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Schedule B (Form 990, 999-EZ,

Schedule of Contributors

OMB No. 1545-0047

Or 980-PP) Department of the Trassury Internal Revenue Service	P AREE to Form 880, Form 880-PF.		2017		
		or identification number			
PIPER JAFFRAY FOUNDATION 41-173			734806		
Organization type (ch	eck 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 for	ndation			
	527 political organization				
Form 990-PF	X 501(c)(3) exampt private foundation	X 501(c)(3) exampt private foundation			
	4947(a)(1) nonexampt charitable trust treated as a private foundate	tion			
	501(c)(3) taxable private foundation	501(c)(3) taxable private foundation			
	vization filing Form 980, 980-EZ, or 990-PF that received, during the year, \$5,000 or any one contributor. Complete Parts I and II.	or more (li	n money or		
under section	in 501(c)(3) organization filing Form 980 or 980-EZ that met the 33 1/3 % support the 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the f (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form sts I and II.	e year, a	contribution of		
during the ye	n 501(c)(7), (8), or (10) organization fiting Form 990 or 990-EZ that received from lar, total contributions of more then \$1,000 for use exclusively for religious, charite al purposes, or the prevention of cruelty to children or animals. Complete Parts I, II,	tole, scien	ontributor, ttfic, Oterary,		
For a section 501(a)(7), (8), or (10) organization filing Form 980 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 total 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 of the control of the co	on that is not covered by the General Rule and/or the Special Rules does not file S t it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line I m 990-PF, to certify that it does not meet the filing requirements of Schedule B (Fo	ichedule B H of its Fo	(Form 980, rm 990-E 2 or on		

For Paperwork Reduction Act Motion, use the Instructions for Force 990, 994-EZ, or 998-PF.

Schedule 8 (Form 990, 990-EZ, or 196-PF) (2011)

	3 (Form 980, 990-EZ, or 990-PF) (2011)		Page 2
Hazno ef or	ganhation PIPER JAFFRAY FOUNDATION		A1-1734808
Part	Contributors (see instructions). Use duplicate copies	of Part I if additional space is nee	ded.
(e) No.	(b) Name, addrese, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	PIPER JAPFRAY & CO. 800 NICOLLET MAIL MINNEAPOLIS, MN 55402	\$\$\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	PIPER JAPFRAY & CO. 800 NICOLLET MALL MINNEAPOLIS, MN 55402	\$ 575,376.	Person X Payroll X Noncean X (Complete Part II if there is a noncean contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Peyroll Noncash (Complete Part II If there is a noncash contribution.)
(a) No.	(b) Name, address, and 2IP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Pryroll Noncash (Complete Pert II If there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, eddress, and ZIP + 4	(c) Total contributions	(এ) Type of contribution
		s	Person Payroll Noncash (Complete Part II If there is a noncash contribution.)

	(Form 890, 880-EZ, ar 890-PF) (2011)		Pego S
Vame of o	panission PIPER JAFFRAY FOUNDATION		erefication number 41-1734808
Part II	Noncesh Property (see instructions). Use duplicate copies	s of Part II if additional space is nee	ded.
(a) No. from Part I	(b) Description of noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Data received
1	NYSE SHARES		
<u> </u>		\$\$.	02/15/2011
(a) No. from Part I	(b) Description of nencash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received
?	CONVIO SHARES	_	
			02/17/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(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 noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	

Schedule E	3 (Form \$90, 980-CZ, or 890-PF) (2011)			Page		
Name of	organization PIPER JAFFRAY FOUNDAT	ION .		Employer Identification number 41-1734808		
Part III	Paties May religious, charitable, etc. that total more than \$1,000 for the y For organizations completing Part III, contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of	year. Complete columns (a) enter the total of ex <i>clusivel</i>) e year. (Enter this informati) through (e) : / reliaious ch:	(c)(7), (8), or (10) organizations and the following line entry.		
A-I No	Ose doplicate copies of Part III ii addit	ioriai space is ribeueu.	·			
(u) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
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	(e) Transfer of gift					
	Transferes's Azmo, address, and ZIP + 4		Relations	Relationship of transferor to transferoe		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
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		(e) Transfer of gift				
	Transferee's name, address, a	and ZP + 4	Refational	hip of transferor to transferos		
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
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	(e) Transfer of gift					
ļ	Transferee's name, address, a	nd 23P + 4	Relations	nip of transferor to transferee		
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
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	(e) Transfer of gift					
	Transferee's name, address, or	N 47 T T	Kelations	htp of transferor to transferoe		
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