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· Form 990-PF

Department of the Treasury Internal Revenue Service

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

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2012

Open to Public Inspection

FOI	calen	dar year 2012 or tax year beginning ,	and ending				
Na	ame of fo	pundation			A Empl	oyer identification number	
-	TOUN!	AND UTW EDICUCON ELVIN DOIN			0.5		
		AND KIM ERICKSON FAMILY FOUND and street (or P O box number if mail is not delivered to street address)				-1886811	
		B WESTSIDE DRIVE	"	loom/suite		hone number (see instruction 8 – 7 3 9 – 3 0 3 9	13)
		n, state, and ZIP code	·		41	0-739-3039	
F	ERG	SUS FALLS MN 56537			C If exe	mption application is pending	, check here
G	Check	all that apply Initial return Initial retu	rn of a former public o	harity	D 1. Fo	oreign organizations, check h	ere ►
		Final return Amended	return		2. Fo	preign organizations meeting	the
		Address change Name cha	ange			% test, check here and attac	
H	Check	type of organization X Section 501(c)(3) exempt private	foundation	 	E If priva	ate foundation status was ten	minated under
			le private foundation		, , , , , , , , , , , , , , , , , , , ,	n 507(b)(1)(A), check here	▶ □
		rket value of all assets at J Accounting method		crual	F If the	foundation is in a 60-month to	ermination
е	nd of y	vear (from Part II, col. (c), Other (specify)	ري			section 507(b)(1)(B), check I	. 1
hu	ne 16)		be on cash basis)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	T			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes
	T			 			(cash basis only)
	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check I if the foundation is not required to attach Sch. B	294,591	-			
	3						
	4	Interest on savings and temporary cash investments Dividends and interest from securities	2,388	-	2,388		
	5a	Gross rents	2,300	<u>' </u>	2,300		
~~ 4 \	b	Net rental income or (loss)		<u> </u>			
]]	6a	Net gain or (loss) from sale of assets not on line 10	-1,526				
<u>~</u> 5	Ь	Gross sales price for all assets on line 6a 140,966	2,320				
ක කෙදි	7	Capital gain net income (from Part IV, line 2)		<u> </u>	0		
	8	Net short-term capital gain				0	
MAY	9	Income modifications					
\geq	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					, , , , , , , , , , , , , , , , , , , ,
ក្រា	С	Gross profit or (loss) (attach schedule)					
<u></u>	11	Other income (attach schedule)					
<u></u>	12	Total. Add lines 1 through 11	295,454		2,389	0	
SCANNED ses	13	Compensation of officers, directors, trustees, etc	0				
© Expenses	14	Other employee salaries and wages					
eu	15	Pension plans, employee benefits					
X	16a	Legal fees (attach schedule)			-		
	b	Accounting fees (attach schedule) STMT 1	366		366		
Ę	С	Other professional fees (attach schedule)				F	PECEIVED
Ţ.	17	Interest					
nis	18	Taxes (attach schedule) (see instructions) STMT 2	4				AY 2 1 2013 SY
Ë	19	Depreciation (attach schedule) and depletion				<u> </u>	AY 2 0 2013 19
Ad	20	Occupancy					\rightarrow \rightarro
ğ	21	Travel, conferences, and meetings				<u> </u>	GDEN, UT-
a	22	Printing and publications					
Operating and Administrative	23	Other expenses (att sch) STMT 3	83		58		
ati	24	Total operating and administrative expenses.	4.50		ارمه	_	-
Ser	25	Add lines 13 through 23	453		424	0	0
Õ	25	Contributions, gifts, grants paid	105,805	···········	424		105,805
	26 27	Total expenses and disbursements. Add lines 24 and 25	106,258		424	0	105,805
		Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	189,196				
	a b	Net investment income (if negative, enter -0-)	109,190		1,965		
	C	Adjusted net income (if negative, enter -0-)			1,303	0	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2012)

Form 990-PF (2012) JOHN AND KIM ERICKSON FAMILY FOUNDA 26-1886811

- D - 4	Attached schedules and amounts in the description column	Beginning of year	End o	f year
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash – non-interest-bearing	28,329	73,035	73,037
2	Savings and temporary cash investments	11,459	4,190	4,190
3	Accounts receivable >			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶	[
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see			
	instructions)			
7	Other notes and loans receivable (att. schedule)			·
	Less allowance for doubtful accounts ▶ 0	1		
8 12	Inventories for sale or use			
Assets 9 10a	Prepaid expenses and deferred charges			
Y 10a	Investments – U S and state government obligations (attach schedule)			
b	Investments – corporate stock (attach schedule) SEE STMT 4		151,759	156,499
c	Investments – corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis		~	
-	Less accumulated depreciation (attach sch.)			
12	Investments – mortgage loans		···	
13	Investments – other (attach schedule)			
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch.)		İ	
15	Other assets (describe ▶			
16	Total assets (to be completed by all filers – see the			
	instructions. Also, see page 1, item I)	39,788	228,984	233,726
17	Accounts payable and accrued expenses			
18	Grants payable			
Liabilities 02 15	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>명</u> 21	Mortgages and other notes payable (attach schedule)			
그 22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here			
Sep 24	and complete lines 24 through 26 and lines 30 and 31.			
	Unrestricted			
E 25	Temporarily restricted			1
Net Assets or Fund Bala 0 6 8 2 2 9 5 2 6 2 2 6 2 2 6 2 6 2 6 8 2 6 6 8 2 6 6 8 6 6 6 8 6 6 6 6	Permanently restricted			,
5	Foundations that do not follow SFAS 117, check here			
<u>.</u>	and complete lines 27 through 31.			
O 27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg, and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds	39,788	228,984	
30	Total net assets or fund balances (see instructions)	39,788	228,984	
Ž 31	Total liabilities and net assets/fund balances (see			
	instructions)	39,788	228,984	
Part II	Analysis of Changes in Net Assets or Fund Balances			
1 Total	net assets or fund balances at beginning of year – Part II, column (a), line 30 (mus	t agree with		
	f-year figure reported on prior year's return)	-	_ 1	39,788
2 Enter	amount from Part I, line 27a		2	189,196
3 Other	increases not included in line 2 (itemize) ▶		3	
	nes 1, 2, and 3		4	228,984
5 Decre	ases not included in line 2 (itemize) ▶		5	
6 Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b) <u>, line 30</u>	6	228,984

Form 990-PF (2012) JOHN AND KIM ERICKSON FAMILY FOUNDA 26-1886811

, Part IV Capital Gains a	nd Losses for Tax on Investme	ent income			
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P Purchase D Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a 5962 SHS OTTER	TAIL CORP		P	11/26/12	2 11/26/12
b WELLS FARGO INV	ESTMENTS				
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed	(g) Cost	or other basis	(h) (Gain or (loss)
	(or allowable)	plus exp	ense of sale	(e) plu	is (f) minus (g)
a 140,966			142,492		-1,526
<u>b</u>					
С					
d					
<u>e</u>					
Complete only for assets showin	g gain in column (h) and owned by the fo	undation on 12/31.	/69		Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i)		not less than -0-) or s (from col. (h))
	as or 12/31/09	Over co	ol (j), if any		
<u>a</u>					-1,526
_b					
<u>c</u>				 	
d		 			
е	- F #	D. 41 L. 7 7			
2 Capital gain net income or (net c	apital loss) If gain, also enter in	.			-1,526
2. Not short term conite! coin or (les	If (loss), enter -0- in	•	-	2	-1,520
	ss) as defined in sections 1222(5) and (6 , column (c) (see instructions) If (loss), e	•			
Part I, line 8	, column (c) (see instructions) if (loss), (enter -u- in		3	
	nder Section 4940(e) for Reduc	ad Tay on Not	Investment Inco		
	foundations subject to the section 4940			iie	
		(a) tax on het inves	unent income)		
If section 4940(d)(2) applies, leave the	iis part blank				
Was the foundation liable for the sec	tion 4942 tax on the distributable amoun	of any year in the	base period?		Yes X No
If "Yes," the foundation does not qual	lify under section 4940(e). Do not comple	ete this part			
1 Enter the appropriate amount in e	each column for each year, see the instri	ictions before mak	ing any entries		
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginning in)		Net valu	e of noncharitable-use assets		Distribution ratio b) divided by col. (c))
2011	164	482	30,7		5.351270
2010		863	44,6		3.108989
2009		265	70,5		1.916614
2008		650	107,3		1.198751
2007					
2 Total of line 1, column (d)				2	11.575624
3 Average distribution ratio for the !	5-year base period – divide the total on li	ne 2 by 5, or by the	•		
	as been in existence if less than 5 years			3	2.893906
4 Enter the net value of noncharitat	ole-use assets for 2012 from Part X, line	5		4	134,704
	·				
5 Multiply line 4 by line 3				5	389,821
•					
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	20
	• •				
7 Add lines 5 and 6				7	389,841
8 Enter qualifying distributions from					
	Part XII, line 4			8	105,805
	•	and complete that	part using a 1% tax ra		105,805
	Part XII, line 4 I line 7, check the box in Part VI, line 1b,	and complete that	part using a 1% tax ra		105,805

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Pi	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instru	ctions					
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	\neg	T				
	Date of ruling or determination letter (attach copy of letter if necessary—see instruction	15)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		. 1				39
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		ŀ				
	Part I, line 12, col (b)			ľ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				(
3	Add lines 1 and 2		3				3 9
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				(
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				3 9
6	Credits/Payments						
а	2012 estimated tax payments and 2011 overpayment credited to 2012		ł				
b	Exempt foreign organizations – tax withheld at source 6b		1				
С	Tax paid with application for extension of time to file (Form 8868) 6c		1				
d	Backup withholding erroneously withheld 6d		1	1			
7	Total credits and payments Add lines 6a through 6d		7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				39
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunde	d ▶	11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No
	participate or intervene in any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					1	
	Instructions for the definition)?				16	ļ	x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				-	1.	
	published or distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?				1c]	X
_d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		_				
	on foundation managers > \$					-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2]	X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	1	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	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?				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? If "Yes," complete Part II, col (c), a	nd Pa	rt XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NONE					•	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					ļ	ĺ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or						
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"						ĺ
	complete Part XIV				9		х
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	· · · · · · · · · · · · · · · · · · ·	'MT	5		10	х	

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P	art VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement (see instructions)			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	
	Website address ► N/A					
14		hone no 🕨	218-7	739-	303	9
	1098 WESTSIDE DRIVE			_		
	Located at Fergus falls	ZIP+4 ▶	5653	7		ــم
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	. 1	1			▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	▶ [15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority			1	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of					
Ď.	the foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>		
					V	Na
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly)			-	Yes	No
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		.	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	[163	21, 140			
	disqualified person?	Yes	X No		.	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		. [
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		110			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				l	
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulati	_	٠٠ <u>ب</u>			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		_			
	were not corrected before the first day of the tax year beginning in 2012?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				.	
а	•	_	_			
	6e, Part XIII) for tax year(s) beginning before 2012?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		/-			
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
•	▶ 20 , 20 , 20 , 20 Debths for address little 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	m	(T.F.)			
_	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	,		
4-	foundation had excess business holdings in 2012)	,	N/A	3b	+	x
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes.	•		4a	+	<u>~</u>
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	122		4b		x
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	14'		orm 99 ()_DE	
			t t	orm JJ	7-L-L-	(2012)

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. <u>P</u>		ing Activities for Which Fo	<u>rm 4720 May Be F</u>	Required (con	tinued)		
5a	During the year did the foundation pay o	r incur any amount to					
	(1) Carry on propaganda, or otherwise a	attempt to influence legislation (sec	tion 4945(e))?		Yes 🗓 No	1 1	
	(2) Influence the outcome of any specific	ic public election (see section 4955	i), or to carry on,				.
	directly or indirectly, any voter regist	tration drive?			Yes X No		
	(3) Provide a grant to an individual for ti	ravel, study, or other similar purpos	ses?	П	Yes X No		
	(4) Provide a grant to an organization of	ther than a charitable, etc , organiz	ation described in	_			
	section 509(a)(1), (2), or (3), or sect	ion 4940(d)(2)? (see instructions)			Yes X No		
	(5) Provide for any purpose other than r		ary, or educational		J		
	purposes, or for the prevention of cre		•		Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did a	· ·	under the exceptions of				
	Regulations section 53 4945 or in a curr				N/A	5b	
	Organizations relying on a current notice				▶ □		
С	If the answer is "Yes" to question 5a(4),						
	because it maintained expenditure response	-		N/A	Yes No		
	If "Yes," attach the statement required by	•)	• 🗀	السما		
6a	Did the foundation, during the year, rece	• •	•				
	on a personal benefit contract?	•			Yes X No		
b	Did the foundation, during the year, pay	premiums, directly or indirectly, on	a personal benefit cont			6ь	ľx
	If "Yes" to 6b, file Form 8870	•					
7a	At any time during the tax year, was the	foundation a party to a prohibited to	ax shelter transaction?		Yes X No		
	If "Yes," did the foundation receive any p				N/A	7b	İ
		ficers, Directors, Trustees					
	and Contractors	•	,	,	p,	,	
1 L	ist all officers, directors, trustees, four	ndation managers and their com	pensation (see instruc	tions).			
				T	(d) Contributions to	T	
	(a) Name and a	address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
			devoted to position	enter -0-)	plans and deferred compensation	omer	allowances
JO	HN ERICKSON	FERGUS FALLS	PRES/CHAIR			<u>† </u>	
10	98 WESTSIDE DR	MN 56537	0.00	ا ،	١ .	.i	0
AD	AM ERICKSON	FARGO	VICE PRES			<u> </u>	
17	21 39TH STREET SW, #302	ND 58103	0.00	۱ ,	٥	.]	0
IS	AAC ERICKSON	FERGUS FALLS	VICE PRES	<u> </u>			
10	98 WESTSIDE DR	MN 56537	0.00	i o	٥	.	0
	MBERLY ERICKSON	FERGUS FALLS	TREAS/SEC	· ·	<u>_</u>		
10	98 WESTSIDE DR	MN 56537	0.00	١ ,	o		0
	Compensation of five highest-paid em			tructions). If non			<u>~</u>
	"NONE."	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-, 0 0 .		
			(L) Tilly and a		(d) Contributions to		
	(a) Name and address of each employee p	paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
			devoted to position		plans and deferred compensation	other	allowances
NO	NE				·		
]			1	
				~			
						1	
						<u> </u>	
	-	· · · · · · · · · · · · · · · · · · ·					
Total	number of other employees paid over \$50	0.000					0
	The state of the s			 		_ 000)-PF (2012)
					FC	rm フラリ	/=r=r=(2012)

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (ii) Name and address of each person paid more than \$50,000	Form 990-PF (20	012) JOHN AND KIM ERICKSON FAMILY FOUNDA	26-1886811	Page
(a) None and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation to largest direct charitables activities only the service of the person and other beneficiaries served, conferences convened, research papers produced of: 1 N/A 2 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-solidad investments made by the foundation during the lax year on lines 1 and 2 Amount All other program-related investments. See instructions 3 All other program-related investments. See instructions 3	Part VIII		on Managers, Highly Paid E	mployees,
NONE Total number of others receiving over \$50,000 for professional services	3 Five high	est-paid independent contractors for professional services (see instruction	ons). If none, enter "NONE."	
Fotal number of others receiving over \$50,000 for professional services Description		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions 3 All other program-related investments. See instructions 3 All other program-related investments. See instructions 3 All other program-related investments. See instructions	NONE			
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List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2 3 4 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments See instructions 3	Total number of	others receiving over \$50,000 for professional services		▶ 0
regarizations and other beneficiaries served, conferences convened, research papers produced, etc Expenses N/A Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions	Part IX-A	Summary of Direct Charitable Activities		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3			as the number of	Expenses
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3	1 N/A			
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Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3				-
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3	3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3	•			
1 N/A 2 All other program-related investments See instructions 3			ons)	<u> </u>
All other program-related investments See instructions 3		gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
All other program-related investments. See instructions 3	I N/A			
3	2	· · · · · · · · · · · · · · · · · · ·		
3	AU alban cara			
otal Add lines 1 through 3	· -	lated investments. See instructions		
tog: contents tourner 1	otal Addisses	1 through 2		

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2012)

105,805

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2012) JOHN AND KIM ERICKSON FAMILY FOUNDA 26-188681	Form 990-PF (2012)	JOHN A	AND K	IM	ERICKSON	FAMILY	FOUNDA	26-188681
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	art XIII Undistributed Income (see	instructions	<u> </u>			
1	Distributable amount for 2012 from Part XI,		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7					6,696
2	Undistributed income, if any, as of the end of 2	012	<u> </u>			
а	Enter amount for 2011 only					
b	Total for prior years 20 , 20 , 2	0				
3	Excess distributions carryover, if any, to 2012					
а	From 2007					
b	From 2008	123,945	1			1
C	From 2009	131,752	1			
d	From 2010	136,632				' '
е	From 2011	162,953				
f	Total of lines 3a through e		555,282			
4	Qualifying distributions for 2012 from Part XII,					
	line 4 ▶ \$105,805					
	Applied to 2011, but not more than line 2a					
b	Applied to undistributed income of prior years					
	(Election required – see instructions)					
С	Treated as distributions out of corpus (Election					
	required – see instructions)					
	Applied to 2012 distributable amount			·	<u> </u>	6,696
	Remaining amount distributed out of corpus		99,109			
5	Excess distributions carryover applied to 2012					
	(If an amount appears in column (d), the same					
_	amount must be shown in column (a))					
6	Enter the net total of each column as					
_	indicated below:	_	654 201			
	Corpus Add lines 3f, 4c, and 4e Subtract line 8	•	654,391			
D	Prior years' undistributed income. Subtract					
_	line 4b from line 2b					
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					1 ' '
d	Subtract line 6c from line 6b Taxable					
٠	amount – see instructions					
	Undistributed income for 2011 Subtract line		· · · · · · · · · · · · · · · · · · ·		 	
٠	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2012. Subtract lines					
•	4d and 5 from line 1. This amount must be					
	distributed in 2013					0
7	Amounts treated as distributions out of corpus	i				
	to satisfy requirements imposed by section	ļ				
	170(b)(1)(F) or 4942(g)(3) (see instructions)					
8	Excess distributions carryover from 2007 not					
	applied on line 5 or line 7 (see instructions)	i				
9	Excess distributions carryover to 2013.	ľ				
	Subtract lines 7 and 8 from line 6a		654,391			
0	Analysis of line 9	į				
а	Excess from 2008	123,945				
b	Excess from 2009	131,752]			
С	Excess from 2010	136,632	Į			
d	Excess from 2011	162,953				
e	Excess from 2012	99,109				

MUST BE A 501(C)3 ORGANIZATION

Form 990-PF (2012) JOHN AND KIM ERICKSON FAMILY FOUNDA 26-1886811

 Part XV Supplementary Information (c 3 Grants and Contributions Paid During th 	ontinued)	Eutura Paymont		
Recipient	if recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year SEE ATTACHED SCHEDULE	NONE	PUBLIC CHARI SUPPORT O	F CHARITY	105,80
b Approved for future payment			<u>▶ 3a</u>	105,80
N/A				
Total			▶ 3b	

Form 900 DE (2012)	MHOL	מואב	KTM	ERICKSON	FAMIL.V	ECIMIDA	26-1886811
roim 990-PF (2012)	UUDIN	MIND	$\mathbf{v}_{\mathbf{TM}}$	TKT CV DOM	LAMITUI	LOUNDA	70-10000TT

Part XVI-A	Analysis of Income-Producing Act	ivities				
Enter gross amo	ounts unless otherwise indicated	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(0)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue					(See instructions)
a				<u> </u>		
ь						·
c	 			ļ .		
				+		
				+		
f	ad contracts from anyone and account					·
	nd contracts from government agencies odues and assessments			+		
-	savings and temporary cash investments		<u> </u>	14	1	
	and interest from securities			14	2,388	
	ncome or (loss) from real estate				2,000	
	anced property		<u> </u>			
	ot-financed property	· · · · · · · · · · · · · · · · · · ·				
	ncome or (loss) from personal property			1		
7 Other invest	· · · · · · · · · · · · · · · · · · ·					
8 Gain or (los	s) from sales of assets other than inventory			14	-1,526	
•	or (loss) from special events					
	or (loss) from sales of inventory					
11 Other reven	ue a					
b						
d						
				ļ		
	dd columns (b), (d), and (e)	L		'	863	
13 Total. Add I	ine 12, columns (b), (d), and (e)			'	13	
13 Total. Add I (See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	L			13	
13 Total. Add I (See worksheet Part XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities		ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
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13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
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13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
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13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
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13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863
13 Total. Add I (See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose	13	863

Part	XVII	Information Reg Exempt Organiz		ransfers To an	d Transactio	ns and Relationships	With Noncharitable			
1 Di	d the orga			ge in any of the fo	flowing with any o	other organization described		Y	es	No
				•		ction 527, relating to political				
	ganizatior			(//)	.,	. 3 .,		ŧ	- 1	
	-	om the reporting found	dation to a n	oncharitable exem	int organization o	f		ł		
) Cash				p. o.gazadon o	•	4.	1(1)	- [X
•) Other a	ecote								X
•	her transa						10	(2)	-	
									ŀ	
		f assets to a noncharit		_			-	(1)		<u> </u>
		ses of assets from a no		· -	ion		<u>[11</u>	(2)		X
•	•	of facilities, equipment	-	sets			11	(3)		X
(4) Reimbu	rsement arrangements	S				11	(4)		X
(5) Loans o	r loan guarantees					11	(5)		<u> </u>
(6) Perform	ance of services or me	embership d	or fundraising solic	itations		11	(6)	\dashv	X
c Sh	naring of fa	acilities, equipment, m	iailing lists, d	other assets, or pa	id employees			С		Х
d If	the answe	r to any of the above i	s "Yes," con	nplete the following	g schedule Colui	nn (b) should always show th	ne fair market			
va	lue of the	goods, other assets, o	or services g	ven by the reporti	ing foundation. If	the foundation received less	than fair market			
va	lue in any	transaction or sharing	arrangeme	nt, show in column	n (d) the value of	the goods, other assets, or s	ervices received			
	ine no	(b) Amount involved		ne of nonchantable exem			rs, transactions, and sharing arran	ements		
N/A										
										
			 							
							·		-	
										
		·	-							
		·								
							 ·			
			-				 			
										
							 			
			ļ							
						·				
			<u> </u>							
de	scribed in	ation directly or indirect section 501(c) of the opposite the following sci	Code (other			exempt organizations n 527?		Yes	X	No
) Name of organization		(b) Type of o	proanization	(c) De	scription of relationship			
N/				1		(0) 20	,			
	·									
										
	Under pena	alties of perjury, I declare tha	at I have exami	ned this return, including	g accompanying sche	dules and statements, and to the bes	t of my knowledge and belief, it is	true,		
	correct, an	d complete Declaration of p	reparer (other t	han taxpayer) is based	on all information of w	hich preparer has any knowledge	May the IRS discuss t	ne return		
Sign							with the preparer show			
lere		_					(see instructions)?	X Yes	: 🔲	No
ieie	L	10			15	10-13	irnan/Pros.			
	Signal	ture of officer or trustee			Date	Title	airman/Pros.			
	7				· · · · · · · · · · · · · · · · · · ·	F I III	———	1		
	Print/Typ	e preparer's name			Preparer's signature)	Date		eck [ıf
aid		Prolong 1. 11 D	L-IL	:	_				f-emplo	oyed
repare	.	RICHARD H PI		DICKERS	T TO		05/08/	.3		
se Only	Firm's na			PICKETT,	LTD		PTIN	. 4 6 -		
	Firm's ad		COURT				Firm's EIN ▶ 41-18			
		FERGU	S FALL	S, MN 56	5537-2106	<u> </u>	Phone no 218 - 7	'36-	-69	65

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

JOHN AND KIN	M ERICKSON FAMILY FOUNDA	26-1886811
Organization type (check	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 foun	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II	r more (in money or
Special Rules		
under sections 509	c)(3) organization filing Form 990 or 990-EZ that met the 33 ¹ /3 % support test 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 91 and II	year, a contribution of
during the year, to	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an tal contributions of more than \$1,000 for use exclusively for religious, charitable coses, or the prevention of cruelty to children or animals. Complete Parts I, II,	ole, scientific, literary,
during the year, co not total to more th year for an exclusi	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an intributions for use exclusively for religious, charitable, etc., purposes, but these ian \$1,000. If this box is checked, enter here the total contributions that were revely religious, charitable, etc., purpose. Do not complete any of the parts unless inization because it received nonexclusively religious, charitable, etc., contributions.	se contributions did received during the iss the General Rule
990-EZ, or 990-PF), but it i	hat is not covered by the General Rule and/or the Special Rules does not file s must answer "No" on Part IV, line 2 of its Form 990, or check the box on line h 0-PF, to certify that it does not meet the filing requirements of Schedule B (Fo	H of its Form 990-EZ or on

Name of organization

JOHN AND KIM ERICKSON FAMILY FOUNDA

Employer identification number 26-1886811

2 21114	AND RIM ERICKBON PANIET TOURER		1000011
Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN & KIM ERICKSON 1098 WESTSIDE DRIVE FERGUS FALLS MN 56537	\$ 294,591	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
	ivalite, address, and all 1.4	\$	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
NO.	Name, address, and zir + 4	\$	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)
		Schodule R (Form 990, 990-F7, or 990-PF) (2012)

Name of organization JOHN AND KIM ERICKSON FAMILY FOUNDA Employer identification number

26-1886811

Part II	Noncash Property (see instructions) Use duplicate	copie		ce is needed.
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	170 SHS CVS CAREMARK			
		\$	7,863	06/19/12
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	90 SHS WALT DISNEY			
		\$	4,276	06/19/12
(a) No. from Part i	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	540 SHS ISHS RUSSELL MIDCAP VAL			
į		\$	24,775	06/19/12
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	275 SHS ISHS RUSSELL MIDCAP INDX			
		\$	29,002	06/19/12
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	285 SHS ISHS RUSSELL 2000 INDEX			
		\$	22,415	06/19/12
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1	405 SHS INTEL			
		\$	11,141	06/19/12

Page 2 of 2 of Part I

Name of organization

JOHN AND KIM ERICKSON FAMILY FOUNDA

Employer identification number 26-1886811

Part II	Noncash Property (see instructions). Use dupli	cate copies of	f Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	1	(c) MV (or estimate) see instructions)	(d) Date received
1	595 SHS VANGUARD REIT			
		\$	38,413	06/19/12
(a) No. from Part I	(b) Description of noncash property given		(c) MV (or estimate) see instructions)	(d) Date received
1	5962 SHS OTTER TAIL CORP			
		\$	142,492	11/26/12
(a) No. from Part I	(b) Description of noncash property given	1	(c) MV (or estimate) see instructions)	(d) Date received
1	65 SHS ANHEUSER BUSCH			
		\$	5,667	12/17/12
(a) No. from Part I	(b) Description of noncash property given		(c) MV (or estimate) see instructions)	(d) Date received
1	135 SHS HOME DEPOT			
		\$	8,547	12/17/12
(a) No. from Part I	(b) Description of noncash property given		(c) MV (or estimate) ee instructions)	(d) Date received
		\$		<u> </u>
(a) No. from Part I	(b) Description of noncash property given	I	(c) MV (or estimate) ee instructions)	(d) Date received
		\$		

5811 John and Kim Erickson Family Founda 26-1886811 FYE: 12/31/2012	F.	deral Statements		5/8/2013 4:05 PM
· σΙ	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	art I, Line 16b - Accou	nting Fees	
Description INDIRECT ACCOUNTING FEES TOTAL	\$ 366	Net Investment \$ 366 \$ 366	Adjusted Net	Charitable Purpose
	Statement 2 - Form 990-	- Form 990-PF, Part I, Line 18 - Taxes	IXes	
Description FEDERAL TAX TOTAL	Total	Net Investment \$	Adjusted Net	Charitable Purpose
	Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses	art I, Line 23 - Other E	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES BANK & INVESTMENT FEES REGISTRATION FEES	58 25 25	 82 &	_ም	w
TOTAL	% 8 8 8 8 8 8	\$	w	o o
				1-3

5811 John and Kim Erickson Family Founda 26-1886811 FYE: 12/31/2012

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Market /alue	5,682 8,220 4,481 8,350 8,351 27,130 31,103 24,031	56,499
Fair Market Value		11
	07	V)
Basis of Valuation	COST COST COST COST COST COST COST	
End of Year	5,667 7,863 4,276 8,547 11,142 24,775 29,002 22,415 38,072	151,759
	w	₩.
Beginning of Year	w	v.
Description	65 SHS ANHEUDER BUSCH 170 SHS CVS CAREMARK 90 SHS WALT DISNEY CO 135 SHS HOME DEPOT 405 SHS INTEL 540 SHS ISHARES RUSSELL MIDCAP VAL 275 SHS ISHARES RUSSELL MIDCAP IDX 285 SHS ISHARES RUSSELL MIDCAP IDX 595 SHS VANGUARD REIT	TOTAL

4

5/8/2013 4:05 PM 2 City, State, Zip Statement 5 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors FERGUS FALLS MN 56537 Federal Statements Address 1098 WESTSIDE DRIVE 5811 John and Kim Erickson Family Founda Name JOHN & KIM ERICKSON FYE: 12/31/2012 26-1886811

5811 John and Kim Erickson Family Founda

Federal Statements

5/8/2013 4:05 PM

FYE: 12/31/2012

26-1886811

Statement 6 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
JOHN ERICKSON KIMBERLY ERICKSON	\$ 147,295 147,296
TOTAL	\$ 294,591

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

NO FORMAL PROCESS

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

MUST BE A 501(C)3 ORGANIZATION

2012 Donations John and Kim Erickson Family Foundation

#1161	1/30/12	Messiah Lutheran Church Hour of Worship	50
#1162	3/15/12	Meals on Wheels	50
#1163	3/6/12	Pioneer Home Foundation	50
#1164	4/3/12	Center For the Arts	100
#1165	4/12/12	Fergus Falls Concert Assocation	150
#1166	4/16/12	Dollars for Scholars	100
#1168	4/27/12	Friends of the Prairie Wetlands Center	7 5
#1169	5/3/12	Fergus Falls #544 Ed. Foundation	500
#1171	5/31/12	Lake Region Healthcare Foundation	500
#1172	6/5/12	Young Life	500
#1173	7/7/12	Badlands Ministries	50
#1175	7/30/12	Otter Tail County Historical Society	50
#1176	7/30/12	Cullen Children's Foundation	5,000
#1177	7/30/12	NDSU Development Foundation	1,000
#1179	10/15/12	Heart Gallery	1,000
#1180	10/16/12	United Way of Otter Tail County	3,000
#1181	10/17/12	Grace United Methodist Church	50
#1182	12/7/12	Lakeland Hospice	20,000
#1183	12/7/12	Lake Region Healthcare Foundation	25,000
#1184	12/7/12	Fergus Falls Fish & Game Club	100
#1185	12/7/12	Health Resources Center	100
#1186	12 <i>/</i> 7/12	Fergus Falls Area College Foundation	500
#1187	12 <i>/</i> 7/12	Carter's Eternal Hope	1,000
#1188	12/7/12	Young Life Otter Tail County	10,000
#1189	12/13/12	Dollars for Scholars	50
#1190	12/20/12	NDSU Development Foundation	1,000
#1191	12/20/12	NDSU Development Foundation	600
#1192	12/29/12	Village Family Service	100
#1193	12/29/12	Young Life	10,000
C. Card	7/30/12	2012 Breast Cancer Ride	100
C. Card	2/27/12	Muscular Dystropny	<i>3</i> 0
C. Card	2/14/12	Impact Foundation	500
	2012	Federated Church	24,500

TOTAL: \$105,**8**05