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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements OMB No 1545-0052

For	aten	dar year 2010, or tax yea	ar beginning		, and ending		
G	heck	all that apply	Initial return	Initial return of a fo	rmer public charity	Final return	1
			Amended return	Address chang	je 🔲	Name change	
Nar	ne of	foundation				A Employer identification	number
		THE KING I	FAMILY CHARI	TABLE TRUST	_	11-6450731	
Nur	nber ar	,	if mail is not delivered to street	•	Room/suite	B Telephone number	
		500 OLD CO	OUNTRY ROAD	SUITE 304		(516)741-3	434
City	or to	own, state, and ZIP code				C If exemption application is p	
L		GARDEN CI	<u> </u>			D 1. Foreign organizations	
	_	type of organization		empt private foundation		Foreign organizations me check here and attach co	emputation
		ction 4947(a)(1) nonexen		Other taxable private founda	r=-1	E If private foundation sta	tus was terminated
			end of year J Accounting	-	Accrual	under section 507(b)(1	
	rom F ∙\$	Part II, col. (c), line 16)		her (specify) mn (d) must be on cash t	2000	F If the foundation is in a	
		Analysis of Revenue ar				under section 507(b)(1	(d) Disbursements
	art i	(The total of amounts in colunecessarily equal the amoun	umns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for chantable purposes (cash basis only)
	1	Contributions, gifts, gran	nts, etc , received .	34,000.		N/A	
	2		on is not required to attach Sch. B				
	3	Interest on savings and temp cash investments	oorary -				
	4	Dividends and interest fre	om securities				
	5a	Gross rents			······································		
	l _	Net rental income or (loss)				DEC	L. E. Z. L. T. L.
e	6a	Net gain or (loss) from sale of Gross sales price for all	f assets not on line 10			<u>neu</u>	<u> FIVELZ</u>
Revenue	, D	assets on line 6a			0.	\$	2 221
æ	,	Capital gain net income (from			· · · · · · · · · · · · · · · · · · ·	I	6 2011 况
	8	Net short-term capital ga Income modifications				- 1 44	
	-	Gross sales less returns and allowances			······································	OGO	TRI TITT
	Ι.	Less Cost of goods sold					
	1	Gross profit or (loss)					
	1	Other income					1.11.41
	12	Total. Add lines 1 through	gh 11	34,000.	0.		
	13	Compensation of officers, dir	rectors, trustees, etc	0.	0.		, 0.
	14	Other employee salaries	and wages				
/A	15	Pension plans, employee	e benefits				
Ses	16a	Legal fees	_				
Exper	b	Accounting fees	STMT 1	3,500.	0.		3,500.
ŭ	C	Other professional fees					
ţ	17	Interest					
stra	18					•	
ij	19	Depreciation and depletic	оп				
Ę,	20	Occupancy Travel, conferences, and	l meetings				-
7 pc	21	Printing and publications		125.	0.		125.
ē	23	Other expenses	STMT 2	25.	0.		25.
Operating and Administrative	24	•			<u> </u>		
3 9 6		expenses. Add lines 13		3,650.	0.		3,650.
ō	25	•	-	18,859.			18,859.
	26	Total expenses and disl					
_		Add lines 24 and 25		22,509.	0.		22,509.
	27	Subtract line 26 from lin	e 12				
	a	Excess of revenue over expe	enses and disbursements	11,491.	t d ddddyddagaeth lldad		
	b	Net investment income	(if negative, enter -0-)		0.		
0236		Adjusted net income (if	negative, enter -0-)		<u></u>	N/A	

12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

Part 11 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Ralanco Shoots Attached schedules and amounts in the description	Beginning of year	End of	fyear		
1	an	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	1,993.	13,984.	13,984.		
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts	1				
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts	1				
S	8	Inventories for sale or use			-		
Assets	9	Prepaid expenses and deferred charges			-		
Ą	10a	Investments - U S and state government obligations					
	ļ ,	Investments - corporate stock		···. ····			
	l	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
		Less: accumulated depreciation]				
	12	Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment basis		7r3n'11111111			
		Less, accumulated depreciation	1				
	15	Other assets (describe ►					

	16	Total assets (to be completed by all filers)	1,993.	13,984.	13,984.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		500.			
abi	21	Mortgages and other notes payable					
	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	0.	500.			
		Foundations that follow SFAS 117, check here					
/ 0		and complete lines 24 through 26 and lines 30 and 31.					
ĕ	24	Unrestricted					
lan	25	Temporarily restricted					
Fund Balances	26	•					
Ĕ		Foundations that do not follow SFAS 117, check here					
٥		and complete lines 27 through 31.					
ts	27	Capital stock, trust principal, or current funds	0.	0.			
SSe	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	1,993.	13,484.			
ž	30	Total net assets or fund balances	1,993.	13,484.			
			1 000	12 004			
_	31	Total liabilities and net assets/fund balances	1,993.	13,984.			
P	art	Analysis of Changes in Net Assets or Fund E	Balances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30				
•		st agree with end-of-year figure reported on prior year's return)	, 00	1	1,993.		
2		r amount from Part I, line 27a	-	2	11,491.		
		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	13,484.		
		eases not included in line 2 (itemize)		5	0.		
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), tine 30	6	13,484.		
Ť	. 5.0	Tatelly o			Form 990-PF (2010)		

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Part IV Capital Gains	and Losses for Tax on Ir	nvestment	Income					
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e.garehouse; or common stock, 200 sh	, real estate, s MLC Co)		P	low acquired - Purchase - Donation		Oate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a '								
b NO	NE					<u> </u>	_	
<u>C</u>		_				ļ	_	
d				ļ				
	<u> </u>		 	<u> </u>		<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				h) Gain or (loss plus (f) minus	
<u>a</u>								
b								
<u>c</u>								
<u>d</u>								
Complete only for assets showing	l ng gain in column (h) and owned by	the foundation	on 12/31/60			//\ Cau	o (Cal /h) asia	minus
Complete only for assets snown	(j) Adjusted basis	1	cess of col (I)	\dashv			ns (Col (h) gain but not less tha	
(i) F M V. as of 12/31/69	as of 12/31/69		col (j), if any				sses (from col (
<u>a</u>		 						
<u>b</u>		 						
C		 						
d								
е								
2 Capital gain net income or (net ca	apital loss) If gain, also ente			}	2			
3 Net short-term capital gain or (lo								
If gain, also enter in Part I, line 8,		iiu (o))				
If (loss), enter -0- in Part I, line 8	<u> </u>			<u></u>	3			
Part V Qualification U	Inder Section 4940(e) for	r Reduced	Tax on Net	Inv	estment l	ncom	e	
(For optional use by domestic privat	e foundations subject to the section	4940(a) tax on	net investment ir	ncome))			
If section 4940(d)(2) applies, leave t	this part blank							
	•							
Was the foundation liable for the sec			•	riod?				Yes X No
If "Yes," the foundation does not qua	each column for each year, see insti			98				
(a)		TUCTIONS DETONE	making any entir					(d)
Base periód years Calendar year (or tax year beginn	(b) Adjusted qualifying dis	stributions	Net value of no	(c) Incha		ets	Distril (col. (b) do	oùtión ratio vided by col. (c))
2009	""y ""/	23,130.			10,13	34.	(001 (0) 011	2.282416
2008	2	25,008.			12,70			1.967894
2007		24,755.	-		38,30			.646277
2006		21,275.			22,0			.966299
2005	1	0,266.			19,9	49.		.514612
		·	•					
2 Total of line 1, column (d)							2	6.377498
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	r of ye	ars			
the foundation has been in existe	ence if less than 5 years						3	1.275500
4 Enter the net value of noncharita	ble-use assets for 2010 from Part X,	line 5				_	4	1,229.
								1 5 6 0
5 Multiply line 4 by line 3	-					_	5	1,568.
								0
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				-	-	6	0.
7 Add hose Free 20							_	1 560
7 Add lines 5 and 6						-	7	1,568.
8 Enter qualifying distributions from	m Part XII, line 4				-		8	22,509.
	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1'	% tax rate			
See the Part VI instructions								

	990-PF (2010) THE KING FAMILY CHARITABLE TRUST TYPE Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		64507			age 4
	Exempt operating foundations described in section 4940(d)(2), check here \to	1	366 11	isti u	Clioi	13/
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				0.
	of Part I, line 27b			····		
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
	Add lines 1 and 2	3			_	0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
	Credits/Payments					
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 135.					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments Add lines 6a through 6d	7			1	35.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1	35.
	Enter the amount of line 10 to be Credited to 2011 estimated tax	11				0.
	t VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n			Yes	No
	any political campaign?		ľ	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		Ī	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	l or	Ī			
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		Ī			
	(1) On the foundation \triangleright \$ 0 • (2) On foundation managers \triangleright \$ 0 •		1			-
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ► \$ 0.					
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		İ	2		Х
	If "Yes," attach a detailed description of the activities.	-	Ī			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	,				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		Ì	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N.	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		Ī	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NY					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation		ĺ	8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ıdar	1			
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses]	10		Х

Form 990-PF (2010)	THE	KING

THE KING FAMILY CHARITABLE TRUST

1	1		c	A		Λ	7	2	1
Τ	Τ	_	o	4	Э	v	1	3	1

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		<u> </u>
3 Five highest-paid independent contractors for professional services. If none, ent	·	
• (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total 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 state	tistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pr	roduced, etc	LAPERISES
1 N/A		
		,
2	. = -	
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
<u> </u>		
All other program-related investments See instructions	-	-
3		
Total. Add lines 1 through 3	•	0.

Part X Minimum Investment	Return (All domestic foundation	ons must complete this part.	Foreign foundations, see	instructions.)
1 Fair market value of assets not used (or hel	ld for use) directly in carrying out ch	antable, etc., purposes.	_ ''''	
a Average monthly fair market value of secur		, , , , , , , , , , , , , ,	1a	0.
b Average of monthly cash balances			1b	1,248.
c Fair market value of all other assets	•	•	10	
d Total (add lines 1a, b, and c)	•		1d	1,248.
e Reduction claimed for blockage or other fai	ctors reported on lines 1a and	•		
1c (attach detailed explanation)		1e	0.	
2 Acquisition indebtedness applicable to line	1 assets		2	0.
3 Subtract line 2 from line 1d			3	1,248.
4 Cash deemed held for chantable activities	Enter 1 1/2% of line 3 (for greater ar	nount, see instructions)	4	19.
5 Net value of noncharitable-use assets. Su	, -	•	5	1,229.
6 Minimum investment return. Enter 5% of	line 5		6	61.
	(see instructions) (Section 4942(j		oundations and certain	
1 Minimum investment return from Part X, III	ne 6		1	61.
2a Tax on investment income for 2010 from P	Part VI, line 5	2a		
b Income tax for 2010 (This does not includ	e the tax from Part VI)	2b		
c Add lines 2a and 2b			2c	
3 Distributable amount before adjustments 5	Subtract line 2c from line 1		3	61.
4 Recoveries of amounts treated as qualifyin	g distributions	_	4	0.
5 Add lines 3 and 4			5	61.
6 Deduction from distributable amount (see	instructions)		6	0.
7 Distributable amount as adjusted Subtract	t line 6 from line 5. Enter here and o	n Part XIII, line 1	7	61.
Part XII Qualifying Distribution				
1 Amounts paid (including administrative ex	•	c , purposes		22 500
a Expenses, contributions, gifts, etc - total fi	•		1a	22,509.
b Program-related investments - total from P			1b	
2 Amounts paid to acquire assets used (or h		naritable, etc., purposes	2	
3 Amounts set aside for specific charitable p	•			
a Suitability test (prior IRS approval required	•		3a	
b Cash distribution test (attach the required s	•		3b	22 500
4 Qualifying distributions. Add lines 1a thro	•	•	4	22,509.
5 Foundations that qualify under section 494	iu(e) for the reduced rate of tax on ne	et investment	_	^
income Enter 1% of Part I, line 27b			5	22 500
6 Adjusted qualifying distributions. Subtract			6	22,509.
Note. The amount on line 6 will be used in 4940(e) reduction of tax in those ye	·	ears when calculating whether the	o Toundation qualifies for the	section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,			2000	2010
line 7				61.
2 Undistributed income, if any, as of the end of 2010			###***********************************	
a Enter amount for 2009 only			0.	
b Total for prior years				***** ********************************
,		0.		
3 Excess distributions carryover, if any, to 2010			111111111111111111111111111111111111111	
a From 2005 9,269. b From 2006 20,174.				
b From 2006 20,174.				
c From 2007 22,840. d From 2008 24,373.				
d From 2008 24,373.				
e From 2009 22,623.				
f Total of lines 3a through e	99,279.			
4 Qualifying distributions for 2010 from				
Part XII, line $4 \triangleright \$ 22,509$.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	· · · · · · · · · · · · · · · · · · ·		
d Applied to 2010 distributable amount				61.
e Remaining amount distributed out of corpus	22,448.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	121,727.			
b Prior years' undistributed income. Subtract		······································		
line 4b from line 2b		0.		
c 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.		
d Subtract line 6c from line 6b Taxable		~	······································	
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line				······································
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of			"	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	9,269.	·····		
9 Excess distributions carryover to 2011.	110 450			
Subtract lines 7 and 8 from line 6a	112,458.			***************************************
10 Analysis of line 9				
a Excess from 2006 20,174.				
b Excess from 2007 22,840.				
c Excess from 2008 24,373.				
d Excess from 2009 22,623. e Excess from 2010 22,448.				
e Excess from 2010 22, 448.				Form QQD_DF (2010)

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3 Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 3		<u> </u>		10.050
Total b Approved for future payment	1	1	. ▶ 3a	18,859
NONE Total			. ► 3b	0

er gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded t	y section 512, 513, or 514	(0)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exemp function income
a tb c					
d					
f Fees and contracts from government agencies					
Membership dues and assessments					•
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					
a Debt-financed property			+		
b Not debt-financed property Net rental income or (loss) from personal			1		
property					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a h	-				
C					
d					
e					
Subtotal Add columns (b), (d), and (e)		0	•	0.	

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of						
the foundation's exempt	purposes (other than by providing fun	ds for such purposes)				
	•					
	-					
		,				
						
	· · · · · · · · · · · · · · · · · · ·					
 _						
<u> </u>						
-	··					
	<u> </u>					

Relationship of Activities to the Accomplishment of Exempt Purposes

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Part XVI-B

Part X				11-645 d Relationships With Nonch		Pa €	ge 13
1 Did t		rectly engage in any of the following	a with any other organization	described in section E01(a) of		Yes	No
		:)(3) organizations) or in section 52		• •		163	110
		ation to a noncharitable exempt or		ations			ĺ
(1)		ation to a noncharitable exempt of	yanızatıdı vi		4.41		v
		-		-	1a(1)		X
	Other assets r transactions		•		1a(2)		
	r transactions Sales of assets to a noncharita	shle avampt arganization			45/43		v
		oncharitable exempt organization			1b(1)		X
	Rental of facilities, equipment,	• •			1b(2)		X
	Reimbursement arrangements	==	•		1b(3)		X
	Loans or Ioan guarantees	-			1b(4)	-	X
	-	embership or fundraising solicitation	200		1b(5)		X
		ailing lists, other assets, or paid em			1b(6) 1c		X
				ys show the fair market value of the goods			
or se	rvices given by the reporting t nn (d) the value of the goods,	oundation If the foundation received other assets, or services received	ed less than fair market value	in any transaction or sharing arrangement,	, show in	- 0	
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	d sharing an	rangeme	nts
		N/A					
	<u> </u>						
			,				
							
			, ,== · ·				
	<u> </u>		, .				
			·	-			
-		· · · · · · · · · · · · · · · · · · ·					
	 	 					
	 	· · · · · · · · · · · · · · · · · · ·					
		-					
	 						
22 lc th	foundation directly or indirec	.l atly affiliated with, or related to, one	or more toy everent everenies	tions described			
		er than section 501(c)(3)) or in sec		uons described		Ī	No
	es," complete the following sch	· · · · · ·	11011 5217	'	Yes	Δ	↑ INO
	(a) Name of or		(b) Type of organization	(c) Description of relation	ichin		
	N/A		(b) Type of organization	(e) bescription of relation	311IP		
-	21,722				 -		
				·			
	Under penalties of perjury, I declar	ge that have examined this return, include	ling accompanying schedules and s	statements, and to the best of my knowledge and b	oelief, it is tr	ue, corre	ct.
Sign	and complete Declaration of prepared	arer (other than texpayer or fiduciary) is b	ased on all information of which pre	eparer has any knowledge			
Here			5/13/1	TRUSTEE			
	Signature of officer or tri	Gat ee	Date	Title		-	
	Print/Type preparer's n			Date Check X If PTIN			
				self- employed			
Paid	Laurence E	. HOMLER Lauren	rce 2. Homler o		0759	410	
Prepar	rer Firm's name ► HOM	ILER & HOMLER, I	LP, CPA'S	Firm's EIN ► 03-0			
Use O	I	SOUTH SERVICE	•	, min o Elite o o o			
		CRICHO, NY 11753		Phone no. (516	5)747	-11	91
				į	•		

023622

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.

OMB No 1545-0047

2010

Name of the organization

Employer identification number

	THE KING FAMILY CHARITABLE TRUST	11-6450731				
Organization type (chec	ck 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	501(c)(3) exempt private foundation				
	X 4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Note. Only a section 50 General Rule X For an organiza	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in manufactors).	/				
Special Rules	mplete Parts I and II.					
509(a)(1) and 1	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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.					
aggregate con	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
contributions for this box is character purpose. Do no	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
Caution. An organization	on that is not covered by the General Rule and/or the Special Rules does not file Schedule	B (Form 990, 990-EZ, or 990-PF),				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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 line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer Identification number

THE KING FAMILY CHARITABLE TRUST

11-6450731

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GISELA KING 6 HADDINGTON DRIVE OLD WESTBURY, NY 11568	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

of Part II

Name of organization

Employer Identification number

THE KING FAMILY CHARITABLE TRUST

11-6450731

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization Employer identification number THE KING FAMILY CHARITABLE TRUST 11-6450731 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. 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.)' > \$ (a) No. from (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

11-64501

FORM 990-PF ACCOUNTING FEES			S!	STATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	3,500.	0.		3,500.	
TO FORM 990-PF, PG 1, LN 16B	3,500.	0.		3,500.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FILING FEE	25.	0.		25.	

FORM 990-PF

STATEMENT

3

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN HORTICULTURAL SOCIETY 7931 EAST BOULEVARD DRIVE ALEXANDRIA, VA	N/A BRINGING GARDENING INTO THE THE LIVES OF CHILDREN	PUBLIC	100.
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 100249981	N/A NATURAL HISTORY	PUBLIC	115.
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK NY	N/A NATURAL HISTORY	PUBLIC	115.
BAY STREET THEATRE P.O. BOX 810 SAG HARBOR, NY 11963	N/A SUPPORT THEATER, MUSIC & EDUCATIONAL PROGRAMS	PUBLIC	800.
CMTA 2700 CHESTNUT STREET CHESTER, PA 190134867	N/A MEDICAL RESEARCH	PUBLIC	250.
GARDEN CITY LIONS CLUB	N/A	PUBLIC	30.
HEMPSTEAD POLICE ACTIVITY LEAGUE 99 NICHOLS COURT HEMPSTEAD, NY 11550	N/A	PUBLIC	280.
MANHATTAN THEATRE CLUB 311 W. 43RD STREET NEW YORK, NY 10036	N/A RENOVATIONS OF THEATRE FACILITY	PUBLIC	2,000.

GRANTS AND CONTRIBUTIONS

. THE KING FAMILY CHARITABLE TRUS	T		11-6450731
METROPOLITAN MUSEUM OF ART GRACIE STATION PO BOX 814 NEW YORK, NY 101300087		PUBLIC	200.
NÀSSAU POLICE CONFERENCE, INC. P.O. BOX 490 LYNBROOK, NY 11563	N/A	PUBLIC	150.
NEW YORK BOTANICAL GARDEN 2900 SOUTHERN BOULEVARD BRONX, NY 104589999		PUBLIC	120.
QUOGUE FIRE DEPARTMENT PO BOX 5026 QUOGUE, NY 119595026	N/A SUPPORT VOLUNTEER FIRE DEPARTMENT	PUBLIC	100.
QUOGUE VILLAGE PBA PO BOX 449 QUOGUE, NY 11959	N/A SUPPORT POLICE BENEVOLENT ASSOCIATION ACTIVITIES	PUBLIC	100.
SUFFOLK UNIVERSITY LAW SCHOOL 8 ASHBURTON PLACE BOSTON, MA 02108		PUBLIC	500.
THE HORTICULTURAL ALLIANCE OF THE HAMPTONS P.O. BOX 202 BRIDGEHAMPTON, NY 119320202	SUPPORTS EFFORTS TO	PUBLIC	200.
THE NATURE CONSERVANCY 4245 N. FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	N/A	PUBLIC	100.
THE QUOGUE HISTORICAL SOCIETY PO BOX 1207 QUOGUE, NY 11959-1207	N/A	PUBLIC	100.
THE QUOGUE LIBRARY BOX 5036 QUOGUE, NY 11959	N/A TO BUY LIBRARY MATERIALS	PUBLIC	250.

. THE KING FAMILY CHARITABLE TRUS	Т		11-6450731
THIRTEEN ASSOCIATES 450 WEST 33RD STREET NEW YORK, NY 100012605	N/A PUBLIC TELEVISION	PUBLIC	375.
UNIVERSITY OF NEW HAMPSHIRE 9 EDGEWOOD ROAD DURHAM, NH 038241934	N/A PRESIDENT'S FUND FOR EXCELLENCE	PUBLIC	500.
WESTHAMPTON BEACH PERFORMING ARTS CENTER 76 MAIN STREET WESTHAMPTON BEACH, NY 11978	N/A PERFORMING ARTS	PUBLIC	10,000.
WILDLIFE CONSERVATION SOCIETY P.O. BOX 108 BRONX, NY 104589950	N/A TO PROTECT MARINE WILDLIFE	PUBLIC	124.
WLIW 21 P.O. BOX 2100 NEW YORK, NY 101162100	N/A PUBLIC TELEVISION	PUBLIC	250.
WNPR CONNECTICUT PUBLIC RADIO P.O. BOX 8000 HARTFORD, CT 061800207	N/A PUBLIC RADIO	PUBLIC	250.
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024-5192	N/A NATURAL HISTORY	PUBLIC	400.
PECONIC LAND TRUST P.O. BOX 1776 SOUTHAMPTON, NY 11969	N/A BRIDGE GARDENS	PUBLIC	50.
SALISBURY FAMILY SERVICES	N/A		200.
AMERICAN FRIENDS OF SHEBA MEDICAL CENTER AT TEL HASHOMER C/O WEINSTEIN SPECIAL EVENTS 215 PARK AVE. SOUTH NEW YORK, NY	N/A	PUBLIC	1,000.

• THE KING FAMILY CHARITABLE TRUST 11-6450731 QUOGUE HISTORICAL SOCIETY N/A **PUBLIC** 200. PO BOX 1207 QUOGUE, NY 11959-1207

TOTAL TO FORM 990-PF, PART XV, LINE 3A

18,859.