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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

OMB No 1545-0052

2010

		t able to use a copy of this		ting (qui a ting ting ting ting ting ting ting ting	
_	calendar year 2010, or tax year beginning		, and ending		·
G (Check all that apply: Initial return		rmer public charity	Final return	1
_	Amended return	Address chan	ge	Name change	
Na	me of foundation			A Employer identification	number
	WILLIAMSON FAMILY FOUR	NDATION		34-6568495	
Nur	mber and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
	8399 TIPPECANOE ROAD			(330)533-5	786
Cit	y or town, state, and ZIP code		<u>-</u>	C If exemption application is p	
	CANFIELD, OH 44406			D 1 Foreign organizations	
H (Check type of organization: X Section 501(c)(3) exe	mot private foundation		2 Foreign organizations me check here and attach co	eeting the 85% test,
Ë	· · · · · · · · · · · · · · · · · ·	Other taxable private founda	ition		
	air market value of all assets at end of year J Accountin		X Accrual	E If private foundation sta under section 507(b)(1)	
	· I ==	er (specify)	71001441	, ,, ,	
	\$ 2,053,880. (Part I, colum	nn (d) must be on cash l	pasis)	F If the foundation is in a under section 507(b)(1)	
	art I Analysis of Revenue and Expenses				(d) Disbursements
3 6	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
		18,000.		NT / A	(cash basis only)
	1 Contributions, gifts, grants, etc., received	10,000.		N/A	
	2 Check If the foundation is not required to attach Sch B Interest on savings and temporary	61.	61.		CDAMENTO 1
	3 cash investments				STATEMENT 1
	4 Dividends and interest from securities	37,147.	37,147.		STATEMENT: 2
	5a Gross rents	***			
	b Net rental income or (loss)				
<u>o</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	2,712.		<u>*</u>	
eu r	b Gross sales price for all 233,910.			>	
Revenue	7 Capital gain net income (from Part IV, line 2)	<u> </u>	2,712.		X *** ***
<u> </u>	8 Net short-term capital gain	* * * *	**		, ` · · · · · · ·
	9 Income modifications	· 440			`£7.%; I
	Gross sales less returns and allowances		<u> </u>	<u> </u>	* * *
	b Less Cost of goods sold	***	* * *		
	c Gross profit or (loss)				, ,
	11 Other income	56.	56.		STATEMENT 3
	12 Total Add lines 1 through 11	57,976.	39,976.		*, ***
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
ses	16a Legal fees				
ë	b Accounting fees STMT 4	<u>6,490.</u>	0.		0.
Expens	c Other professional fees		34,173.		0.
ati	18 Taxes	080			,=
istr	19 Depreciation and depletion NOV 0 9	7011 W			
Ë	20 Occupancy	<u></u>			
Administrative	21 Travel, conferences, and meetings OGDE	V. UT			
and /	22 Printing and publications				-
<u>e</u>	23 Other expenses		-		
Operating	24 Total operating and administrative				
era	expenses. Add lines 13 through 23	40,663.	34,173.		0.
္ ဝိ	25 Contributions, gifts, grants paid	100,095.	<u> </u>		100,095.
>	26 Total expenses and disbursements.				100,093.
>	· ·	140,758.	34,173.		100,095.
<u> </u>	Add lines 24 and 25	140,130.	34,1/3·		100,033.
,	27 Subtract line 26 from line 12:	200 700			
	Excess of revenue over expenses and disbursements	<82,782.			
	b Net investment income (if negative, enter -0-)		5,803.	37 / 3	
0005	c Adjusted net income (if negative, enter -0-)			N/A	200 85

LHA For Paperwork Reduction Act Notice, see the instructions

Form 990-PF (201)

023511 12-07-10 2,052,778. Form **990-PF** (2010)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

2-story brick w	cribe the kind(s) varehouse; or cor	of property sold (e.g nmon stock, 200 sh	o., real estate, s. MLC Co.)		P -	w acquired Purchase Donation	(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a b SEE ATTACHEI	CMAMEM	ENIO.			-				
	SIALEM	ENI							
d			-		<u> </u>				<u> </u>
e									
(e) Gross sales price		ciation allowed llowable)		t or other basis xpense of sale				Gain or (loss) is (f) minus (
<u>a</u>									
<u>b</u>			<u>.</u>						· <u> </u>
<u>C</u>	 								
d 222 010	 	· ·		266 75					0.710
e 233,910. Complete only for assets show		n /h) and owned by	the foundation	266,75	3.			0.1.0.	2,712
Complete only for assets snow.	T		1			c	(I) Gains (I ol. (k), but	Col. (h) gaın not less thar	minus n -0-) or
(i) F.M.V. as of 12/31/69		usted basis 12/31/69		cess of col. (1) col. (1), if any		·		(from col. (
b	 							-·· ··· <u>·</u>	 -
C									
d	1								
e					+	_		·····	2,712
•		C If gain, also asta	run Dart Lina 1	7	7				2,112
Capital gain net income or (net o	capital loss)	If gain, also enter of the lift (loss), enter -0	i in Part I, ime i I- in Part I line i	, 7	}	2			2,712
		•		•	7				2/122
Net short-term capital gain or (lo If gain, also enter in Part I, line 8	•	Sections 1222(5) an	10 (6):		٦				
If (loss), enter -0- in Part I, line 8	. , ,				}	3		N/A	
Part V Qualification l		on 4940(e) for	Reduced	Tax on Net	Inve	stment In	come		
For optional use by domestic priva	te foundations su	bject to the section	4940(a) tax on	net investment in	come.)				
			• •		•				
f section 4940(d)(2) applies, leave	this part blank.								
Vas the foundation liable for the se	ction 4942 tax or	the distributable an	nount of any ye	ar in the base pei	rıod?				Yes X No
f "Yes," the foundation does not qua									
Enter the appropriate amount in	each column for	each year; see instr	uctions before	making any entri	es.				
(a) Base period years		(b)			(c)			Distrib	(d) ution ratio
Calendar year (or tax year beginn	ning in) Ac	justed qualifying dis		Net value of no				(col. (b) div	ided by col. (c))
2009			8,846.			<u>707,12</u>			.057902
2008			3,913.			<u>521,22</u>			.187969
2007			3,088.			<u>274,32</u>		···	.141430
2006			3,433.			<u>645,74</u>			.162774
2005		52	2,980.		4,	<u>140,17</u>	6.		.126318
Total of line 1, column (d)							2	ļ	.676393
Average distribution ratio for the			on line 2 by 5,	or by the number	of year:	S			
the foundation has been in exist	ence if less than	5 years					3		.135279
Enter the net value of noncharita	able-use assets fo	r 2010 from Part X,	line 5				4	ļ	<u>1,906,867.</u>
Multiply line 4 by line 3							5		257,959.
Enter 1% of net investment inco	me (1% of Part I	line 27b)					6		58.
							ĺ		
Add lines 5 and 6							7		258,017.
							1		400
Enter qualifying distributions fro	m Part XII, line 4						8	l	100,095.
If line 8 is equal to or greater tha	an line 7, check th	e box ın Part VI, line	tb, and comp	lete that part usin	ıg a 1%	tax rate.			
See the Part VI instructions.									

_	990-PF (2010) WILLIAMSON FAMILY FOUNDATION 34	<u>4 – 6</u>	56849	<u> 35</u>	Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 -	see ins	tructio	ns)
fa	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%	1		1	16.
	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).				ŧ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3		1	16.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1	.16.
6	Credits/Payments:				
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6, 109.	/ \			!
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6c				1
	Backup withholding erroneously withheld 6d				1
		7		6.1	.09.
8		8			<u></u>
		9			
		10		- 5 C	93.
		11		<u></u>	0.
	rt VII-A Statements Regarding Activities	11. 1			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	nr.	·····•	<u>Star</u>	
	distributed by the foundation in connection with the activities			* \$	*
c	Did the foundation file Form 1120-POL for this year?		1	_	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		<u> </u>	25 50	
_	(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •		* , 8		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				^
·	managers. > \$ 0.				3 1
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		<u> </u>	* **	19.9°.
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				"
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		ئة . 3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	_ —		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	11/	11 5		X
٠	If "Yes," attach the statement required by General Instruction T.		· ·		1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1	* * * /	1. :
•	By language in the governing instrument, or		İ	常義	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 	A/	- 1	- 1,5,7,	% :
	remain in the governing instrument?		le	. T	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7		
,	If "Yes," complete Part II, col. (c), and Part XV.		-	+^	
Яэ	Enter the states to which the foundation reports or with which it is registered (see instructions)				t
υđ	OH		—		ţ
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		—		
ט	of each state as required by General Instruction G? If "No," attach explanation			.	-
α	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(1)(3)$ or $4942(1)(5)$ for calendary	25	8	b X	
3		וג		.	v
10	year 2010 or the taxable year beginning in 2010 (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			<u>, </u>	

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Form 990-PF (2010) WILLIAMSON FAMILY FOUNDATION	34-65	68495 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
VP		
	_	
- · · · · · · · · · · · · · · · · · · ·		
	4	
	-	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist	tical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod	Juced, etc.	Expenses
1 N/A		
2		
3		
<u>, </u>	-	
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		<u> </u>
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	1,935,906.
	Average of monthly cash balances	1b	
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	1,935,906.
	Reduction claimed for blockage or other factors reported on lines 1a and	. %	
	1c (attach detailed explanation) 1e0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,935,906.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	29,039.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,906,867.
6	Minimum investment return Enter 5% of line 5	6	95,343.
P	art XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	95,343.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)	2	
C	Add lines 2a and 2b	2c	116.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	95,227.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	95,227.
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	<u>95,227.</u>
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	100,095.
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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100,095.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,095.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation of	uralifice fo	or the caction

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI,	00.500	rouro prior to 2000		
line 7				95,227.
2 Undistributed income, if any, as of the end of 2010			<u> </u>	
a Enter amount for 2009 only		/	0.	**
b Total for prior years:				
		0.	,	ý
3 Excess distributions carryover, if any, to 2010:				·
a From 2005 318, 413.				
b From 2006 419,546.	*			*
c From 2007 304, 200.		*		:
d From 2008 348,306.	, (3,)	,		,
e From 2009 13,490.	* *		*	·
f Total of lines 3a through e	1,403,955.	, "	*	
4 Qualifying distributions for 2010 from	↑ & .:	The same of the sa	*	<i>32</i>
Part XII, line 4: ►\$100,095.	·	, "*))) v	,
a Applied to 2009, but not more than line 2a	4	* * * * * * * * * * * * * * * * * * * *	. O.	
b Applied to undistributed income of prior			*	
years (Election required - see instructions)	, i	0.	. v	
c Treated as distributions out of corpus				· 🗞,
(Election required - see instructions)	0.			% ♥ ,
d Applied to 2010 distributable amount		4. 3 × 386 × .	´x	95,227.
e Remaining amount distributed out of corpus	4,868.		/v/4, ***	JJ, <u>22</u> 7•
5 Excess distributions carryover applied to 2010	2,000.	**************************************		0.
(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:				`
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,408,823.		** }	
b Prior years' undistributed income. Subtract	1,100,020.		· · · · · · · · · · · · · · · · · · ·	
line 4b from line 2b		0.		* 34.
c Enter the amount of prior years'			*	***************************************
undistributed income for which a notice of	3			
deficiency has been issued, or on which	Lillio Z			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.		* * * * * * * * * * * * * * * * * * *	0.	!
f Undistributed income for 2010. Subtract	}	· \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	,×	
lines 4d and 5 from line 1. This amount must	ii	#\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
be distributed in 2011		k	ķ	0.
7 Amounts treated as distributions out of	······································			
corpus to satisfy requirements imposed by		ان		
section 170(b)(1)(F) or 4942(g)(3)	0.	*		Ą
8 Excess distributions carryover from 2005	· · · · · · · · · · · · · · · · · · ·	-		" "
not applied on line 5 or line 7	318,413.			
9 Excess distributions carryover to 2011			**************************************	
Subtract lines 7 and 8 from line 6a	1,090,410.			
10 Analysis of line 9:	-, -, -, -, -,			
a Excess from 2006 419,546.				
b Excess from 2007 304, 200.	-			
c Excess from 2008 348,306.				,
d Excess from 2009 13,490.				
e Excess from 2010 4,868.		₩		
1	<u>-, , , , , , , , , , , , , , , , , , , </u>			Form 990-PF (2010)

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3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		B	
	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	7 00111
a Paid during the year		·		
a Faid duffing the year				
				=
				•
SEE STATEMENT 11				
Total			▶ 3a	100,095
		<u> </u>	<u> </u>	100,033
b Approved for future payment				
NONE				
		l		
Total			▶ 3b	
3611 12-07-10			Fo	orm 990-PF (20

Part XVI-A Analysis of Income-Producing Activit

Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		y section 512, 513, or 514	(e)
-	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		code		
ab	-	<u></u>	 		
· · · · · · · · · · · · · · · · · · ·					
d	f		 		
<u> </u>			 		
e		· · · · · · · · · · · · · · · · · · ·	-	-	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	61.	
4 Dividends and interest from securities			14	37,147.	
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	56.	
8 Gain or (loss) from sales of assets other than inventory			18	2,712.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_		ļ. ļ		
b	_				
C	_				
d	_				
e	- 3 44 86		<u> </u>	20.076	
12 Subtotal. Add columns (b), (d), and (e)	- 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	•	39,976.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	39,976.
(See worksheet in line 13 instructions to verify calculations.))				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line 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).					
-						

023621 12-07-10

Form **990-PF** (2010)

(330)533-9777

Use Only

SUITE 101

Phone no.

Firm's address ► 6601 WESTFORD PLACE,

CANFIELD, OH 44406

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

2010

Employer identification number Name of the organization WILLIAMSON FAMILY FOUNDATION 34-6568495 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

WILLIAMSON FAMILY FOUNDATION

34-6568495

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LOWRY A STEWART 3528 ARCADIA DR. CARSON CITY, NV 89705	\$\$,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	MARTHA J STEWART P.O. BOX 10905 JACKSON, WY 83002	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

WILLIAMSON FAMILY FOUNDATION

34-6568495

Part II	Noncash Property (see instructions)			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$	_	

of Part III

Name of orga	anization		Employer identification number
WTI.ITA	MSON FAMILY FOUNDATION		34-6568495
Part III	Exclusively religious, charitable, etc., in	ndividual contributions to secte columns (a) through (e) and thous, charitable, etc., contributions.	tion 501(c)(7), (8), or (10) organizations aggregating the following line entry. For organizations completing ons of
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	gift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) NI=			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	gift
F	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	gift
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Tuesdanadananadahan	(e) Transfer of g	
	Transferee's name, address, a	10 ZIP + 4	Relationship of transferor to transferee

╚	artiv Capital Gains and Los	sses for Tax on Investment Income	<u> </u>	1	.1	
•	(a) List and 2-story br	describe the kind(s) of property soluck warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquire P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1425.221 SHS C	AUSEWAY INTERNAT	IONAL	P		06/22/10
b	988.142 SHS MA	NNING & NAPIER F	UND	P		06/22/10
С	6138.881 SHS C	AUSEWAY INTERNAT	IONAL	P	VARIOUS	06/22/10
d	4611.331 SHS M	ANNING & NAPIER	FUND	P	VARIOUS	06/22/10
e	LONG TERM CAPI	TAL GAINS - PNC	- SEE ATTACHED	P	VARIOUS	VARIOUS
	SHORT TERM CAP	ITAL GAINS - PNC	- SEE ATTACHED	P	VARIOUS	VARIOUS
 _g	LONG TERM CAPI	TAL GAINS FROM P	ASSTHROUGH ENTIT	ES P	VARIOUS	<u>VARIOUS</u>
<u>h</u>	SHORT TERM CAP	ITAL GAINS FROM	PASSTHROUGH ENTIT	TIE P	VARIOUS	VARIOUS
_1	CAPITAL GAINS	DIVIDENDS				
丄						
<u>k</u>						
	-					
_m	<u> </u>					
<u>n</u>						
_0					<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		h) Gain or (loss) plus (f) minus (g)	
a	15,264.		27,792.			<12,528.>
b	7,500.		5,287.			2,213.
С	65,747.		119,708.			< 53,961. >
d	35,000.		24,671.			10,329.
е	93,635.		77,657.			<u> 15,978.</u>
<u>f</u>	15,632.		11,638.			3,994.
g						27,133.
h						8,422.
1	1,132.					<u>1,132.</u>
⊥	···					
k						
<u>_l</u>						
m						
<u>n</u>						
0	Complete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69	(D.1.)	osses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain ove not less than "-0-")	
a			,,,,	···		<12,528. >
<u>a</u> b		, -				$\frac{(12,320.)}{2,213.}$
c						<53,961.>
d		<u></u>				10,329.
e						15,978.
f						3,994.
g						27,133.
h						8,422.
						1,132.
1						
k						
<u></u>						
m						
n						
0		<u> </u>		ı		
2	Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-(in Part I, line 7	2		2,712.
	Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar	, I			2,712.
_	If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		<u> </u>	3	N/A	

ACCT 2XMY 75750719397397 FROM 01/01/2010 TO 12/31/2010

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

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TRUST YEAR ENDING 12/31/2010

TAX PREPARSR TRUST ADMINISTRATOR INVESTMENT OFFICER:			LEGEND F - FEDER E - EXEMP	AL S - STATE T FROM STATE U -	I - INHERITE ACQ COST UNKNOW	
PROPERTY DESCRIPTION		DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM
SOLD ACQ	COPP COM - 126408 100 0000 CATE PALMOLIVE CO	02/19/2010 06/22/2009	4682 20 4682 20	3236 73	1445.47	ST
SOLD ACQ	25 0000 ESSON HBOC INC COM	02/19/2010 06/06/2007	2038 28 2038 28	1653.93	374.35	LI15
SOLD ACQ	25 0000 CO HEALTH SOLUTIONS	02/19/2010 06/22/2009	1510 34 1510 34	1090 47	419.87	ST
SOLD ACQ 25.0000 OCC	50.0000 IDENTAL PETE CORP (02/19/2010 04/18/2006 COM - 674599105	3228 36 3228 36 - MINOR = 31001	1371 00	1857.36	LT15
SOLD ACQ 25.0000 PRO	25 0000 OCTER & GAMBLE CO CO	02/19/2010 01/10/2005 DM - 742718109	2041 47 2041 47	703 88	1337.59	LT15
SOLD ACQ 199.0000 STA	25 0000 TE STR CORP COM - 8	02/19/2010 05/10/2007 357477103 - MINO	1588 77 1588 77 R = 053100	1532 93	55.84	LT15
SOLD ACQ .0060 FRO	199 0000 NTIER COMMUNICATION	02/19/2010 08/25/2008 SS CO - 35906A10	9418 65 9418 65 8 - MINOR = 053100	12941 37	-3522 72	LT15
UNK COST SOLD ACQ 36.0000 FRO	0060 NTIER COMMUNICATION			0.05U	0.00	UNK
SOLD ACC 75.0000 HON	36.0000 EYWELL INTL INC COM	08/06/2010 10/20/2009 1 - 438516106 - 1	273 23 273.23 MINOR = 053100	272 69	0.54	ST
SOLD ACQ 225.0000 MAR	75.0000 ATHON OIL CORP COM	08/06/2010 06/22/2009 - 565849106 - M	3260,19 3260 19 INOR = 053100	2379 74	880.45	LT15
SOLD ACQ	75.0000 150.0000	08/06/2010 10/23/2007 01/10/2005	7/03 86 2567 95 5135 91	4295 13 2802 75	-1727 18 2333 16	LT15 LT15
SOLD ACQ	ESSON HBOC INC COMM 75 0000	08/06/2010 06/22/2009	4700 17 4700 17	3271 42	1428 75	LT15
100.0000 NEX SOLD ACQ	TERA ENERGY INC - 6	5339F101 - MINO 0F/06/2010 01/24/2008	R = 053100 5348 91 4011 68	4731.00	-719 33	LT15
100.0000 NOR SOLD	25 0000 THERN TR CORP COM -	06/22/2009 665859104 - MII 08/C6/2010	4812 91	1435 39	-98.17	LT15
ACQ 75.0000 OCC SOLD	100 0000 IDENTAL PETE CORP C	06/22/2009 OM - 674599105 08/06/2010	4812 91 - MINOR = 31001 5705 90	5248 85	-435 94	LT15
ACQ 75.8100 ROW SOLD	75.0000 E T PRICE MID-CAP G	01/10/2005 ROWIH FD INC - ' 08/06/2010	5705 90 779556109 - NINOR = 050 3855 00	2111 62 827	3594.28	LT15
ACQ 25.2720 Row SOLD	75.8100 E PRICE NEW HORIZON	06/23/2009 IS FUND INC CAP 08/06/2010	3855.00 - 779562107 - MINOR = 0 695.00	2773 13 50842	1081.87	LT15
ACQ 133.1290 ROW SOLD	25,2720 E T PRICE MID CAP V	01/24/2008 ALUE F COM - 77: 08/06/2010	695 00 957Y106 - MINOR = 05082 2825 00	700 03 B	-5 03	LT15
ACQ 50.5260 ROY SOLD	133.1290 CE FD TOTAL RETURN	01/10/2005 - 780905881 - MI 08/06/2010	2825 00 INOR = 050841 575.00	2971 44	-146 44	LT15
ACQ 100,0000 SEC SOLD	50.5260 TOR SPDR TR SBI BAS	06/23/2009 IC INDS - 813699 08/06/2010	575 00 3100 - MINOR - 053559 3231.94	434 02	140 98	LT15
ACQ 125,0000 YUM	85.0000 15.0000 BRANDS INC COM - 9	02/05/2007 11/13/2006 88498101 - MINO	2747 15 484 79 5 = 053100	3114 18 510 00	-367 03 -25 21	LT15 LT15
C.IOZ ACQ TAR 0000.001	125 0000 ON CORP COM - 27805	09/13/2010 06/22/2009 8102 - MINOR = 6	5669 20 5669.20 053100	4191 24	1477 96	LT15
SOLD ACQ 75.0000 HON	100 0000 EYWELL INTL INC COM	09/28/2010 06/22/2009 - 438516106 - N	8231.18 8231.18 4INOR = 053100	4358 73	3872 45	LT15
SOLD ACQ 150.0000 MCG	75.0000 RAW-HILL COMPANIES	09/29/2010 06/22/2009 INC COM - 580645	3288 69 3268 69 5109 - MINOR = 053100	2379.74	908 95	LT15
SOLD ACQ	150,0000 T INC - 00206R102 -	10/28/2010 06/22/2009	5653 52 5653.52	4274 52	1379 00	LT15
SOLD ACQ	50.0000 CORPORATION (DEL)	12/27/2010 06/22/2009	1463.47 1463.47 - MINOR = 053100	1206 50	256 97	LT15
SOLD ACQ	33 0000 42 0000	12/27/2010 08/25/2008 01/10/2005	2593 45 1141 12 1452 33	1215 72 1021 48	-74 60 430 85	LT15 LT15
25.0000 FED SOLD ACQ	SRATED INVS INC PA			532.25	119 98	ST

ACCT 2XMY 75750719397397 FROM 01/01/2010 TO 12/31/2010 PNC BANK, N.A. STATEMENT OF CAPITAL GAINS AND LOSSES WILLIAMSON FAMILY FEN AGT

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TRUST YEAR ENDING 12/31/2010

RUST ADMINISTRATOR 1A INVESTMENT OFFICER. 1H					TATE I - INHSI U - ACQ COST UNI	
ROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS		
25.0000 J P MO	rgan Chase & CO	COM - 46625H100	- MINOR = 31001			
SOLD	25 0000	12/27/2010	1063 23 1063 23 3100	958 00	105 2	23 LT15
25.0000 NIKE I	NC CL B 65410	6103 - MINOR = 05	3100	330 00	103 2	3 2113
SOLD ACQ	25 0000	12/27/2010 06/22/2009	2145.96 2145 96	1387 25	758 7	71 LT15
100.0000 PARKER SOLD	HANNIFIN CORP (COM - 701094104 -	MINOR = 053100 8513 85			
ACQ	100 0000	08/06/2010	8513 65	6506 00	2007.8	35 ST
	T ROWE GROUP INC		- MINOR = 053100 1610 97 1610 97			
ACQ	25.0000 N COMMINICATIONS	05/22/2009 S COM = 923439104	1610 97 MINOR = 053100	997.21	613.7	76 LT15
SOLD	N COPPORTATION	12/27/2010 10/20/2009	886 01	674 38		
		10/20/2009	886.01	674 RA	211 6	3 LT15
ACQ	25 0000	10, 20, 2003				
ЯСQ	25 0000	TOTALS	109266 98	89294 77		
ACQ UNMARY OF CAPITAL GAIN	s/losses	TOTALS	109266 98	89294 77		
UNNARY OF CAPITAL GAIN:	S/LOSSES	TOTALS LONG TERM 28%	109266 98	89294 77	LT WASH SALE	
MMARY OF CAPITAL CAINS	S/LOSSES SHORT TERM 3993 71	LONG TERM 28%	109266 98	89294 77		
JANARY OF CAPITAL GAINS SDERAL JETOTAL FROM ABOVE JAMON TRUST FUND	S/LOSSES SHORT TERM 3993 71	LONG TERM 28%	109266 98 ####################################	89294 77	LT WASH SALE	0.00
UNNARY OF CAPITAL GAIN: SDERAL JETOTAL FROM ABOVE JMMON TRUST FUND	S/LOSSES SHORT TERM 3993 71 0 00 0 00	TOTALS LONG TERM 28%	109266 98	89294 77	LT WASH SALE	0.00
UNNARY OF CAPITAL GAIN: SDERAL JETOTAL FROM ABOVE JMMON TRUST FUND	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00	109266 98 DESCRIPTION LONG TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE	0.00 0 00 0 00
UMMARY OF CAPITAL GAIN: EDERAL UETOTAL FROM ABOVE DMMON TRUST FUND APITAL GAIN DIVIDENDS	S/LOSSES SHORT TERM 3993 71 0 00 0 00	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00	109266 98 DESCRIPTION LONG TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE	0.00 0 00 0 00
UMNARY OF CAPITAL GAIN: EDERAL UETOTAL FROM ABOVE UMMON TRUST FUND APITAL GAIN DIVIDENDS	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00	109266 98 DESCRIPTION LONG TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE	0.00 0 00 0 00 0 00
UMMARY OF CAPITAL GAINS EDERAL UETOTAL FROM ABOVE DMMON TRUST FUND APITAL GAIN DIVIDENDS	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 .00	109266 98 LONG TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE 0.00	0.00
UMMARY OF CAPITAL GAINS SDERAL UBTOTAL FROM ABOVE DMMON TRUST FUND APITAL GAIN DIVIDENDS TATE UBTOTAL FROM ABOVE DMMON TRUST FUND	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71 ANDERDEED 3993.72 0 00	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00 0 00 0 00 0 00 0	109266 98 DEDERMINE TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE 0.00	0.00 0 00 0 00 0.00 0.00
MMARY OF CAPITAL GAINS EDERAL JETOTAL FROM ABOVE JEMMON TRUST FUND REITAL GAIN DIVIDENDS TATE JETOTAL FROM ABOVE	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71 AUGUSTEE 3993.72 0 00 0.00	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00 0 00 0 00 0 00 0	109266 98 DESCRIPTION 15% 15978 49 0 00 1132 20 17110.69 DESCRIPTION 69 DESCRIPTI	89294 77 BETTERENTE ST WASH SALE 0 00 0 00	LT WASH SALE 0.00 0.00 0.00	0.00 0 00 0 00 0.00 0.00
UNNARY OF CAPITAL GAINS EDERAL JETOTAL FROM ABOVE JOHNON TRUST FUND APITAL GAIN DIVIDENDS	S/LOSSES SHORT TERM 3993 71 0 00 0 00 3993 71 ANDERDEED 3993.72 0 00	TOTALS LONG TERM 28% 0 00 0 00 0 00 0 00 0 00 0 00 0 00 0	109266 98 DEDERMINE TERM 15% 15978 49 0 00 1132 20 17110.69	89294 77	LT WASH SALE 0.00	0.00 0 00 0 00

CAPITAL LOSS CARRYOVER

FEDERAL

0.00

0 00

OH10

N/A

H/A

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY CA	ASH INVESTMENT	S STATEMENT 1
SOURCE			AMOUNT
INTEREST INCOME - JP MORGAN (GENER	AL)		6.
INTEREST INCOME - JP MORGAN (LAS) INTEREST INCOME - JP MORGAN (MJS)			1. 1.
INTEREST INCOME - JP MORGAN (MVHS)			30.
INTEREST INCOME - JP MORGAN (WPW)			1.
INTEREST INCOME - PNC (JDW) TAX EXEMPT INTEREST			6. 16.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		61.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAIN	S COLUMN (A) AMOUNT
DIVIDEND INCOME - JP MORGAN			_
(GENERAL)	4,825.	0	4,825.
DIVIDEND INCOME - JP MORGAN (MVHS)	22 460	0	22.460
DIVIDEND INCOME - PNC (JDW)	23,460. 9,994.	0 1,132	•
TOTAL TO FM 990-PF, PART I, LN 4	38,279.	1,132	37,147.
FORM 990-PF O	THER INCOME		STATEMENT 3
	(A)	(B)	(C)
DESCRIPTION	REVENUE PER BOOKS		F- ADJUSTED ME NET INCOME
OTHER INCOME	· · ·	56.	56.
TOTAL TO FORM 990-PF, PART I, LINE	11	56.	

FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
PROFESSIONAL FEES	6,490.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	6,490.	0.			0.
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
ASSET MANAGEMENT FEES	30,882.	30,882.			0.
OTHER DEDUCTIONS FROM PASSTHROUGH ENTITIES	3,291.	3,291.			0.
TO FORM 990-PF, PG 1, LN 16C	34,173.	34,173.			0.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
NET UNREALIZED GAIN ON MARKET	ABLE SECURI	TIES	_	196,6	64.
TOTAL TO FORM 990-PF, PART II	I, LINE 3		=	196,6	64.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUND E	BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
NONDEDUCTIBLE EXPENSES FROM J	P MORGAN SC	HEDULES K-1	_		1.
TOTAL TO FORM 990-PF, PART II	I, LINE 5				1.

FORM 990-PF OTHER	INVESTMENTS	<u> </u>	STAT	EMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE
PNC BANK INVESTMENTS JP MORGAN - GENERAL (INVESTMENTS IN	FMV FMV	491,46	50.	491,460.
PARTNERSHIPS) JP MORGAN INVESTMENTS (MVHS)	FMV	260,23 961,07		260,238. 961,076.
TOTAL TO FORM 990-PF, PART II, LINE	13	1,712,77	741	,712,774.
FORM 990-PF PART VIII - LIST OF TRUSTEES AND FO			STAT	емент 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
WARREN P. WILLIAMSON, III C. 1568 HEIGHTS COURT MARCO ISLAND, FL 34145	HAIRPERSON 0.00	0.	0.	0.
J.D. WILLIAMSON, II V 14450 ROLAND CANYON ROAD SALINAS, CA 93908	ICE-CHAIR 0.00	0.	0.	0.
MARTHA STEWART STEWART P.O. BOX 10905 JACKSON, WY 83002	ECY./TREAS. 0.00	0.	0.	0.
LOWRY STEWART 3528 ARCADIA DR. CARSON CITY, NV 89705	RUSTEE 0.00	0.	0.	0.
LYNN WILLIAMSON TO TO STATE TO	RUSTEE 0.00	0.	0.	0.
SUSAN BROWNLEE TO THE TOTAL TO THE TOTAL TO THE TOTAL TOTAL TO THE TOTAL	RUSTEE 0.00	0.	0.	0.
WARREN P. WILLIAMSON, IV TO 101 SOUTHBEND COURT LOVELAND, OH 45140	RUSTEE 0.00	0.	0.	0.

WILLIAMSON FAMILY FOUNDATION			34-6568	495
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.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.
	RT XV - LINE 1A FOUNDATION MANAGERS		STATEMENT	10

NAME OF MANAGER

MARTHA STEWART LOWRY STEWART

	S AND CONTRIBUTIONS D DURING THE YEAR	STAT	EMENT 11
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
GREATER BAY AREA MAKE A WISH FOUNDATION SALINAS, CA	N/A CHARITABLE	N/A	2,500.
LITERACY KANSAS CITY KANSAS CITY, MO	N/A CHARITABLE	N/A	1,000.
EISENHOWER MEDICAL CENTER RANCHO MIRAGE, CA	N/A CHARITABLE	N/A	1,000.
AMERICAN RED CROSS SALINAS, CA	N/A CHARITABLE	N/A	500.
PALM SPRINGS ART MUSEUM PALM SPRINGS, CA	N/A CHARITABLE	N/A	500.
MY BLUE DOTS PALO ALTO, CA	N/A CHARITABLE	N/A	500.
BOYS & GIRLS CLUB OF MONTEREY COUNTY SALINAS, CA	N/A CHARITABLE	N/A	750.
CULVER EDUCATION FOUNDATION CULVER, IN	N/A EDUCATIONAL	N/A	2,000.

WILLIAMSON FAMILY FOUNDATION			34-6568495
HUNTINGTON'S DISEASE SOCIETY OF AMERICA NEW YORK, NY	N/A CHARITABLE	N/A	500.
THE CALIFORNIA HIGHWAY PATROL 11-99 FOUNDATION FULLERTON, CA	N/A CHARITABLE	N/A	250.
MONTEREY COMMUNITY HOSPITAL FOUNDATION SALINAS, CA	N/A CHARITABLE	N/A	2,500.
DESERT COMMUNITY FOUNDATION PALM DESERT, CA	N/A CHARITABLE	N/A	250.
THE LIVING BREATH FOUNDATION MONTEREY, CA	N/A CHARITABLE	N/A	150.
SALINAS VALLEY MEMORIAL HOSPITAL FOUNDATION SALINAS, CA	N/A CHARITABLE	N/A	2,500.
SALVATION ARMY SALINAS, CA	N/A CHARITABLE	N/A	500.
SPCA OF MONTEREY COUNTY MONTEREY, CA	N/A CHARITABLE	N/A	1,000.
THE LIVING DESERT PALM DESERT, CA	N/A CHARITABLE	N/A	250.
THE MAHONING VALLEY HISTORICAL SOCIETY YOUNGSTOWN, OH	N/A CHARITABLE	N/A	83,195.

WILLIAMSON FAMILY FOUNDATION

34-6568495

MONTEREY MUSEUM OF ART SALINAS, CA

N/A CHARITABLE N/A

250.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

100,095.

Summary

Portfolio value

n Décember 31 \$501,928.55	n October 1 457,747.19	\$44,181.36
Total Total portfolio value on December 31	Total portfolio value on October 1	Total change in value
n December 31 \$495,254,29	453,912.47	\$41,341.82
Principal Principal on December 31	October 1	\$2,839.54 Change in value
\$6,674.26	3,834.72	\$2,839.54
Income on December 31 \$6,674.26	: =	Change in value

Portfolio value by asset class

 \$3,794.04
**** *********** ********

We use tax cost to calculate the cost of your portfolio. When this information is not available for all assets, your portfolio's tax cost may be understated. To
determine if we have tax cost information for all your assets, call George Millich your Account Advisor.

For the Period 12/1/10 to 12/31/10

Consolidated Summary

5 = 260,238

INVESTMENT ACCOUNTS

Asset Allocation	Beginning Market Value	Ending Market Value	Change In Value	Estimated Current Annual Income Allocatron	Current Allocatron
Equity	169,556 40	183,138.93	13,582.53	908.90	%49
Cash & Short Term	14,172.55	13,358 71	(813.84)	6.67	2%
Fixed Income	76,612 68	76,604.46	(8 22)	2,654.22	28%
Market Value	\$260,341.83	\$273,102.10	\$12,760.47	\$3,569.79	100%
Accruals	112 48	494 26	381 78		
Market Value with Accruals	\$260,454.11	\$273,596.36	\$13,142.25		

Asset Allocation Cash & Erred Fixed Income

Portfolio Activity	Current Period Value	Year-to-Date Value
Beginning Market Value	260,341.63	250,788.17
Net Contributions/Withdrawals	(2,007.48)	(10,604.31)
Income & Distributions	872 52	3,41537
Change in Investment Value	13,895.43	29,502.87
Ending Market Value	\$273,102.10	\$273,102.10
Accruals	494 26	494 26
Market Value with Accruals	\$273,596.36	\$273,596.36

This Consolidated Summary shows all of your investments at J.P. Morgan other than investments we hold in trust for you. These investments may be held in custody or investment amanagement account at J.P. Morgan Chase Bank, N.A. (the "Bank") or in a brokerage or margin account at J.P. Morgan Clearing Corp. ("JPMCC"). Brokerage and margin accounts are non-discretionary and all investment decisions are made by the client. J.P. Morgan Securities LLC ("JPMS") 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.

Page 2 of 21

Consolidated Summary

2 = 961,076

INVESTMENT ACCOUNTS

Asset Allocation	Beginning Market Value	Ending Market Value	Change In Value	Estimated Current Annual Income Allocation	Current Allocation
Equity	766,924 56	596,532.48	(170,392.08)	2,968.56	48%
Cash & Short Term	63,553.96	294,098.76	230,544.80	147.04	23%
Fixed Income	362,279 51	362,219.86	(59.65)	12,542.50	29%
Market Value	\$1,192,758.03	\$1,252,851.10	\$60,093.07	\$15,658.10	100%
Accruals	532 74	2,323 29	1,790 55		
Market Value with Accruals	\$1,193,290.77	\$1,255,174.39	\$61,883.62		

	Equity	}
Asset Allocation	Cash &	Fixed

Portfolio Activity	Current Period Value	Year-to-Date Value
Beginning Market Value	1,192,758.03	1,188,064.83
Net Contributions/Withdrawals	(5,403.04)	(83,456.48)
Income & Distributions	4,303 93	16,387 99
Change in Investment Value	61,192.18	131,854.76
Ending Market Value	\$1,252,851.10	\$1,252,851.10
Accruals	2,323.29	2,323 29
Market Value with Accruals	\$1,255,174.39	\$1,255,174.39

This Consolidated Summary shows all of your investments at J.P. Morgan other than investments we hold in trust for you. These investments may be held in custody or investment management account at JPMcCa.) Brokerage and margin accounts are mon-discretionary and all investment decisions are made by the client. J.P. Morgan Securities LLC ("JPMS") 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.

Page 2 of 25

Form **8868**

(Rev January 2011)

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

Form 8868 (Rev. 1-2011)

● If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filide form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (in months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part I with the exception of Form 8870, information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, viet www.irs.gov/eride and chick on e-file for Charities & Nonprofits Ilipatrial: Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copies needed) Automatic 3-Month Extension of Times. Only submit original (no copie		D	An and D	and shook this how			X		
Do not complete Part II unless you have already been granted an automatic 3-month extension on a prevously filed Form 8888 Electronic filing (Fell-R) vuc an electronically file Form 8980 fl. you may be a filed for all with the exception of Form 8970, informatic extension of time to file file months for a corporation required to file Form 990 T), or an additional (not automatic) 3-month extension of time Vou can electronically file Form 8980 for required to file Form 990 T), or an additional (not automatic) 3-month extension of time Vou can electronically file Form 8980 to required an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8970, Information Patturn for Transfers Associated With Certain Personal Benefic Contracts, which must be seen to the IRS in paper format (see instructions) For more details on the electronic filing of this form, wast www.sr.gov/elle and elicks on e-rife for Chartes & Nonprofits Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 for request an extension of time to file income tax returns. Type or Name of exempt organization Employer Identification number print Part I only WILLIAMSON FAMILY FOUNDATION 34 – 6568495					form\	•	لما		
Electronic filing (e-file). You can electronically rile Form 8808 4 you need a 3 month automatic extension of time to file (6 months for a corporation required to file Form 8901 yin a distillational (for automatics) amonth extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8970, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, with warving agrowing and electronic filing of the form with warving agrowing and electronic filing of the form, with warving agrowing to the form 9901 Time required in the form 9901 Time required to file form 9901 Time required in the form 9901 Time required to file form 9901 Time required in a form 9901 Time required to file form 9901 Time required to file form 9901 Time required in the form 9901 Time required to file									
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Patricitis				(see instructions) For more details on the	IC CIC	cuone imig or this	101111,		
A corporation required to file Form 990 T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. WILLIAMSON FAMILY FOUNDATION 34-6568495 WARREN F. WILLIAMSON FAMILY FOUNDATION WARREN P. WILLIAMSON FAMILY FOUNDATION WARREN P. WILLIAMSON FAMILY FOUNDATION WARREN P. WILLIAMSON FAMILY FUNDATION WARREN F. WILLIAMSON FAMILY	WW.			ibmit original (no copies needed)					
All other corporations (including 1120-C hiers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to the income tax returns. Value Corporations Employer Identification number print			matic 6-mo	onth extension - check this box and com	plete				
Type or print with the proper of the proper	•	*				•	· 🔲		
WILLIAMSON FAMILY FOUNDATION WILLIAMSON FAMILY FOUNDATION			IICs, and t	rusts must use Form 7004 to request ar	exter	nsion of time			
WILLIAMSON FAMILY FOUNDATION 34-6568495 Number, street, and room or suite no. If a P.O. box, see instructions 8399 TIPECANOE ROAD City, town or post office, state, and ZIP code. For a foreign address, see instructions. CANFIELD		r Name of exempt organization			Emp	loyer identification	number		
Number, street, and room or suite no. If a P.O. box, see instructions	print	MITTITAMOON FAMILY POINDATE) N		٦	4-6568495			
Ray Sage TTPPECANOE ROAD Cty, town or post office, state, and ZIP code. For a foreign address, see instructions. CANFTELD, OH 44406		Alumbar street and room or suite no. If a D.O. hov s		tions		± 0300433			
City, town or post office, state, and ZIP code. For a foreign address, see instructions. CANFIELD, OH 44406 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return SFor Code Form 990 O1 Form 990-T (corporation) O7 Form 990-T (corporation) O7 Form 990-T (corporation) O8 Form 990-EZ O3 Form 4720 O9 Form 990-PF O4 Form 5827 10 Form 990-T (sec 401(a) or 408(a) trust) O5 Form 690-T (files tother than above) WARREN P - WILLIAMSON , III, TRUSTEE The books are in the care of ▶ 8399 TIPPECANOE ROAD - CANFIELD, OH 44406 Telephone No. ▶ (330) 533-5786 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box	flingyour 8399 TIPPECANOE ROAD								
Enter the Return code for the return that this application is for (file a separate application for each return)									
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Form 990 BL			Code	Is For			Code		
Form 990-EZ		90	01	Form 990-T (corporation)			07		
Form 990-PF	Form 9	90-BL	02	Form 1041-A			08		
Form 990-T (sec 401(a) or 408(a) trust) WARREN P. WILLIAMSON, III, TRUSTEE The books are in the care of \$ 8399 TIPPECANOE ROAD - CANFIELD, OH 44406 Telephone No. \$ (330)533-5786 If the organization does not have an office or place of business in the United States, check this box	Form 9	90-EZ	03	Form 4720			09		
WARREN P. WILLIAMSON, III, TRUSTEE The books are in the care of ▶ 8399 TIPPECANOE ROAD - CANFIELD, OH 44406 Telephone No.▶ (330)533-5786 FAX No.▶ If this organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box If this is for part of the group, check this box Indicated In	Form 9	90-PF	04	Form 5227			10		
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The books are in the care of ▶ 8399 TIPPECANOE ROAD - CANFIELD, OH 44406 Telephone No.▶ (330)533-5786 FAX No.▶ If the organization does not have an office or place of business in the United States, check this box	Form 9						12		
If the organization does not have an office or place of business in the United States, check this box		books are in the care of > 8399 TIPPECANOL			06				
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until							_		
If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 It of file the exempt organization return for the organization named above. The extension is for the organization's return for I x calendar year 2010 or I tax year beginning I the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 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. If this application is for Form 990-PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. I request an automatic 3-month (6 months for a corporation required to file Form 990-T, extension of time until AUGUST 15, 2011 I request an automatic 3-month (6 months for a corporation required to file Form 990-T, extension of time until AUGUST 15, 2011 I request an automatic 3-month (6 months for extension of time until AUGUST 15, 2011 I to file the exempt organization return for the organization named above. The extension is for the extension is for file extension. I have a payment set or file extension or file extension or file extension or file file extension or file extension						•			
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X Calendar year 2010 or tax year beginning , and ending . .	1					The extension			
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For Paperwork Reduction Act Notice, see Instructions.

Form 886	8 (Rev. 1 2011)				Page 2
	re filing for an Additional (Not Automatic) 3-Month Ex	tension.	complete only Part II and check this b	ox	► X
Note Onl	y complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed	d Form 8868	
	re filing for an Automatic 3-Month Extension, comple				
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no	copies needed).	
	Name of exempt organization			Employer identification	on number
Type or	Name of exempt organization				
print	WILLIAMSON FAMILY FOUNDATION	NT		34-6568495	;
File by the	Number, street, and room or suite no. If a P.O box, s		tions	1 32 0300233	
extended due date for	8399 TIPPECANOE ROAD	ico in strac	vicino.		
filing your	City, town or post office, state, and ZIP code. For a fo	oreign add	trace see instructions		
return, See instructions	CANFIELD, OH - 44406	or cigit acc	areas, and management		
	CANFIELD, OH 144400				
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Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)		[<u>0]4</u>]
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Applicate	on	Return	Application		Return
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Form 990	DI.	02	Form 1041-A		08
Form 990		02	Form 4720		09
Form 990	 	03	Form 5227		10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
	T (trust other than above)	06	Form 8870		12
	not complete Part II if you were not already granted		*	icly filed Form 9969	
STOPIDO	not complete Part II If you were not already granted היים מספר איז היים מיים מספר איז היים מספר איז היים מספר איי	TAMCO	N, III, TRUSTEE	rally med rount bood.	
• The be	oks are in the care of 8399 TIPPECANOL			106	
		E KUA	FAX No. ►	¥00	
	one No. ► (330)533-5786	a sa tha l le			
	rganization does not have an office or place of business s for a Group Return, enter the organization's four digit				chook this
_		1	sch a list with the names and EINs of all		
box ▶ L	. If it is for part of the group, check this box		BER 15, 2011.	members the extension	15 101.
	•	VOVEII.			
	calendar year 2010, or other tax year beginning	book roan	, and ending on. Initial return	Final return	
6 If th	e tax year entered in line 5 is for less than 12 months, c	neck reas	on milarelum (FINALIBION	
- 0	Change in accounting period				
	e in detail why you need the extension DITIONAL INFORMATION IS REQU	TTPFD	FROM AN INDEPENDENT	VTGAG CGTUT	IN
	DER TO PREPARE A COMPLETE AN			L THIRD FARIT	
<u>OR</u>	DER TO PREPARE A COMPUETE A	AD AC	CONAIL REIGHN.	· · · · · · · · · · · · · · · · · · ·	
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	payments made Include any prior year overpayment all			77	
		Oweu as a	a credit and any amount paid	8b \$	6,109.
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	ence due, Subtract line ob from line oa. Include your pa PS (Electronic Federal Tax Payment System). See instru		artins form, it required, by daing	8c \$	0.
EFI			d Verification	1 80 1 4	
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onuer pena it is true, co	Itich of perjury, I declare that shave examined this form, include rreck and complete, and that lam authorized to prepare this fo	ing account	bunying achieutics and statements, and to the	r near or my viloniende gilli	vollel,
	MA A MORI AND THE	The	um toot	Date > 8/2/11	
Signature	The same		-1	Form 8868 (F	2ev 1-2011\
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