

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation  
 or Section 4947(a)(1) Trust Treated as Private Foundation**

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 ▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No. 1545-0052  
**2019**  
**Open to Public Inspection**

**For calendar year 2019, or tax year beginning 10-01-2019, and ending 09-30-2020**

Name of foundation ERIK E AND EDITH H BERGSTROM FOUNDATION A CHARITABLE TRUST		<b>A Employer identification number</b> 91-2155835
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 520	Room/suite	<b>B Telephone number</b> (see instructions) (650) 323-0596
City or town, state or province, country, and ZIP or foreign postal code PALO ALTO, CA 943020520		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>182,829,101</u>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	86,257			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	3,006,776	3,006,776		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	10,057,418			
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)		10,057,418		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	13,150,451	13,064,194			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	90,000	0		90,000
	<b>14</b> Other employee salaries and wages	444,816	222,408		222,408
	<b>15</b> Pension plans, employee benefits	150,054	75,027		75,027
	<b>16a</b> Legal fees (attach schedule)	16,422	8,211		8,211
	<b>b</b> Accounting fees (attach schedule)	64,045	32,023		32,022
	<b>c</b> Other professional fees (attach schedule)	299,231	253,774		45,457
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	100,225	0		0
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings	2,702	1,351		1,351
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	72,423	36,212		36,211
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	1,239,918	629,006		510,687
	<b>25</b> Contributions, gifts, grants paid	7,147,131			7,717,882
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	8,387,049	629,006		8,228,569	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	4,763,402				
<b>b Net investment income</b> (if negative, enter -0-)		12,435,188			
<b>c Adjusted net income</b> (if negative, enter -0-)					

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	6,432,357	1,042,067	1,042,067
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	151,947,385	163,088,794	163,088,794
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)	17,436,464	18,698,240	18,698,240	
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	175,816,206	182,829,101	182,829,101	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	31,112	63,131	
	<b>18</b> Grants payable . . . . .	6,928,854	6,528,754	
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	250,845	250,845	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	7,210,811	6,842,730	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	151,262,203	175,986,371	
	<b>25</b> Net assets with donor restrictions . . . . .	17,343,192	0	
	<b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	168,605,395	175,986,371		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .	175,816,206	182,829,101		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	168,605,395
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	4,763,402
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	2,617,574
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	175,986,371
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	175,986,371

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a PUBLICLY TRADED SECURITIES</b>	P		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			10,057,418
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			10,057,418
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	10,057,418
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	7,509,781	143,895,408	0.052189
2017	5,876,332	113,955,466	0.051567
2016	4,546,322	99,332,555	0.045769
2015	3,388,165	84,619,781	0.040040
2014	2,232,939	83,913,164	0.026610
<b>2 Total</b> of line 1, column (d)			0.216175
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			0.043235
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			155,348,248
<b>5</b> Multiply line 4 by line 3			6,716,482
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			124,352
<b>7</b> Add lines 5 and 6			6,840,834
<b>8</b> Enter qualifying distributions from Part XII, line 4			8,228,569

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and tax due. Total tax due is 97,540.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about political campaigns, political expenditures, and state reporting. Includes Yes/No columns.

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>JULIA RITA BOLOUS</u> Telephone no. ▶ <u>(650) 323-0596</u>		
	Located at ▶ <u>PO BOX 520 PALO ALTO CA</u> ZIP+4 ▶ <u>924030520</u>		
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>		
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	<b>Yes</b>	<b>No</b>
		<b>16</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	<b>1b</b>	<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . .	<b>3b</b>	<b>No</b>
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	<b>4b</b>	<b>No</b>



**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	154,983,472
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	2,730,485
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	157,713,957
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	157,713,957
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	2,365,709
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	155,348,248
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	7,767,412

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	7,767,412
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	124,352
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	124,352
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	7,643,060
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	179,223
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	7,822,283
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	7,822,283

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	8,228,569
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	8,228,569
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	<b>5</b>	124,352
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	8,104,217

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				7,822,283
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .			1,133,032	
<b>b</b> Total for prior years: 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ <u>8,228,569</u>				
<b>a</b> Applied to 2018, but not more than line 2a			1,133,032	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2019 distributable amount. . . . .				7,095,537
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . .				726,746
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					

**3** Complete 3a, b, or c for the alternative test relied upon:

**a** "Assets" alternative test—enter:

(1) Value of all assets . . . . .

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

**b** "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .

**c** "Support" alternative test—enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3) Largest amount of support from an exempt organization

(4) Gross investment income

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

---

**b** The form in which applications should be submitted and information and materials they should include:

---

**c** Any submission deadlines:

---

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				7,717,882
<b>b</b> <i>Approved for future payment</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3b</b>				6,528,754





**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AFRICAN PARKS FOUNDATION OF AMERICA 21 WEST 46TH STREET NEW YORK, NY 10036	NONE	PC	FOR WORK IN MALAWI	25,000
ASOCIACION PRO-BIENESTAR DE LA FAMILIA DE GUATEMALA 9A CALLE 0-57 ZONA 1 GUATEMALA CITY GT	NONE	NC	FOR WORK IN GUATEMALA	116,435
BUTLER INSTITUTE OF AMERICAN ART 524 WICK AVENUE YOUNGSTOWN, OH 44502	NONE	PC	SUPPORT THE MUSEUM'S SPECIFIC MISSION OBJECTIVE TO PRESERVE DE MUSEUM'S BUILDING AND GROUNDS IN THE UNITED STATES	25,000
<b>Total . . . . . ▶ 3a</b>				7,717,882

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DKT INTERNATIONAL 1001 CONNECTICUT AVENUE NW SUITE 800 WASHINGTON, DC 20036	NONE	PC	FOR WORK IN MOZAMBIQUE	304,000
GLOBAL CONSERVATION 110 WILLOWBROOK DRIVE PORTOLA VALLEY, CA 94028	NONE	PC	FOR WORK IN THE MIRADOR IN GUATEMALA	25,000
GLOBAL HERITAGE 361 EMERSON STREET PALO ALTO, CA 94301	NONE	PC	FOR WORK IN CIUDAD PERDIDA	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				7,717,882

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE	PC	FOR WORK IN TANZANIA	25,000
IMPERIAL COUNTY HISTORICAL SOCIETY 373 EAST ATEN ROAD IMPERIAL, CA 92251	NONE	PC	TO COMPLETE SECONDARY ROOF AND TO INSTALL A SAFE REAR ENTRANCE INCLUDING DISABLED ACCESS IN THE UNITED STATES	25,000
IPASPO BOX 9990 CHAPEL HILL, NC 27515	NONE	PC	FOR WORK IN ETHIOPIA AND MOZAMBIQUE	656,000
<b>Total . . . . .</b> ▶ <b>3a</b>				7,717,882



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
IPPFWHR120 WALL STREET NEW YORK, NY 10005	NONE	PC	FOR WORK IN ARGENTINA, BOLIVIA, GUATEMALA, HAITI, HONDURAN, NICARAGUA, PARAGUAY, VENEZUELA, ETHIOPIA, MOZAMBIQUE, TANZANIA AND UGANDA	1,857,664
IWHC333 SEVENTH AVENUE 6TH FLOOR NEW YORK, NY 10001	NONE	PC	FOR WORK IN ARGENTINA AND KENYA	69,865
MSI-US 1730 RHODE ISLAND AVENUE NW SUITE 807 WASHINGTON, DC 20036	NONE	PC	FOR WORK IN UGANDA, KENYA AND BOLIVIA	1,387,138
<b>Total . . . . .</b>				<b>7,717,882</b>

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ONE WORLD CHILDREN'S FUND 3108 GLENDALE BOULEVARD 506 LOS ANGELES, CA 90039	NONE	PC	FOR WORK IN UGANDA AND KENYA	464,367
PATHFINDER INTERNATIONAL 9 GALEN STREET 217 WATERTOWN, MA 02472	NONE	PC	FOR WORK IN TANZANIA	231,656
PHILANTHROPIC VENTURES 1222 PRESERVATION PARK WAY OAKLAND, CA 946121201	NONE	PC	FOR WORK SUPPORTING REPRODUCTIVE HEALTH IN UGANDA, BOLIVIA, VENEZUELA AND THE UNITED STATES	1,339,757
<b>Total . . . . .</b>				<b>7,717,882</b>

▶ **3a**

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PLANNED PARENTHOOD OF GREATER WASHINGTON AND NORTH IDAHO 1117 TIETON DRIVE YAKIMA, WA 99207	NONE	PC	THESE FUNDS WILL BE USED FOR GENERAL SUPPORT IN THE UNITED STATES	5,000
POPULATION CONNECTION 2120 L STREET NW SUITE 500 WASHINGTON, DC 20037	NONE	PC	THESE FUNDS WILL BE USED FOR GENERAL SUPPORT IN THE UNITED STATES	3,000
POPULATION MEDIA CENTER 30 KIMBALL AVENUE SUITE 302 SOUTH BURLINGTON, VT 05403	NONE	PC	FOR WORK IN HAITI, RWANDA, GUATEMALA, UGANDA, ZAMBIA AND BURUNDI	403,000
<b>Total . . . . .</b>				<b>7,717,882</b>

**▶ 3a**

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
POPULATION SERVICES INTERNATIONAL 1120 19TH STREET NW SUITE 600 WASHINGTON, DC 20036	NONE	PC	FOR WORK IN UGANDA	530,000
PRO-MUJER 253 WEST 35TH STREET 11TH FLOOR NEW YORK, NY 10001	NONE	PC	FOR TRAINING IN IMPLANT INSERTION IN BOLIVIA	25,000
SOLAR COOKERS INTERNATIONAL 2400 22ND STREET SUITE 210 SACRAMENTO, CA 95818	NONE	PC	THESE FUNDS WILL BE USED FOR THE DISTRIBUTION OF COOKITS IN TANZANIA	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				7,717,882

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TEEN SUCCESS508 VALLEY WAY MILPITAS, CA 95035	NONE	PC	TO PROVIDE A PEER EDUCATIONAL SUPPORT GROUP AND INDIVIDUAL COACHING FOR TEEN MOTHERS AND THEIR CHILD IN THE UNITED STATES	25,000
THE UNIVERSITY OF WYOMING FOUNDATION 222 SOUTH 22ND STREET LARAMIE, WY 82070	NONE	PC	ENDOWMENT FUND IN THE UNITED STATES	25,000
WALLOWA LAND TRUSTPO BOX 515 ENTERPRISE, OR 97828	NONE	PC	PERRY FARM CONSERVATION EASEMENT IN THE UNITED STATES	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				7,717,882

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WHITMAN COLLEGE 345 BOYER AVENUE WALLA WALLA, WA 99362	NONE	PC	THIS GRANT WILL FUND THE ERIK E. AND EDITH H. BERGSTROM FOUNDATION SCHOLARSHIPS IN THE UNITED STATES	25,000
WORLD LEARNING INC 1 KIPPLING ROAD BRATTLEBORO, VT 05302	NONE	PC	FOR WORK IN THE UNITED STATES	25,000
YAKIMA MUSEUM OF ART 2105 TIETON DRIVE YAKIMA, WA 98902	NONE	PC	INTERACTIVE STEM EXHIBITS IN THE UNITED STATES	25,000
<b>Total . . . . .</b>				7,717,882

**▶ 3a**

**TY 2019 Accounting Fees Schedule****Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION

A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	64,045	32,023		32,022

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2019 Expenditure Responsibility Statement

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION PRO-BIENESTAR DE LA FAMILIA DE GUATEMALA	9A CALLE0-57 ZONA 1 GUATEMALA CITY  GT	2019-01-01	763,762	HELP SUPPORT ACTIVITIES IN GUATEMALA TO EXPAND AND IMPROVE SERVICES FOR REPRODUCTIVE HEALTH.	570,894	NONE	1/19,2/19,3/19,4/19, 5/19, 6/19, 7/19, 8/19, 9/19, 10/19, 11/19, 12/19, 1/20		TO THE KNOWLEDGE OF THE TAXPAYER, AND BASED ON REPORTS SUBMITTED BY THE GRANTEE, NO PART OF THE GRANT WAS USED FOR OTHER THAN THE INTENDED PURPOSE, AND NO VERIFICATION EFFORTS HAVE BEEN CONSIDERED NECESSARY.



## TY 2019 Investments Corporate Stock Schedule

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
 A CHARITABLE TRUST

**EIN:** 91-2155835

**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
GABELLI GLBL HEALTHCARE & WELLNESS RX	670,800	670,800
ABERDEEN EMERGING MARKETS	1,944,000	1,944,000
TEMPLETON EMERGING MKTS FD	2,305,500	2,305,500
COHEN & STEERS QUAL INC REALTY	3,240,476	3,240,476
ELLSWORTH FUND LIMITED	5,775,000	5,775,000
RENN FUND INC	9,344	9,344
SOURCE CAPITAL INC	2,487,375	2,487,375
GENERAL AMERICAN INVESTORS	3,395,000	3,395,000
CENTRAL SECURITIES CORP	7,827,300	7,827,300
ADAMS EXPRESS COMPANY	128,383,200	128,383,200
PIMCO DYNAMIC	1,004,000	1,004,000
TEKLA HEALTH HQH	206,200	206,200
FIDELITY	648,286	648,286
MUTUAL FUNDS	5,192,313	5,192,313

**TY 2019 Legal Fees Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL FEES	16,422	8,211		8,211

**TY 2019 Other Assets Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
LONG TERM CONTRIBUTIONS RECEIVABLE	5,672,315	5,859,111	5,859,111
TRUST CONTRIBUTIONS RECEIVABLE	93,272	93,272	93,272
BENEFICIAL INTEREST IN REMAINDER TRUST	11,670,877	12,745,857	12,745,857

**TY 2019 Other Expenses Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSES	72,423	36,212		36,211

**TY 2019 Other Increases Schedule****Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION

A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Description</b>	<b>Amount</b>
UNREALIZED GAINS	2,617,574

**TY 2019 Other Liabilities Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Description</b>	<b>Beginning of Year - - Book Value</b>	<b>End of Year - Book Value</b>
DEFERRED FEDERAL EXCISE TAX LIABILITY	178,825	178,825
FEDERAL EXCISE TAX PAYABLE	71,785	71,785
STATE FILING FEE PAYABLE	235	235

**TY 2019 Other Professional Fees Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	208,317	208,317		0
OTHER PROFESSIONAL FEES	90,914	45,457		45,457

**TY 2019 Taxes Schedule**

**Name:** ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**EIN:** 91-2155835

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL EXCISE TAX	100,225	0		0



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047  
**2019**

Name of the organization  
ERIK E AND EDITH H BERGSTROM FOUNDATION  
A CHARITABLE TRUST

**Employer identification number**  
91-2155835

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
 ERIK E AND EDITH H BERGSTROM FOUNDATION  
 A CHARITABLE TRUST

**Employer identification number**  
 91-2155835

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF ERIK BERGSTROM 149 HAWTHORN DRIVE ATHERTON, CA 94027	\$ 86,257	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization  
 ERIK E AND EDITH H BERGSTROM FOUNDATION  
 A CHARITABLE TRUST

**Employer identification number**  
 91-2155835

**Part II Noncash Property**

(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization  
 ERIK E AND EDITH H BERGSTROM FOUNDATION  
 A CHARITABLE TRUST

Employer identification number  
 91-2155835

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	