

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)

Schedule of Contributors

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

OMB No. 1545-0047

୭⋒11

Department of the Treasury Internal Revenue Service		
Name of the organization	-	Employer identification number
THE PATTERSON FAM	ILY FOUNDATION	
Organization type (check	anol:	99-0346079
organization type (check	une).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	vate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	Toundation
	1 501(c)(3) taxable private foundation 1	
		DEC 0 3 2012
Check if your organization lote. Only a section 501(dinstructions.	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule.	
Seneral Rule		
_	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$ ny one contributor. Complete Parts I and II.	5,000 or more (in money or
Special Rules		
under sections 5	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % su 109(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, du \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (i) and II.	iring the year, a contribution of
during the year,	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received total contributions of more than \$1,000 for use exclusively for religious, urposes, or the prevention of cruelty to children or animals. Complete Pa	charitable, scientific, literary,
during the year, not total to more year for an exclu- applies to this or	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received contributions for use exclusively for religious, charitable, etc., purposes, than \$1,000. If this box is checked, enter here the total contributions the sively religious, charitable, etc., purpose. Do not complete any of the paraganization because it received nonexclusively religious, charitable, etc., year	but these contributions did let were received during the ts unless the General Rute contributions of \$5,000 or
90-EZ, or 990-PF), but it r	nat is not covered by the General Rule and/or the Special Rules does no must answer "No" on Part IV, line 2, of its Form 990, or check the box o 90-PF, to certify that it does not meet the filing requirements of Schedule	n line H of its Form 990-EZ or on
or Paraguark Reduction Act No	ntice was the Instructions for Form 990 990-F7 or 990-FF. Sc	hedule B (Form 990, 990-EZ, or 990-PF) (201

JSA

Employer Identification number 99-0346079

	Contributors (see instructions). Use duplicate copies of F		,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JAMES A PATTERSON 69 NIUHI STRFEET HONOLULU, HI 96821	\$83,000. 	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
		 \$	Person Payroll 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
		\$	Person Payroll 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
		\$	Person Payroll 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
		\$	Person Payroll Noncash (Complete Part II of 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.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization THE PATTERSON FAMILY FOUNDATION

Employer identification number 99-0346079

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
		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 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 noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u></u>		<u></u>

	990, 990-EZ, or 990-PF) (2011)			Р	
a or ordaub	tation THE PATTERSON FAMILY	COUNDATION		Employer identification number 99-0346079	
rt III Exch	usively religious, charitable, etc.,	tions to section 5	01(c)(7), (8), or (10) organizations		
For cont	total more than \$1,000 for the year organizations completing Part III, e ributions of \$1,000 or less for the	nter the total of excl year. (Enter this info	<i>usively</i> religious, comation once. Se	haritable, etc.,	
	duplicate copies of Part III if addition	nal space is needed	d		
) No. rom art i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
_ =					
		(e) Transfe	er of gift		
	Transferee's name, address, and ZIP + 4 Relatio		nship of transferor to transferee		
_					
No. om art I	(b) Purpose of gift	(с) Use	of gift	(d) Description of how gift is held	
_ =					
<u> </u>		(e) Transfe	er of gift		
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
-					
No.					
om art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
-					
		(e) Transfe	er of gift		
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
No. om ort I	(b) Purpose of gift	(c) Use (of gift	(d) Description of how gift is held	
- -					
	(e) Transfer of gift				
_	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
í		(