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

OMB No	1545-0052
20	10

Department of the Treasury Internal Revenue Service

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

For	calend	lar year 2010, or tax year beginning $07/01/10^{\circ}$, a	and ending $06/3$	0/11			
G	Check a	all that apply: Initial return Initial rel	turn of a former public	chanty		Final return	•
		Amended return Add	ress change	Name	change		
Na	ame of fo	pundation			A Emp	loyer identification nun	nber
Τ	HE	DAVE H. & REBA W. WILLIAMS			13	-338182 <u>1</u>	
F	'OUN	DATION			B Telep	phone number (see page 1	0 of the instructions)
Νι	ımber a	nd street (or P.O box number if mail is not delivered to street address	ss) Ro	om/suite	43	4-977-4420	
C	:/0	SILVERCREST, 614 E. HIGH ST.			C If exe	emption application is pend	ding, check here
Cı	ty or tow	n, state, and ZIP code			D 1. Fo	oreign organizations, chec	k here
	HAR	LOTTESVILLE VA 22902			2. Fo	oreign organizations meeti	ng the
H	Check	type of organization: $\overline{f X}$ Section 501(c)(3) exempt private	foundation		85	5% test, check here and a	tach computation 🕨 📗
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation			ate foundation status was	. I I
I F	air mai	rket value of all assets at J Accounting method:	X Cash Acc	rual	section	on 507(b)(1)(A), check hei	re . ▶ 📋
е	nd of y	ear (from Part II, col (c), Other (specify)				foundation is in a 60-mon	. 1 1
	ne 16)	▶ \$ 212,591 (Part I, column (d) must	be on cash basis)		unde	r section 507(b)(1)(B), che	eck here
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net in	vootmont	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		ome	income	purposes
	T .	the amounts in column (a) (see page 11 of the instructions))	0.45 0.4.1				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	245,014				
	2	Check ▶ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
a 1	5a	Gross rents					
່ ລີ ເປເຣີ levenue¯	b	Net rental income or (loss)	6,329				
e e	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 251, 343	0,329				
& Re⊍	7	Capital gain net income (from Part IV, line 2)		1	32,332		
	8	Net short-term capital gain			32,332	0	
Ĭ	9	Income modifications			••••••		
2	10a	Gross sales less returns & allowances					
\mathfrak{I}	Ь	Less: Cost of goods sold					
JANNE C	c	Gross profit or (loss) (attach schedule)			Ì	RECEIV	=n
Ž.	11	Other income (attach schedule)				THE OLIV	
200	12	Total. Add lines 1 through 11	251., 343	1	32,332	[X]	717
Du	13	Compensation of officers, directors, trustees, etc	0		I	WAY 2 2 2	PIZ 12
Sesued	14	Other employee salaries and wages				Ш	₩
ē	15	Pension plans, employee benefits				OGDEN	
×	16a	Legal fees (attach schedule)			<u></u>	<u> </u>	<u> </u>
e	b	Accounting fees (attach schedule) Stmt 1	5,000				5,000
.≥	С	Other professional fees (attach schedule) Stmt 2	95		95		
tra	17	Interest					
and Administrative Ex	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 3	959				50
Ē	19	Depreciation (attach schedule) and depletion					
Ad	20	Occupancy					
ď	21	Travel, conferences, and meetings				-	
ā	22	Printing and publications	-			-	
ing	23	Other expenses (att sch)					
ati	24	Total operating and administrative expenses.	6,054		95	0	5,050
Operating	25	Add lines 13 through 23 Contributions, gifts, grants paid	101,435		9.0	<u> </u>	101,435
Ō	26	Total expenses and disbursements. Add lines 24 and 25	107,489		95	0	
_	27	Subtract line 26 from line 12:	107,1303				100,100
	a	Excess of revenue over expenses and disbursements	143,854				
	b	Net investment income (if negative, enter -0-)	110,001		32,237		
	0	Adjusted net income (if negative, enter -0-)			_,,	0	
For		work Reduction Act Notice, see page 30 of the instructi	ons.	-		<u> </u>	990-PF (2010)
DAA	-	, p- g	-			σ	N. C
						•	0.

Part II		Ralanco Shoots Attached schedules and amounts in the description column	Beginning of year	End	nd of year	
_	r dr f i	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing		 		
	2	Savings and temporary cash investments	75,944	212,59	1 212,591	
ļ	3	Accounts receivable ▶ 5,616				
		Less allowance for doubtful accounts ▶		5,61	6	
- 1	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶		=		
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
l		disqualified persons (attach schedule) (see page 15 of the				
1		instructions)				
	7	Other notes and loans receivable (att. schedule)	-			
		Less: allowance for doubtful accounts ▶				
ş	8	Inventones for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ď	10a	Investments—U S and state government obligations (attach schedule)				
i	Ь	Investments—corporate stock (attach schedule)				
	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 ▶				
ł		Less accumulated depreciation (attach sch) ▶				
ı	15	Other assets (describe ► See_Statement 4)	909		ļ	
	16	Total assets (to be completed by all filers—see the				
4		instructions. Also, see page 1, item i)	76,853	218,20	7 212,591	
	17	Accounts payable and accrued expenses			4	
δί	18	Grants payable .	2,500		_	
∄	19	Deferred revenue .			4	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			4	
삅	21	Mortgages and other notes payable (attach schedule)			4	
-	22	Other liabilities (describe)	2 500			
-	23	Total liabilities (add lines 17 through 22)	2,500		<u> </u>	
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
ces	24	Unrestricted				
盲	25	Temporarily restricted				
Ba	26	Permanently restricted		-	-	
2		Foundations that do not follow SFAS 117, check here ▶ X			7	
.≒		and complete lines 27 through 31.				
Ž	27	Capital stock, trust principal, or current funds	•			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1	
set	29	Retained earnings, accumulated income, endowment, or other funds	74,353	218,20	7	
Š	30	Total net assets or fund balances (see page 17 of the			7	
Net Assets or Fund Balan		instructions)	74,353	218,20	7	
Ž	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	76,853	218,20	7	
	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 (mu	st agree with			
	end-c	of-year figure reported on prior year's return)		1	74,353	
2	Ente	amount from Part I, line 27a		2	143,854	
3	Othe	r increases not included in line 2 (itemize) ▶		3		
4		ines 1, 2, and 3		4	218,207	
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 (b), line 30		218,207	

	Losses for Tax on Investr			15 5501021			r age v
(a) List and describe the	e kind(s) of property sold (e.g., real esta se, or common stock, 200 shs MLC Co	ite,	onie .	(b) How acquired P—Purchase D—Donation	(c) Date :		(d) Date sold (mo , day, yr)
1a 420 SHS AMERIPRIS	SE FINL INC COM			P	12/0	4/08	01/11/11
b 660 SHS HALLIBURT				P	12/1		01/11/11
c 11,100 SHS ALCOA				P	04/1		04/07/11
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss)) minus (g)
a 25,369	-			7,400			17,969
ь 25,966				11,378			14,588
c 200,008				100,233			99,775
d							
е		ــــــــــــــــــــــــــــــــــــــ					- .
Complete only for assets showing ga	un in column (h) and owned by the (j) Adjusted basis as of 12/31/69	e foundation	(k) Exces	69 is of col (i) (j), if any		(k), but not	(h) gain minus less than -0-) or om col. (h))
_	43 0. 120 1100	-		(), ii diiy		•	17,969
b		+				<u> </u>	14,588
c		<u> </u>					99,775
d		-					
e		<u> </u>					
 Capital gain net income or (net capital Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, col If (loss), enter -0- in Part I, line 8 	If (loss), enter -0- as defined in sections 1222(5) and	in Part I, lır I (6):	ne 7		3		132,332
f section 4940(d)(2) applies, leave this p Was the foundation liable for the section f "Yes," the foundation does not qualify the section of the section o	4942 tax on the distributable amo	, ,	*	pase penod?			Yes X No
1 Enter the appropriate amount in each	• • • • • • • • • • • • • • • • • • • •			pefore making any er	itnes.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distribu			(c) of nonchantable-use as			(d) nbution ratio divided by col (c))
2009	15	3,387		75,	156		2.040915
2008		0,990		185,			1.787242
2007		8,765		391,			1.247314
2006	33	1,784		208,			1.590954
2005		7,156		42,	548		4.163674
2 Total of line 1, column (d)					2	_	10.830099
3 Average distribution ratio for the 5-ye number of years the foundation has it			5, or by the		3		2.166020
4 Enter the net value of nonchantable-	use assets for 2010 from Part X, I	ine 5			4		95,933
5 Multiply line 4 by line 3					5		207,793
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		1,322
7 Add lines 5 and 6					7		209,115
8 Enter qualifying distributions from Pa If line 8 is equal to or greater than lin		1b, and co	mplete that	part using a 1% tax i	ate. See t	he	106,485
Part VI instructions on page 18							

<u>Form</u>	990-PF(2010) THE DAVE H. & REBA W. WILLIAMS 13-3381821			Pa	age 4
Þa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			2,6	645
	here ▶ and enter 1% of Part 1, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	:			0
3	Add lines 1 and 2	T		2,6	645
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			2,6	645
6	Credits/Payments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 909				
b	Exempt foreign organizations—tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c 4,800				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments. Add lines 6a through 6d 7			5,	709
8	Enter any penalty 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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,		3,0	064
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 3,064 Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?	ļ	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		İ		
	of the instructions for definition)?		1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	ļ	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$		1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. > \$	-			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	_2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	37 / 7	4a		Χ
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_ 5		Χ
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	İ		.,	
_	conflict with the state law remain in the governing instrument?		-6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X\	'	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	Instructions) ► NY				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ا		
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	ļ	8b	<u>X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ī		
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page		_		v
40	27)? If "Yes," complete Part XIV	}	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				v
	names and addresses		10	י טר	<u>X</u>

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2010.)

Form **990-PF** (2010)

3b

4a

N/A

		. & REBA W. WILLIAMS		301021			Pa	ge o
Pa	irt VII-B Statements Regar	ding Activities for Which Forn	<u>n 4720 May Be R</u>	equired (conf	tinued)	т.		
5a	During the year did the foundation pay	or incur any amount to:				ŧ		
	(1) Carry on propaganda, or otherwise	e attempt to influence legislation (section	n 4945(e))? .	📙 ነ	∕es ∑ No			
		cific public election (see section 4955), o	or to carry on,		F-3	-		
	directly or indirectly, any voter reg			=	∕es ∑ No	ı		
		travel, study, or other similar purposes	•	. U'	∕es ∑ No	-		
		other than a charitable, etc , organization		EST.		[
		ction 4940(d)(2)? (see page 22 of the in		X	∕es ∐ No	f		
		n religious, charitable, scientific, literary,	or educational		(m)	Ī		
	purposes, or for the prevention of	•			∕es 🏻 No	İ		
b	• • • • • • • • • • • • • • • • • • • •	dany of the transactions fail to qualify u	•					
	=	ırrent notice regarding disaster assistan		e instructions)?	. —	5b	\longrightarrow	<u>X</u>
	• • •	ice regarding disaster assistance check	•		▶□	ŧ		
С	·), does the foundation claim exemption	from the tax	.				
	because it maintained expenditure res	• • • • •		. X	res ∐ No	ł		
	If "Yes," attach the statement required							
6a		ceive any funds, directly or indirectly, to	pay premiums		, []			
	on a personal benefit contract?	, ·., ·		LJ	Yes $\overline{\mathbb{X}}$ No	_		v
b		ay premiums, directly or indirectly, on a	personal benefit contr	ract?		6b		<u>X</u>
_	If "Yes" to 6b, file Form 8870			П,	, _[V] ,,			
	-	ne foundation a party to a prohibited tax			Yes X No			
		proceeds or have any net income attribi			N/A	7b		—
٤٠,		Officers, Directors, Trustees, F	-oundation wan	agers, nignly	Paid Employ	ees,		
4 1	and Contractors	undation managers and their compen	cation (can page 22	of the instruction				—
1 1	ist all officers, directors, trustees, to	undation managers and their compen	Sation (see page 22	The mistraction		<u> </u>		
	(a) Name of	- d - add	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit	(e) Exp	ense acc	count,
	(a) Name ar	id address	hours per week devoted to position	-0-)	plans and deferred compensation	other	allowand	es
	UP II SITITIMO	CDEENWICH	mpucmer.		Сотрепация	<u> </u>		
	VE H. WILLIAMS	GREENWICH	TRUSTEE					0
	5 ZACCHEUS MEAD LANE	CT 06831	2.00	0	<u>-</u>			0
	BA W. WILLIAMS	GREENWICH CT 06831	TRUSTEE 2.00			÷		0
13	5 ZACCHEUS MEAD LANE	C1 06831	2.00	<u>-</u>	· ·			
2	Compensation of five highest-naid a	employees (other than those included	on line 1 — see nag	e 23 of the instru	ctions)			
_	If none, enter "NONE."	imployees (other than those included	on me 1 — see pag	e 25 of the matru	ctionsj.			
			0.5711		(d) Contributions to			
	(a) Name and address of each en	aployee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense acc	
	• •		devoted to position		plans and deferred compensation	Oulei	allowand	.62
NC	NE							
	•							
	•	•		•				
					Ĭ .			
	· 	·	<u> </u>		<u> </u>			
					<u>L</u>			_
		•						
ota	I number of other employees paid over	\$50,000				•		0
					For	m 99 0	-PF (2010)

Form 990-PF (2	010) THE DAVE H. & REBA W. WILLIAMS 13-3	381821	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Mana	gers, Highly Paid Emp	loyees,
	and Contractors (continued)		
3 Five high	est-paid independent contractors for professional services (see page 23 of the instru		T
NOVE	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			1
			1-
	·		
Total number o	f others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
			T
	on's four largest direct chantable activities during the tax year. Include relevant statistical information suc nd other beneficiaries served, conferences convened, research papers produced, etc.	ch as the number of	Expenses
1 N/A			
,			
2		•	
		•	
3			
•			
	·	·	
4 .			
•			
Part IX-B	Summary of Program-Related Investments (see page 24 of the in	nstructions)	<u> </u>
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2	Total district	Amount
1 N/A			
			_ ···
2 .			
•	• •		
All other progra	m-related investments. See page 24 of the instructions		
3			

Total. Add lines 1 through 3

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

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore	eign f	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.,		
	purposes:		
а	Average monthly fair market value of securities	1a	16,336
b	Average of monthly cash balances	1b	81,058
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	97,394
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	97,394
4	Cash deemed held for chantable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	1,461
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	95,933
6	Minimum investment return. Enter 5% of line 5	6	4,797
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perati	ng
	foundations and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	4,797
2a	Tax on investment income for 2010 from Part VI, line 5 2, 645		
b	Income tax for 2010 (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	2,645 2,152
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,152
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,152
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,	ļ	
	line 1	7	2,152
Pa	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	106,485
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.,	i	
	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	106,485
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	106,485
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the founds	ation	

Pa	TARE Undistributed income (see page 26 of	the instructions)			
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7				2,152
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only				
	Total for pnor years. 20 , 20 , 20			· · · · · · · · · · · · · · · · · · ·	
3	Excess distributions carryover, if any, to 2010:				
	From 2005 178, 917				
a	•	1.			
D	• •	1		•	
С.	From 2007 473, 486	1			
d	From 2008 345, 756				
е	From 2009 150,539	T			
f	Total of lines 3a through e	1,486,758			
4	Qualifying distributions for 2010 from Part XII,	Ţ			
	line 4: ▶ \$ 106,485			•	
а	Applied to 2009, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)	i			
С	Treated as distributions out of corpus (Election				
_	required—see page 26 of the instructions)				
а	Applied to 2010 distributable amount				2,152
	Remaining amount distributed out of corpus	104,333			2/132
	Excess distributions carryover applied to 2010	104,333			<u> </u>
5	• • • • • • • • • • • • • • • • • • • •				
	(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	1,591,091			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				
е	Undistributed income for 2009. Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
•	4d and 5 from line 1. This amount must be				!
	distributed in 2011				0
_				· · · · · · · · · · · · · · · · · · ·	<u> </u>
7	Amounts treated as distributions out of corpus				1
	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) .	178,917			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	1,412,174			
10	Analysis of line 9				
а	Excess from 2006 338, 060				
b	Excess from 2007 473, 486	4			
c	Excess from 2008 345,756	7			
d	Excess from 2009 150, 539	1			
		1			
е_	Excess from 2010 104, 333	L	L		L

13-3381821

	art XIV Private Operating Fou			tructions and Dad		Page IV
	······································				VII-A, question 9	<u> </u>
ıa	If the foundation has received a ruling or			aung		
	foundation, and the ruling is effective for		- • •		1040()(0)	0(1)(5)
b	Check box to indicate whether the foundation		ating foundation desc		942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly	•				
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
_	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					-
J						
_	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		+			-
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	· ·	1			
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)		 	+	 	
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					ļ
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income		<u> </u>			
P	art XV Supplementary Inform	nation (Complet	e this part only i	f the foundation h	nad \$5.000 or mor	e in assets at
- 1	any time during the y	•	•		40,000 01	dood
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	-	are than 2% of the total	al contributions received	t by the foundation	
a	before the close of any tax year (but only					
	See Statement 5	in they have withinto	ited more triair \$5,000	n. (See Section 507 (d)(.	۷., ا	
_	List any managers of the foundation who	100/ as mass of	the steek of a corner	ation (or an aqually larg	no nortion of the	-
b			=		ge portion of the	
	ownership of a partnership or other entity	() of which the founda	ation has a 10% or gre	eater interest.		
_	N/A					·
2	Information Regarding Contribution, G					
	Check here \blacktriangleright \overrightarrow{X} if the foundation only					
	unsolicited requests for funds. If the four	idation makes gifts, g	rants, etc. (see page	28 of the instructions) t	o individuals or	
	organizations under other conditions, con	mplete items 2a, b, c	, and d.			
а	The name, address, and telephone num	ber of the person to v	vhom applications sho	ould be addressed:		
	N/A					
_						
b	The form in which applications should be	submitted and inform	mation and materials t	they should include		
	N/A			-		
С	Any submission deadlines:					
-	N/A					
d	Any restrictions or limitations on awards,	such as by geograph	nical areas charitable	fields, kinds of institute	ons or other	····
u	factors	such as by geograpi	non areas, criantable	noido, kindo or moditur	ono, or outer	
	N/A					
	11/13					

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient				
a Paid dunng the year See Statement 6				101,435		
Total		· · · · · · · · · · · · · · · · · · ·	▶ 3a	101,43		
b Approved for future payment N/A						
Total			▶ 3b			
				222.55		

Part XVI-A	Analysis of Income-Producing Ac	tivities				
	ounts unless otherwise indicated		d business income (b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of
1 Program se	ervice revenue:					the instructions)
a	·					
b			1			
		-	-			
		-		1		
		- }		+		
' 	-44			+		
	nd contracts from government agencies					-
	p dues and assessments			+		
	savings and temporary cash investments			14		
4 Dividends	and interest from securities .					
5 Net rental i	ncome or (loss) from real estate:					
a Debt-fi	nanced property					
b Not de	bt-financed property ·	L				
6 Net rental i	ncome or (loss) from personal property					
7 *Other inves						
	ss) from sales of assets other than inventory			18	6,329	
	e or (loss) from special events			+	3,022	
	t or (loss) from sales of inventory					
				1		
	nue: a	-		+		
		-		-		
		-		-		
d						
e		-				
12 Subtotal A	dd columns (b), (d), and (e)			0	6,329	
13 Total. Add	line 12, columns (b), (d), and (e)				13	6,329
	t in line 13 instructions on page 29 to verify calcula				<u></u>	
Part XVI-E	Relationship of Activities to the A	Accomplishm	nent of Exempt I	ourpose	es	
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur instructions)					
N/A						
						·
					,·- <u>-</u>	
						
			· · · · · · · · · · · · · · · · · · ·		·	
						
		-				
					<u>-</u> <u>-</u>	- 0 - 0
						_
	-					
						. · ·
		V				

		Exempt	Organiza	ations								
1 Did					ge in any of the foll	owing with any o	ther organization des	cnbed			Yes	No
	_		-		-		ction 527, relating to				:	
org	anızation	s?										ĺ
a Tra	nsfers fro	m the repo	orting found	ation to a no	nchantable exemp	ot organization of	f .					ĺ
(1)	Cash									1a(1)		X
(2)	Other as	sets								1a(2)		X
b Oth	ner transa	ctions:										ĺ
(1)	Sales of	assets to a	a nonchanta	able exempt	organization					1b(1)		X
(2)	Purchas	es of asset	ts from a no	nchantable	exempt organization	on				1b(2)		X
(3)	Rental o	f facilities,	equipment,	or other ass	sets .					1b(3)		X
(4)	Reimbui	sement an	rangements	3						1b(4)		<u>X</u>
(5)	Loans o	r Ioan guara	antees		·	ē				1b(5)		X
(6)	Perform	ance of ser	rvices or me	embership oi	r fundraisıng solıcıt	tations	·			1b(6)		Χ_
c Sh	aring of fa	acılıtıes, eq	uipment, ma	ailing lists, o	ther assets, or pai	d employees				1c		_X_
d If th	ne answe	r to any of	the above is	s "Yes," com	plete the following	schedule Colu	mn (b) should always	show the fa	ıır market			
val	ue of the	goods, oth	er assets, o	or services gi	iven by the reporting	ng foundation If	the foundation receiv	ed less thar	ı faır market			
val	ue in any	transaction	n or sharing	arrangemer	nt, show in column	(d) the value of	the goods, other asse	ets, or servi	ces received			
(a) Lir	ne no	(b) Amour	nt involved	(c) Name	of nonchantable exen	npt organization	(d) Description of	transfers, tra	nsactions, and	sharing arrange	ements	
N/A												
												
					,		· · · · · · · · · · · · · · · · · · ·					
		_										
		-										
					<u> </u>							
										,		
										····	_	
			•	-			exempt organization	S		\Box .	177	1
				-	than section 501(c	c)(3)) or in section	n 52/?	•		. L Y	es X	No
D 11 "			ollowing sci	neaule.	(h) Tuna at a			(a) Dagger	tion of relationsh			—
N/Z		Name of org	janization		(b) Type of o	rganization		(c) Descrip	tion of relationsh	пр		
IN / Z												
					-				 -			
		· · · ·										
					-							
——Т	. I la da a a a			45-44 1 5-4						lancidadan an		
	belief, it is	naities of per s true, correc	jury, i deciare t, and comple	e that i have ex eclaration	kamined this return, ir n of preparer (other th	ncluding accompan nan taxpayer o <u>r</u> fid _t	ying schedules and state (ciary) is based on all info	ments, and to irmation of wh	nich preparer ha	s any knowled	a ge	
Sign	N	1901	and I	Us in	•	572/	,	TRUS				
Here	Sign	ature of office	er or trustee			Date	<u>-</u>	Title	105			
		pe preparer								Date		
Paid	-mn/1)	rpe preparer	o Hallie			Preparer's signa	K.A. We	10	_	Date	Check	
	KEVIL	1 A WE	TIS C	DΔ		אבעדאז א	•		_	4/30/12	self-em	ployed
•			Silve		Financia	KEVIN A. al Servi				P00894	704	
Use Only		name 🕨 _			Street	T SELAT	ces, IIIC.		PTIN	11-246		
	rimm's a	address 🟲			ville, VA	22902		ŀ		434-97		
	<u> </u>		Cilall	<u>.occes</u> v	VIIIE, VA	22302			Phone no	Form 99		
										rorm 33	リーア ア	(2010)

DAA

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

Department of the Treasury Internal Revenue Service

Name of the organization

THE DAVE H. & REBA W. WILLIAMS

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

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

FOUNDATION 13-3381821 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Nàme of organization

THE DAVE H. & REBA W. WILLIAMS

Employer identification number

13-3381821 Part I Contributors (see instructions) (a) (c) (d) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 1 DAVE H. WILLIAMS Person 135 ZACCHEUS MEAD LANE **Payroll** 245,014 Noncash GREENWICH CT 06831 (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (c) (a) (b) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (b) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution)

Name of organization
THE DAVE H. & REBA W. WILLIAMS

Employer identification number

13-3381821

(a) No. from Part I	(b) Description of noncash property given	(c) MV (or estimate) see instructions)	(d) Date received
1	420 SHS AMERIPRISE FINANCIAL INC		
		\$ 25,070	01/10/11
a) No. from Part I	(b) Description of noncash property given	(c) MV (or estimate) see instructions)	(d) Date received
1	660 SHS HALLIBURTON CO. COM.		
		\$ 25,139	01/10/11
a) No. from Part I	(b) Description of noncash property given	(c) MV (or estimate) see instructions)	(d) Date received
1	11,100 SHS ALOCA INC. COM.		
	·	\$ 194,805	03/30/11
(a) No. from Part I	(b) Description of noncash property given	(c) MV (or estimate) see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) MV (or estimate) see instructions)	(d) Date received
		\$	

(c)

FMV (or estimate)

(see instructions)

\$

(d)

Date received

(a) No.

from

Part I

(b)

Description of noncash property given

SILVERCREST ASSET MANAGEMENT GROUP LLC REALIZED GAINS AND LOSSES

Dave & Reba W. Williams Foundation UAD 12/12/86 From 07-01-10 Through 06-30-11

							GAIN O	R LOSS
OPEN DATE	CLOSE DATE	QUANTITY	SECURITY	Cost Basis	AMORT. OR	PROCEEDS	SHORT TERM	LONG TERM
12-04-08	01-11-11	420	AMERIPRISE FINL INC	7,400	ı	25,369		17,969
12-15-08	01-11-11	660	HALLIBURTON CO COM	11,378	1	25,966		14,588
04-15-09	04-07-11	11,100	ALCOA INC COM	100,233		200,008		99,775
TOTAL C	AINS						0	132,331
TOTAL L							0	0
				119,012	. 0	251,343	0	132,331
TOTAL R	EALIZED	GAIN/LOSS	132,331					

The Dave H. & Reba W. Williams Foundation 13-3381821 Form 990-PF Tax Year 2010

Statement Regarding Expenditure Responsibility Over Certain Grants

The Dave H. & Reba W. Williams Foundation ("the Foundation") donated \$10,000 on April 5, 2011 to Print Quarterly Publications ("Print Quarterly"), a British Registered Charity located in London. This donation qualifies as a grant made to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2). However, the Foundation has maintained expenditure responsibility in accordance with Regulation 53.4945(d) (as outlined below) and therefore, the Foundation is exempt from any tax on this expenditure under Internal Revenue Code Section 4945.

The Foundation exists primarily for the support of other public charitable organizations in their charitable, scientific, literary or educational purposes. Print Quarterly is a Registered Charity in England (No. 1007928), as accepted by the Charity Commissioners, and a Company Limited by Guarantee, registered in England under No. 2677762 (VAT No. GB 564 3431 46). Print Quarterly produces an international journal dedicated to the art of the print form and releases the journal in quarterly installments.

Consistent with the Foundation's charitable support goals, the Foundation's grant to Print Quarterly of \$10,000 was instructed to be spent on Print Quarterly's primary charitable activity, the publication of print art journals.

The Foundation has received reports from Print Quarterly that the entire grant has been spent solely for the purpose for which it was made:

Print Quarterly has confirmed that the \$10,000 grant was spent towards the printing and binding of its September and December 2011 journal issues by Butler Tanner & Dennis, pre-press production costs from The Burlington Magazine, and distribution costs from Pitney Bowes. As evidence that it was spent for instructed purposes, Print Quarterly provided the Foundation with invoices totaling more than £7,352 (\$12,275). Print Quarterly has stated that the entire grant of \$10,000 went towards these payments.

Therefore, the Foundation believes that it has exerted all reasonable efforts and established adequate procedures with respect to its grant to Print Quarterly in order to be exempt from tax on this expenditure.

13-3381821

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	_	Fair Market Value
PREPAID FEDERAL EXCISE TAXES-990PF	\$ 909	\$	\$	
Total	\$ 909	\$ 0	\$_	0

13-3381821

Federal Statements

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

Name of Manager	 Amount
DAVE H. WILLIAMS REBA W. WILLIAMS	\$ 245,014
Total	\$ 245,014

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Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

3,000 135 1,500 5,000 5,000 1,500 1,500 2,000 5,000 500 1,000 200 500 25,000 1,000 10,000 2,500 12,000 8,000 Amount Purpose GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL Status PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC PUBLIC Uni PO Box 191, 7300 State Hi 1030 15th Street, NW, Sui Box Box 520 West 27th Street, P.0. La Grua Center, P.O. Pequotsepos Road Strickland Road The Mercantile Library Ce 17 East 47 Street Mercantile Library Ce 17 East 47 Street The Mercantile Library Ce 17 East 47 Street East 47 Street Relationship Museum Drive One Museum Drive Address La Grua Center, The Metropolitan Museum o 1000 5th Avenue West 44 St. Friends of Robinson Garde 1008 Elden Way P.O> Box 7458 Mystic Area Shelter & Hos 119 High St. High St. NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE Denison Pequotsepos Natur 109 Mystic CT 06355 One 268 Mystic Area Shelter & Hos 119 69 17 Greenwich CT 06830-7100 Greenwich CT 06830-7100 New York NY 10001-5548 Beverly Hills CA 90210 Business Executives for N The University of Texas a S American Associates of th Greenwich Historical Soci American Patrons of TATE Cooperstown NY 13326 Austin TX 78713-7458 Stonington CT 06378 Washington DC 20005 Stonington CT 06378 The Mercantile Library New York NY 10028 New York NY 10036 New York NY 10017 New York NY 10017 New York NY 10017 New York NY 10017 Cos Cob CT 06807 Address Mystic CT 06355 Glimmerglass Opera Grua Foundation Grua Foundation Bruce Museum The Bruce Museum Name The The La

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Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name Address	Address Relationship	Status	Purpose	Amount
Sarden Conservancy - Cold Spring NY 10516	The Garden Conservancy - P.O. Box 219 Cold Spring NY 10516 NONE	PUBLIC	GENERAL	500
Metropolitan Museum o New York NY 10028	Metropolitan Museum o 1000 5th Avenue New York NY 10028	PUBLIC	GENERAL	200
The Worcester Art Museum Worcester MA 01609	55 Salisbury Street NONE	PUBLIC	GENERAL,	5,400
	52 Kelso Place			
	NONE		GENERAL	10,000
				101,435

Form 8868 (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of I		▶ File	a separate	application for each return.			1	
		utomatic 3-Month Extension, comp	olete only P	art I and check this box				▶ 🛛
•	_	•	•	complete only Part II (on page 2 of the	ns form)			_
-	-			tic 3-month extension on a previously			•	
Electronic fi	lina (e-file). Y	ou can electronically file Form 8868 i	f vou need a	a 3-month automatic extension of time	to file (6	months	s for	
			-	3-month extension of time. You can ele				
•	-	•		or Part II with the exception of Form 88		-		
•				which must be sent to the IRS in paper	-			
				irs gov/efile and click on e-file for Cha			ts	
Part I				submit original (no copies nee				
A corporation	required to fil	e Form 990-T and requesting an auto	omatic 6-mo	onth extension-check this box and con	plete			
Part I only	•							▶ 🗌
All other corp	orations (inclu	iding 1120-C filers), partnerships, RE	MICs, and	trusts must use Form 7004 to request	an exter	ision of	time	_
to file income	tax returns							
Type or	Name of ex	empt organization			Emplo	yer ider	ntification	number
print THE DAVE H. & REBA W. WILLIAMS								
File by the	by the FOUNDATION 13-3381821							
due date for filing your		reet, and room or suite no. If a P.O. b						
return See		LVERCREST, 614 E.			_			
Instructions		r post office, state, and ZIP code Fo OTTESVILLE VA	22902					
Enter the Ref	<u> </u>	ne return that this application is for (fi	•	-	· 			04
Application			Return	Application				Return
Is For Code Is For				Application				-
								Code 07
Form 990-6	21		01 02	Form 990-T (corporation) Form 1041-A				08
Form 990-8			02	Form 4720	_			09
Form 990-F			03	Form 5227				10
		or 409(a) to (at)			_			11
		or 408(a) trust)	05 06	Form 6069				12
_ FORIT 990-1	(trust other ti	SILVERCREST	[00_	FOITH 6670	_			12
		614 E. HIGH ST.						
• The books	are in the care of	of CHARLOTTESVILLE				7.	/A 2290	12
		4-977-4420	EAVAG	o. ► 434-977-3944		V	A 2230	12
•		not have an office or place of busine						ightharpoonup
_		turn, enter the organization's four dig			his is			
	•	· • • • • • • • • • • • • • • • • • • •	•	check this box				
	group, check		• .	check this box	CII			
		INs of all members the extension is for a corporation of the corporation in the corporation is for a corporation of the corporation in the corporation in the corporation is for a corporation in the corpo		o file Form 900 T) extension of time				
				organization named above. The extension	ion io			
			um for the t	organization named above. The extens	5101115			
	organization's							
	calendar year		10/20/	1 1				
► X	tax year begir	nning $07/01/10$, and ending (16/30/	11				
2 If this ta	ax year entere	d in line 1 is for less than 12 months,	check reas	on Initial return Final return				
	hange in acco							
3a If this a	pplication is fo	r Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	enter the tentative tax, less any				
	• -	See instructions	· , -		3a	\$_		5,709
		r Form 990-PF, 990-T, 4720, or 6069	enter any	refundable credits and				
		nts made. Include any prior year over	-		3ь	\$	_	909
				this form, if required, by using EFTP:				
		y Payment System) See instruction		·	30	S		4 800

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 8868 (F	Rev. 1-2011)					Page 2		
• If you are	filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check this t	юх		► X		
	omplete Part II if you have already been granted ar				1868.	—		
	filing for an Automatic 3-Month Extension, comp							
Part II	Additional (Not Automatic) 3-Month			al (no d	copies need	ded).		
Туре ог	Name of exempt organization				er identificat			
print	THE DAVE H. & REBA W. W	TT.T.TAM	9	Employer recommended frames				
File by the	FOUNDATION		~ l	13_3	381821			
extended	Number, street, and room or suite no. If a P.O. t	nov soo incl	nuctions	10 0	301021			
due date for	c/o SILVERCREST, 614 E.	-						
filing your								
return See instructions	City, town or post office, state, and ZIP code. For							
	CHARLOTTESVILLE VA	2290	<u> </u>					
Enter the Ret	turn code for the return that this application is for (f	ile a separa	e application for each return)		••••	04		
Application	n	Return	Application			Return		
ls For		Code	Is For			Code		
Form 990		01		·· <u></u>				
Form 990-E	3L	02	Form 1041-A	•		08		
Form 990-E		03	Form 4720			09		
Form 990-F		04	Form 5227			10		
	(sec. 401(a) or 408(a) trust)	05	Form 6069		·	11		
	(trust other than above)	06	Form 8870			12		
	ot complete Part II if you were not already grante			ısly filed	Form 8868.			
	SILVERCREST			,				
	614 E. HIGH ST.							
The books	are in the care of ▶CHARLOTTESVILLE				. VA 2	2902		
Telephon	e No.▶ 434-977-4420	EAY No	▶ 434-977-3944	-	*** 2	2,92,		
• If the ora:	anization does not have an office or place of busing	oon in the Li	eited States, shock this have					
	or a Group Return, enter the organization's four dig					🗀		
	group, check this box		up, check this box and a	attach a				
	ames and EINs of all members the extension is for							
4 I reque:	st an additional 3-month extension of time until 5	7.19/12	N1 /10	•				
	endar year , or other tax year beginnin			i				
	x year entered in line 5 is for less than 12 months,	cneck reaso	ort Initial return I Final return					
	hange in accounting period							
7 State in	detail why you need the extension		.,, . ,. ,					
ˈYadi	itional time is requested	ı to ga	ither intormation t	o br	epare a	combrete		
aṇḍ	accurate return.							
			 					
8a if this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	nter the tentative tax, less any					
nonrefu	ndable credits. See instructions.			8a	\$	<u>2,645</u>		
b If this a	pplication is for Form 990-PF, 990-T, 4720, or 606	9, enter any	refundable credits and	1	1			
estimat	ed tax payments made. Include any prior year over	rpayment all	owed as a credit and any					
amount	paid previously with Form 8868.			8b	\$	<u>5,709</u>		
c Balance	e Due. Subtract line 8b from line 8a Include your p	payment with	this form, if required, by using EFTPS	3				
(Electro	nic Federal Tax Payment System). See instruction	is.		8c	\$	0		
	Sig	gnature a	nd Verification					
Under penalties true, correct, an	of perjury, I declare that I have examined this form, included domplete, and that I am authorized to prepare this form	ing accompan	ying schedules and statements, and to the b	est of my	knowledge and t	relief, it is		
	K.A Wdl		COA - 20000000					
Signature	5 4. Wax	Ti-	ile > CPH PREVARER		Date ► (01/31/12		
						368 (Rev 1-2011)		