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· Form 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

2009

Form **990-PF** (2009)

OMB No 1545-0052

For c	alenda	ar year 2009, or tax yea	ar beginning			, and e	nding					
G C	heck a	ll that apply:	Initial return		Initial return of a f		harity			Fınal returr	1	
			Amended return		Address chan	ige		Name ch	nang	e		
	the IR	s Name of foundation						A Empl	oyeı	· identification	number	
-	erwise		N FAMILY FOU					34	<u>l – 6</u>	568495)	
	orint	l l	O box number if mail is not de	elivered to	street address)		Room/suite			e number		
	type. Specif		ECANOE ROAD)		
	uction	, I city of town, state, a									ending, check here	
	l l - 4-	CANFIELD,] ບໍ່າ. Fo ວິ່ງ For	reigi	organizations	s, check here	
H_C	, ´		Section 501(c)(3) ex			-4		che	eck h	ere and attach co	eeting the 85% test, emputation	
		on 4947(a)(1) nonexement of all assets at e			xable private found	X Accr	ual .				tus was terminate	ď
		rt II, col (c), line 16)	· I —	her (spe		LA_J Accr	uai	1		,	(A), check here	
<i>(III</i>			9 , 9 0 4 . (Part I, colu			hasis)		F If the	four	ndation is in a	60-month termina	tion
	rt I	Analysis of Revenue an	nd Expenses					Ti .			(B), check here	
	(The total of amounts in colunecessarily equal the amoun	mns (b), (c), and (d) may not		Revenue and enses per books	(b) Net in		(c)		usted net ome	for charitable pu	rposes
		ontributions, gifts, grant			30,147.				N/		(cash basis o	miy)
			in is not required to attach Sch. B		JU,14/•	-			74 /	п.		
	_	iterest on savings and temporals investments			305.	_	305	-			STATEMEN	յու 1
		ash investments ividends and interest fro			32,153.	3	$\frac{303}{2,153}$				STATEMEN	
		ross rents	3111 3034111103		32,133.		<u> </u>	1			DIALBMEN	11_2
		et rental income or (loss)						İ,				
_	_	et gain or (loss) from sale of	assets not on line 10		198,392.	>			-	RECI	IVED	
Revenue	b G	ross sales price for all ssets on line 6a	345,667.									
e e		apital gain net income (from					0.	,	က	NOV 1	- T-2	
æ	8 N	et short-term capital gai	ın						003	NO A T	8 2010 C	1
		come modifications					-				<u>\</u>	
	10a a	ross sales less returns nd allowances								OGDE	M, UT	
		ess Cost of goods sold										=1
	c G	ross profit or (loss)										
	11 0	ther income			286.		286.				STATEMEN	<u> 1T 3 </u>
_	12 T	otal. Add lines 1 throug	h 11	_ <	<u> 135,501.</u>	> 3	<u>2,744.</u>	<u>, </u>				
	13 c	ompensation of officers, dire	ectors, trustees, etc		0.		0.	<u> </u>				0.
		ther employee salaries a	=									
တ		ension plans, employee	benefits					1				,
nses		egal fees						1				
Exper		ccounting fees	STMT 4		7,166.		0.					0.
Ĥ		ther professional fees	STMT 5		33,368.	3	3,368.	•				0.
ţį		nterest	amım c	-	0.046			 				
and Administrative		axes	STMT 6		<2,046.	<u> </u>	0.	'			<u> </u>	0.
ij		epreciation and depletio	on .	<u> </u>				-				
þ		ccupancy ravel, conferences, and I	maatinaa			,		-				
Þ		ravel, comerences, and i rinting and publications	-									
		ther expenses						1				
			inictrativa					 				
Operating	24 Total operating and administrative expenses. Add lines 13 through 23				38,488.	2	3,368.					Λ
Ö	25 Contributions', gifts, grants paid			98,846.	<u>J</u>	<i>-</i> ,	 			9.0	0. 846.	
		otal expenses and disb	·		20,040.			 			90,	040.
		dd lines 24 and 25			137,334.	3	3,368.	.]			9.8	846.
		ubtract line 26 from line	12:				_ , _ 0 0 0	 			70,	<u> </u>
Operat		ccess of revenue over expens			272,835.	>						
'		et investment income (r					0.					
		djusted net income (if ne							N/	Ä		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), lin	ne 30			6	1,938,897.
5	Decreases not included in line 2 (itemize)	SEE	STATEMENT	8	5	15.
4	Add lines 1, 2, and 3				4	1,938,912.
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT	7_	3	555,441.
2	Enter amount from Part I, line 27a				2	<272,835·>
	(must agree with end-of-year figure reported on prior year's return)				1	1,656,306.
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		•			

923511

Part IV Capital Gains a	and Losse	es for Tax on In	vestment	Income						
	(a) List and describe the kind(s) of property sold (e.g., real es 2-story brick warehouse; or common stock, 200 shs. MLC C				(b) How acquired P - Purchase D - Donation				acquired day, yr.)	(d) Date sold (mo., day, yr.)
<u>1a</u>					<u> </u>	-				
b SEE ATTACHED	STATE	MENTS			ļ					
<u>c</u>		····								<u> </u>
<u>d</u>				"	-					-
<u>e</u>	(f) Done	noistian allawad	(=\ Coo	t or other been	<u>. </u>	•		(5) (Coup or (Inco	
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale					<u></u>		Gain or (loss s (f) minus			
a b					\neg			 -		
C										·
d					_					···
e 345,667.			***	480,05	9.					<198,392.
Complete only for assets showin	g gain in colui	mn (h) and owned by t	he foundation			_		(I) Gains (Col. (h) gair	
		fjusted basis		cess of col. (I)			cc	ol. (k), but	not less tha	ın -0-) or
(i) F.M.V. as of 12/31/69		of 12/31/69		col. (j), if any				Losses	(from col.	(n))
a								•		
b								•		
C										
d										
е				·			,			<198,392.
		If gain, also enter If (loss), enter -0-	in Part I, line	7]					.100 202
2 Capital gain net income or (net ca	pital loss)	If (loss), enter -0-	ın Part I, line	7	J	2				<198,392.
3 Net short-term capital gain or (los	•	in sections 1222(5) and	d (6):		٦					
If gain, also enter in Part I, line 8,	column (c).								NT / 70	
If (loss), enter -0- in Part 1, line 8 Part V Qualification U	nder Sec	tion 4940(e) for	Reduced	Tax on Net	· Inv	estr	nent In	come	N/A	1
		· · · · · · · · · · · · · · · · · · ·						001110		-
(For optional use by domestic private	: iounoanons :	subject to the Section 4	940(a) lax on	net investment ii	ICOITE	s.)				
If section 4940(d)(2) applies, leave the	nis part blank.									
Was the foundation liable for the sect	tion AQA2 tay (on the dietributable am	ount of any ve	ar in the hace no	rınd?					Yes X No
If "Yes," the foundation does not qual			,,	•	i iou ·					
1 Enter the appropriate amount in e					es.					"
(a)		(b)		-	(c)				Diotri	(d)
Base period years Calendar year (or tax year beginnii	na in) A	Adjusted qualifying dist	ributions	Net value of no			-use asset	s		bùtión ratio vided by col. (c))
2008	<u> </u>	47	3,913.		2	,52	1,22	6.	, , , ,	.187969
2007			3,088.				4,32			.141430
2006		59	3,433.				5,74			.162774
2005			2,980.				0,17			.126318
2004			3,375.		1	,77	1,41	0.		.069648
2-Total of line 1, column (d)								2	-	.688139
3 Average distribution ratio for the !	5-year base pe	riod - divide the total c	n line 2 by 5,	or by the number	r of ye	ears				
the foundation has been in exister	nce if less thar	n 5 years						3		.137628
4 Enter the net value of noncharitab	le-use assets	for 2009 from Part X, I	ıne 5					4		1,707,128.
5 Multiply line 4 by line 3								5	<u> </u>	234,949.
6 Enter 1% of net investment incom	ne (1% of Part	I, line 27b)						6		0.
7 Add lines 5 and 6								7_		234,949.
O Fatan analis of the transfer	- D- 4 VIII 1									00 046
8 Enter qualifying distributions from	•		1h and	loto that ===4 ··-:-		0/ +	rata	8	<u></u>	98,846.
If line 8 is equal to or greater than See the Part VI instructions.	mie 7, cneck	ine oox in Part VI, line	io, and comp	iete triat part usir	ıy a 1'	7₀ tax	rate.			

_		<u> 568495</u>		Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	see instru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%			0.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-;)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6	Credits/Payments:			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6,109.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
_	Total credits and payments. Add lines 6a through 6d		<u>6,1</u>	<u>09.</u>
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			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		6,1	09.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 6, 109. Refunded ► 11 Int VII-A Statements Regarding Activities			0.
			Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		162	
	any political campaign? Did it accord more than \$100 during the year (orther directly or indirectly) for political purposes (see instructions for definition)?	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			}
	Did the foundation file Form 1120-POL for this year?	10		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1c		
u	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
·	managers. > \$ 0.			
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		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		l	
	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?	7	X	
	If "Yes," complete Part II, col (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	ОН			1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	85	X	<u> </u>
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X_

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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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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Х

3b

4a

N/A

orm 990-PF (2009) WILLIAMSON FAMILY FOUNDA			<u>34-65684</u>	195	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	l	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	es X No	- 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization			1		
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			
expenditure responsibility for the grant?		Γ/A □ Y€	s No		
If "Yes," attach the statement required by Regulations section 53 4945			,5 110		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	* *			l	
a personal benefit contract?	Jay premiums on		es X No	1	
·	araanal hanafit aantraat?	۲۰۰۰ السبب	ואונבבואט	6	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denenii contract?		-	6b	→
If "Yes" to 6b, file Form 8870.	h		es X No		1
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	-	71	-
b If yes, did the foundation receive any proceeds or have any net income attribute		name Highl	N/A	7b	
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Ma	inagers, migni	y		
List all officers, directors, trustees, foundation managers and their	compensation				
List all officers, directors, a disters, foundation managers and their		(c) Compensation	(d) Contributions to	(0)	Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acco	unt, other
\-\frac{\pi_{\text{0.5}}}{1}	to position	enter -0-)	compensation	alle	owances
				-	•
SEE STATEMENT 11		0.	0.	·	0.
				1	
155			ı		
				İ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(-) Componentian	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	alle	owances
NONE					
			- ''		-
			1		
				1	
			 	†	
			 	-	
Tetal number of other employees and over \$50,000	<u> </u>	<u>l</u>		<u> </u>	0
Total number of other employees paid over \$50,000				000 5	PF (2009)
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All other program-related investments. See instructions.

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. For	oreign toundations, s	see instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	1,733,125.
b Average of monthly cash balances	1b	
c Fair market value of all other assets	_1c	
d Total (add lines 1a, b, and c)	1d	1,733,125.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,733,125.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>25,997</u> .
Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,707,128.
6 Minimum investment return. Enter 5% of line 5	6	<u>85,356</u> .
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four foreign organizations check here and do not complete this part.)	ndations and certain	
1 Minimum investment return from Part X, line 6	1	85,356.
2a Tax on investment income for 2009 from Part VI, line 5		
b Income tax for 2009. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	85,356.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	85,356.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	85,356.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00.046
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	98,846.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	00 046
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	98,846.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		^
income. Enter 1% of Part I, line 27b	5	98,846.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fi	oundation qualities for	the section
4940(e) reduction of tax in those years.		Form 990-PF (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		10010 p1101 to 2000		2000
line 7				85,356.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:			- 0.	
b Total for prior yours.		0.		
3 Excess distributions carryover, if any, to 2009:	· · · · · · · · · · · · · · · · · · ·	· ·		- ,
a From 2004 35,557.				
b From 2005 318, 413.				
c From 2006 419,546.				
d From 2007 304, 200	•			
e From 2008 348, 306.				
f Total of lines 3a through e	1,426,022.			
	1,420,022.			
4 Qualifying distributions for 2009 from Part XII, line 4: ►\$ 98,846.				
			0.	
a Applied to 2008, but not more than line 2a			U •	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			25.256
d Applied to 2009 distributable amount	12 100			85,356.
e Remaining amount distributed out of corpus	13,490.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,439,512.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line	1 111		<u></u>	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009, Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010	-			0.
7 Amounts treated as distributions out of		· • ·		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004		- 		**
not applied on line 5 or line 7	35,557.			
9 Excess distributions carryover to 2010.	00,007.1			
Subtract lines 7 and 8 from line 6a	1,403,955.			
10 Analysis of line 9:	2,100,333.	-		
a Excess from 2005 318, 413.				
b Excess from 2006 419,546.				
c Excess from 2007 304, 200.				
d Excess from 2008 348, 306.				
e Excess from 2009 13,490.				
£ 2, 490 •			·	5 000 DE (2222)

Part XIV Private Operating F	SON FAMILY				68495 Page 10
			· · · · · · · · · · · · · · · · · · ·	N/A	
1 a If the foundation has received a ruling of			.		
foundation, and the ruling is effective fo		-		14040(1/0)	
b Check box to indicate whether the found		ing roundation describer		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(a) Tatal
income from Part I or the minimum	(a) 2003	(8) 2000	(6) 2007	(0) 2000	(e) Total
investment return from Part X for					
each year listed		`			
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		- · · · · · ·			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross		/			
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	/ if the foundation	n had \$5 000 or me	nre in assets
at any time during t			, ii tiio iodiidatio	71 11dd 40 ,000 01 111	ore in deserts
1 Information Regarding Foundation					
a List any managers of the foundation wh	-	than 2% of the total co	ntributions received by t	ha faundation hafara tha cla	ca of any tay
year (but only if they have contributed in			ininbulions received by the	ne loutidation before the Go	SE OF ALTY LAX
SEE STATEMENT 12	, , , ,	((((((((((((((((((((
b List any managers of the foundation wh	o own 10% or more of t	he stock of a cornoration	a (or an equally large no	tion of the ownership of a n	artnership or
other entity) of which the foundation ha					
NONE	-				
2 Information Regarding Contribut	ion Grant Gift Loar	Sobolarchin etc. I	Programs:		· · · · · · · · · · · · · · · · · · ·
Check here ► X if the foundation of				not account uncollected road	unete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	· · · · · · · · · · · · · · · · · · ·				
a The hame, address, and telephone ham	not of the herson to who	ντι αμφιισατιστίο οπιστία τ	ro quui coocu,		
b The form in which applications should b	e submitted and inform:	ation and materials they	eponiq include.		
The form in which applications should be	c submitted and informe	ation and materials mey	Siloulu iliciduc.		
c Any submission deadlines:					···
	- -				
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable field	s, kınds of ınstitutions, o	r other factors:	
923601 02-02-10					Form QQA_DE (2000)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	Amount
a Paid during the year	any roundation manager or substantial contributor	status of recipient	Contribution	Amount
SEE STATEMENT 13 Total		l	N 0-	00 016
b Approved for future payment			▶ 3a	98,846.
NONE				
Total 923811 02-02-10			<u> </u>	0.
			Fo	orm 990-PF (2009)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	.				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b	·	····			
C	1 1				
<u> </u>					
e	·				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	305.	
4 Dividends and interest from securities			14	32,153.	<u>.</u>
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property		·			
7 Other investment income	-		14	286.	
8 Gain or (loss) from sales of assets other than inventory			18	<198,392.>	
9 Net income or (loss) from special events			10	<u> </u>	· ·· · · · · · · · · · · · · · · · · ·
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c	1				
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·	0.	<165,648.>	
3 Total Add line 12, columns (b), (d), and (e)				13	<165,64
See worksheet in line 13 instructions to verify calculations.)					

_ine No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2009)

	art X			s To and Transactions ar	nd Relationships With Non	charitable		ige 13
L.,	••	Exempt Organ			in the section of the section is		-	
1	Dıd tl	ne organization directly or indi	rectly engage in any of the	following with any other organization	described in section 501(c) of		Yes	No
				ection 527, relating to political organiz	` '			
á	Trans	sfers from the reporting found	ation to a noncharitable ex	empt organization of;				ĺ
	(1)	Cash				1a(1)		Х
	(2)	Other assets				1a(2)		Х
t	Other	transactions;						
	(1) 3	Sales of assets to a noncharita	ible exempt organization			1b(1)		_x
	(2)	Purchases of assets from a no	ncharitable exempt organi	zation		1b(2)		Х
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		Х
	(4)	Reimbursement arrangements	;			1b(4)		Х
	(5) l	oans or loan guarantees				1b(5)		Х
	(6)	Performance of services or me	embership or fundraising s	olicitations		1b(6)		X
(Shari	ng of facilities, equipment, ma	ailing lists, other assets, or	paid employees		10		Х
(I If the	answer to any of the above is	"Yes," complete the follow	ing schedule. Column (b) should alwa	lys show the fair market value of the go	ods, other as:	sets,	
					in any transaction or sharing arrangem	ent, show in		
	colur	nn (d) the value of the goods,	other assets, or services r	eceived.				
(a)	Line no	(b) Amount involved	(c) Name of nonc	haritable exempt organization	(d) Description of transfers, transactions	s, and sharing ar	rangeme	nts
_			1	N/A				
_		, ,						
_								
_								
_						·		
_		<u> </u>						
_								
_								
_								
_								
_								
_					<u> </u>			
28				to, one or more tax-exempt organiza	tions described		-	٦
		ction 501(c) of the Code (othe s," complete the following sch		or in section 527?		Yes	X	No
	i ii te	s, complete the following sch (a) Name of org		(b) Type of organization	(a) Description of rela	tionchin		
-		N/A	janization	(b) Type of organization	(c) Description of rela	lionship		
_		N/A	<u> </u>					
_							-	
		<u> </u>			·			
_	Underp	enalties (perjury, I declare that I h	ave examined this return, inclu	ding accompanying schedules and statemen	nts, and to the best of my knowledge and belie	f. it is true, corre	ct.	
	and cor	nplete peclaration of preparer (o)h	er than taxpayer or fiduciary) is	based on all information of which preparer ha	as any knowledge	,,		
	\	mull.	harmat	1 (a) 1 2ala	Landotina Daisa			
ē	Sı	gnature of officer or trustee	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date	Title			
Sign Here		Prenarer's	A	Dat	te Check if P	reparer's identif		
ÿ	_'s, ≥	signature	~ 1) WAT	CPC III	8/10 self- employed ▶ □	P0019	529	77
٠,	Paid Preparer's Use Only	Firm's name (or yours PACK	ER THOMAS		EIN ► 3 4-	1667		
	r ř. Use	if self-employed), 6 FE	DERAL PLAZA	CENTRAL, SUITE 1		, , , ,	<u> </u>	
╝		address, and ZIP code YOUN	GSTOWN, OH	44503	• • • • • • • • • • • • • • • • • • •	30)744	-42	77

Form **990-PF** (2009)

Schedule B

(Form 990, 990-EZ, 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

2009

Name of the organization	1	Employer identification number
W	ILLIAMSON FAMILY FOUNDATION	34-6568495
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 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	
Note. Only a section 501(d	is covered by the General Rule or a Special Rule .	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in plete Parts I and II.	noney or property) from any one
Special Rules		
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of t (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one co outions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, litera cruelty to children or animals. Complete Parts I, II, and III	
contributions for If this box is chec purpose, Do not o	(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one course exclusively for religious, charitable, etc., purposes, but these contributions did not ked, enter here the total contributions that were received during the year for an exclusion complete any of the parts unless the General Rule applies to this organization becausele, etc., contributions of \$5,000 or more during the year.	t aggregate to more than \$1,000
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedun Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of or	ganization		Employer identification number
WILLI	AMSON FAMILY FOUNDATION		34-6568495
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	(d) tions Type of contribution
1	LOWRY A STEWART 3528 ARCADIA DR. CARSON CITY, NV 89705	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	(d) tuons Type of contribution
2	MARTHA J STEWART P.O. BOX 10905 JACKSON, WY 83002	\$ 7,5	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	(d) tions Type of contribution
3	WARREN P WILLIAMSON III 1568 HEIGHTS COURT MARCO ISLAND, FL 34145	\$\$ 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	(d) tions 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 contribu	(d) tions 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 contribu	(d) tions Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

PNC BANK, N A.
STATEMENT OF CAPITAL GAINS AND LOSSES
WILLIAMSON FAMILY FDN AGT

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TRUST YEAR ENDING 12/31/2009

	1.	COOL TENER BUSINE	12,31,2003			
TAX PREPARER 50 TRUST ADMINISTRATOR 104 INVESTMENT OFFICER: 52			LEGEND. F - F E - F	FEDERAL S - STATE EXEMPT FROM STATE U -	I - INHERITED ACQ COST UNKNOWN	
PROPERTY DESCRIPTION			SALES PRICE	COST BASIS	GAIN/LOSS	TERM
,						
	NER INC - 099724106	5 - MINOR = 48 10/2009	6710 65			
SOLD ACQ		.2/2006	3728.14	3743 12	-14 98	LT15
250 0000 COCNIZAN	100.0000 11/1 T TECHNOLOGY SOLUTI	.7/2008	2982 51	1738.11	1244 40	ST
SOLD	06/2	2/2009	6234.83			
ACQ		.0/2007 06/2007	3740.90 2493 93	6085.50 4093.73	-2344 60 -1599.80	LT15 LT15
	PALMOLIVE CO COM -	194162103 - MIN	OR = 48	1023111		
SOLD ACQ		2/2009 16/2007	3532 91 3532.91	3327.86	205 05	LT15
125.0000 DEERE &	CO COM - 244199105	- MINOR = 48	4016.26			
SOLD ACQ	125 0000 11/1	2/2009 7/2005	4916 26 4916 26	3933 12	983.14	LT15
75 0000 EQT CORP SOLD	- 26884L109 - MINO	OR = 48 2/2009	2562 90			
ACQ	75 0000 01/1	.0/2005	2562.90	2220.37	342 53	LT15
50 0000 EXELON C SOLD	ORP COM - 30161N101	MINOR = 48 2/2009	2462.01			
ACQ	50 0000 01/1	0/2005	2462.01	2110.00	352 01	LT15
100.0000 FRANKLIN SOLD	RES INC COM - 3546 06/2	13101 - MINOR =	6998.63			
ACQ	75.0000 06/0	5/2006	5248.97 1749 66	6763.50 2525.94	-1514 53 -776 28	LT15 ST
350 0000 FRONTIER	COMMUNICATIONS COR				770 20	51
SOLD ACO		2/2009 8/2006	2369.44 2369 44	4683 00	-2313 56	LT15
125.0000 ISHARES	TR RUSSELL MIDCAP -	464287499 - MI	NOR = 63	1003 00		
SOLD ACO		2/2009 5/2008	7919.79 7919 79	8077.44	-157.65	ST
175.0000 JACOBS E	NGR GROUP INC COM -	469814107 - MI	NOR = 48			
SOLD ACO		2/2009 0/2005	6909 50 4935 36	2851.25	2084.11	LT15
-	50 0000 08/0	8/2008	1974 14	3641 96	-1667.82	ST
SOLD SOLD	AL INC COM - 481165 06/2	$\frac{108 - MINOR = 4}{2/2009}$	4995 53			
ACQ		2/2006 8/2008	3330.35 1665.18	3949 79 3338 80	-619.44 -1673.62	LT15 ST
	- 48242W106 - MINOR	. = 48		3330 00		
SOLD ACO		2/2009 0/2007	4799.06 4799.06	6611.00	-1811.94	LT15
350.0000 KROGER C	O COM - 501044101 -	MINOR = 48	7675 34			
SOLD ACQ		2/2009 6/2007	7675.34 2192.95	2580.78	-387 83	LT15
		4/2008 5/2008	3289 43 2192.95	3993.00 2779.00	-703.57 -586 05	LT15 ST
	TANLEY DEAN WITTER	& CO COM - 6174	46448 - MINOR		•••	
SOLD ACQ		2/2009 0/2007	6714 73 4700 31	8778.00	-4077 69	LT15
-	75 0000 08/2	5/2008	2014.42	2880.70	-866.28	ST
150.0000 NOKIA CO. SOLD	RP SPONSORED ADR - 06/2	654902204 - MIN 2/2009	2118.16			
ACQ	150.0000 08/2 AG SPONSORED ADR -	5/2008	2118.16 NOP = 50	3824.98	-1706.82	ST
SOLD SOLD	06/2	2/2009	6178.85			
ACQ		2/2005 5/2007	3089 43 3089.43	3655.50 4392.75	-566 08 -1303 33	LT15 LT15
	ENERGY CORP COM - 7	04549104 - MINO	R = 48	1000110		
SOLD ACQ		2/2009 2/2006	5726.07 2863.04	3804.65	-941 62	LT15
_	100 0000 08/0	6/2007	2863.04	3657 64	-794 61	LT15
SOLD SECTOR S.		2/2009	2 MINOR = 48 874.98			
ACQ -	-25 0000 10/2 10.0000 05/1	3/2007	624.99 249 99	1036.70 = 397.67	-411.71 - -147.68	LT15 - LT15
100.0000 TEVA PHA	RMA INDS ADR 1 ADR	REPRESENTS 10 S	HS - 881624209		11	
SOLD ACQ		2/2009 0/2005	4692.99 1173.25	709.00	464.25	LT15
	75.0000 01/2	0/2005	3519.74	2125.50	1394 24	LT15
375.0000 TEXAS IN	STRS INC COM - 8825 06/2	08104 - MINOR = 2/2009	7893.55			
ACQ		5/2007	4736.13 3157.42	7107.75 4684.50	-2371.62 -1527.08	LT15 LT15
	INTL EQ INDX EMRG		2858 - MINOR =		1027.00	
SOLD ACQ		2/2009 8/2008	14779.28 14779.28	10549.70	4229 58	ST
300.0000 MARVELL	TECHNOLOGY GROUP LT	D ORD - G5876H1	05 - MINOR = 5			
SOLD ACQ		2/2009 6/2007	3470.94 3470.94	4962.72	-1491.78	LT15
300.0000 NABORS II	NDUSTRIES LTD SHS -	G6359F103 - MI				
SOLD ACQ	200.0000 01/1	2/2009 0/2005	2936 29	4765.00	-1828.71	LT15
	100.0000 08/0	6/2007	1468.15	2741 90	-1273.75	LT15

•ACCT 2XMY 1440Y122001 FROM 01/01/2009 TO 12/31/2009

CAPITAL LOSS CARRYOVER

0 00

N/A

FEDERAL

OHIO

PNC BANK, N A STATEMENT OF CAPITAL GAINS AND LOSSES WILLIAMSON FAMILY FDN AGT

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TRUST YEAR ENDING 12/31/2009

AX PREPARER 50 RUST ADMINISTRATOR: 10		INOUT TIEME		repressi c cq	TATE I - INHERI	TED
NVESTMENT OFFICER 52			E - E	EXEMPT FROM STATE	U - ACQ COST UNKN	
PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM
100 0000 ACE LIN	MITED - H0023R10	5 - MINOR = 48				
SOLD ACQ 119.4520 HARBOR	100 0000	06/22/2009 01/10/2005 1511306 - MINOR	4282 90	4235 00	47 90	LT15
SOLD ACO	119 4520	06/23/2009 05/06/2008	5014 59 5014 59	8710 42	-3695 83	LT15
SOLD		ERNATIONAL FD - 06/23/2009	576417208 - MINOR 5069 60		302.64	T M1 C
ACQ	64 0510 412.4150	11/21/2005 01/10/2005	5069 60 681 50 4388.10	1074 14 6788 35	-392 64 -2400 25	LT15 LT15
743 5070 ROWE PR	RICE NEW HORIZON	06/23/2009	- 779562107 - MINOR 14617 35	= 55	2240 62	LT15
ACQ	414 2050	05/06/2008	3774 35 8143 27	11962 23	-3818.96	LT15
412.5510 T ROWE	137.3210 PRICE MID-CAP V	01/24/2008 ALUE FUND - 779	2699.73 57Y106 - MINOR = 55	3803 79	-3240.63 -3818.96 -1104 06	LT15
SOLD	102 4500	06/23/2009	6415 17	2220 45	727 (0	LT15
	309.4790	01/10/2005	4812.40	6907 57	-727 68 -2095 17	LT15
1234.9660 THIRD A SOLD	VE VALUE FD SML	CAP VAL. 443 - 1	884116203 - MINOR =	55		
ACQ	1088 4260	12/27/2005	15782 18	26655.55	-10873 37 -1421 44	LT15 LT15
100.0000 ALLERGA	AN INC COM - 018	490102 - MINOR :	= 48		-1421 44	11113
SOLD ACQ 125 0000 DOLBY I	100 0000	01/10/2005 - CL A - 25659	5821 85 5821.85 F107 - MINOR = 48	3962 50	1859.35	LT15
· SOLD ACQ	125 0000	09/25/2009 06/22/2009	4781 87 4781.87		217 94	ST
250.0000 LOWES (COS INC COM - 54	8661107 - MINOR 09/25/2009	= 48 5274 86 5274.86			
100.0000 NORTHRO	250 0000 OP GRUMMAN CORP	COM - 666807102	- MINOR = 48		562 81	ST
300.0000 SIMANTE	100 0000 C CORP COM - 87	L503108 - MINOR	5118 31 5118.31 = 48		424 85	ST
100 0000 VARTAN	MED CVC THE COM	_ 0000AD1AE _ I	4599 69 4599.69 MINOR = 48		45.72	ST
ACQ	75.0000 25.0000	04/22/2005	3105.03 1035.01	2496.00 1189.17	609 03 -154 16	
175.0000 AMERICA SOLD	N TOWER SYS COR	PCLA - 029912: 10/20/2009	201 - MINOR = 48 6886.37			
ACQ 75.0000 CVS COR SOLD	175.0000 PORATION (DEL)	06/22/2009 COM - 126650100	4140.04 3105.03 1035.01 201 - MINOR = 48 6886.37 6886.37 - MINOR = 48	5111 49	1774.88	ST
ACQ	8 0000	06/06/2007	2837.17 302.63 2534.54	298.62 2468.28	4.01	
40 0000 SECTOR SOLD		IC INDS - 81369	2534.54 Y100 - MINOR = 48 1281.66	2468.28	66.26	LT15
ACQ		05/10/2007	1281.66	1590.70	-309.04	LT15
	•	TOTALS	218989.28	267790.85		
MMARY OF CAPITAL GAINS	/LOSSES					
DERAL	SHORT TERM	LONG TERM 28%	LONG TERM 15%	ST WASH SALE	LT WASH SALE	1250 GAIN
BTOTAL FROM ABOVE	1065.66			0 00		0.00*
MMON TPUST FUND PITAL GAIN DIVIDENDS	n nn 0.00	0 00 0.00	0.00 177.94			0 00
	1065.66	0.00	-49689 29	0.00	0.00	0.00
ATE			=======================================	*********		
BTOTAL FROM ABOVE	1065 66	0.00		0.00	0.00	0 00*
MMON TRUST FUND	0.00 0.00	0 00 0 00	0.00			0.00 0.00
	0.00					
PITAL GAIN DIVIDENDS	1065.66	0.00		0.00	0.00	0 00

0 00

N/A



MATIONAL CITY BANK AT 20 FEDERAL PLAZA POUNGSTOWN OH 44503 🥳 ⊱ 🕌 NationalCity com/PrivateClientGroup

Statement Period Account Number

10/01/2009 through 12/31/2009 14 40-Y122-00-1



Answers about your account

Relationship Manager KAREN H ABRAMS 330-742-4255

Account Title

NATIONAL CITY BANK AGENT UNDER AGREEMENT DATED SEPTEMBER 8, 2004 WITH WILLIAMSON FAMILY FOUNDATION JD & JUDY WILLIAMSON, TRUSTEE

GREGORY GETT PACKER THOMAS 1000 BANK ONE BUILDING YOUNGSTOWN, OH 44503

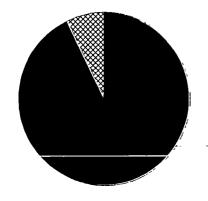
Enclosed please find an insert with details regarding when you can expect to receive your 2009 tax information for your investment management and/or trust account If you have any questions, please contact your representative

PORTFOLIO OVERVIEW

Value Summary of Your Assets

Asset Categories	Beginning Value	Portfolio %	Ending Value	Portfolio %	Period Change
EQUITIES	\$411,201.51	94.2%	\$424,541 48	92.7%	\$13,339 97
CASH AND CASH EQUIVALENTS	\$25,267 66	5.8%	\$33,274.74	7.3%	\$8,007.08
TOTAL PORTFOLIO	\$436,469.17	100.0%	\$457,816.22	100.0%	\$21,347.05

Allocation of Assets In Your Account



	Asset	Ending Value
92.7%	EQUITIES	\$424,541.48
7.3%	CASH AND CASH EQUIVALENTS	\$33,274.74
100.0%	Total	\$457,816.22

Short Term

Long Term

Year to Date

NET REALIZED GAIN/LOSS

\$1,076 68

-\$49,867 23

-\$48,790 55

For information purposes only, not to be used for tax reporting Contact your Relationship Manager for tax information





Page 1 of 15





Consolidated Summary

509'012 = 3

CONTINUED

INVESTMENT ACCOUNTS

Asset Allocation	Begin ning Market Valúe	Ending Market Value	Change In Value	Estimated Current Annual Income Allocation	Current Allocation
, Equity	170,243.41	171,784 04	1,540 63	1,814 83	%69
Cash & Short Term	10,685 54	10,312 41	(373 13)	7.21	4%
Fixed Income	68,693.57	68,691 72	(6 85)	2,743 55	27%
Market Value	\$249,627.52	\$250,788.17	\$1,160.65		100%
Accruals	110 97	129.15	18 18		
Market Value with Accruals	\$249,738.49	\$250,917.32	\$1,178.83		

Asset Allocation Cash & Short Term

	_	
Portfolio Activity	Current Period Value	Year-to-Date Value
Beginning Market Value	249,627.52	238,177.00
Net Contributions/Withdrawals	(1,078 50)	(11,008.36)
Income & Distributions	705 37	3,988 18
Change in Investment Value	1,533 78	19,631.35
Ending Market Value	\$250,788.17	\$250,788.17
Accruals	129 15	129 15
Market Value with Accruals	\$250,917.32	\$250,917.32

This Consolidated Summary shows all of your rivestments at J.P. Morgan Private Bank other than investments we hold in trust for you. These investments may be held in custody or investment management account at JP Morgan Clearing Corp ("JPMCC"). Brokerage and margin accounts are non-discretionary and all investment decisions are made by the client. JP Morgan Securities Inc ("JPMSI") does not provide advice on asset allocation or investment management services, nor do its personnel take discretion over any client accounts. Such advice and services are provided exclusively by the Bank.

Consolidated Summary

CONTINUED

INVESTMENT ACCOUNTS

Asset Allocation	Beginning Market Value	Ending Market Value	Change In Value	Estimated Current Annual Income Allocation	Current Allocation
Equity	786,046,96	814,254 40	28,207 44	8,209 39	%19
Cash & Short Term	71,401 18	69,775 91	(1,625 27)	48 84	%9
Fixed Income	324,714 36	324,652.54	(61.82)	12,969 77	27%
Market Value	\$1,182,162.50	\$1,208,682.85	\$26,520.35		100%
Accuals	52.1 80	612 38	87 58		
Market Value with Accruals	\$1,182,687.30	\$1,209,295.23	\$26,607.93		

	Equity	
Asset Allocation	Cash & Short Torm	Fixed
⋖		

	tooring.	Vest-to-Date
Portfolio Activity	Period Value	Value
Beginning Market Value	1,182,162.50	1,156,732.19
Net Contributions/Withdrawals	(4,882 08)	(86,557 36)
Income & Distributions	3,256 81	18,743 87
Change in Investment Value	28,145.62	119,764.15
Ending Market Value	\$1,208,682.85	\$1,208,682.85
Accruals	612 38	612 38
Market Value with Accruals	\$1,209,295.23	\$1,209,295.23

This Consolidated Summary shows all of your investments at J.P. Morgan other than investments we hold in frust for you. These investments may be held in custody or investment management account at J.P. Morgan Cleaning Corp. ("J.PMCC"). Brokerage and margin accounts are non-discretionary and all investment decisions are made by the client. J.P. Morgan Securities Inc. ("J.PMSI") does not provide advice on asset allocation or investment management services, nor do its personnel take discretion over any client accounts. Such advice and services are provided exclusively by the Bank.

If (loss), enter "-0-" in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

(a) List and	sses for Tax on Investment Income d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How P - Pu D - Do	acquired (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAINS	DIVIDENDS	- · ·			
b ·					
С .					
d					
e					
f	-				
<u>g</u>					
<u>h</u>					
			-		
					
<u>k</u>					
m n					
0				 	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)	<u> </u>
a 178.	<u> </u>			(c) prod (r)do (g)	178.
<u>b</u>			<u> </u>		<u> </u>
С				 ,	
d					
e				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
f					
g					
h					
1				-	
<u> </u>					
k					
<u> </u>					····
<u>m</u>					<u>.</u>
n	-				
Complete only for seasts shown	an ann in column (b) and award by	the foundation on 40/04/00			
(i) F.M.V. as of 12/31/69	ng gain in column (h) and owned by (j) Adjusted basis	(k) Excess of col. (i)	Gains	(I) Losses (from col. (h)) (excess of col. (h) gain over but not less than "-0-")	r col. (k),
	as of 12/31/69	over col. (j), if any			450
<u>a</u>			<u> </u>		178.
<u>b</u>					
d					
e					
f					
9					
h					
1					
k					
m					
n					
0					
2 Capital gain net income or (net ca	apıtal loss) { If gain, also enter If (loss), enter "-C	in Part I, line 7 -" in Part I, line 7	2	<	198,392 . >
If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c).				
If (loss), enter "-0-" in Part I, line I	8		3	N/A	

FORM 990-PF INTEREST ON SAVINGS AN	ND TEMPORARY CA	ASH INVESTMENTS	STATEMENT	_1
SOURCE .			AMOUNT	
INTEREST INCOME - JP MORGAN (GENERA	AL)		2	25.
INTEREST INCOME - JP MORGAN (LAS) INTEREST INCOME - JP MORGAN (MJS)				3. 3.
INTEREST INCOME - JP MORGAN (MVHS)				59.
INTEREST INCOME - JP MORGAN (WPW) INTEREST INCOME - PNC (JDW)			7	72. 3.
TAX EXEMPT INTEREST			3	80.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		30	5.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT)
DIVIDEND INCOME - JP MORGAN (GENERAL)	4,931.	0.	4,93	31.
DIVIDEND INCOME - JP MORGAN (MVHS)	20,675.	0.	20 65	7 =
DIVIDEND INCOME - PNC (JDW)	6,725.	178.	20,67 6,54	
TOTAL TO FM 990-PF, PART I, LN 4	32,331.	178.	32,15	3.
FORM 990-PF , O	THER INCOME		STATEMENT	3
	(A)			
DESCRIPTION	REVENUE PER BOOKS			
OTHER INCOME		286. 286	5.	
TOTAL TO FORM 990-PF, PART I, LINE	11 - 2	286- 286	5	-

FORM 990-PF	ACCOUNTI	NG FEES	<u> </u>	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
PROFESSIONAL FEES	7,166.	0.		-	0.	
TO FORM 990-PF, PG 1, LN 16B	7,166.	0.			0.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	,	STATEMENT	5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
ASSET MANAGEMENT FEES OTHER DEDUCTIONS FROM	30,974.	30,974.			0.	
PASSTHROUGH ENTITIES	2,394.	2,394.			0.	
TO FORM 990-PF, PG 1, LN 16C	33,368.	33,368.			0.	
FORM 990-PF	TAX	ES		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
EXCISE TAX	<2,046.	> 0.		_	0.	
TO FORM 990-PF, PG 1, LN 18	<2,046.	> 0.			0.	
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT	7	
DESCRIPTION				AMOUNT		
NET UNREALIZED GAIN ON MARKE	TABLE SECURI	TIES	_	555,4	41.	

		···						
FORM 990-PF OTHER DE	CREASES	IN NET	ASSETS	OR	FUND	BALANCES	STATEMENT	8
DESCRIPTION							AMOUNT	
NONDEDUCTIBLE EXPENSES	FROM JP	MORGAN	SCHEDUI	LES	K-1			15.
TOTAL TO FORM 990-PF, P.	ART III,	LINE	5					15.
FORM 990-PF		OTHER	INVESTME	ENTS	5		STATEMENT	9
DESCRIPTION			VALUATI METHOI		В	OOK VALUE	FAIR MARKE VALUE	ET
PNC BANK INVESTMENTS	тин Стинали	O TH	FMV			424,541.	424,5	41.
JP MORGAN - GENERAL (IN PARTNERSHIPS)		S IN	FMV			240,605.	•	
JP MORGAN INVESTMENTS (MVHS)		FMV			1,139,519.	1,139,5	519.
TOTAL TO FORM 990-PF, P.	ART II,	LINE 1	3			1,804,665.	1,804,6	65.
FORM 990-PF		OTHER	LIABILI	TIES	5		STATEMENT	10
DESCRIPTION	-				В	TRUOMA YO	EOY AMOUNT	ŗ
CONTRIBUTION PAYABLE						356,250.		0.
TOTAL TO FORM 990-PF, P.	ART II,	LINE 2	2			356,250.		0.

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STATEMENT

FORM 990-PF

NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
WARREN P. WILLIAMSON, III 1568 HEIGHTS COURT MARCO ISLAND, FL 34145	CHAIRPERSON 0.00	0.	0.	0.
J.D. WILLIAMSON, II 14450 ROLAND CANYON ROAD SALINAS, CA 93908	VICE-CHAIR 0.00	0.	0.	0.
MARTHA STEWART P.O. BOX 10905 JACKSON, WY 83002	SECY./TREAS. 0.00	0.	0.	0.
LOWRY STEWART 3528 ARCADIA DR. CARSON CITY, NV 89705	TRUSTEE 0.00	0.	0.	0.
LYNN WILLIAMSON 4188 SERENADE RD. CASTLE ROCK, CO 80104	TRUSTEE 0.00	0.	0.	0.
SUSAN BROWNLEE 11969 PASEO FUERTE EL CAJON, CA 92020	TRUSTEE 0.00	0.	0.	0.
WARREN P. WILLIAMSON, IV 101 SOUTHBEND COURT LOVELAND, OH 45140	TRUSTEE 0.00	0.	0.	0.
JOSEPH BRADLEY WILLIAMSON 7233 WEST MERCER WAY MERCER ISLAND, WA 98040	TRUSTEE 0.00	0.	0.	0.
JOHN BOYDSTON 7851 N.W. 89TH TERRACE #106 _ KANSAS CITY, MO 64153	TRUSTEE 0.00		0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS

	RT XV - LINE 1A FOUNDATION MANAGERS	STATI	EMENT	12
NAME OF MANAGER				
MARTHA STEWART LOWRY STEWART				
	S AND CONTRIBUTIONS D DURING THE YEAR	STATI	EMENT	13
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOU	NT
CULVER EDUCATION FOUNDATION CULVER, IN	N/A EDUCATIONAL	N/A	2,0	00.
BOYS & GIRLS CLUB OF MONTEREY COUNTY SALINAS, CA	N/A CHARITABLE	N/A	7	50.
SPCA OF MONTEREY COUNTY MONTEREY, CA	N/A CHARITABLE	N/A	1,0	00.
MAYO CLINIC ROCHESTER, MN	N/A CHARITABLE	N/A	5	00.
MONTEREY BAY AQUARIUM MONTEREY, CA	N/A CHARITABLE	N/A	2,5	00.
MONTEREY COUNTY FOOD BANK SALINAS, CA	N/A CHARITABLE	N/A	2	50.

WILLIAMSON FAMILY FOUNDATION			34-6568495
MONTEREY COMMUNITY HOSPITAL FOUNDATION SALINAS, CA	N/A CHARITABLE	N/A	2,500.
MONTEREY MUSEUM OF ART SALINAS, CA	N/A CHARITABLE	N/A	250.
THE LIVING DESERT PALM DESERT, CA	N/A CHARITABLE	N/A	250.
SALINAS VALLEY MEMORIAL HOSPITAL FOUNDATION SALINAS, CA	N/A CHARITABLE	N/A	2,500.
SALVATION ARMY SALINAS, CA	N/A CHARITABLE	N/A	500.
THE MAHONING VALLEY HISTORICAL SOCIETY YOUNGSTOWN, OH	N/A CHARITABLE	N/A	83,346.
UNITED WAY OF MONTEREY COUNTY SALINAS, CA	N/A CHARITABLE	N/A	2,500.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A		98,846.

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box			ightharpoons x
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this			
Do not o	complete Part II unless you have already been granted an automatic 3-month extension on a previously file	led Fo	rm 8868	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corpor	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete		
Part I on	·	•		▶ □
All other	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	exter	sion of time	•
	ome tax returns			
noted be (not auto you mus	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or control to the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Chanties & Nonprofits.	cally r	f (1) you wa ated Form 9	nt the additional 990-T. Instead,
Type or	Name of Exempt Organization	Emp	loyer ident	fication number
print	WILL TANGON BANTLY BOIDINANTON	,	4 6566	105
File by the	WILLIAMSON FAMILY FOUNDATION Number, street, and room or suite no If a P.O. box, see instructions	3	4-6568	3495
due date for filing your	8399 TIPPECANOE ROAD			
return See instructions				
	CANFIELD, OH 44406			
Check to	pe of return to be filed (file a separate application for each return):			
		700		
=	rm 990	-		
=	rm 990-EZ Form 990-T (trust other than above) Form 60			
=	rm 990-PF)			
Telepi If the	ooks are in the care of ► WARREN P. WILLIAMSON, III, TRUSTEE hone No. ► (330) – 533 – 5786 FAX No. ► organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If thi . If it is for part of the group, check this box ► and attach a list with the names and EINs of all			
ıs f	equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto AUGUST 15, 2010, to file the exempt organization return for the organization named a corporation or the organization's return for: X calendar year 2009 or, and ending, and ending		The extens	on
	his tax year is for less than 12 months, check reason. Initial return Final return		Change in a	accounting penod
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nrefundable credits. See instructions.	3a	\$	227.
	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.	2►		6,109.
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b	\$	0,103.
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
	e instructions	3c	\$	0.
Caution.	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payn	
LHA F	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form	8868 (Rev. 4-2009)

•	•			
Form 8	3868 (Rev. 4-2009)		Pa	ge 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	ox	■ X	
Note.	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form	8868.	
• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Par	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no o	opies	needed)	
Туре	Name of Exempt Organization	Emp	loyer identification numb	er
print	WILLIAMSON FAMILY FOUNDATION	_		
File by t	C/O PACKER THHOMAS, GREGORY L. GETT, CPA		4-6568495	
extende	Number, street, and room or suite no. If a P O. box, see instructions	For I	RS use only	
ming the	6 FEDERAL PLAZA CENTRAL, SUITE 1000	1		
return S instructi				
	k type of return to be filed (File a separate application for each return) Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 Form 88 orm 6069	370
STOP	! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 8868.	
• The	e books are in the care of WARREN P. WILLIAMSON, III, TRUSTEE			
Tel	ephone No ► <u>(330) - 533 - 5786</u> FAX No. ►			
	he organization does not have an office or place of business in the United States, check this box		. ▶ □	
• If t	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			hıs
box		memb	ers the extension is for.	
	I request an additional 3-month extension of time until NOVEMBER 15, 2010.			
	For calendar year 2009, or other tax year beginning, and ending			<u>—:</u>
	If this tax year is for less than 12 months, check reason Initial return Final return State in detail why you need the extension		Change in accounting peri	iod
	ADDITIONAL INFORMATION IS REQUIRED FROM AN INDEPENDENT	TH	IRD PARTY IN	
	ORDER TO PREPARE A COMPLETE AND ACCURATE RETURN.	111	IND PARTI IN	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	8a	\$ 22	7.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	tax navments made, include any prior year overnayment allowed as a credit and any amount paid			

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, cor lest, and complete, and that them authorized to prepare this form.

Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Signature

previously with Form 8868

Form **8868** (Rev. 4-2009)

8b

8c

Date >

6,109.

0.