

Form	99	0
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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

.... mation about Form 990 and its instructions is at www.irs.nov/form990



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ternal Reve		bout Form 990 and it				orm990,		Inspection
Forth	e 2015 calendar year, or tax year begi	nning 0	4/01, 2015	, and end	aing	D Employee		3/31, 20 16
Check if a	C Name of organization	_						ation number
	BERGER ACTION FUND INC	<u>.</u>				20-89	4886	8
chang	e Doing business as							
X Name	change Number and street (or P O box if mail is	not delivered to street add	ress)	Room/suit	e	E Telephone	number	
fnitial						()	-	
termir			ode					
Amen return	WASHINGTON, DC 20009-9	9997				G Gross recei	pts \$	10,000,000.
Applic pendi		JOSEPH FISH	ER			H(a) is this a g subordina		um for Yes X N
	P.O. BOX 53241 WASHING	GTON, DC 20009	-9997			H(b) Are all sub		included? Yes N
Tax-ex	empt status 501(c)(3) X 501(c) (4) ◀ (insert no)	4947(a)(1)	or	527	lf "No," a	itach a lis	st (see instructions)
Websi	te: ► N/A					H(C) Group ex	emption r	number 🕨
Form	of organization X Corporation Trust	Association Other	•	L Yea	ar of format	ion 2007	A State	e of legal domicile DE
Part I	Summary	φ., I I		I		•		Ū
	Briefly describe the organization's mission o	most significant activ	ties THE OF	RGANIZA	TION	RIMARY	MISS	ION IS TO
	PROMOTE PRO-CONSERVATION AN							
Covernance 2 3	Check this box					of its pat ass		
			•					5.
5 3	Number of voting members of the governing							5.
n i	Number of independent voting members of i				• • • • •			
5	Total number of individuals employed in cale		/, line 2a)	The second second			5	0.
6	Total number of volunteers (estimate if neces	sary)	DECE	N.F.			6	0.
⁶ 7a	Total unrelated business revenue from Part V	/III, column (C), line 12	HEY!		7 <u> </u>		7a	0.
b	Net unrelated business taxable income from	Form 990-T, line 94		.:	. öl	• • • • • • • •	7b	0.
		i i i i i i i i i i i i i i i i i i i	oct 2	8 Sûir	10	Prior Year		Current Year
8	Contributions and grants (Part VIII, line 1h)				1=1	200,0	00.	10,000,000.
9	Program service revenue (Part VIII, line 2g)		المسترجع والمسترج والمسترج والمسترج المسترج المسترج المسترج والمسترج والمست	A.I. I.			0.	0
9	Investment income (Part VIII, column (A), line		THEFT	<u>- IV. L</u>			0.	0
	Other revenue (Part VIII, column (A), lines 5,		· · · · · · · · · · · · · · · · · · ·				0.	0
12	Total revenue - add lines 8 through 11 (musi	t equal Part VIII, colum	n (A), line 12)			200,0	00.	10,000,000.
13	Grants and similar amounts paid (Part IX, col					730,0)00.	3,875,000.
	Benefits paid to or for members (Part IX, colu						0.	0
40	Salaries, other compensation, employee ben					29,6	515.	41,112.
6	Professional fundraising fees (Part IX, column						0.	0
h h	Total fundraising expenses (Part IX, column ((D) line 25) b		· · · · · ·	· – –			
5 17	Other expenses (Part IX, column (A), lines 11					11,	730.	17,993.
18	Total expenses Add lines 13-17 (must equal					771,3	-	3,934,105.
19						-571,3		6,065,895.
-	Revenue less expenses Subtract line 18 from					ning of Currer		End of Year
Eund Balances 50 51 52 53 54 54 55 55 55 55 55 55 55 55 55 55 55	Tatal analy (Dath Y, has 40)					44,2		6,110,160.
	Total assets (Part X, line 16)				·	4474	0.	0,110,160.
21	Total liabilities (Part X, line 26)				·			
	Net assets or fund balances Subtract line 2	1 from line 20	• • • • • • •		•	44,2	205.	6,110,160.
art II	Signature Block							
nder pei ue, corre	natues of perjury, I declare that I have examined the ect, and complete Declaration of preparer (other that	nis return, including acco n officer) is based on all ir	mpanying sched nformation of wh	ules and sta ich prepare	atements, a r has any ki	and to the besi nowledge	of my	knowledge and belief, it i
	Chan Zinta	<u> </u>		·····				
gn	Deck Orden	<u> </u>				<u> </u>	10	4110
ere	Sugnature of officer					Date		
516	JOSEPH FISHER		SECRET	ARY				
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature		Date		Check	ſ	PTIN
lid						' self-emp	loyed	i
eparer	Firm's name	•			·	Firm's EIN		
e Only	Firm's address					Phone no		
ay the I	RS discuss this return with the preparer show	vn above? (see instructi	ions)					Yes X N
	rwork Reduction Act Notice, see the separa			•••• <u>•</u> •		<u></u>		/ Form 990 (2015
SA E 1010 1 0								y and 550 (201

_	m 990 (2015) Page 2
Pa	art III `Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
•	ATTACHMENT 1
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
_	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	services? Yes Yes Yes Yes No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$1,015,249 including grants of \$1,000,000) (Revenue \$)
	PURSUE PRO-CONSERVATION POLICIES.
4b	(Code) (Expenses \$ 2,918,856 including grants of \$ 2,875,000) (Revenue \$) PURSUE SOCIAL WELFARE ADVOCACY POLICIES
	PORSOE SOCIAL WELFARE ADVOCACI POLICIES
	······································
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	······································
4d	Other program services (Describe in Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 3,934,105.
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Part	IV Checklist of Required Schedules		Yes	No
, `	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		103	110
1	complete Schedule A	1		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
2	• • • • • • •		~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		x
	candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			ĺ
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		
	Part III.	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			<u> </u>
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14ь		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			1
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			<u> </u>
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u> </u>	<u> </u>	+
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u>⊢</u> -	1	+
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<u>ا</u>	<u>}</u>	+
13	If "Yes" complete Schedule G. Part III	19	1	x

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	0 (2015)		-	Page 4
Part	Checklist of Required Schedules (continued)			
		r	Yes	No
20 a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			_
-	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24-		x
L	through 24d and complete Schedule K If "No," go to line 25a	24a		<u>^</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		x
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		<u> </u>
v	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	280		x
29		29		X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	23		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
24	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31		24		x
32	Part I	31		<u>⊢</u> ^
JZ		32		x
~~	complete Schedule N, Part II		-	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
~ 4	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			v
	or IV, and Part V, line 1	34		X X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>	<u> </u>	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1		
••	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		l	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		İ	
	19? Note. All Form 990 filers are required to complete Schedule O	38		Х

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			i i
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			-
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			,
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0.	-	-	-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2.		х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		<u></u>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
4 d	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
b	If "Yes," enter the name of the foreign country.			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			ł
	(FBAR)			¢ 1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		i
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		x
ь	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_	
-	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			v
	sponsoring organization have excess business holdings at any time during the year?	8		_ <u>X</u>
9	Sponsoring organizations maintaining donor advised funds.	9a		x
	Did the sponsoring organization make any taxable distributions under section 4966?	9b		X
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.2-		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
F	Note. See the instructions for additional information the organization must report on Schedule O			. '
Q	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
r	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
100				

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Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u> .	• • •	X
Sect	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			1
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		<u>x</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			1
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		x
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code) .)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	_		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		l	ļ
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1	ĺ	
	with a taxable entity during the year?	16a		Х
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	1	ļ	
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available Check all that apply	n 501(c)(3)s	s only)
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	polic	y, and
20	financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and recom-	de 🕨		
20	JOSEPH FISHER P.O. BOX 53241 WASHINGTON, DC 20009-9997	u 3 🏴		

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Form 990 (2015	5) Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

. List all of the organization's current key employees, if any See instructions for definition of "key employee"

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or indiv	iot ch unles	is pe	ition more rson	than o is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MOLLY MCUSIC DIRECTOR & PRESIDENT	2.00	x		x				0.	0.	0.
(2) JOSEPH FISHER DIRECTOR & SECRETARY	2.00	x		x				0.	0.	0.
_(3)ROBERT_BLAND DIRECTOR	1.00	x						0.	0.	0.
(4)ANDREW STEVENSON DIRECTOR	2.00	x						0.	0.	0.
JOHN_LESHY DIRECTOR	1.00	x						0.	0.	0.
(6)PATRICIA DAVIS TREASURER	2.00			x				0.	0.	<u> </u>
	·+	1								
	+									
_(9)	+									
(10)	+		_							
<u>(11)</u> <u>(12)</u>	+						-			
<u>(12)</u> (<u>13)</u>	+	1	-				-			
(14)		1	$\left - \right $	-						
								<u> </u>	_	

								1:	haat Companyat					age 8
Part	/II Section A. Officers, Directors, T (A) Name and title	(B) Average hours per week (list any hours for related	(do i box, office	not ci unle: er and	Pos Pos heck ss pe	C) sition more erson tirect	e than o is both or/trust	ne an	(D) Reportable compensation from the organization	(E) (E) Reporta compensatio related organizat (W-2/1099-	ble on from d ions	Est am comp fro	(F) Imated ount of other bensation m the	on
		organizations below dotted line)	Individual trustee or director	Institutional trustee	ICer	Key employee	Highest compensated employee	mer	(W-2/1099-MISC)			and	nization related nization	1
													-	
	·													
с То	ib-total ital from continuation sheets to Part VII,	Section A							0.		0.			0
2 To	otal (add lines 1b and 1c)	ot limited to t	those	liste				o re	0. eccived more than	100,000 (0. of			0
	portable compensation from the organization		0	•									Yes	No
3 Di en	d the organization list any former of nployee on line 1a? <i>If "Yes," complete Sch</i> e	ficer, directo edule J for su	or, oi ch inc	r tri <i>fivid</i>	uste <i>ual</i>	e, 	key 6 	emp	ployee, or highes	t compens	ated	3		x
or	or any individual listed on line 1a, is the ganization and related organizations	greater than	5 \$15	50,0	007	י וו	f "Yes	s,"	complete Schedu	le J for a	such			
5 Di	dividual	or accrue co	mper	nsat	on	fron	n any	un	nrelated organizati	on or indivi	dual	4		X X
	on B. Independent Contractors	res, comple		neut	JIG C	101	Such	per	13011	•_• • • • • •	••••			
co	omplete this table for your five highest compensation from the organization Reported ar													
	(A) Name and business	address							(B) Description of se	ervices	c	(C) Compens	ation	
								+						
								-						
								_						
	otal number of independent contractors ore than \$100,000 in compensation from				nıte		o tho:	se	listed above) who	received			000	

	Charle of Cabadula O contains a second state of the second	(line in the D 1 14	11		
	Check if Schedule O contains a response or note to any	/ line in this Part VI (A) Total revenue	II(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from t under section: 512-514
1a	Federated campaigns				
b	Membership dues				
С	Fundraising events				
d	Related organizations				
е	Government grants (contributions) 1e				
f	All other contributions, gifts, grants, and similar amounts not included above 11 10,000,000				
g h	Noncash contributions included in lines 1a-1f \$ Total, Add lines 1a-1f	10,000,000			
	Business Code	10,000,000			
2a					
ь					
с					
d					
е					
f	All other program service revenue				
g	Total. Add lines 2a-2f	0		· · · · ·	
3	Investment income (including dividends, interest,				1
	and other similar amounts)	0			
4	Income from investment of tax-exempt bond proceeds	0			
5	Royalties	0			
6a	Gross rents				
b	Less rental expenses				
c d	Rental income or (loss) . Net rental income or (loss) .	0			I
7a	Gross amount from sales of (I) Securities (II) Other				
	assets other than inventory				
ь	Less cost or other basis				
-	and sales expenses				
с	Gain or (loss)				
d	Net gain or (loss)	0			
8a	Gross income from fundraising				
	events (not including \$				
	of contributions reported on line 1c)				
	See Part IV, line 18				
b	Less direct expenses b				
c	Net income or (loss) from fundraising events ▶	0			
9a	Gross income from gaming activities See Part IV, line 19				
ь	Less direct expenses b	ļ		1	
c	Net income or (loss) from gaming activities	0			
10a	Gross sales of inventory, less returns and allowances				
	Less cost of goods sold b				
c	Net income or (loss) from sales of inventory. ▶ Miscellaneous Revenue Business Code	0			
11-				1	
11а ь					
Ь				1	
c d	All other revenue		· ·		
d e	Total. Add lines 11a-11d	0		1	
12	Total revenue. See instructions	10,000,000.		1	

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must	complete all columns	All other organization	ns must complete col	umn (A)
Check if Schedule O contains a respo		un Ahun David IV		r
Do not include amounts reported on lines 6b, 7b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations	2 275 222	0.075.000		
and domestic governments See Part IV, line 21	3,875,000.	3,875,000.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0.		_	
3 Grants and other assistance to foreign organizations, foreign governments, and foreign				
Individuals See Part IV, lines 15 and 16	0.			
Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	0.			
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	41,112.	41,112.		
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	0.			
0 Payroll taxes	0.			
1 Fees for services (non-employees)				
a Management	0.			
b Legal	0.			
c Accounting	0.			
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17,	0.			
f Investment management fees	0.			
g Other (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O).	0.			
2 Advertising and promotion	0.			
3 Office expenses	0.			
4 Information technology	0.			
5 Royalties	0.			
6 Occupancy	0.			
7 Travel	0.			
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0.			
9 Conferences, conventions, and meetings	0.			
0 Interest	0.			
1 Payments to affiliates	0.			
2 Depreciation, depletion, and amortization	0.			
3 Insurance	0.			
4 Other expenses itemize expenses not covered				
above (List miscellaneous expenses in line 24e If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O)				
aOTHER_EXPENSES	17,993.	17,993.		
b				
c				
d				
e All other expenses				
5 Total functional expenses. Add lines 1 through 24e	3,934,105.	3,934,105.		
6 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation Check here ►if following SOP 98-2 (ASC 958-720)	0.			

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art X	Balance Sheet		_	
	Check if Schedule O contains a response or note to any line in this Pa	art X		
•		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	44,265.	1	6,110,160
2	Savings and temporary cash investments	0.	2	0
3	Pledges and grants receivable, net	0.	3	0
4	Accounts receivable, net	0.	4	0
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees			
	Complete Part II of Schedule L	0.	5	C
6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	0.		с
	organizations (see instructions) Complete Part II of Schedule L	0.	-	(
7	Notes and loans receivable, net	0.	-	C
ľ	Inventories for sale or use	0.	<u> </u>	
9	Prepaid expenses and deferred charges	0.	9	0
10a	Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D 10a	0		~
	Less accumulated depreciation		10c	(
11	Investments - publicly traded securities		11	(
12	Investments - other securities See Part IV, line 11		12	(
13	Investments - program-related See Part IV, line 11		13	(
14	Intangible assets		14	(
15	Other assets See Part IV, line 11		15	(
16	Total assets. Add lines 1 through 15 (must equal line 34)	44,265.		
17	Accounts payable and accrued expenses	0.	<u> </u>	(
18	Grants payable	0.	10	(
19	Deferred revenue		19	(
20	Tax-exempt bond liabilities		20	(
21	Escrow or custodial account liability Complete Part IV of Schedule D	0.	21	(
22	Loans and other payables to current and former officers, directors,			
22	trustees, key employees, highest compensated employees, and			
	disqualified persons Complete Part II of Schedule L	0.	22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	0.	24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D	0.	25	
26	Total liabilities. Add lines 17 through 25	0.	26	
	Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117 (ASC 958), check here \blacktriangleright X and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	44,265.	30	6,110,160
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	
32	Retained earnings, endowment, accumulated income, or other funds	0.	32	
33	Total net assets or fund balances	44,265.	33	6,110,160
34	Total liabilities and net assets/fund balances	44,265.	34	6,110,160

Form 99	90 (2015)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1		00,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,9	34,1	.05.
3	Revenue less expenses Subtract line 2 from line 1	3		6,0	65,8	395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			44,2	265.
5	Net unrealized gains (losses) on investments	5				0.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		6,1	10,1	60.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		ſ			
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	IN			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or			
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b		x
-	If "Yes," check a box below to indicate whether the financial statements for the year were aud					<u> </u>
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	aht			
	of the audit, review, or compilation of its financial statements and selection of an independent ac		-	2c		
	If the organization changed either its oversight process or selection process during the tax year, of					
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	un İ			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b		
				Form	990	(2015)

SCHEDULE		brants ar	nd Other A	ssistance t	Grants and Other Assistance to Organizations.	tions.		OMB No 1545-0047
(Form 990)	Ğ	vernmer	its, and In	dividuals in	Governments, and Individuals in the United States	l States		
	Comp	lete if the or	ganization ansv	vered "Yes" on F	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	line 21 or 22.		Onen to Public
Department of the Treasury Internal Revenue Service		ion about Sc	hedule I (Form	Form 990) and its instr	Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	.irs.gov/form990.		Unspection
Name of the organization							Employer Identification number	cation number
BERGER ACTION F	FUND INC.						20-8948868	8
Part I General I	General Information on Grants and Assistan	Assistance						
1 Does the organi	Does the organization maintain records to substantiate	bstantiate th	e amount of the	grants or assistal	nce, the grantees'	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and	ر الا الا
the selection crif 2 Describe in Part	the selection criteria used to award the grants or assistance '	s or assistance ures for mon	e ⁷	of grant funds in the	· · · · · · · · · · · · · · · · · · ·	•	· · · · ·]
Part II Grants ar 990, Part	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	omestic Org ent that reco	Janizations an eived more tha	d Domestic Gov In \$5,000. Part II	rernments. Com	plete if the organiza ed if additional spac	tion answered " e is needed.	'es" on Form
1 (a) Name and or	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NEW VENTURE FUND								
1201 CONNECTICUT AVENUE, NW	AVENUE, NW - SUITE 300	20-5806345	501 (C) (3)	750,000				PRO-CONSERVATION PRO
(2) CENTER FOR POPULA	CENTER FOR POPULAR DEMOCRACY ACTION FUND							
449 TROUTMAN STRE	449 TROUTMAN STREET BROOKLYN, NY 11237	45-3860271	501 (C) (4)	1,875,000.				SOCIAL WELFARE ADVOC
(3) NATIONAL COUNCIL	OF LA RAZA							
1126 16TH STREET,	NW - SUITE 600	C6TT6FC-C6	(6) (0) 100	000 0002				SOLIAL MELEANE ADVOU
(4) WESTERN CONSERVATION ACTION	TION ACTION	20.000140E		350 000				PRO-CONSERVATION PRO
1010 MINNOUE SINGEL - #410	THE PULL PULL	5/ ET/00-07	121 121 122					
TUDE TITNOLION IN TABLE	CUTIONIII CAINEIT ACTIVE LONG THE	30-0687494	501 (C) (4)	250.000				SOCIAL WELFARE ADVOC
(6) PLANNED PARENTHOC	PLANNED PARENTHOOD ACTION FUND INC.		1.1.1.2.					
	434 WEST 33RD STREET NEW YORK, NY 10001	13-3539048	501 (C) (4)	500,000				SOCIAL WELFARE ADVOC
(1)								
(8)								
(6)								
(10)								
(11)								
(12)								
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government	organizations	isted in the line 1 t	able			
3 Enter total nun	Enter total number of other organizations listed in the I	sted in the lin	ine 1 table	••••••				.0
For Paperwork Reduct	For Paperwork Reduction Act Notice, see the Instructions for Form	ons for Form 9	990.				S	Schedule 1 (Form 990) (2015)

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. schedule I (Form 990) (2015) Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

		10000010100				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
5						
, m						
4						
-vo						
۵						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	is part to prov	vide the informati	ion required in	Part I, line 2, Part III,	column (b), and any other additional

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. 2015 Open to Public Inspection

OMB No 1545-0047

Employer identification number

20-8948868

ATTACHMENT 1

Internal Revenue Service Name of the organization

BERGER ACTION FUND INC.

CONF

EACH DIRECTOR IS REQUIRED TO COMPLETE THE ATTACHED "CONFLICT OF INTEREST

POLICY" ANNUALY.

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE CORPORATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR SOCIAL WELFARE PURPOSES WITHIN THE MEANING OF SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE. PRIMARILY PRO-CONSERVATION POLICIES AND SOCIAL WELFARE AT THE FEDERAL LEVEL THROUGH MEETINGS WITH POLICY MAKERS AND OTHER CONSERVATION MINDED GROUPS.

State of Delaware Secretary of State Division of Corporations Delivered 09:21 AM 11/02/2015 FILED 09:21 AM 11/02/2015 SR 20150729179 - File Number 4341774

STATE OF DELAWARE **CERTIFICATE OF AMENDMENT** (A CORPORATION WITHOUT CAPITAL STOCK)

- •

The corporation, Wyss Action Fund, Inc.

organized and existing under the laws of the State of Delaware, hereby certifies as follows:

(1) That at a meeting a vote of the members of the governing body was taken for and against the amendment to the Certificate of Incorporation, said Amendment being

as follows: The Article titled "Article I. Name" now reads as follows: The name of the corporation is Berger Action Fund, Inc. ("the corporation)

(2) That said amendment was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, said corporation has caused this certificate to be signed this 29 h day of October, A.D. 2015.

By: Molly Mm

uthorized Officer

Name: Molly McUsic, President Print or Type

WYSS ACTION FUND, INC.

UNANIMOUS WRITTEN CONSENT OF THE BOARD OF DIRECTORS

The undersigned, being directors of the Wyss Action Fund, Inc. a Delaware nonprofit corporation (the "Corporation"), does hereby waive any notice of an annual meeting of the Director of the Corporation and does hereby adopt, by written consent, the following Resolution.

Change of Name of Wyss Action Fund, Inc. to Berger Action Fund, Inc.

RESOLVED, that the Certificate of Incorporation of this corporation be amended by changing the Article thereof titled "Article I. Name" so that, as amended, said article shall be read as follows:

The name of the corporation is Berger Action Fund, Inc. ("the Corporation")

WITNESS the due execution hereof this 29Th day of OCT. 2015

Andrew Stophonson, Director stevensoi AL

Molly McUsic. Director

Robert Bland, Director

The undersigned Secretary of the Wyss Action Fund, Inc. hereby certifies that this Unanimous Written consent has been duly filed in the minute book of the Corporation.

oh Fisher, Secretary

BERGER ACTION FUND, INC.

Conflict of Interest Policy

Berger Action Fund, Inc. (the "Corporation") is a Delaware nonprofit, nonstock corporation described in section 501(c)(4) of the Internal Revenue Code and is therefore subject to the Internal Revenue Code provisions applicable to social welfare organizations. Directors and officers of the Corporation also have legal obligations to exercise prudence and undivided loyalty to the Corporation in managing the Corporation's affairs. To the extent required by their particular responsibilities, all board members, officers, staff members, and other agents of the Corporation should be familiar with the specific provisions of the law applicable to the Corporation and its employees and agents. In order to help ensure that all directors, officers, and staff conduct themselves in accordance with the highest fiduciary standards, the Board of Directors of the Corporation has adopted this Policy.

<u>Section 1. Statement of purpose</u>. From time to time, in the life of every organization, conflicts of interest or the appearance of such conflicts arise in the organization's decision making process. It is imperative that the Corporation be exemplary in its handling of such situations. In adopting this Policy, the Board of Directors is mindful that the appearance that a decision of the Corporation has been improperly influenced by an individual with a conflict of interest can compromise the Corporation's ability to achieve its mission even if in fact there is no improper influence. For this reason, officers, directors, employees, and other agents of the Corporation must strive to avoid even the appearance of impropriety.

<u>Section 2. Conflicts of interest covered by this policy</u>. This policy applies to all situations in which a director, officer, employee, or other agent of the Corporation: (1) is in a position to make, or exercise substantial influence over, a significant decision of the Corporation, and (2) has a material private interest (financial or otherwise) that could cause, or reasonably be perceived as causing, the individual to exercise his or her authority or influence in a manner not solely motivated by the best interests of the Corporation.

For purposes of this policy, a material private interest may arise in a transaction between the Corporation and: (1) a director, officer, employee, or other agent of the Corporation; (2) a family member, domestic partner, or business partner of such director, officer, employee or other agent of the Corporation; or (3) an organization in which any of the individuals listed above have a significant financial or non-financial interest.

<u>Section 3. Disclosure of all conflicts and potential conflicts</u>. Directors, officers, employees, and other agents of the Corporation have an obligation to promptly disclose to the President all conflicts covered by this policy or situations that might reasonably be thought to present conflicts covered by this policy.

To encourage continuing compliance with this disclosure obligation, every director and officer shall file an annual statement with the President listing the following affiliations that involve or could reasonably be expected to involve a conflict of interest, as defined above, covered by this policy: (1) employers, (2) board memberships, (3) significant financial interests of the individual or the individual's extended family, and (4) other significant personal involvements. Although only directors and officers are required to submit annual statements, all Corporation employees and agents shall promptly disclose any conflicts covered by this policy to the President of the Corporation.

If the Corporation learns of facts suggesting a conflict of interest that has not been disclosed, it shall seek clarification from the individual with a putative conflict of interest. The disinterested members of the Board of Directors have final authority to determine whether a conflict of interest actually exists.

<u>Section 4. Recusal required when a conflict of interest exists</u>. No director, officer, employee, or other agent of the Corporation may take part in any decision by the Corporation in which such person has a material private interest or that would directly or indirectly benefit such person or any family member, domestic partner, business partner, or organization with which any of the foregoing has a formal relationship. Such director, officer, employee, or other agent may participate in discussions regarding the matter to be decided, but shall not be present when the decision is made.

<u>Section 5. Procedure for approving transactions presenting a conflict of interest</u>. In the case of any prospective transaction involving a conflict of interest of a director or other person with substantial influence over the Corporation's operations as a whole, the transaction must be approved by the Board of Directors or a duly authorized committee thereof (not including any directors required to recuse themselves pursuant to Section 4 of this Policy). In other cases, the Board may delegate authority to approve the transaction to others.

The body approving a transaction shall make a reasonable investigation of alternative transactions not involving any conflict of interest and of the fair market value of the benefits the Corporation would obtain through the transaction. It shall not approve the transaction unless, based on any facts or data obtained in its investigation, it determines that (1) there are no reasonably available alternatives to the transaction providing more favorable terms to the Corporation; (2) the transaction is entirely fair to the Corporation, and the Corporation will not provide more than fair market value in return for the benefits it receives through the transaction; and (3) taking into account all relevant factors, including any potential appearance' of impropriety, the transaction is in the best interest of the Corporation.

<u>Section 6. Recordkeeping</u>. With respect to any Board discussion, decision or action involving matters covered by this Policy, the minutes of the Board meeting at which such discussion, decision or action takes place shall reflect in detail the Board deliberations and the voting process. In addition, copies shall be kept of any market data or information considered by the Board in approving or disapproving a proposed transaction. Similar records shall be kept of any discussion, decision or action involving matters covered by this Policy by a body other than the Board.

<u>Section 7. Distribution of this policy</u>. A copy of this Policy and Disclosure Statement shall be furnished annually to all directors, officers, employees, and other agents of the Corporation, and shall be furnished to all new directors, officers, employees, or other agents at that time they begin service to the Corporation.

ANNUAL DISCLOSURE STATEMENT

I have carefully read the Conflict of Interest Policy, and in signing this Disclosure Statement, I have considered not only the literal expression of the policy, but its intent. Except as hereinafter stated, I do not, to the best of my knowledge, have a conflict of interest that may be seen as competing with the interests or concerns of Berger Action Fund, Inc., nor does any member of my extended family, or any organization to which my extended family or I have an allegiance, have such a competing concern.

If any situation should arise in the future that may create a conflict of interest, I will promptly and fully disclose the circumstances to the President.

Name:_____

Signature:

Date:_____

In the space below, please list all organizations in which you or a family member hold a position as trustee, director, general manager, or principal officer, or in which you or a family member have a financial interest, if those organizations engage in business transactions with the Corporation or if you anticipate that they will do such business in the coming year. Enter "N/A" if you have no organizations to report.

Name of Organization	Nature of Your Interest in the Organization
I certify that the above inform	ation is correct to the best of my knowledge.
Name:	
Signature:	
Date:	

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "WYSS ACTION FUND, INC.", CHANGING ITS NAME FROM "WYSS ACTION FUND, INC." TO "BERGER ACTION FUND, INC.", FILED IN THIS OFFICE ON THE SECOND DAY OF NOVEMBER, A.D. 2015, AT 9:21 O`CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



4341774 8100 SR# 20150729179

You may verify this certificate online at corp delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

Authentication: 10345010 Date: 11-02-15

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