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Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0052 2010

	calent	aar year 2010, or tax year beginning , a	and ending				· · · · · · · · · · · · · · · · · · ·
G	Check		turn of a former public		[Final return	
			ress change	Name	change		_
١	lame of f	oundation				loyer identification nur -1861951	nber
•	THE '	WILLIAMS FAMILY FOUNDATION				phone number (see page	10 of the instructions)
_	lumber a	nd street (or P O box number if mail is not delivered to street addre	ss) R	oom/suite		2-764-6951	, , , , , , , , , , , , , , , , , , , ,
_ :	2789	HARTLAND ROAD			C If exe	mption application is pen	ding, check here
	ity or tow	vn, state, and ZIP code			D 1. Fc	oreign organizations, chec	k here
	FALL	S CHURCH VA 22043			2 . Fo	oreign organizations meet	ing the
Н	Check	type of organization $f X$ Section 501(c)(3) exempt private	foundation		85	% test, check here and a	ttach computation 🕨 📗
Ш	Section		le private foundation		-	ate foundation status was	- 1
		rket value of all assets at J Accounting method	X Cash Acc	crual	section	on 507(b)(1)(A), check he	re 🕨 📘
		ear (from Part II, col (c), Uther (specify)				foundation is in a 60-mor	
	ine 16)			T	under	r section 507(b)(1)(B), che	· · · · · · · · · · · · · · · · · · ·
ŧ	art i	Analysis of Revenue and Expenses (The total of	(a) Revenue and expenses per	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))	books	1 ''	ome	income	purposes
<u> </u>	1	Contributions, gifts, grants, etc., received (attach schedule)	40,000	1		, <u>, , , , , , , , , , , , , , , , , , </u>	(cash basis only)
न्त	2	Check fit the foundation is not required to attach Sch B					
8	3	Interest on savings and temporary cash investments	18,488		18,488		
A ⊃	4	Dividends and interest from securities	41,931		41,931		
AON :	5a	Gross rents			,		
يه ⊆		Net rental income or (loss)	•				
Revenue Revenue	6a	Net gain or (loss) from sale of assets not on the 10	41,843				
<u></u>	Ь	Gross sales price for all assets of line 6a 2 199,586					
٥	7	Capital pain net income (from Part IV, line 2)			41,843		
D	8	Net short-term capital gain 3 2011				0	
	1 9	Income modifications	•••••				
	10a	Gross sales less returns & allowances				·····	
	b	Less Cost of goods sold				-	
	C	Gross profit or (loss), lattach schedule)					
	11	Other income (attach schedule) STMT 1	24,370		24,370		
	12	Total. Add lines 1 through 11	166,632	1	26,632	0	
es	13	Compensation of officers, directors, trustees, etc.		'			
xpenses	14 15	Other employee salaries and wages Pension plans, employee benefits		<u> </u>			 ··
CDe	16a	Legal fees (attach schedule)			-		
ш	h	Accounting fees (attach schedule) STMT 2	5,401		3,781		1,620
<u>×</u>	C	Other professional fees (attach schedule) STMT 3	5,551	+	5,551		
Operating and Administrative	17	Interest	5,908	4	5,908	· ·	
ist	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 4	2,386	• • • • • • • • • • • • • • • • • • • 	2,386		
nin	19	Depreciation (attach schedule) and depletion STMT 5					
\d	20	Occupancy					
A D	21	Travel, conferences, and meetings					
ğ	22	Printing and publications					
פַ	23	Other expenses (att sch) STMT 6	2,121		2,121		
atir	24	Total operating and administrative expenses.				_	
ē		Add lines 13 through 23	21,367		19,747	0	
O		Contributions, gifts, grants paid	47,500		10 7		47,500
	26	Total expenses and disbursements. Add lines 24 and 25	68,867		19,747	0	49,120
	27	Subtract line 26 from line 12	97,765	.1			•
	a b	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	91,163		06,885		
	C	Adjusted net income (if negative, enter -0-)	······································	<u> </u>	JU, 003	0	
		regalite income (ii negalite, cilici "U")	1	1			I .

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	1 4141	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
i	2	Savings and temporary cash investments	16,125	12,171	12,171
	3	Accounts receivable ► 16,038			
		Less allowance for doubtful accounts ▶	5,119	16,038	16,038
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the			
		instructions)			
	7	Other notes and loans receivable (att. schedule) SEE WRK			
		Less allowance for doubtful accounts ▶ 0	164,713		
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	344		
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) SEE STMT 7	2,211,832	2,241,899	1,660,925
	С	Investments—corporate bonds (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ 1,156	·	······································	
		Less accumulated depreciation (attach sch) ► STMT 8 1,156			
	15	Other assets (describe SEE STATEMENT 9	301,665	342,941	342,941
	16	Total assets (to be completed by all filers—see the			· · · · · · · · · · · · · · · · · · ·
		instructions Also, see page 1, item I)	2,699,798	2,613,049	2,032,075
	17	Accounts payable and accrued expenses	·		
ζ,	18	Grants payable			
Liabilities	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
iak	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe SEE STATEMENT 10)	485,663	301,149	
	23	Total liabilities (add lines 17 through 22)	485,663	301,149	
		Foundations that follow SFAS 117, check here			
ces		and complete lines 24 through 26 and lines 30 and 31.			
Ž	24	Unrestricted	2,214,135	2,311,900	
ala	25	Temporarily restricted			
ä	26	Permanently restricted			
or Fund Balan		Foundations that do not follow SFAS 117, check here ▶		· · · -	
Ŀ		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds			
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund balances (see page 17 of the		·	
et		instructions)	2,214,135	2,311,900	
Z	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	2,699,798	2,613,049	
	Part I	Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year-Part II, column (a), line 30 (must	st agree with		
	end-	of-year figure reported on prior year's return)		1	2,214,135
2	Ente	r amount from Part I, line 27a		2	97,765
3	Othe	r increases not included in line 2 (itemize) ▶		3	
4	Add	ines 1, 2, and 3		4	2,311,900
5		eases not included in line 2 (itemize) ▶		5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (l	b), line 30	6	2,311,900
					Form 990-PF (2010)

Part IV Capital Gains a	nd Losses for Tax on Investment	Income				
(a) List and describ 2-story brick ware	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a SEE WORKSHEET						
b '						
С						
đ						
			<u> </u>		i	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain (e) plus (f)	
a						
b						
С						
d		 				
Complete only for assets shown	g gain in column (h) and owned by the found	ation on 12/21/6	<u></u>			
Complete only for assets showing	```					(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		Losses (fro	ess than -0-) or m col (h))
а						
b						
С						
d						
е	<u>_</u>					
2 Capital gain net income or (net c	apital loss) If gain, also enter in Part If (loss), enter -0- in Part			2		41,843
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6)	_				
If gain, also enter in Part I, line 8	, column (c) (see pages 13 and 17 of the inst	tructions)	-			
If (loss), enter -0- in Part I, line 8			Į.	3		24,999
Part V Qualification Ur	nder Section 4940(e) for Reduced	Tax on Net I	Investment Incon	ne		
If "Yes," the foundation does not qua	tion 4942 tax on the distributable amount of a lify under section 4940(e) Do not complete t each column for each year, see page 18 of the	his part		200		Yes X No
(a)	(b)	ile ilisti detions b		1		(d)
Base penod years Calendar year (or tax year beginning	in) Adjusted qualifying distributions		(c) of nonchantable-use asse			bution ratio vided by col (c))
2009	18,49		1,216,5			0.015203
2008	25,20		1,510,9			0.016682
2007	22,50		2,805,3			0.008020
2006	8,9		3,086,2			0.002900
2005	11,40	اه ب	2,571,0	<u> </u>	Т	0.004436
2 Total of line 1, column (d)				2	<u> </u>	0.047241
	5-year base period—divide the total on line 2 has been in existence if less than 5 years	by 5, or by the		3		0.009448
4 Enter the net value of noncharita	ble-use assets for 2010 from Part X, line 5			4		1,327,740
	5.5 255 about to 25 to Holli Fall A, lille O			1		
5 Multiply line 4 by line 3				5	 	12,544
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			6	 	1,069
7 Add lines 5 and 6				7		13,613
8 Enter qualifying distributions from	n Part XII, line 4			8		49,120
If line 8 is equal to or greater that Part VI instructions on page 18	n line 7, check the box in Part VI, line 1b, and	d complete that	part using a 1% tax ra	te See the	€	
					F	orm 990-PF (2010

HAROLD A. WILLIAMS, JR MERRIFIELD VICE-PRES P.O. BOX 506 VA 22116 1.00 0 0 0 FRANK E. WILLIAMS, III MERRIFIELD SEC/TRAS P.O. BOX 506 VA 22116 1.00 0 0 0 COMPENSATION OF THE INSTRUCTIONS OF THE INSTRUCTION OF T			MS FAMILY FOUNDATIO		1861921	41		P	age 6
(1) Carty on propaganda, or otherwise attempt to influence legislation (section 4945(s))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an organization other than a chantable, etc., organization described in section 59(s)(1), (2), or (3), or section 4940(s)(2)? (see page 22 of the instructions) (4) Provide a grant to an organization other than a chantable, sent, it is described in section 59(s)(1), (2), or (3), or section 4940(s)(2)? (see page 22 of the instructions) (5) Provide in any purpose of that has reliquous, chantable, sentific, literary, or douctational purposes, or for the prevention of cruelty to children or animals? (6) Provide a grant to an organization other than ecliquous, chantable, sentific, literary, or douctational purposes, or for the prevention of cruelty to children or animals? (7) If we will be a section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? (8) If any name were in Yes' to Question 54, 494 or in a current notice regarding disaster assistance (see page 22 of the instructions). (8) If the animal marking despending disaster assistance (see page 22 of the instructions). (9) A yes a local page of the grant? (1) If Yes, "attach the statement required by Regulations section 53 4945-5(d) (9) Del the foundation, during the year, increave any funded, directly, to pay premiums on a personal benefit contract? (1) Del the foundation, during the year, increave any funded, directly or indirectly, to pay premiums on a personal benefit contract? (1) Del the foundation, during the year, increave any froededs or have any net income attributable to the transaction? (1) If Yes, to the fine foundation and party to a prohibited tax shelter transaction? (1) Prevait the foundation distribution of the fine foundation and page years and Contractors. (1) If Yes a different foundation and page years are all the foundation				rm 4720 May Be F	kequired (con	tinued)	T1		Γ
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly, any owler registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than rechardable, elc. organization described in section 505(g/t), (2) or (3), or section 494(g/t)(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, charitable, elc. organization described in purposes, or for the prevention of curety to children or animals of the purposes of the foundation dainy of the transactions fall to qualify under the exceptions described in Para y answer is "Yes" to Self)—(6), did any of the transactions fall to qualify under the exceptions described in Regulations section 34 945-5 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes, a fact the statement required by Regulations section 33 945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 56, file Form 8870 A farty time during the tax year, was the foundation as any relineone attributable to the transaction? Yes X No B If Yes, did the foundation display the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No B If Yes, did the foundation display the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No B If Yes, did the foundation display the year year year premiums. The year year year year year year year y	5a	-	·			🕶		- 1	
directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc. organization described in section 509(a)(1), (2), or (3), or section 494(b)(2)? (see page 22 of the instructions) (5) Provide of any purpose other than religious, chantable, section 494(c)(2)? (see page 22 of the instructions) (6) Provide of any purpose other than religious, chantable, section 494(c)(2)? (see page 22 of the instructions) (7) Post of the prevention of cruelty to children or animals? (8) If any naws re "Yes" to Squid, (4), 6) daily of the transactions fall to qualify under the exceptions described in Regulations section 53, 4945 or in a current notice regarding diseaster assistance check here (8) If any naws rest "Yes" to question 54(4), does the foundation chain exemption from the tax because it maintained expenditure responsibility for the grant? (9) The statich the statement required by Regulations section 53, 4945-5(d) (9) If "Yes" Six No (1) The statement required by Regulations section 53, 4945-5(d) (9) If "Yes" Six No (1) The statement required by Regulations section 53, 4945-5(d) (9) If "Yes" Six No (1) The statement required by Regulations section 53, 4945-5(d) (9) If "Yes" Six No (1) If "Yes" Six No (2) If "Yes" Six No (3) No If "Yes" Six No (4) If "Yes" Six No (5) If "Yes" Six No (6) If "Yes" Six No (7) If "Yes" Six No (8) If "Yes" Six No (9) If "Yes Six No (9) If "Yes Six No (9) If "Yes Six No (1) If "Yes Six No (1) If "Yes Six No (1) If "Yes Six No (2) Compensation? (3) Name and address of each employee pad more than \$50,000 (4) If "Yes Six No (5) If "Yes Six No (6) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (a) Name and address of each employee pad more than \$50,000 (b) If yes described in popular is a control of				,	` لــا	Yes X No			
(3) Provide a grant to an ingranation often than a chantable, it. or, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. b If any answer is "Yes" to Self)—(5), did any of the transactions fail to qualify under the exceptions described in Paray answer is "Yes" to Self)—(5), or an current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes, a statistic than the statement required by Regulations sections 53 4945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes, to b, file Form 8870 A tain yith eduling the tax year, was the foundation a party to a prohibited tax shelter transaction? It is all officers, of the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). PRANK 2. WILLIAMS, JR MERRIFIELD WERRIFIELD YES YES O (6) Compensation of five highest-paid employees (other than those included on line 1— see page 23 of the instructions). O) (6) Compensation of five highest-paid employees (other than those included on line 1— see page 23 of the instructions). O) (7) Compensation of t		•), or to carry on,		🖘			
(4) Provide a grant to an organization other than a chantable, sci. organization described in section 505(4)(1); (2), or (3), or section 494(6)(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If any animal purposes, or for the prevention of cruelty to children or animals? If any animal purposes, or for the prevention of cruelty to children or animals? If the animal purposes of the prevention of cruelty to children or animals? If the animal purposes of the prevention of cruelty to children or animals? If the animal purposes of the prevention of cruelty to children or animals? If the animal purpose of the instructions? If the animal purpose of the instructions or a personal benefit contract? If Yes's that the statement required by Regulations section 53 4945-5(d) But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's that the statement required by Regulations section 53 4945-5(d) But the foundation, during the year, was the foundation a party to a prohibited tax shelter transaction? If Yes (any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes (b) If the foundation creave any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors I List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (b) If the animal animal party or a prohibited tax shelter transaction? (c) If the animal animal party or a prohibited tax shelter transaction? (d) Compensation (e) Provide the instructions (e) Instructions (e) Provide the instructions (, , ,		_	=				
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)					LJ '	Yes X No			
(6) Provide for any purpose other than religious, charatable, scentific, literary, or educational purposes, or for the prevention of cruelty to children or annuals? If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a D of the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes is 5b, file Form 8870 Ta At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). PRANKE E. WILLIAMS, JR MERRIFIELD PRESIDENT (a) Name and address (b) Tide, and parage (c) Compensation (officers) and defined composition (officers) and defined composition (officer) and defined composition						. 🖘			
b If any answer is "Yes" to 5a(1)—(5), did any of the transactons fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes" is the state the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 8b, file Form 8370 A tan time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). PRANK E. WILLIAMS, JR MERRIFIELD PRESIDENT P.O. BOX 4004 VA 22116 P.O. BOX 4004 VA 22116 D.O. BOX 505 VA 22116 O.O. G.O. G.O. G.O. G.O. G.O. G.O. G.O				•	□ `	Yes X No		Ì	
b If any answer is "Yes" to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes" to question 5a(4), does the foundation claim exemption from the tax because if maintained expenditure responsibility for the grant? If "Yes" cattach the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" bits, file Form 8a70 To At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Tids, and average for the instructions to composition of the path of the instructions to composition of the path of the contract of the allowances of the path of the contract of the contract of the contract of the path of the contract of the contr				ry, or educational		-			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If 'Yes ' tatch the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, reverse any funds, directly or indirectly, to pay premiums on a personal benefit contract? If 'Yes' to 8b, file Form 8870 A lany time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions) (a) Name and address (b) Tile, and average for the paid, enter proper benefit first paid, enter proper benefit paid and defined by proper paid in problem. PRANK E. WILLIAMS, JR MERRIFIELD PRESIDENT P.O. BOX 506 VA 22116 1.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		•	•		<u> </u>	Yes X No			
Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) Bo Did the foundation, during the year, recave any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 8b, file Form 8870 To At any time during the tax year, was the foundation a party to a prohibited tax shelter triansaction? To At any time during the tax year, was the foundation a party to a prohibited tax shelter triansaction? To At any time during the tax year, was the foundation and party to a prohibited tax shelter triansaction? N/A 7b To B If Yes C M file froundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (a) Name and address (b) Tills, and average file (c) Compensation (c) Com	b			· · · · · · · · · · · · · · · · · · ·		/-			
c If the answer is "Yes" to question 5s(4), does the foundation claim exemption from the tax because it manitained expenditure responsibility for the grant? Yes				, , ,	ne instructions)?	N/A	5b		
because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At A tray time during the t		· ·	• •			▶ [_]			
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Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to Sb, file Form 8870 A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Tide, and average devoted to position (find paid, enter proposation) FRANK E. WILLIAMS, JR MERRIFIELD PRESIDENT P.O. BOX 4004 VA 22116 FRANK E. WILLIAMS, JR MERRIFIELD VICE-PRES P.O. BOX 506 VA 22116 P.O. BOX 506 VA 22116 In On O O O O Compensation of five highest-paid employees (other than those included on line 1 — see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE Total number of other employees paid over \$50,000		•	•		N/A 📋 '	Yes No			
on a personal benefit contract? Yes No	_								
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7 A 1 any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Part Viii Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Tile, and average (c) Compension (d) compension (d) compension (de)	ба		ceive any funds, directly or indirectly,	to pay premiums		ু হিচা			
If "Yes" to 5b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		•				Yes X No		ł	
Total number of other employees paid over \$50,000	þ		ay premiums, directly or indirectly, on	a personal benefit cont	ract?		6b		X
b If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and serged hours per week decided to position (if not paid, enter decided to position) (if enter all of the position) (if enter all of the position of the enter decided to position) (if enter all of the	_	·			F	(49)			
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Total number of other employees paid over \$50,000 ▶ 0				devoted to position			otner	allowan	nces
	NO	NE							
							<u> </u>		
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	Total	number of other employees hald over	\$50,000		<u></u>		<u> </u>		
Form 990-PF (2010			400,000		 -		_ 000)-DE	

Form 990-PF (20	110) THE WILLIAMS FAMILY FOUNDATION	54-1861951	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundati and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services (see page 23 of	the instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of o	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct chantable activities during the tax year. Include relevant statistical info I other beneficianes served, conferences convened, research papers produced, etc.	ormation such as the number of	Expenses
1 SEE S	TATEMENT 11		
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page 24	of the instructions)	
Describe the two l	largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 N/A			
2			
All other program-	-related investments. See page 24 of the instructions		

▶

Total. Add lines 1 through 3

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

P	art X Minimum Investment Return (All domestic foundations must complete this part Fore	ign fo	oundations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes		
а	Average monthly fair market value of securities	1a	1,347,959
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,347,959
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,347,959
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	20,219
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,327,740
6	Minimum investment return. Enter 5% of line 5	6	66,387
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratin	g
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	66,387
2a	Tax on investment income for 2010 from Part VI, line 5 2a 1,069		
b	Income tax for 2010 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	1,069 65,318
3	Distributable amount before adjustments Subtract line 2c from line 1	3	65,318
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	65,318
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	65,318
P	urt XII Qualifying Distributions (see page 25 of the 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	49,120
b	Program-related investments—total from Part IX-B	1b	
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		
а	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	49,120
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 (see page 26 of the instructions)	5	1,069
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	48,051
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the founda	tion	

Pa	irt XIII Undistributed Income (see page 26 c	of the instructions	()	, 	
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
_	line 7			····	65,318
2	Undistributed income, if any, as of the end of 2010.				
	Enter amount for 2009 only			38,726	
b	Total for prior years 20, 20, 20	****			
3	Excess distributions carryover, if any, to 2010				
а	From 2005	_]			
b	From 2006				
С	From 2007	7			
đ	From 2008	7			
е	From 2009	7	†		
f	Total of lines 3a through e			1	
4	Qualifying distributions for 2010 from Part XII,				
•	line 4 ▶ \$ 49,120				
•	Applied to 2009, but not more than line 2a			38,726	
	••			38,720	
U	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
	Applied to 2010 distributable amount				10,394
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010				
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
А	Subtract line 6c from line 6b Taxable				
u	amount—see page 27 of the instructions				
_	Undistributed income for 2009. Subtract line	***************************************			······································
e	Chelotination in control of Edda Capital inic				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
T	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2011				54,924
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007	7			
c	Excess from 2008	7			
d	Excess from 2009	7			
e	Excess from 2010	1		1	
-					

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 12 47,500 Total 47,500 ▶ 3a b Approved for future payment N/A Total ▶ 3b

DAA

Part XVI-	Analysis of Income-Producing Act	ivities				
	nounts unless otherwise indicated		d business income	Exclude	by section 512, 513, or 514	(e)
•		(a) Business code	(b)	(c) Exclusion	(d)	Related or exempt function income
1 Program s	ervice revenue	Business code	Amount	code	Amount	(See page 28 of the instructions)
						·
b						
c						
d			<u> </u>			
е						
f			<u>.</u>			
	nd contracts from government agencies					
	p dues and assessments					
	savings and temporary cash investments					18,488
	and interest from securities					41,931
	ncome or (loss) from real estate					
	nanced property	-				
	ot-financed property					
	ncome or (loss) from personal property	-				
7 Other inves		-				24,370
	ss) from sales of assets other than inventory					41,843
	e or (loss) from special events					
	t or (loss) from sales of inventory					
	nue a	<u> </u>				
d						·
е						
	dd columns (b), (d), and (e)		0		0	
13 Total. Add	line 12, columns (b), (d), and (e)		0		0 13	126,632 126,632
13 Total. Add See workshee	line 12, columns (b), (d), and (e) t in line 13 instructions on page 29 to verify calculatio				13	
13 Total. Add See workshee Part XVI-E	line 12, columns (b), (d), and (e) t in line 13 instructions on page 29 to verify calculation Relationship of Activities to the Activities	complishm	ent of Exempt Pเ		13 <u> </u>	
13 Total. Add See workshee	line 12, columns (b), (d), and (e) tin line 13 instructions on page 29 to verify calculation Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpo	complishm is reported in c	ent of Exempt Pu	A contrib	13s	126,632
13 Total. Add See workshee Part XVI-E Line No. ▼	line 12, columns (b), (d), and (e) tin line 13 instructions on page 29 to verify calculation Relationship of Activities to the Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purposinstructions)	complishm us reported in coses (other than	ent of Exempt Pu olumn (e) of Part XVI-/ by providing funds for	A contrib such pu	s uted importantly to the rposes) (See page 29	126,632
13 Total. Add See workshee Part XVI-E	Inne 12, columns (b), (d), and (e) In line 13 instructions on page 29 to verify calculations. Relationship of Activities to the Activiti	complishm is reported in coses (other than	ent of Exempt Pu olumn (e) of Part XVI-/ by providing funds for HER THE EXE	A contrib such pu	s uted importantly to the rposes) (See page 29	126,632
13 Total. Add See workshee Part XVI-E Line No. ▼	line 12, columns (b), (d), and (e) t in line 13 instructions on page 29 to verify calculations. Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purportinstructions.) THE INCOME WAS UTILIZED OF THE WILLIAMS FAMILY	is reported in coses (other than	ent of Exempt Pu olumn (e) of Part XVI-/ by providing funds for HER THE EXE TION, A NON	A contrib such pu MPT PROF	s uted importantly to the rposes) (See page 29	126,632
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13 Total. Add See workshee Part XVI-E Line No. ▼	Inne 12, columns (b), (d), and (e) tin line 13 instructions on page 29 to verify calculations. Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpor instructions.) THE INCOME WAS UTILIZED OF THE WILLIAMS FAMILY 501 (C) (3) FOUNDATION WH GIFTS, GRANTS AND CONTRI SCIENTIFIC, LITERARY, RE	complishm is reported in coses (other than TO FURTI FOUNDA! OSE SOLI BUTIONS	ent of Exempt Puolumn (e) of Part XVI-/ by providing funds for HER THE EXE FION, A NON E PURPOSE I FOR CHARIT	MPT : PROF: S TO	s uted importantly to the rposes) (See page 29 PURPOSE IT MAKE	126,632
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13 Total. Add See workshee Part XVI-E Line No. ▼	Inne 12, columns (b), (d), and (e) tin line 13 instructions on page 29 to verify calculations. Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpor instructions.) THE INCOME WAS UTILIZED OF THE WILLIAMS FAMILY 501 (C) (3) FOUNDATION WH GIFTS, GRANTS AND CONTRI SCIENTIFIC, LITERARY, RE	complishm is reported in coses (other than TO FURTI FOUNDA! OSE SOLI BUTIONS	ent of Exempt Puolumn (e) of Part XVI-/ by providing funds for HER THE EXE FION, A NON E PURPOSE I FOR CHARIT	MPT : PROF: S TO	s uted importantly to the rposes) (See page 29 PURPOSE IT MAKE	126,632
13 Total. Add See workshee Part XVI-E Line No. ▼	Inne 12, columns (b), (d), and (e) tin line 13 instructions on page 29 to verify calculations. Relationship of Activities to the Activities to the Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpor instructions.) THE INCOME WAS UTILIZED OF THE WILLIAMS FAMILY 501 (C) (3) FOUNDATION WH GIFTS, GRANTS AND CONTRI SCIENTIFIC, LITERARY, RE	complishm is reported in coses (other than TO FURTI FOUNDA! OSE SOLI BUTIONS	ent of Exempt Puolumn (e) of Part XVI-/ by providing funds for HER THE EXE FION, A NON E PURPOSE I FOR CHARIT	MPT : PROF: S TO	s uted importantly to the rposes) (See page 29 PURPOSE IT MAKE	126,632
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Pa	rt XVII		_	_	ansfers To an	d Transactio	ons and Relations	hips With	Noncharitable	е		
1	Did the be	Exempt C			no in any of the fol	llauraa reth aarr	other errorretion deep				Vac	No
•	•	-	•		•		other organization descri				Yes	No
			oae (otne	er than section	on 501(c)(3) organ	lizations) or in se	ection 527, relating to po	olitical				
_	organizati		<i></i>			- .						
a		from the repon	ung touna	ation to a no	oncharitable exem	pt organization o	т					v
	(1) Cash									1a(1)		<u> </u>
	(2) Other								F	1a(2)		<u>X</u>
D	Other tran											
		of assets to a		·-	•					1b(1)		<u> </u>
					exempt organizati	on				1b(2)		X
		l of facilities, ed			sets					1b(3)		<u>X</u>
		oursement arra	-	;						1b(4)		<u>X</u>
		or loan guarar								1b(5)		X
				•	r fundraising solic					1b(6)		<u>X</u>
	-			-	ther assets, or pa				l	1c		X
d							mn (b) should always s					
					· ·	=	the foundation received					
							the goods, other assets					
	I) Line no	(b) Amount	involved	(c) Name	of nonchantable exer	npt organization	(d) Description of tr	ransfers, trans	actions, and sharing a	arrange	ements	
N/A	7						ļ					
	 .											
	 						·					
												
		-										
		_ .										
		<u> </u>										
	···-											
		_										
		_										
				_								
2a	Is the four	dation directly	or indirec	tly affiliated	with, or related to	one or more tax	exempt organizations		_	_		
	described	ın section 501((c) of the (Code (other	than section 501(c)(3)) or in section	n 527?			_ Ye	es X	No
_b	If "Yes," c	omplete the fol	lowing scl	hedule	··-				<u> </u>			
		a) Name of organ	nization		(b) Type of o	organization		(c) Description	n of relationship			
1	I/A											
							ying schedules and statem					
Sign	belief	t is true, correct,	and comple	ete Declaration	n of preparer (other t	han taxpayer or fide	iciary) is based on all inform	mation of which	h preparer has any kn	iowled	ge	
lere		7(5)	11			111/	14/11	PRESI	DENT			
	Sig	gnature of officer	or trustee			Date	7	Title				
	Print	Type preparer's	name			Preparer's signa	ture		Date		Check	X .
Paid		-					80.				self-em	_
repa	arer EDW:	IN G. HIL	L			EDWIN G.	HILL (+) 3	طعد و	:∤A 11/09	/11		-
Jse ('s name 🕨	DABBS	, HICK	MAN, HIL	L & CANN	ON, LLP				480	
	· 1		•	MAIN			•		Firm's EIN ▶ 58 - :			
			STATE	SBORO,	GA 304	58-0716			Phone no 912			
	•					-	••				0 DE	

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

Name of the organization

THE WILLIAMS FAMILY FOUNDATION

Employer identification number

54-1861951

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(c)(7),	overed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
Instructions. General Rule	
f X For an organization filir	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or contributor. Complete Parts I and II
Special Rules	
sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts
the year, aggregate cor	, (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during intributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or or the prevention of cruelty to children or animals. Complete Parts I, II, and III
the year, contributions aggregate to more than year for an exclusively	(8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during for use exclusively for religious, charitable, etc., purposes, but these contributions did not a \$1,000. If this box is checked, enter here the total contributions that were received during the religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule tion because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more.
990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, t 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 rtify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

of 1 of Part I

Name of organization Employer identification number THE WILLIAMS FAMILY FOUNDATION 54-1861951 Part I Contributors (see instructions) (a) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution 1 FRANK E. WILLIAMS, JR. Person 2789 HARTLAND ROAD **Payroll** 40,000 Noncash VA 22043 FALLS CHURCH (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (b) (a) (c) (d) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. Person Pavroll Noncash \$ (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution)

•					
Foi	m 990-PF	Capital Gains and Losses			2010
Name		dar year 2010, or tax year beginning	, and endin		entification Number
	-			Limployer lui	similation Number
T	HE WILLIAMS FAM	ILY FOUNDATION		54-186	1951
	(a) List and desc 2-story brick t	nbe the kind(s) of property sold, e.g., real esta warehouse, or common stock, 200 shs MLC	ate, (b) How acquir P-Purchase D-Donation	red (c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>(1)</u>	FAIRPOINT COMM	UNICATIONS	P	VARIOUS	04/07/10
<u>(2)</u>	GM NOTE		P	03/19/10	08/19/10
<u>(3)</u>	SYNOVUS 5.125%	2 1/2 DIFF	P	09/10/09	
(4)	LAZARD EMERGING AMERIS BANCORP	G MARKETS	P	VARIOUS	VARIOUS
(5) (6)	SENTINEL COMMO	N STOCK	P	VARIOUS VARIOUS	VARIOUS VARIOUS
(7)	SENTINEL MID-C		P	VARIOUS	VARIOUS
(8)	PASS-THRU FROM		P	VARIOUS	VARIOUS
(9)	PASS-THRU FROM		P	VARIOUS	VARIOUS
(10)	CAPITAL GAINS				
(11)					
<u>(12)</u>					
<u>(13)</u>					
(14)				- · ·	
<u>(15)</u>			L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Ga	ın or (loss) (f) minus (g)
(1)	27,744		27,699		45
(2)	30,119		33,290		-3,171
(3)	84,994		62,749		22,245
(4)	14,874		16,400		-1,526
(5)	15				15
(6)	5,141		5,548		-407
<u>(7)</u>	15,813		12,057		3,756
<u>(8)</u>	5,925				5,925
<u>(9)</u>	14,501				14,501
(10)	460				460
(11)					
(12)			+		
(13) (14)					
(15)			 		
1.07		<u> </u>		-	
C	Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/69		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (i col (k), but no Losses (fr	Col (h) gain minus t less than -0-) or om col (h))
<u>(1)</u>					45
(2)					-3,171
(3)					22,245
<u>(4)</u>	<u></u> .				-1,526
<u>(5)</u>					<u>15</u> -407
(6) (7)					3,756
(8)					5,925
(9)					14,501
(10)					460
(11)	_				
(12)					· · · · · · · · · · · · · · · · · · ·
(13)					
(14)					
(15)					

Forms	Oth	er Notes and	Loans Receiv	/able		
990 / 990-PF	_					2010
	For calendar year 2010, o	or tax year beginning		, and ending	T =	1
lame '					Employer id	dentification Number
THE WILLIAMS F	AMILY FOUNDAT	ION			54-186	31951
		_				
FORM 990-PF, PA	ART II, LINE	7 - ADDITIC	NAL INFORM	ATION		
Nar Nar	ne of borrower			Relationship to di	squalified pers	on
) WILLIAMS FAM:	LLY LTD PARTN	ERSHIP				
2)						
3)						
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S)						
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<u></u>	T					
Original amount	Dete effere	Maturity	_			Interest
borrowed	Date of loan	date	R	epayment terms		rate
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Security	provided by borrower			Purpose	of loan	
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		<u> </u>		T	······	
Consideration	furnished by lender		alance due at eginning of year	Balance due end of year		air market value (990-PF only)
)			164.713	1 2.7.34.	<u> </u>	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)	164,713		
2)			
3)			
4)			
5)			
5)			
7)			
8)			
9)			
10)			
Totals	164,713		

54-1861951	Federal S	ederal Statements		
	Statement 1 - Form 990-PF, Part I, Line 11 - Other Income	Part I, Line 11 - Other II	тсоте	,
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
K-1 ORDINARY INCOME/LOSS TOTAL		\$ 24,370	\$ 24,370 \$ 24,370	w w
Sta	Statement 2 - Form 990-PF, P.	990-PF, Part I, Line 16b - Accounting Fees	ing Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING FEES TOTAL	\$ 5,401	\$ 3,781	v v	\$ 1,620
Statem	Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	, Line 16c - Other Profes	ssional Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INVESTMENT MANAGEMENT FEES TOTAL	\$ 5,551 \$ 5,551	\$ 5,551	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0 0 0 0
	Statement 4 - Form 990	Form 990-PF, Part I, Line 18 - Taxes	Sa	
Descrip	Total	Net Investme	Adjusted Net	Charitable Purpose
STATE AND FOREIGN TAXES TOTAL	\$ 2,386	\$ 2,386	O O O O O O O O O O	
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54-1861951			Federal Statements	atements			•
		Statement 5 - Fo	5 - Form 990-PF, Pa	orm 990-PF, Part I, Line 19 - Depreciation	reciation		
Date	Description Cost				Current Year	Net Investment	Adjusted Net
Acquired START-UP EXPENSES	Basis	Depreciation	Method	_ Life	Depreciation	Income	
10/15/97 \$ TOTAL \$	1,156 \$ 1,156 \$	1,156	S/L	ທ່ ທ່ ທ	0	\$ \$	s 0
		Statement 6 -	Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses	t I, Line 23 - Othe	Expenses		
Description	tion		Total	Net Investment	Adju	Adjusted Net	Charitable Purpose
EXPENSES BANK CHARGES MISCELLANEOUS		<i>የ</i> ጉ	113	\$ 113 2,008	ጥ	<i>ن</i>	
TOTAL		ν	2,121	\$ 2,121	w	' မှ "	0
	State	ement 7 - Form 9	Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	10b - Corporate	Stock Investme	<u>its</u>	
Desc	Description		Beginning of Year	End of Year		Basis of Valuation	Fair Market Value
TOTAL			\$ 2,211,832 \$ 2,211,832	\$ 2,241, \$ 2,241,	,899 ,899	KET \$ =	1,660,925 1,660,925
	State	ment 8 - Form 9	Statement 8 - Form 990-PF, Part II, Line 14	14 - Land, Buildi	- Land, Building, and Equipment	ent	
Desc	Description		Beginning Net Book	End Cost / Basis	ı	End Accumulated Depreciation	Net FMV
TOTAL		o, o,	S S	\$ \$	156 \$	1,156	0
							5-8

Federal Statements

Statement 9 - Form 990-PF, Part II, Line 15 - Other Assets

Description	_	Beginning of Year	 End of Year		Fair Market Value
INVESTMENT IN PRUDENT CAPITAL	\$	63,317	\$ 58,888	\$	58,888
INVESTMENT IN ATEGRA GROUP, LLC		613	471		471
INVESTMENT IN ATEGRA COMMUNITY		30,350	23,903		23,903
INVESTMENT IN PRUDENT CAPITAL II		50,637	81,067		81,067
INVESTMENT IN PRUDENT CAPITAL III		25,026	-6,733		-6,733
INVESTMENT IN COMPASS POINT PARTNERS		105,689	113,344		113,344
INTEREST RECEIVABLE		135	1		1
INVESTMENT-FIRST FINANCIAL		25 , 898			
INVESTMENT-CAPITAL BANCORP NOTE	_	··	 72,000		72,000
TOTAL	\$_	301,665	\$ 342,941	\$_	342,941

Statement 10 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	E	Beginning of Year	 End of Year
INSTALLMENT AGREEMENT MARGIN ACCOUNT FEW,JR	\$	25,000 259,576 201,087	\$ 25,000 162,297
LOANS PAYABLE ROUNDING		·	 113,850 2
TOTAL	\$	485,663	\$ 301,149

Statement 11 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

THE PURPOSE OF THE FOUNDATION IS TO MAKE GIFTS, GRANTS AND CONTRIBUTIONS FOR CHARITABLE, SCIENTIFIC, LITERARY, RELIGIOUS AND/OR EDUCATIONAL PURPOSES WITHIN THE MEANING OF THOSE TERMS AS USED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND DISTRIBUTE ITS INCOME TO ORGANIZATIONS DESCRIBED IN SECTION 509(A)(1),(2), AND (3) OF THE INTERNAL REVENUE CODE WHICH ARE ENGAGED IN CHARITABLE, SCIENTIFIC, LITERARY, RELIGIOUS AND/OR EDUCATIONAL ACTIVITIES.

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

Name of Manager	 Amount
FRANK E. WILLIAMS, III	\$ 40,000
TOTAL	\$ 40,000

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Federal Statements

Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

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	Amount	C	7,300	2,500		3,000		2,500		2,500		1,000		1,000		16,000		11,500		3,000	(2,000	47,500
	An																						
	4																						
	Purpose																						
		_																		ij		-]	
		C + 0 + E N 0 + C 0)	RELIGIOUS		RELIGIOUS		RELIGIOUS		RELIGIOUS		CHARITABLE		RELIGIOUS		RELIGIOUS		RELIGIOUS		EDUCATIONAL	6 () H	EDUCATIONAL	
		ָה הייני	2	RELI(RELI(RELI(RELIC		CHAR		RELI(RELI(RELI(EDUC?	[EDOC	
	Sn:																						
	Status	7 T T T T T T	OBELC	PUBLIC		PUBLIC		PUBLIC		PUBLIC		PUBLIC		PUBLIC		PUBLIC		PUBLIC		PUBLIC	{ } }	PUBLIC	
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Address	Relationship	18	m		1288 MYERSTOWN RD		37				615 SLATERS LANE		T.		ZETTEROWER AVENUE		VILLA NOVA BAPTIST CHURCH 766 VILLA NOVA RD		BOBBY DODD WAY		ST		
٩	Rela	PO BOX 22718	PO BOX 1058		MYERS		PO BOX 17037		BOX 69		LATER:		9891 MAIN ST		ROWER		ILLA 1		OBBY 1		760 SPRING		
		PO BO	PO BO		1288	7305	PO BO		PO BO		615 S		9891		ZETTE		766 V		150 B		2 09 L		
		ICAN CANCER SOCIETY 1	776/	78		BEERHEBA SPRINGS IN 37305		217		9		313	NAL		Ω	458	HURCH		Ω		NOI		
	Address	AMERICAN CANCER SOCIETY	70 III H,	ROSEVILLE CA 95678	IES	PRINGS	OUR	CINCINNATI OH 45217	'RY	CULLODEN GA 31016		ALEXANDRIA VA 22313	ADVOCATES INTERNATIONAL	FAIRFAX VA 22031	PRIMITIVE BAPTIST FND	STATESBORO GA 30458	IST C		ALEXANDER-THARPE FUND	ATLANTA GA 30332	GEORGIA TECH FOUNDATION	ATLANTA GA 30308	
Name	A	CANCER	TRUI	ILLE (INISTR	EBA SI	BLE H	NNATI	ISINII	DEN GA	ARMY	NDRIA	INTER	AX VA	BAPTI	SBORO	A BAPT	FORD	-THARE	TA GA	CH FC	IA GA	. 7
		ICAN C	TRUMPET OF TRUTH	ROSEV	WAYMARK MINISTRIES	BEERH	BAPTIST BIBLE HOUR	CINCI	DONETSKY MINISTRY	CULLO	SALVATION ARMY	ALEXA	CATES	FAIRE	ITIVE	STATE	A NOV	WATERFORD	ANDER-	ATLAN	GIA TE	AILAN	TOTAL
		AMER	TRUM		WAYM		BAPT		DONE		SALV		ADVO		PRIM		VILL		ALEX,		GEOR		

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of t Internal Revenu		▶ File a	a separate a	pplication for each return.				
		tomatic 3-Month Extension, complet	te only Part	I and check this box			▶ X	T
· .	•	•	•	nplete only Part II (on page 2 of this for	m)		_	,
•	-			-month extension on a previously filed F	-	8		
Ť				•				
Electronic fil	ing (e-file). Yo	u can electronically file Form 8868 if yo	ou need a 3-	month automatic extension of time to file	e (6 mont	hs for		
a corporation	required to file	Form 990-T), or an additional (not auti	omatic) 3-m	onth extension of time. You can electron	ically file	Form		
8868 to reque	est an extensio	n of time to file any of the forms listed i	n Part I or P	art II with the exception of Form 8870, I	nformatio	n		
Return for Tra	ansfers Associa	ated With Certain Personal Benefit Cor	ntracts, whic	h must be sent to the IRS in paper form	at (see			
instructions)	For more detail	ls on the electronic filing of this form, v	ısıt www ırs	gov/efile and click on e-file for Charities	& Nonpre	ofits		
Part I	Automati	c 3-Month Extension of Time	. Only sul	omit original (no copies needed).			
A corporation	required to file	Form 990-T and requesting an autom	atic 6-month	extension-check this box and complete				_
Part I only							▶ _]
All other corp	orations (includ	ling 1120-C filers), partnerships, REMI	Cs, and trus	ts must use Form 7004 to request an ex	tension o	of time		
to file income	tax returns							_
Type or	Name of exe	empt organization			Employ	er ident	ification number	
print								
File by the		LLIAMS FAMILY FOUND			<u>54-1</u>	<u>8619</u>	51	
due date for filing your	•	eet, and room or suite no If a PO box	k, see instruk	ctions				
return See		IARTLAND ROAD	· · · · · · · · · · · · · · · · · · ·					_
instructions		r post office, state, and ZIP code For a						
	FALLS	CHURCH VA	22043			-		
Enter the Ret	urn code for the	e return that this application is for (file a	a separate a	pplication for each return)			0	4
Application			Detum	[Application			Return	=
Application Return Application								
Is For			Code	Is For			Code	—
Form 990			01	Form 990-T (corporation)			07	—
Form 990-E			02	Form 1041-A			08	—
Form 990-E			03 04	Form 4720 Form 5227			10	_
	(sec 401(a) c	or 408(a) truct)	05	Form 6069				_
	(trust other th		06	Form 8870			11 12	_
	thust other th	FRANK E. WILLIAMS, I		F01111 667 0			111	—
		PO BOX 506						
The books	are in the care of	► MERRIFIELD				v	A 22116	
		2-764-6951	FAX No	>		•		
•		not have an office or place of business	in the Unite	d States, check this box			▶ [7
•		urn, enter the organization's four digit (•	his is		_	2
	group, check th							
a list with the	names and Ell	Ns of all members the extension is for						
1 I reques	st an automatic	3-month (6 months for a corporation r	equired to fi	le Form 990-T) extension of time				_
until 0	8/15/11	, to file the exempt organization retui	rn for the org	ganization named above. The extension	ıs			
for the	organization's r	eturn for						
▶ <u>X</u>	calendar year	2010 or						
▶ 📙	tax year begin	ning , and ending						
2 If this to	av vear entered	I in line 1 is for less than 12 months, ch	ack reason	Initial return Final return				
	change in acco		ieck reason					
	mange in acco							
3a If this a	pplication is for	r Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, ente	er the tentative tax, less any				
nonrefu	indable credits	See instructions.			3a	\$		0
b If this a	pplication is for	r Form 990-PF, 990-T, 4720, or 6069, e	enter any ref	undable credits and				
estimat	ed tax paymen	ts made Include any prior year overpa	yment allow	ed as a credit	3b	\$		0
c Balanc	e due. Subtrac	t line 3b from line 3a. Include your pay	ment with th	is form, if required, by using EFTPS				
(Electro	nic Federal Ta	x Payment System) See instructions			3c_	\$		0
Caution, If vo	ou are going to	make an electronic fund withdrawal with	th this Form	8868, see Form 8453-EO and Form 88	79-EO fo	г		

Form 8868 (Re	ev. 1-2011)					Page 2
If you are	filing for an Additional (Not Automatic) 3-Month Ex	tension, com	plete only Part II and check this box	(▶ X
Note. Only con	mplete Part II if you have already been granted an au	tomatic 3-mor	nth extension on a previously filed Fo	rm 8868.		. —
If you are	filing for an Automatic 3-Month Extension, comple	te only Part I	(on page 1).			
Part II	Additional (Not Automatic) 3-Month Ex	xtension o	f Time. Only file the original	(no copies	needed).	
Type or print	Name of exempt organization			Employ	er identifica	ition number
File by the	THE WILLIAMS FAMILY FOUN	DATION		54-1	861951	
extended	Number, street, and room or suite no. If a P.O. box	, see instructi	ons.			
due date for filing your	2789 HARTLAND ROAD					
return See	City, town or post office, state, and ZIP code. For a	foreign addre	ess, see instructions.			
instructions	FALLS CHURCH V	A 22043	<u> </u>			
Enter the Retu	rn code for the return that this application is for (file a	separate app	lication for each return)			04
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990		01				ينبر المنات المراي
Form 990-BI		02	Form 1041-A			08
Form 990-E		03	Form 4720			09
Form 990-PI	F	04	Form 5227			10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870		-	12
STOP! Do not	complete Part II if you were not already granted	an automatic	3-month extension on a previousl	y filed Form	8868.	
Telephone If the orga If this is fo for the whole g list with the na I reques For cale If the tax Ci State in TAXF RETU	mes and EINs of all members the extension is for. It an additional 3-month extension of time until 11 Indar year 2010, or other tax year beginning a year entered in line 5 is for less than 12 months, che hange in accounting period detail why you need the extension PAYER REQUIRES ADDITIONAL JRN.	rt of the group L/15/11 geck reason: TIME NE	States, check this box on Number (GEN) o, check this box , and ending Initial return ECESSARY TO FILE A			22116
-	pplication is for Form 990-BL, 990-PF, 990-T, 4720, o ndable credits. See instructions.	r 6069, enter t	the tentative tax, less any	8a	\$	0
,	oplication is for Form 990-PF, 990-T, 4720, or 6069, e ed tax payments made. Include any prior year overpa					
	paid previously with Form 8868	-	•	8b	\$	0
	Due. Subtract line 8b from line 8a. Include your pay	ment with this	form, if required, by using EFTPS			
	nic Federal Tax Payment System). See instructions.			8c	\$	0
		ignature ar	nd Verification			
true, correct, and	of perjury, I declare that I have examined this form, including a complete, and that I am authorized to prepare this form	accompanying s	chedules and statements, and to the best	of my knowledg		os/10/11
Signature P	1910. 1720	Ti	itle PA			8868 (Rev 1-2011)
					Form	0000 (Kev 1-2011)