

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Schedule B (Form 990, 990-EZ, or 990-PF)

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

W. DUNCAN AND NIVIN MACMILLAN FOUNDATION 26-2162073 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990 PF 4947(a)(1) nonexempt charatable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules 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 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 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, chantable, 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, chantable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization 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), 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)

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)

Name of organization

Employer identification number

NCAN AND NIVIN MACMILLAN FOUNDATION	2	6-2162073
Contributors (see instructions)	-	
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
W. DUNCAN MACMILLAN TRUST ESTATE P.O. BOX 5628 MINNEAPOLIS, MN 55440	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) (b) No. Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	- s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) (b) No Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II if there Is a noncash con-ribution)
(a) (b) No 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) (b) No. Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	s	Person Payroil Noncash (Complete Part il if there is a noncash contribution)
(a) (b) No. Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
	(b) Name, address, and ZIP+4 W. DUNCAN MACMILLAN TRUST ESTATE P.O. BOX 5628 MINNEAPOLIS, MN 55440 (b) Name, address, and ZIP+4 (b) Name, address, and ZIP+4 (b) Name, address, and ZIP+4	(c) Name, address, and ZIP + 4 Aggregate contributions