See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

| | Tax year | Prior 3 years | | | (e) Total |
|---|---|---|---|---|---|
| | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter:
(1) Value of all assets
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test—enter:
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)
(3) Largest amount of support from an exempt organization
(4) Gross investment income

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**Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see page 28 of the instructions.)**

1 **Information Regarding Foundation Managers:**

a 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). (See section 507(d)(2).)

W.L. WILLIAMS FOUNDER & SOLE CONTRIBUT

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N.A.

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed

W.L. WILLIAMS 415 EATON WAY

b The form in which applications should be submitted and information and materials they should include

NO FORMS N.A.

c Any submission deadlines

N.A.

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

NONE

**Part XV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business) | 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 |
|---|---|---|---|---|
| a Paid during the year 18,500 | | | | |
| 1794 Meetinghouse<br>New Salem, MA | | 501(c) 3 | Support of Services<br>PROMOTION OF ARTS | 2,000 |
| Saint Joseph's Church<br>Boynton Beach, Fla | | 501 (C).(3) | Support of Church | 2000 |
| Eagle Brook School<br>Deerfield, Ma. | | 501(c) 3 | Support of Services | 3000 |
| Bryn Mawr Rehab<br>Paoli, Pa. | | 501 (c) 3 | Support of Services | 500 |
| Stages of Life | | 501 (c) 3 | Support of Services<br>LITTERACY PROGRAMS<br>THEATRE / ARTS | 5,000 |
| Hall of Fame<br>South Boston, Va | | 501(C) 3 | Support of Services<br>Scholarship Awards | 1,000 |
| SVHEC<br>South Boston, Va. | | 501 (c) 3 | Support of Services<br>LITTERACY PROGRAMS<br>ADULT EDUCATION | 5,000 |
| TOTAL CONTRIBUTIONS: | | | | $ 18,500 |



| | | | | |
|---|---|---|---|---|
| Total | | | ▶ 3b | |

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WILLIAMS FAMILY FOUNDATION
415 EATON WAY
WEST CHESTER PA 19380

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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of Officer or Trustee Date

Sole Contractor
Title