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CISR99PQVF

Schedule B

(Form 990, 990-EZ, or 990-PF) .

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number

PI	ETER J. KING FAMILY FOUNDATION	26-1600569			
Organization type (check one).					
Filers of:	Section:				
Form 990 or 990-EZ	orm 990 or 990-EZ				
	4947(a)(1) nonexempt chantable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule					
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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, 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 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 8 (Form 990, 990-EZ, or 990-PF) (2010)

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Schedule B (F	orm 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Part I	
Name of or	ganization ,	E	Employer identification number	
PETER	J. KING FAMILY FOUNDATION		26-1600569	
Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) ns Type of contribution	
1	PETER J. KING 25 SOUTH DEEP LAKE ROAD NORTH OAKS, MN 55127	\$ 320,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)	
2	ESTATE OF PETER J. KING 3001 BROADWAY STREET NE, SUITE 665 MINNEAPOLIS, MN 55413	\$ <u>57,570,50</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)	
3	ESTATE OF PETER J. KING 3001 BROADWAY STREET NE, SUITE 665 MINNEAPOLIS, MN 55413	s <u>4,606,86</u> 2	Person Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(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 contribution	(d) Type of contribution	
023452 12-23	3-10	\$Schedule R (F	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) orm 990, 990-EZ, or 990-PF) (2010)	
	-	Ocheans D (I	onn 000, 000 Ez, 01 000 FF) (2010)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Name of organization

Page 1 of 1 of Part #
Employer identification number

ert II	J. KING FAMILY FOUNDATION Noncash Property (see instructions)	·	26-1600569
	Trondant Toporty (300 msnuchoris)		····
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	1 1316 50601/07
	MARKETABLE SECURITIES VALUED AT AVERAGE OF HIGH AND LOW FOR THE DAY	-	
-		\$ <u>4,606,86</u>	2. 09/15/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
.		- - - \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		- - - \$	
(a) No. from	(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	

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Schedule B &	orm 990, 990-EZ, or 990-PF) (2010)			Page of of Part III				
	ganization			Employer identification number				
	T WING PANTLY BOINDAM	TON		26 1600560				
PETER	J. KING FAMILY FOUNDAT Exclusively religious, charitable, etc., in	LUN	on 501(a)(7) (8) or (10)	26-1600569				
Part III	more than \$1,000 for the year. Complet	e columns (a) through (e) and the	following line entry. For	organizations aggregating				
	Part III, enter the total of exclusively religion	ous, charitable, etc., contribution:	s of	- Garage				
	\$1,000 or less for the year. (Enter this inf	ormation once See instructions.)	<u>▶ \$</u>					
(a) No.	(6) 9	4-) 11a4 a/4	(4) 000					
from Part I	(b) Purpose of gift	(c) Use of gift	(a) Desi	cription of how gift is held				
				- 				
								
			<u> </u>					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	Relationship of transferor to transferee				
			-					
(a) No.	-							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
								
			 					
		j	<u> </u>					
		L						
		(e) Transfer of gif	t					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	insferor to transferee				
(a) No								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	· · · · · · · · · · · · · · · · · · ·							
		4.77						
		(e) Transfer of gift						
Į.								
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ensferor to transferee				
		\						
		l						
			· · · · · · · · · · · · · · · · · · ·					
(a) No.		1	=					
from Part i	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
								
				 				
ŀ		<u> </u>						
	(e) Transfer of gift							
ļ	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	insferor to transferee				
								
			Caba dula I	2 /Farm 000 000 F7 000 DF1 (0040)				