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DLN: 93491076001031

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

**Not e.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For	cale	endar year 2010, or tax	year beginning 01-	01-2010 , and	deno	ding 12-31-	2010	
<b>G</b> CI	neck a	all that apply	_	n of a former public ch	-	Final re	turn	
		undation					entification numb	er
VV	LSUN F	FAMILY FOUNDATION				84-1318359		
Num	ber and	d street (or P O box number if mail is	not delivered to street address	s) Room/suite		<b>B</b> Telephone nu	ımber (see page 10	of the instructions)
		TH THIRD STREET NO 101				(970) 243-780	5	
Cıtv	or towr	n, state, and ZIP code				<b>C</b> If exemption	application is pendin	g, check here 🕨 🗀
		ICTION, CO 81501				·	rganizations, check h	<u>-</u>
— н с н	ack ty	ype of organization	on 501(c)(3) exempt priva	ate foundation		<b>2</b> Foreign o	rganizations meeting	the 85% test
		n 4947(a)(1) nonexempt charit			on		re and attach comput	
		ket value of all assets at end	J Accounting method	Cash Acc	rual		undation status was i n 507(b)(1)(A), chec	
		from Part II, col. (c), ▶\$ 328,043	O ther (specify) (Part I, column (d) mus	- t ha on each backs )			ation is in a 60-mont	
	rt I	· ,		t be on cash basis.)		under sectio	n 507(b)(1)(B), ched	(d) Disbursements
Pa		Analysis of Revenue total of amounts in columns (b), necessarily equal the amounts in the instructions)	(c), and (d) may not	(a) Revenue and expenses per books	<b>(b)</b> N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , rec	eıved (attach schedule)	90,000				
	2	Check F r if the foundation is no	t required to attach Sch B					
	3	Interest on savings and temp	orary cash investments	2		2		
	4	Dividends and interest from s	ecurities	5,715		5,715		
	5a	Gross rents						
	Ь	Net rental income or (loss)						
<u>⊈</u>	6a	Net gain or (loss) from sale of	fassets not on line 10	296				
Revenue	b	Gross sales price for all assets on line				206		
	7	Capital gain net income (from				296		
	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowanteess Cost of goods sold.						
	ן ,	Gross profit or (loss) (attach						
	11	Other income (attach schedu						_
	12	Total. Add lines 1 through 11	•	96,013		6,013		
	13	Compensation of officers, dire	ctors, trustees, etc	0		0		0
.n	14	Other employee salaries and	wages					
Š	15	Pension plans, employee bene	efits					
Ę.	16a	Legal fees (attach schedule)						
Expenses	ь	Accounting fees (attach sche	dule)	1,323		0		0
	c	Other professional fees (attac	ch schedule)					
rati	17	Interest						
돌	18	Taxes (attach schedule) (see page	•	386		0		0
Ē	19	Depreciation (attach schedule						
Αd	20	Occupancy						
and Administrative	21	Travel, conferences, and mee	_					
	22	Printing and publications Other expenses (attach sche				0		0
Ĭ	23			31		0		<u> </u>
Operating	24	Add lines 13 through 23	·	1,740		0		0
Ö	25	Contributions, gifts, grants pa		80,325				80,325
	26	Total expenses and disbursemen		82,065		0		80,325
	27	Subtract line 26 from line 12		, ==				, ==
		Excess of revenue over expen	ses and disbursements	13,948				
	ь	Net investment income (if neg	jative, enter -0-)			6,013		
_	c	Adjusted net income (if negat	rive, enter - 0 - )					

o a	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	(I-) DI-		nd of ye	
		Cash—non-interest-bearing	(a) Book Value 11,551	(b) Book		842	20,842
	1	Savings and temporary cash investments	11,331		20,0	- '-	20,042
	2	<del>-</del>				-	
	3	Accounts receivable  Less allowance for doubtful accounts					
	_					+	
	4	Pledges receivable  Less allowance for doubtful accounts					
	_					+	
	5	Grants receivable				+	
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
	_	Instructions)				+	
	7	Other notes and loans receivable (attach schedule)					
٨		Less allowance for doubtful accounts 🕨					
Ď	8	Inventories for sale or use					
H > > C	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)					
	ь	Investments—corporate stock (attach schedule)	279,028	<u> </u>	307,	201	307,201
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) 🟲					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule) 🟲					
	15	Other assets (describe					
	16	Total assets (to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	290,579		328,0	043	328,043
	17	Accounts payable and accrued expenses					
	18	Grants payable				_	
e l	19	Deferred revenue				$\neg$	
≝	20	Loans from officers, directors, trustees, and other disqualified persons				$\neg$	
1100	21	Mortgages and other notes payable (attach schedule)					
֡֞֞֞֞֓֞֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֓֓֓֡֜֜֡֓֓֡֡֡֡֡֡	22	Other liabilities (describe )					
						$\neg$	
	23	Total liabilities (add lines 17 through 22)	0			0	
		Foundations that follow SFAS 117, check here ▶ ▽					
ا ۾		and complete lines 24 through 26 and lines 30 and 31.					
Fund Balances	24	Unrestricted	290,579		328,0	043	
틍	25	Temporarily restricted					
8	26	Permanently restricted					
₽		Foundations that do not follow SFAS 117, check here 🕨 🦵					
Ē		and complete lines 27 through 31.					
5	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
ASSets	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances (see page 17 of the					
ž		ınstructions)	290,579		328,0	043	
	31	Total liabilities and net assets/fund balances (see page 17 of					
		the instructions)	290,579		328,0	043	
)a	rt II		I				
			/-> l 20 /			<u> </u>	
L		Total net assets or fund balances at beginning of year—Part II, column (					200 570
		with end-of-year figure reported on prior year's return)		ŀ	1		290,579
2		Enter amount from Part I, line 27a			2	<del>                                     </del>	13,948
3		Other increases not included in line 2 (itemize)			3	<del>                                     </del>	23,516
4 -		Add lines 1, 2, and 3			4	<del>                                     </del>	328,043
5		Decreases not included in line 2 (itemize)			5	<del> </del>	0
5		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lii	ne 30	6	1	328,043

		nd(s) of property sold (e g , re or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) L	o , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Table						
b							
С							
d							
е					Ц		
(4	e) Gross sales price	(f) Depreciation allowed (or allowable)	1	t or other basis pense of sale		(h) Gain (e) plus (f)	or (loss) mınus (g)
а	See Additional Data Table						
b							
С							
d							
e							
Сс	omplete only for assets showin	<del></del>	· ·				(h) gain minus
(i)	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), If any	co	Losses (fro	ess than -0-) <b>or</b> om col (h))
а	See Additional Data Table						
b							
С							
d							
e							
2	Capital gain net income or		If gain, also enter If (loss), enter - 0		2		29
3	Net short-term capital gain	or (loss) as defined in section	ns 1222(5) and (6	)	-		
	If gain, also enter in Part I, If (loss), enter -0- in Part I	line 8, column (c) (see pages, line 8	13 and 17 of the i	nstructions)	}		
Part		r Section 4940(e) for R	adused Tax on	Not Investme	<u>'                                       </u>	<u> </u>	
/as the	on 4940(d)(2) applies, leave t e foundation liable for the sect ," the foundation does not qual	ion 4942 tax on the distributa			eriod?		┌ Yes ┌ No
<b>1</b> En	iter the appropriate amount in	each column for each year, se	e page 18 of the 11	nstructions before	makın	g any entries	
	(a) e period years Calendar	(b) Ijusted qualifying distributions	(c) Net value of noncha			(d) Distribution (col (b) divided	
уеаг (	or tax year beginning in) 2009	48,529		297,518		(cor (b) divided	0 163113
	2008	39,300		282,442			0 139144
	2007	63,760		347,409			0 183530
	2006	27,520		335,909			0 081927
	2005	40,400		274,137			0 147372
2	Total of line 1 column (d)				2		0 71508
3		or the 5-year base period—div		<u> </u>	_		3,1500
,		indation has been in existence			3		0 14301
	Enter the net value of nonc	harıtable-use assets for 2010	from Part X, line 5	5	4		204.67
4							304,67
4 5	Multiply line 4 by line 3				5		
		t income (1% of Part I, line 27	7b)		6		43,57
5		t income (1% of Part I, line 27	7b)				304,67 43,57 6 43,63
5 6	Enter 1% of net investment  Add lines 5 and 6	t income (1% of Part I, line 27			6		<b>4</b> 3,57

Form	990-PF (2010)			age <b>4</b>
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here T 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			60
c	here Fand enter 1% of Part I, line 27b			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			60
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			60
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
ь	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)  6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			60
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax Refunded Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt participate or intervene in any political campaign?	. 1a		No
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of			
	the instructions for definition)?	. 1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
<b>c</b>	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$\bigs\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.			
2	on iounation managers in a	١,		No
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		140
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		110
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
•	If "Yes," attach the statement required by General Instruction T.	<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
_	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ►CO			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on			
	page 27)? If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►WILLIAM WILSON Telephone no ►(970)	243-	7806	
	Located at 101 SOUTH THIRD STREET GRAND JUNCTION CO  ZIP+4 1501	, 245	7000	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		'	-
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			<b>.</b>
	a bank, securities, or other financial account in a foreign country?	16		No
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	for the benefit or use of a disqualified person)?			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
с	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
_	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	<b>2</b> L		
4-	If the foundation had excess business holdings in 2010.)	3b		N-
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4b		No

Pai	rt VII-B	Statements Re	gardii	ng Activities for V	Vhich Form 4720 N	lay Be Required <i>(cont</i>	inued)		
5a				or incur any amount to					
	(1) Carry	on propaganda, or ot	herwise	attempt to influence l	egislation (section 494	5(e)) <sup>?</sup>	No		
	<b>(2)</b> Influe	nce the outcome of a	ny spec	rific public election (se	e section 4955), or to	carry			
							No		
				travel, study, or other		☐ Yes ☑	No		
	<b>(4)</b> Provi	de a grant to an orgar	nization	other than a charitable	e, etc , organization des	cribed			
	ın sed	tion 509(a)(1), (2), c	or (3), o	r section 4940(d)(2)?	(see page 22 of the ins	tructions) 🗆 Yes 🔽	No		
				religious, charitable, :					
							No		
b						the exceptions described in			
						see page 22 of the instructio	ns)? <b>5</b>	ь	
	O rganiza	tions relying on a cur	rent not	ice regarding disaster	assistance check here.		-		
С					claim exemption from t				
						T Yes 「	- No		
				by Regulations section 5					
6a				ceive any funds, direct					
							No		
ь						nal benefit contract?		ь	No
		o 6b, file Form 8870.	. ,.	, , .	., .				
7a			r, was t	he foundation a party t	o a prohibited tax shelte	er transaction? <b>Tyes</b> 🔽	No		
ь	•	-	•	•	·	to the transaction?	.   7	ъ	
						ion Managers, Highly		mploy	ees,
Pa	rt VIII	and Contractors		,	,				, ,
_1	List all of f	icers, directors, trust	ees, fo	undation managers and	l their compensation (se	ee page 22 of the instruction	ns).		
	/- <b>&gt;</b> N		1	Title, and average	(c) Compensation	(d) Contributions to	(e) Exp	ense a	ccount,
	(a) Nar	ne and address		nours per week voted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other	allowa	inces
WILLI	AM L WILSON			PRESIDENT	0	0			0
101	SOUTH TI	HIRD STREET	0 00						
GRA	ND JUNCT	TION,CO 81501							
JOAN	B WILSON		_	IDENT	0	0			0
		HIRD STREET	0 00						
		TION,CO 81501							
	IS C WILSON		SECF	RETARY/TREASURER	0	0			0
		HIRD STREET TION,CO 81501	10 00						
		· · · · · · · · · · · · · · · · · · ·	aid emi	Novees (other than the	nse included on line 1—s	 see page 23 of the instruction	ne)		
-		nter "NONE."	aia cinj	noyees (other than the	ose meiadea on inic 1	ree page 25 or the instruction			
				(b) Title, and averag	<u> </u>	(d) Contributions to			
(a)		l address of each emp	loyee	hours per week	(c) Compensation	employee benefit		ense a ·allowa	ccount,
	paidi	more than \$50,000		devoted to position		plans and deferred compensation	other	anowa	nces
NON	l E								
-				1					
				1					
-									
				-					
				1					
				4					
Tota	Inumber	fother employees na	dover	\$ 5 O O O O		<b>.</b>	I		0

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)  3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE  Total number of others receiving over\$50,000 for professional services.     O	Form 990-PF (2010)		Page <b>7</b>
(c) Compensation  NONE  Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.		rustees, Foundation Managers, Highly	Paid Employees,
Total number of others receiving over \$50,000 for professional services.     Description   Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".
Total number of others receiving over \$50,000 for professional services.  Del the foundation's four largest direct charitable Activities  List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1  2  3  4  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1  Amount  Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount	NONE		
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
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Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount		1	
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Total. Add lines 1 through 3	Summary of Direct Charitable Activities		
2  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  3  Total. Add lines 1 through 3.   • 0	List the foundation's four largest direct charitable activities during the tax year. Including any other hanging research page.	ude relevant statistical information such as the number of	Expenses
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.		15 produced, etc	
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	<u></u>		•
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	*		1
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	Part IV P. Summary of Program-Polated Investme	nte (see page 24 of the instructions)	
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			A mount
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3		9 , ,	- Timount
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			-
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	2		
3	•		-
3			•
3	All other program-related investments. See page 24 of the instru	ctions	
Total. Add lines 1 through 3		ctions	
Total Add Illies I tillough St	<u> </u>		1
Total Add Illies I tillough St			1
Total Add Illies I tillough St		_ 1	
	Iotal. Add lines 1 through 3		

Form	990-PF (2010)		Page <b>8</b>
Pa	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	293,115
b	A verage of monthly cash balances	1b	16,198
c	Fair market value of all other assets (see page 24 of the instructions)	<b>1</b> c	0
d	Total (add lines 1a, b, and c)	1d	309,313
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	309,313
4	Cash deemed held for charitable activities Enter 1 $1/2\%$ of line 3 (for greater amount, see page 25		
	of the instructions)	4	4,640
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V , line 4	5	304,673
6	Minimum investment return. Enter 5% of line 5	6	15,234
Par	<b>Distributable Amount</b> (see page 25 of the instructions) (Section 4942(j)(3) and (j)(		
	foundations and certain foreign organizations check here 🕨 🚺 and do not complete t		
1	Minimum investment return from Part X, line 6	1	15,234
2a	Tax on investment income for 2010 from Part VI, line 5 2a 60		
Ь	Income tax for 2010 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	60
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,174
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	15,174
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	15,174
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	80,325
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts 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	80,325
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	60
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	80,265
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	her the	foundation qualifies for

P	art XIII Undistributed Income (see page	26 of the instruct	ons)		<u> </u>
		(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	( <b>d</b> ) 2010
1	Distributable amount for 2010 from Part XI, line 7				15,174
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			0	
Ь	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006	-			
C	From 2007	4			
d	From 2008				
	From 2009	-			
	<b>Total</b> of lines 3a through e	144,380			
4	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$			0	
	Applied to 2009, but not more than line 2a			0	
Ь	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c	Treated as distributions out of corpus (Election	0			
d	required—see page 26 of the instructions) Applied to 2010 distributable amount				15,174
	Remaining amount distributed out of corpus	65,151			,
	Excess distributions carryover applied to 2010	0			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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	209,531			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions		0		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
£	of the instructions				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2011				0
7	A mounts 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)	0			
R	Excess distributions carryover from 2005 not				
·	applied on line 5 or line 7 (see page 27 of the instructions)	26,934			
9	Excess distributions carryover to 2011.				
-	Subtract lines 7 and 8 from line 6a	182,597			
10	Analysis of line 9				
а	Excess from 2006	]			
b	Excess from 2007	4			
	Excess from 2008	-			
	Excess from 2009	4			
е	Excess from 2010 65,151				

- a The name, address, and telephone number of the person to whom applications should be addressed
- **b** The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year See Additional Data Table 80,325 **b** Approved for future payment

	PF (2010) I-A Analysis of Income-Produc	ina Activities	<u> </u>			Page <b>1</b> 2
	s amounts unless otherwise indicated		siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
<b>1</b> Prograr	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See page 28 of
a	and contracts from government agencies ership dues and assessments on savings and temporary cash investments indicate and interest from securities		C	14 14 14	296 296	the instructions )
Line No.	Explain below how each activity for whithe accomplishment of the organization page 28 of the instructions )	ich income is rep	oorted in column (	(e) of Part XVI-A co	ntributed importa	

501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of  (1) Cash	Form 99	90-PF (2	2010)							Рa	ge <b>13</b>
Solic) of the Code (other than excises 501(c)(3) organization) or in section 527, relating to political organizations?  a Transfers from the reporting Gundation to a nonchantable exempt organization of  (1) Cash.  (2) Other assets.  (3) Cash of assets to a nonchantable exempt organization.  (3) Sented of Escilitus, equipment, or other assets.  (4) Reimburs mend arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (8) Escharged fractilities, equipment, making lists, other assets, or paid employees.  (9) Escharged fractilities, equipment, making lists, other assets, or paid employees.  (10) It the answer to any of the above is "tes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, shown column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, shown column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, shown column (d) the value of the goods, other assets, or services given by the reporting foundation.  (a) Line for (b) Amount involved (c) home of mondaniable exempt organizations.  (b) Incentification of prepared colored to the state of the state of the state of the properties of the state	Part	XVII				ısac	ctions and Relations	ships With			
a Transfers from the reporting foundation to a nonchantable exempt organization of  (3) Cash.  (3) Cash.  (3) Other assets.  (4) Other assets.  (5) Defort fransactions.  (3) Sales of assets to a nonchantable exempt organization.  (4) Purchases of assets from a nonchantable exempt organization.  (5) Purchases of assets from a nonchantable exempt organization.  (6) Purchases of assets from a nonchantable exempt organization.  (6) Rental of facilities, equipment, or other assets.  (7) Sales of assets from a nonchantable exempt organization.  (8) Rental of facilities, equipment, mailing lists, other assets.  (9) Purchases of assets from a nonchantable exempt organization.  (9) Purchases of assets from a nonchantable exempt organization.  (10) Inc. Sales of the assets of part of the assets.  (10) Inc. Sales of the assets of the asset of th	<b>1</b> Did 1	the organiz	zation directly or indirectly	y engage in any	of the following with any other or	ganız	ation described in section			Yes	No
(1) Cash.   Ia(1)   Ne   Ne   Ia(2)   Other assets.   Ia(2)   Ne   Ia(2)   Ia(2)   Ne   Ia(2)	501(	(c) of the (	Code (other than section	501(c)(3) organ	izations) or in section 527, relating	g to p	oolitical organizations?				
(2) Other assetts.	<b>a</b> Tra	nsfers fr	om the reporting four	ndation to a n	oncharitable exempt organi	zatio	on of				
b Other transactions  (1) Sales of assets to a nonchantable exempt organization.  (2) Purchases of assets from a nonchantable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (6) Performance of services or membership or fundraising solicitations.  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (8) Loans or loan guarantees.  (9) Line to (1) Amount involved (1) No. 1 No. 2 No. 2 No. 2 No. 3 No.	(1)	Cash.							1a(1)		No
(1) Sales of assets to a noncharitable exempt organization.  (2) Purchases of assets from a noncharitable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (7) Exemplar of facilities, equipment, mailing lists, other assets, or paid employees.  (8) Performance of services or membership or fundraising solicitations.  (9) Find a service of facilities, equipment, mailing lists, other assets, or paid employees.  (1) If the assets or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in collumn (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in collumn (d) the value of the goods, other assets, or services received described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (2) Name of organization is the code (other than section 501(c)(3)) or in section 527?  (3) Name of organization is the code (other than section 501(c)(3)) or in section 527?  (4) Name of organization is the code (other than section 501(c)(3)) or in section 527?  (5) Perform section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (6) Description of relationship  (7) Press organization of prepared to the prepared by the first transactions, and sharing arrangements of the prepared by the first transaction of the prepared by the first transac	(2)	Othera	issets						1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (8) Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (9) Loans or loan guarantees.  (10) Inc. Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (10) Inc. Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (10) Inc. Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (10) Inc. Sharing of solicities assets, or services given by the reporting foundation if the foundation received less share fair market value of the goods, other assets, or services given by the reporting foundation if the foundation directive or indirectly arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization if the foundation directly or indirectly arrangements of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly arrangements of the goods, other assets, or services given by the reporting foundation in the foundation of the fair arrangements of the goods, other assets, or services given by the reporting foundation of the fair arrangements of the goods, other assets, or services given by the reporting foundation in the foundation of the fair arrangements are arrangements of the goods, other assets, or services given by the report of the goods, other assets, or services given by the report of the goods, other assets, or services given by the report of the goods, other assets, or services given by the goods, other assets, or services given by the goods, other assets, or services given by the goods, other asse	<b>b</b> Oth	ner trans	actions								
(a) Rental of facilities, equipment, or other assets.  (b) A sembursement arrangements.  (c) Bearn or long quarantees.  (d) Reimbursement arrangements.  (e) Performance of services or membership or fundraising solicitations.  (e) Performance of services or membership or fundraising solicitations.  (f) Performance of services or membership or fundraising solicitations.  (g) Performance of services or membership or fundraising solicitations.  (g) If the assets, equipment, maining lists, other assets, or paid employees.  (g) If the assets or services given by the reporting foundation of the foods, other assets, or services given by the reporting foundation of the goods, other assets, or services given by the reporting foundation of the goods, other assets, or services received in any transaction or shaning arrangement, show in column (g) the value of the goods, other assets, or services received on any transaction or shaning arrangement, show in column (g) the value of the goods, other assets or services received on any transaction or shaning arrangement, show in column (g) the value of the goods, other assets or services received on any transaction or shaning arrangement, show in column (g) the value of the goods, other assets, or services received on the goods, other assets, or services rec	(1)	Sales o	fassets to a noncha	rıtable exemp	ot organization				1b(1)		No
(4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (7) Experimence of services or membership or fundraising solicitations.  (8) Performance of services or membership or fundraising solicitations.  (9) Performance of services or membership or fundraising solicitations.  (10) Experiments of facilities, equipment, mailing lists, other assets, or paid employees.  (11) It is not the solicities of	(2)	Purcha	ses of assets from a	noncharitable	e exempt organization				1b(2)		No
(5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  (8) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line No. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements of the services received.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(3)	Rental	of facilities, equipme	nt, or other as	ssets				1b(3)		No
(5) Loans or loan guarantees	(4)	Reımbu	rsement arrangemen	nts					1b(4)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization.  (d) Description of transfers, transactions, and sharing arrangements.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									1b(5)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization.  (d) Description of transfers, transactions, and sharing arrangements.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(6)	Perform	ance of services or m	nembership o	r fundraising solicitations.				1b(6)		No
d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Une No. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) of the Code				•	-				<u> </u>		No
of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		•	, ,	• ,	,	•					
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	ın a	iny trans	action or sharing arr	angement, sh	ow in column (d) the value	of th	e goods, other assets, or	services receive	ed		nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(,		(-, , , , , , , , , , , , , , , , , , ,	(-,			(=, ===================================				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						$\bot$					
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						+					
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						+					
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						$\perp$					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  ******    2011-02-24   ******   Signature of officer or trustee   Date   Title	des	cribed in	n section 501(c) of the splete the following s	ne Code (othe schedule	r than section 501(c)(3)) o	rıns	section 527?			es F	, No
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  ******  Signature of officer or trustee  Date  Preparer's  NARK MACKLEY  Signature  Preparer's  MARK MACKLEY  Signature  MACKLEY AND COMPANY  Firm's name  MACKLEY AND COMPANY  Total  Page 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Under	penalties of perjury,	I declare tha	t I have examined this retu	rn, ır	ncluding accompanying s	chedules and sta	tement	s, and	to
Signature of officer or trustee  Date  Date  Check if self-employed F  Firm's name  MACKLEY AND COMPANY  101 SOUTH THIRD ST SUITE 200		the be based	st of my knowledge a on all information of	and belief, it is	s true, correct, and complete		eclaration of preparer (otl	ner than taxpaye			
Preparer's NARK MACKLEY Signature  Preparer's Signature  Prim's name  MACKLEY AND COMPANY  101 SOUTH THIRD ST SUITE 200  Page 101-02-24  Firm's EIN F		<u> </u>	nature of officer or t	rustee				Title			
Preparer's Signature  Preparer's Signature  MARK MACKLEY  Firm's name  MACKLEY AND COMPANY  101 SOUTH THIRD ST SUITE 200  Phone are (070) 243-2190							T	1	DEIN		
101 SOUTH THIRD ST SUITE 200	55						Date	Chack if salf-	PIIN		
101 SOUTH THIRD ST SUITE 200	gu⊬	س_		KMACKLEY			2011-02-24				
Dhama na (070) 242 2100	ß	aret Only	Firm's name		MACKLEY AND COMPAN	Υ		Fırm's EIN ▶	<u> </u>		
Dhama na (070) 242 2100		<u></u>			101 SOUTH THIRD ST SU	UITE	200				
			Firm's address 🕨		GRAND JUNCTION, CO	815	01	Phone no (970	)) 243-	3180	

Schedule B Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047
or 990-PF)	► Attach to Form 990, 990-EZ, or 990-PF.		2010
Department of the Treasury Internal Revenue Service		<del></del>	
Name of organization VILSON FAMILY FOUNDATION			entification number
Organization type (chec	ck one)	I 84-131835	9
- ilers of:	Section:		
Form 990 or 990-EZ			
orm 990 or 990-E2	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four	idation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on	
	501(c)(3) taxable private foundation		
Special Rules	y one contributor Complete Parts I and II		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ, that met the $33^1 \text{B}\%$ support test $9(a)(1)$ and $170(b)(1)(A)(vi)$ , and received from any one contributor, during to 000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-	he year, a contribut	
during the year, a	(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from ggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, or educational purposes, or the prevention of cruelty to children or animals (	charitable,	
during the year, c not aggregate to r the year for an ex applies to this org	(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the more than \$1,000. If this box is checked, enter here the total contributions that it clusively religious, charitable, etc., purpose. Do not complete any of the parts anization because it received nonexclusively religious, charitable, etc., contributions that it is contributed to the parts and the property of the parts and the pa	nese contributions d twere received dur s unless the <b>Gener</b> butions of \$5,000 or	lid ing <b>al Rule</b>
990-EZ, or 990-PF), but it	n that is not covered by the General Rule and/or the Special Rules does not file <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or check the box on lin I of its Form 990-PF, to certify that it does not meet the filing requirements of Si	H of its	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491076001031

Name of organization
WILSON FAMILY FOUNDATION

Employer identification number

84-1318359

Part I	Contributors (see Instructions)				
(a) No.	(b) Name, address, and ZIP + <b>4</b>	(c) Aggregate contributions	(d) Type of contribution		
1	WILLIAM JOAN WILSON 101 SOUTH THIRD ST STE 101  GRAND JUNCTION, CO 81501	\$90,000	Person		
(a) No.	(b) Name, address, and ZIP + <b>4</b>	(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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
_		\$	Person		

Name of organization
WILSON FAMILY FOUNDATION

Employer identification number

84-1318359

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
		 \$	

Name of organization WILSON FAMILY FOUNDATION **Employer identification number** 

84-1318359

) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift P + 4 Relation	onship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift P + 4 Relatio	onship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift P + 4 Relatio	onship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift P + 4 Relatio	onship of transferor to transferee

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

#### **Additional Data**

Software ID: Software Version:

**EIN:** 84-1318359

Name: WILSON FAMILY FOUNDATION

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
Α	COLUMBIA MARSICO FUND	Р	2003-01-10	2010-10-18
В	HARBOR FUND INTERNATIONAL FUND	Р	2007-06-12	2010-10-18
С	HARBOR FUND	Р	2007-09-10	2010-10-18
D	HOTCHIKISS & WILEY FUND	Р	2004-06-21	2010-10-18
Е	ADVISORS INNER CIRCLE FUND	Р	2008-12-04	2010-10-18
F	PIMCO COMMERCIAL REAL ESTATE FUND	Р	2009-10-06	2010-10-18
G	DREYFUSS EMERGING MARKETS FUND	Р	2008-12-04	2010-10-18
Н	T ROWE PRICE REAL ESTATE FUND	Р	2009-10-05	2010-10-18
I	T ROWE PRICE BLUE CHIP GROWTH FUND	Р	2007-06-12	2010-10-18
J	T ROWE PRICE MID-CAP GROWTH FUND	Р	2004-06-21	2010-10-18
К	WASHINGTON MUTUAL INVESTORS FUND	Р	2003-01-10	2010-10-18
L	GOLDMAN SACHS MONEY MARKET FUND	Р	2009-07-08	2010-04-08
М	CAPITAL GAINS DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

	(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
Α	417		265	152
В	37		43	-6
С	49		57	-8
D	118		133	-15
Е	76		46	30
F	124		110	14
G	64		44	20
Η	149		110	39
I	116		125	-9
J	95		78	17
К	448		437	11
L	223		223	0
М	51			51

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

	ipital callic alla 200000 loi l	ux on zintebinione zincome	
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69	(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (յ), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))
А			152
В			-6
С			-8
D			-15
Е			30
F			14
G			20
н			39
I			-9
J			17
К			11
L			0
М			51

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

WILLIAM L WILSON

JOAN B WILSON

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
AMERICAN CANCER SOCIETY 2754 COMPASS DR STE 328 GRAND JUNCTION, CO 81506	NONE		TO PROMOTE MEDICAL RESEARCH	300
ARTHRITIS FOUNDATION 2280 SOUTH ALBION DENVER,CO 802224906	NONE		TO PROMOTE MEDICAL RESEARCH	300
CATHOLIC OUTREACH 245 SOUTH 1ST STREET GRAND JUNCTION,CO 81501	NONE		ASSISTANCE FOR HOMELESS AND LOW INCOME INDIVIDUALS	7,500
CLIFTON ELEMENTARY SCHOOL 3276 F ROAD CLIFTON,CO 81520	NONE		TO PROVIDE BICYCLES FOR LOW INCOME CHILDREN	5,000
COLORADO SPECIAL OLYMPICS PO BOX 13979 DENVER,CO 802013979	NONE		TO PROVIDE SPORTS OPPORTUNITIES FOR DISABLED PERSONS	100
COMMUNITY FOOD BANK 486 MORNING GLORY LANE GRAND JUNCTION,CO 81504	NONE		TO PROVIDE FOOD TO LOW INCOME FAMILIES	2,500
DOCTORS WITHOUT BORDERS 333 SEVENTH AVE 2ND FLOOR NEW YORK,NY 100015004	NONE		TO PROVIDE MEDICAL CARE	500
COLORADO ENERGY ASSISTANCE FOUNDATION 225 EAST 16TH AVE STE 200 DENVER,CO 802031612	NONE		TO PROVIDE ENERGY FOR THE UNDERPRIVILEGED	1,000
GRAND JUNCTION RESCUE MISSION 550 SOUTH AVENUE GRAND JUNCTION,CO 81501	NONE		TO PROVIDE SHELTER FOR THE HOMELESS	3,500
GRAND VALLEY SENIOR DAYBREAK 599 THIRTY ROAD GRAND JUNCTION, CO 81504	NONE		TO PROMOTE ACTIVITIES FOR SENIOR CITIZENS	1,000
HABITAT FOR HUMANITY PO BOX 4947 GRAND JUNCTION,CO 815024947	NONE		TO PROVIDE HOUSING ASSISTANCE FOR LOW INCOME FAMILIE	1,000
HOMEWARD BOUND HOMELESS SHELTER 2853 NORTH AVENUE GRAND JUNCTION,CO 81501	NONE		TO PROVIDE ASSISTANCE FOR THE HOMELESS	2,000
HOSPICE AND PALLIATIVE CARE OF WESTERN COLORADO 3090 N 12TH ST UNIT B GRAND JUNCTION,CO 81506	NONE		TO PROVIDE ASSISTANCE TO TERMINALLY ILL PATIENTS	7,000
KAFM 1310 UTE AVENUE GRAND JUNCTION, CO 81501	NONE		TO PROVIDE OPERATIONAL SUPPORT	100
LATIMER HOUSE 1003 MAIN STREET GRAND JUNCTION, CO 81501	NONE		TO PROVIDE SUPPORT FOR DOMESTIC VIOLENCE	2,000
Total			▶ 3a	80,325

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

GIFT PROCESSING CENTER WASHINGTON, DC 200907104  MARCH OF DIMES 634 MAIN STREET GRAND JUNCTION, CO 81501  MARILLAC CLINIC INC 2333 NORTH 6TH STREET GRAND JUNCTION, CO 81501  MESA LAND TRUST 1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 81502200  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTMERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200995726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN TO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL S01 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE NONE  TOTAL TRAIN TO SALVATION ARMY TOY DRIVE TO THE TRAIN TO SALVATION ARMY TOY DRIVE TO TO THE TRAIN TO SALVATION ARMY TOY DRIVE TO TO THE TRAIN TO SALVATION TO TO THE TO THE TRAIN TO SALVATION ARMY TOY DRIVE TO THE T		
a Paid during the year  MAKE A WISH FOUNDATION GIFT PROCESSING CENTER WASHINGTON, DC 200907104  MARCH OF DIMES 634 MAIN STREET GRAND JUNCTION, CO 81501  MARILLAC CLINIC INC 2333 NORTH 6TH STREET GRAND JUNCTION, CO 81501  MESA LAND TRUST 1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO NONE TGRAND JUNCTION, CO 81501  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 81502  MATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 802099  OSU FOUNDATION NONE TROOM M112 DENVER, CO 802099  OSU FOUNDATION NONE TROOM M1 SSOW 35TH STREET GRAND JUNCTION, CO 81501  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATIN DO NATIONAL JOURNER, CO 80209  OSU FOUNDATION NONE TROOM SSOW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATIN DO NATIONS PROCESSING WASHINGTON, DC 200906231  WASHINGTON, DC 200906231  NONE TROOM TO STREET TO STREE	Purpose of grant or contribution	A mount
MAKE A WISH FOUNDATION GIFT PROCESSING CENTER WASHINGTON, DC 200907104  MARCH OF DIMES 634 MAIN STREET GRAND JUNCTION, CO 81501  MARILLAC CLINIC INC 2333 NORTH 6TH STREET GRAND JUNCTION, CO 81501  MESA LAND TRUST 1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 81502  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 802099  OSU FOUNDATION SSOS WS STH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DO NATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  TJ JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650  I T CONNEL TRAIN TONNE  T T CONNEL TRAIN TONNE T T		
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634 MAIN STREET GRAND JUNCTION, CO 81501  MARILLAC CLINIC INC 2333 NORTH 6TH STREET GRAND JUNCTION, CO 81501  MESA LAND TRUST 1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 815025020  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 578 GRAND JUNCTION, CO 81502  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	TO PROVIDE SUPPORT TO TERMINALLY ILL PATIENTS	100
2333 NORTH 6TH STREET GRAND JUNCTION, CO 81501  MESA LAND TRUST 1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 815025020  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATIN DONATIONS PROCESSING WASHINGTON, DC 200995726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE HEALTH CARE FOR DISABLED CHILDREN	200
1006 MAIN STREET GRAND JUNCTION, CO 81501  MOAA SCHOLARSHIP GOLF PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 815025020  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLERO SIS SOCIETY 900 SO UTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, CC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231  WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	TO PROVIDE MEDICAL SUPPORT TO THOSE W/O INSURANCE	2,000
PO BOX 3313 GRAND JUNCTION, CO 81502  MUSEUM OF WESTERN COLORADO PO BOX 20000 GRAND JUNCTION, CO 815025020  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SO UTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE FOR PROTECTION OF UNDEVELOPED LAND	2,000
PO BOX 20000 GRAND JUNCTION, CO 815025020  NATIONAL JEWISH HOSPITAL 1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE SCHOLARSHIP ASSISTANCE	500
1400 JACKSON ST ROOM M112 DENVER, CO 802069825  COLORADO CHAPTER MULTIPLE SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER, CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE SUPPORT FOR THE MUSEUM AND THE ARTS	500
SCLEROSIS SOCIETY 900 SOUTH BROADWAY DENVER,CO 80209  OSU FOUNDATION 850 SW 35TH STREET CORVALLIS,OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION,CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON,DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION,CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON,DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROMOTE HEALTH CARE	5,000
850 SW 35TH STREET CORVALLIS, OR 973334015  PARTNERS OF THE GRAND VALLEY 1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROMOTE MEDICAL RESEARCH	2,000
1169 COLORADO AVENUE GRAND JUNCTION, CO 81501  READING IS FUNDAMENTAL ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROMOTE HIGHER EDUCATION	500
ATTN DONATIONS PROCESSING WASHINGTON, DC 200095726  SALVATION ARMY PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE MENTORS FOR YOUTH	2,500
PO BOX 578 GRAND JUNCTION, CO 81502  SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROMOTE LITERACY	500
PO BOX 96231 WASHINGTON, DC 200906231  ST JUDE CHILDRENS HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650	TO PROVIDE SUPPORT FOR HOMELESS ASSISTANCE	8,000
501 ST JUDE PLACE MEMPHIS, TN 38105  SALVATION ARMY TOY DRIVE C/O MARINE CORPS 2502 HWY 650  T	TO PROVIDE MEDICAL CARE TO CLEFT PALATE PATIENTS	100
C/O MARINE CORPS 2502 HWY 650	TO PROMOTE HEALTH CARE	1,000
	TO PROVIDE TOYS FOR LOW- INCOME CHILDREN	4,000
Total		80,325

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNITED SERVICE ORGANIZATIONS 422 WHITE AVE SUITE 337 GRAND JUNCTION, CO 81501	NONE		TO PROMOTE WELFARE OF MILITARY PERSONNEL	1,000
UNIVERSITY OF COLORADO FOUNDATION 4740 WALNUT STREET BOULDER, CO 80301	NONE		TO PROMOTE HIGHER EDUCATION	500
VESTIBULAR DISORDERS ASSOCIATION PO BOX 13305 PORTLAND, OR 97213	NONE		TO PROMOTE MEDICAL RESEARCH	500
WESTERN COLORADO BOTANICAL GARDENS 641 STRUTHERS AVENUE GRAND JUNCTION, CO 81501	NONE		TO PROVIDE SUPPORT FOR BOTANICAL GARDENS	125
WESTERN COLORADO CENTER FOR THE ARTS 1803 NORTH 7TH STREET GRAND JUNCTION, CO 81501	NONE		TO PROMOTE THE ARTS	1,000
WESTERN COLORADO MATH AND SCIENCE CENTER 2660 UNAWEEP AVENUE GRAND JUNCTION, CO 81503	NONE		TO PROMOTE MATH AND SCIENCE EDUCATION	5,000
WESTERN COLORADO SUICIDE PREVENTION FOUNDATION PO BOX 4329 GRAND JUNCTION, CO 81502	NONE		TO PREVENT SUICIDE	1,000
MOUNTAIN STATES LEGAL FOUNDATION 2596 SOUTH LEWIS WAY LAKEWOOD,CO 80227	NONE		TO PROVIDE LEGAL SERVICES FOR LOW INCOME INDIVIDUALS	1,000
SUSAN G KOMEN RALLY FOR THE CURE 1835 FRANKLIN STREET DENVER, CO 80218	NONE		TO PROMOTE BREAST CANCER RESEARCH	1,000
WESTERN COLORADO COMMUNITY FOUNDATION 225 NORTH 5TH ST STE 505 GRAND JUNCTION, CO 81501	NONE		TO PROMOTE COMMUNITY CHARITIES IN WESTERN COLORADO	2,500
WESTERN SLOPE FOOD BANK OF THE ROCKIES 734 SCARLET DRIVE GRAND JUNCTION, CO 81505	NONE		TO PROVIDE FOOD TO LOW INCOME FAMILIES	1,000
WESTERN SLOPE HONOR FLIGHT PO BOX 3950 GRAND JUNCTION, CO 81502	NONE		TO HELP WORLD WAR II VETERANS TRAVEL TO MEMORIAL	3,000
Total				80,325

# **TY 2010 Accounting Fees Schedule**

Name: WILSON FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	750	0		0
INVESTMENT ADVISORY FEES	573	0		0

## **TY 2010 Investments Corporate Stock Schedule**

Name: WILSON FAMILY FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BANK OF AMERICA CORP	4,242	4,242
INVESTMENT COMPANY OF AMERICA	24,663	24,663
ROYAL GOLD INC	13,658	13,658
US GOLD CORP	81	81
AMCAP FUND INC	28,473	28,473
DAVIS N Y VENTURE FUND INC CLASS A	5,293	5,293
T ROWE PRICE MID CAP GROWTH FD	1,377	1,377
APPLIED MATERIALS CORP	11,240	11,240
STANDARD & POORS 500 DEPOS. RCPTS. TRUST	6,822	6,822
CAPITAL WORLD GROWTH AND INCOME FUND	129,007	129,007
GROWTH FUND OF AMERICA	28,464	28,464
WASHINGTON MUT INVS FD INC CLASS F	16,616	16,616
HOTCHKIS & WILEY MID CAP VALUE FUND	1,381	1,381
HARBOR FUND CAP APPRECIATION FUND INV CL	3,514	3,514
MARSICO FOCUSED EQUITIES FUND	3,107	3,107
HARBOR MID CAP GROWTH FUND	916	916
T. ROWE PRICE BLUE CHIP FUND	3,525	3,525
HARBOR INTERNATIONAL STOCK FUND	3,593	3,593
ADVISORS INNER CIRCLE NEW PERIMETER SMALL CAP FD	1,821	1,821
DREYFUS INTL FUNDS EMERGING MARKETS FD	1,685	1,685
HARBOR FD INTERNATIONAL GROWTH FUND	3,629	3,629
SECURITY EQUITY FUND	895	895
GOLDMAN SACHS FINL SQUARE MONEY MKT	410	410
PIMCO COMM REAL RETURN	1,316	1,316
PIONEER FUND	3,140	3,140
T. ROWE PRICE REAL ESTATE FUND	868	868
STRATTON SMALL CAP VALUE FUND	1,812	1,812
WASHINGTON MUTUAL INV FD	4,789	4,789
OPPENHEIMER DEVELOPING MARKETS FUND	864	864

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# **TY 2010 Other Expenses Schedule**

Name: WILSON FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PUBLICATION OF LEGAL NOTICE	28	0		0
MISCELLANEOUS	3	0		0

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# **TY 2010 Other Increases Schedule**

Name: WILSON FAMILY FOUNDATION

Description	Amount
UNREALIZED GAIN/(LOSS) ON INVESTMENTS	23,504
NONDIVIDEND DISTRIBUTIONS	12

### **TY 2010 Taxes Schedule**

Name: WILSON FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	46	0		0
FOREIGN TAX PAID	340	0		0