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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2014

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calend	lar year 2014 or tax year beginning , a	and ending				
	me of fou	iams Family Charitable			A Emplo	oyer identification number	
		dation			62	-1495295	
		street (or PO box number if mail is not delivered to street address)	Ro	om/surte		none number (see instructions	s)
		Cantrell Avenue			61!	<u>5-297-5164</u>	
		, state or province, country, and ZIP or foreign postal code			C If exer	nption application is pending,	check here
		ville TN 37215					
G (Check a		m of a former public cl	hanty	D 1. Fo	reign organizations, check he	ere •
		Final return Amended				reign organizations meeting t	
		Address change Name cha			85	% test, check here and attach	computation
<u>H</u> (Check t	type of organization. X Section 501(c)(3) exempt private	foundation			ate foundation status was tem	ninated under
	Section		le private foundation		sectio	n 507(b)(1)(A), check here	▶ ∐
I F	aır mar	ket value of all assets at J Accounting method:	X Cash Acc	rual	I .	foundation is in a 60-month te	
		ear (from Part II, col (c), Uther (specify)			under	section 507(b)(1)(B), check h	ere
	ne 16) l		be on cash basis)		L	<u> </u>	
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	vestment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incoi		income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			5 //	20 1 29 1	(cash basis only)
	2	Check ► X if the foundation is not required to attach Sch B		 		, , , , , , , , , , , , , , , , , , ,	
	3	Interest on savings and temporary cash investments	149	<u></u>	149	······	
	4	Dividends and interest from securities	12,519		12,519		
	5a	Gross rents					
ø.	Ь	Net rental income or (loss)	, , , , , , , , , , , , , , , , , , , ,	*	, , , , , , , , , , , , , , , , , , , ,	i. '\ ':	, , ;
Ž	6a	Net gain or (loss) from sale of assets not on line 10 Stmt 1	875	7."	. ".		
Revenue	b	Gross sales price for all assets on line 6a 12,377	V		٠	-	~~~ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
æ	7	Capital gain net income (from Part IV, line 2)			338		
	8	Net short-term capital gain	Κ /,		٠ ,٠	0	,, ` ;
	9	Income modifications			· , · ,		
	10a	Gross sales less returns and allowances		; ;	"",	, v	
	b	Less Cost of goods sold	\$ 1. 5 L			, , , , , , , , , , , , , , , , , , , ,	
	С	Gross profit or (loss) (attach schedule)		, , ,	, .		<u> </u>
	11	Other income (attach schedule) CFIVED		<u> </u>			
	12	Total. Add lines 1 through 11	13,543		13,006	0	<u> </u>
Ś	13	Compensation of officers, directors, trustees, etc.	0				
38	14	Other employee salaries and wages	 		_		<u></u>
xpenses	15	r ension plans, employee benefits			·		
Ĕ	16a	Legal fees (attach schedule), GDEN, UT Accounting fees (attach schedule)					
	b	Accounting fees (attach schedule).	1 660		1 660		
	C	Other professional fees (attach schedule) Stmt 2 Interest	1,662	 	1,662		
str	17 18	Taxes (attach schedule) (see instructions)		 			
∹Ë	19	Depreciation (attach schedule) and depletion	 -				
<u>~</u> E	20	Occupancy		 			Timb in and I have made
Ž₹	21	Travel, conferences, and meetings		 			
2	22	Printing and publications					
Operating and Administrative	23	Other expenses (att. sch.) Stmt 3					
ZĒ	24	Total operating and administrative expenses.					
		Add lines 13 through 23	1,662)	1,662	o	o
ڠؚڒ	25	Contributions, gifts, grants paid	31,200				31,200
20	26	Total expenses and disbursements. Add lines 24 and 25	32,862	1	1,662	0	
	27	Subtract line 26 from line 12:	44 : 4 4	, , , , ,	\$, V 33 X	77 ()
	a	Excess of revenue over expenses and disbursements	-19,319		.,,		
	b	Net investment income (if negative, enter -0-)			11,344		
_	<u>c</u>	Adjusted net income (if negative, enter -0-)		> % , .		0	1

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399,032

398,999

33

3

4

5

6

3 Other increases not included in line 2 (itemize) ▶

Decreases not included in line 2 (itemize) ▶ See Statement 5

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

Add lines 1, 2, and 3

***************************************	Family Charitable		62-1495295			Page
(a) List and descrit	the Losses for Tax on Investment the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)	nt Income	(b) How acquired P – Purchase D – Donation	(c) Date acq (mo , day,		(d) Date sold (mo , day, yr)
1a ML acct #04012			P	07/09	/13	07/01/14
ь Merrill Lynch #	04010					
С						
<u>d</u>						
<u>•</u>			<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain o (e) plus (f) r	
a 10,062			9,929			133
b 205						205
С						
d						
е						
Complete only for assets showing	gain in column (h) and owned by the for	undation on 12/31/6	59			h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	s of col (I)	•	k), but not le Losses (fror	ess than -0-) or m col. (h))
	as of 1251705		(j), if any			133
_a b						205
c					_	
d					_	
θ						
If gain, also enter in Part I, line 8, Part I, line 8	If gain, also enter in F If (loss), enter -0- in F s) as defined in sections 1222(5) and (6) column (c) (see instructions). If (loss), en der Section 4940(e) for Reduce	Part I, line 7		3		338 133
If section 4940(d)(2) applies, leave this Was the foundation liable for the secting If "Yes," the foundation does not qualify	foundations subject to the section 4940(s part blank. ion 4942 tax on the distributable amount fy under section 4940(e) Do not comple each column for each year, see the instru	of any year in the t	pase penod?			Yes X No
(a)	" 	Cuons belore maki	(c)		_	(d)
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	e of nonchantable-use asset	s		bution ratio vided by col. (c))
2013	37,	899	450,	423		0.084143
2012		800	451,			0.05717
2011		535	466,			0.046144
2010		350	461,			0.080879
2009		947	403,	731		0.08903
2 Total of line 1, column (d)3 Average distribution ratio for the 5	i-year base period – dıvıde the total on lır	ne 2 by 5, or by the	,	2		0.357372
number of years the foundation ha	as been in existence if less than 5 years			3_	 	0.071474
4 Enter the net value of nonchantab	ole-use assets for 2014 from Part X, line	5		4_		426,64
5 Multiply line 4 by line 3				5		30,494
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		11:
7 Add lines 5 and 6				7		30,60

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

31,200

Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		•	12	
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	13	,	,	1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	 			113
	here X and enter 1% of Part I, line 27b		y,	3/	•
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of		,		
	Part I, line 12, col. (b).	ļ			
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	<u> </u>			113
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				113
6	Credits/Payments:			ŝ	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 627		5 () 5		
b	Exempt foreign organizations – tax withheld at source	1.	, £		`
¢	Tax paid with application for extension of time to file (Form 8868)			`	. 1
d	Backup withholding erroneously withheld 6d 5	J	3.3		1,74
7	Total credits and payments. Add lines 6a through 6d	↓		(<u> 627</u>
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				<u>514</u>
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 514 Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities		yn maig		
1a	Dunng 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?		1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	_			
	Instructions for the definition)?	N/A	1b		******
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			411	·
	published or distributed by the foundation in connection with the activities.		 	1.	a
C	Did the foundation file Form 1120-POL for this year?	N/A	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		 	50	
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				2
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		`	٠٠٠,	,
	on foundation managers. ▶ \$		ļ., I	٠. ١	€:
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities			,	,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		│ `┃		im
	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?	,_	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.		.	١,	3
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				•
	By language in the governing instrument, or		l) I	`	,
	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	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 XV	′	7	X	dami.
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			, ,	1/ 3
	TN			<u> </u>	
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	X	1881153
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		` .	>	123
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"				-
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		_		₹.
	names and addresses		10	O DE	X

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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THE PERSON NAMED IN	1 990-PF (2014) WIIIIams Fa			495295		Page	2
P		ling Activities for Which Fo	orm 4720 May Be R	equired (conti	nued)		-
5a	During the year did the foundation pay	*			_		
	(1) Carry on propaganda, or otherwise	•	, ,,	<u> </u>	es X No		,
	(2) Influence the outcome of any speci		5); or to carry on,				
	directly or indirectly, any voter regis			<u> </u>	es X No	1 1	
	(3) Provide a grant to an individual for			∐ Y	es 🛚 X No		
	(4) Provide a grant to an organization of		ration described in			1,4	
	section 4945(d)(4)(A)? (see instruc			Y	es X No		
	(5) Provide for any purpose other than	religious, chantable, scientific, litera	ary, or educational			. I 44 -	
	purposes, or for the prevention of c	ruelty to children or animals?		Y	es X No		
b	If any answer is "Yes" to 5a(1)–(5), did	any of the transactions fail to qualif	y under the exceptions d	escribed in		. 1/2	•
	Regulations section 53 4945 or in a cur	rent notice regarding disaster assis	tance (see instructions)?	•	N/A	5b	-
	Organizations relying on a current notice	e regarding disaster assistance che	eck here		▶ ∐ [1 .	`
C	If the answer is "Yes" to question 5a(4)	, does the foundation claim exempt	ion from the tax	. —			
	because it maintained expenditure resp	onsibility for the grant?		N/A 📙 Y	'es 🗌 No	1 1	
	If "Yes," attach the statement required	by Regulations section 53 4945-5(c	1)				
6a	Did the foundation, during the year, rec	eive any funds, directly or indirectly	, to pay premiums				٠
	on a personal benefit contract?			Y	'es X No		
b	Did the foundation, during the year, pay	premiums, directly or indirectly, or	a personal benefit contr	act?	ļ	6b X	**
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the	e foundation a party to a prohibited	tax shelter transaction?	\	es X No	- 、東ット ♡	:
	If "Yes," did the foundation receive any				N/A	7b	_
P		fficers, Directors, Trustees	s, Foundation Mana	agers, Highly	Paid Employe	ees,	
	and Contractors						_
1 1	List all officers, directors, trustees, for	undation managers and their com	pensation (see instruc	tions).		1	_
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,	
	(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred	other allowances	
			devotes to position		compensation		_
Jo	oseph P. Williams	Nashville	Trustee				
92	24 Cantrell Ave.	TN 37215	0.00	0	0		<u>0</u>
Ma	ary H. Williams	Nashville	Director				
92	24 Cantrell Ave.	TN 37215	0.00	0	0		<u>0</u>
					_		_
			1			İ	
					_ _	l	_
2	Compensation of five highest-paid e "NONE."	mployees (other than those inclu	ided on line 1 - see insi	tructions). It non	e, enter		
	NONE.		<u> </u>		(d) Contributions to	T	-
	(a) Name and address of each employed	a pout more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expense account,	
	(a) Name and address of each employer	e paid more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	other allowances	
NTC	ONE				отпроподает		_
NC	/ME					İ	
_						<u> </u>	-
				ļ	a I	į	
							-
_	·			-		†	_
				1]	
	·						-
Γota	I number of other employees paid over \$	550,000		<u> </u>		• •	5
	, , , , , , , , , , , , , , , , , , , ,		-		F	orm 990-PF (201	_
					•		

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	ut Officers, Directors, Trustees, Fo	undation Managers, Highly Paid I	Employees,
and Contractors			
	contractors for professional services (see in		
NONE	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 sequess		
Part IX-A Summary of D	irect Charitable Activities		
	activities during the tax year. Include relevant statistical information	ation such as the number of	Expenses
1 N/A			
•			
2			
			
3			
4			
Part IX-B Summary of P	rogram-Related Investments (see in	structions)	
	ents made by the foundation during the tax year on lines 1 and	2	Amount
1 N/A			
2			-
-			
All other program-related investments. See instruc	tions		
3			
			
Total. Add lines 1 through 3		>	

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	31,200
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 chantable, etc.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	2.3	
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	31,200
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 1	
	Enter 1% of Part I, line 27b (see instructions)	5	113
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	31,087

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

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Form 990-PF (2014) Williams Family Charitable 62-1495295 Page 9 Undistributed Income (see instructions (a) (b) (c) (d) 2014 Comus Years prior to 2013 2013 1 Distributable amount for 2014 from Part XI, 21,219 line 7 2 Undistributed income, if any, as of the end of 2014. 3 a Enter amount for 2013 only **b** Total for prior years: 20 ____ , 20__ Excess distributions carryover, if any, to 2014: 15,977 From 2009 From 2010 14,533 c From 2011 3,964 From 2012 15,580 From 2013 50,054 Total of lines 3a through e Qualifying distributions for 2014 from Part XII, 31,200 line 4: ▶ \$ a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) Treated as distributions out of corpus (Election required - see instructions) 21,219 d Applied to 2014 distributable amount 9,981 Remaining amount distributed out of corpus Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 60,035 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of pnor 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 instructions e Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount - see instructions Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) 15,977 Excess distributions carryover to 2015. 44,058 Subtract lines 7 and 8 from line 6a Analysis of line 9: 14,533 Excess from 2010 Excess from 2011 3,964 Excess from 2012 15,580 Excess from 2013 9,981 Excess from 2014

Pa	ert XIV Private Operating Fou	undations (see in	structions and Pa	rt VII-A. guestion 9	9)	· -g-
1a						
	foundation, and the ruling is effective for		•	·····9		
b	Check box to indicate whether the found		•		1942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	Touridation descri	Pnor 3 years	1042(1)(0) 01	-4//0/
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for	(4) 20 11	(4,23.6	(0) 20 12	(5) = -	· · ·
	each year listed					
b	85% of line 2a				 	
c	Qualifying distributions from Part XII,			 		
	line 4 for each year listed		ļ			
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	 -		 		
•	alternative test relied upon.				1	
а	"Assets" alternative test – enter				1	
	(1) Value of all assets		l			
	(2) Value of assets qualifying under			 		
	section 4942(j)(3)(B)(i)					
ь	"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	i				
	investment income (interest,					
	dividends, rents, payments on		1			
	secunties loans (section					
	512(a)(5)), or royalties) (2) Support from general public		 	 	 	
	and 5 or more exempt			İ		
	organizations as provided in					
	section 4942(j)(3)(B)(iii)		<u> </u>			
	(3) Largest amount of support from			1		
	an exempt organization				<u> </u>	
	(4) Gross investment income	- 15	<u> </u>	<u> </u>	<u> </u>	L
Pē	Supplementary Inform			the foundation I	nad \$5,000 or more	e in assets at
_	any time during the y		tions.)			
1	Information Regarding Foundation Ma List any managers of the foundation who	_	ro than 20/ of the total	contributions recover	d by the foundation	
а	before the close of any tax year (but only				=	
	N/A	in they have contribut	ed more than \$5,000)	. (See Section 507(d)(2).)	
	List any managers of the foundation who	own 10% or more of	the stock of a corpora	tion (or an equally large	ne portion of the	
-	ownership of a partnership or other entity		•		go portion or the	
	N/A	, or whom are realistation	aon nao a 1070 or gro	2101 11107001.		
2	Information Regarding Contribution, C	Grant, Gift, Loan, Scl	holarship, etc., Prog	rams:	· · · · · · · · · · · · · · · · · · ·	
			to preselected chanta		does not accept	
	unsolicited requests for funds. If the foun			_		
	other conditions, complete items 2a, b, c	· · · · · ·	·	,	•	_
a	The name, address, and telephone numl	per or e-mail address	of the person to whom	applications should b	e addressed:	
	Joseph P. Williams			••		
	924 Cantrell Ave. Na	ashville TN	37215			
b	The form in which applications should be			ney should include		
	See Statement 6					
C	Any submission deadlines:				·	-
	None					
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable	fields, kınds of ınstıtuti	ons, or other	
	factors.					
	None					

Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Paid during the year	or substantial contributor			
See Statement 7				
				31,2
			-	
			Ì	
			ļ	
			}	
			·	
	1			
	1			
Total _		<u> </u>	▶ 3a	31,2
Approved for future payment				
N/A		}	1	
		ļ	1	
		1		
Total			▶ 3b	

COLLYEN	Analysis of income-Froducing Ac	riaines				
Enter gross amo	ounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Program sei	vice revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_				+ +		
b						
c						
d		-				
_						
f						
g Fees an	d contracts from government agencies					-
	dues and assessments					
	savings and temporary cash investments		<u> </u>	14	149	
	nd interest from securities			14	12,519	
5 Net rental in	come or (loss) from real estate:	7				<u> </u>
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other invest	ment income					
8 Gain or (los:	s) from sales of assets other than inventory			14	205	670
	or (loss) from special events]		
	or (loss) from sales of inventory					
11 Other reven						
b						
С						
e						
12 Subtotal. Ad	ld columns (b), (d), and (e)			0	12,873	670
13 Total. Add I	ine 12, columns (b), (d), and (e)				13	13,543
	ine 12, columns (b), (d), and (e) in line 13 instructions to venfy calculations.)				13	13,543
	in line 13 instructions to verify calculations.)	Accomplishm	ent of Exempt F	Purposes		13,543
See worksheet	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to venfy calculations.) Relationship of Activities to the A	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
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See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
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See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	
See worksheet Part XVI-B Line No.	in line 13 instructions to verify calculations.) Relationship of Activities to the Activities to the Activities to the Activity for which income	ne is reported in co	olumn (e) of Part XV	I-A contribut	ed importantly to the	

Form 990	0-PF (201	4) Williams	Family	<u>Charital</u>	ble	62-	1495295		Pa	ge 1 3
Part.		Information Reg Exempt Organiz	_	ansfers To an	d Transactio	ns and Rela	tionships With Noncharita	able		
1 Did		nization directly or ind		e in any of the foll	lowing with any	other organizatio	n described		Yes	No
		01(c) of the Code (other			-	_		in		
	anization			(-,(-, -, -, -, -, -, -, -, -, -, -, -, -, -			.g to point on		1 3	4 -
•	•	om the reporting found	dation to a no	ncharitable evem	nt organization o	f		1	!	k. Y
	Cash	om the reporting lourie	addir to a no	monantable exemp	pt organization o	'		1a(1)	† `	X
									-	$\frac{1}{x}$
	Other as							1a(2)	 	╀╇
	her transa							- 1	Ī	
		f assets to a noncharit	•	•				1b(1)	-	X
		ses of assets from a ne			on			1b(2)		X
		of facilities, equipment		sets				1b(3)	T-	X
		rsement arrangement	s					1b(4)	<u>. </u>	X
(5)	Loans o	r loan guarantees						1b(5)	<u> </u>	X
(6)	Perform	ance of services or m	embership or	r fundraising solici	tations			1b(6)	<u> </u>	X
c Sh	aring of fa	acılıties, equipment, m	iailing lists, o	ther assets, or par	id employees			1c	L	X
d Ift	he answe	er to any of the above	ıs "Yes," com	plete the following	schedule Colu	mn (b) should al	ways show the fair market			
val	lue of the	goods, other assets,	or services gi	ven by the reporti	ng foundation. If	the foundation r	eceived less than fair market			
val	lue in any	transaction or sharing	g arrangemer	nt, show in column	(d) the value of	the goods, othe	r assets, or services received			
(a) ⊔	ine no	(b) Amount involved	(c) Name	e of nonchantable exem	pt organization	(d) Des	cnption of transfers, transactions, and shann	g arrangeme	ents	
N/A	-	ļ	<u> </u>			<u> </u>				
		<u></u>	<u> </u>							
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			<u> </u>							
										
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		<u> </u>	<u> </u>							
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			L							
2a Is	the found	ation directly or indired	ctly affiliated	with, or related to,	, one or more tax	c-exempt organiz	zations			
		section 501(c) of the						_	es X	No.
b If "	'Yes," con	nplete the following so	hedule							
		a) Name of organization		(b) Type of o	organization		(c) Description of relationship			
N/	A					L				
				ļ		<u></u>				
						Į –				
					 					
							its, and to the best of my knowledge and be	lief, it is tru	e,	
	соптест, а	nd complete Declaration of	preparer (other t	(nan taxpayer) is based	on all information of	which preparer has	May the IRS	discuss this	return	
Sign			1/2				with the prep			_
Here	,	0 . 1/	AH.			1 1	(see instructi	ons)?	Yes	No
- 1		July 1. 4	/illes	AL,	4	13/15	TRUSTEE	-		
ſ	Sugar	ature of officer or trustee			Date	, //-	Title		-	
	Print/Tv	pe preparer's name			Preparer's signatu	re) - Dat	 e	Check	Y
_		e composer e neme			- sparor o orginali		2 11 00 1	_		k [▲] fl mployed
Paid	Larr	y Williams			Larry Wil	liams	XMUlleam \$11)	02/15	1	
Prepare	Firm's n		y Willi	lams, CPA	<u> </u>		/ 	0122		7
Use Only	v		Powell				Firm's EIN ▶			

Firm's EIN

Phone no

Brentwood, TN

37027

WILLAMSFAM Williams Family Charitable 62-1495295 FYE: 12/31/2014

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Federal Statements

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	Description		How Received				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
ML Acct #04012			Purchase				
	7/02/13	7/14/14 \$	2,110 \$	1,573	\$	₩.	\$ 537
Total		w ျ	2,110 \$	1,573	\$	\$	\$ 537

Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose	w	0
Adjusted Net	w	w.
Net Investment	\$ 1,662	\$ 1,662
Total	\$ 1,662	\$ 1,662
Description	Merrill Lynch #04012 Merrill Lynch #04010	Total

Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	w w
Adjusted Net	w w
Net Investment	w w
Total	w w
Description	Foreign tax Total

ጭ ŝ ጭ Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments Valuation Basis of Adjusted Net Cost Cost Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses Ś 51,561 194,032 142,210 387,803 End of Year 0 Investment Federal Statements Net €O-ស ₹Ø-S 51,561 186,211 138,335 376,107 Beginning of Year Total ŧԴ ŝ WILLAMSFAM Williams Family Charitable Description Description Misc equities Merrill Lynch #04010 Merrill Lynch#04012 FYE: 12/31/2014 Wire fee 62-1495295 Total Total Expenses

199,028 174,924

425,513

51,561

Fair Market

Value

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Charitable

Purpose

WILLAMSFAM Williams Family Charitable
62-1495295 Federal Statements

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FYE: 12/31/2014		
Statement 5 - Form 990-PF, Part III, Lir	e 5 - Other Decreases	
Description	Amount	
Prior period adjustment	\$ 33	
Total	\$ 33	
Statement 6 - Form 990-PF, Part XV, Line 2b - Application	ation Format and Require	ed Contents
Description		
Written requests detailing purpose and uses for funds.	requested	
Form 990-PF, Part XV, Line 2c - Sub	mission Deadlines	
Description		
None		
Form 990-PF, Part XV, Line 2d - Award Re	estrictions or Limitations	<u> </u>
Description		
None		

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WILLAMSFAM Williams Family Charitable 62-1495295 FYE: 12/31/2014

Federal Statements

Statement 7 - Form 990-PF, Part	rm 990-PF, Part XV, Line 3a - Gra <u>Year</u>	XV, Line 3a - Grants and Contributions Paid During the Year	
Name	Address		
Address	Relationship Status	Purpose	Amount
St. Henry's Church	Harding Road		
	None 501(c)3	General fund	2,500
St. Bernard Academy	2020 24th A		
Nashville TN 37212 Caring Bridge	None None $501(c)3$	Education	21,000
Egan MN 55121	None $501(c)$ 3	General fund	
School Sisters of Notre	13105 Watertown Plank Rd		
		General fund	
Best Buddies of TN	116 Wilson Pike Circle		
Brentwood IN 37027	None 501(c)3	General fund	
Court of the Cotton of Total	None 501 (2) 3	General find	
Lupus Foundation	4004 Hills		
Nashville TN 37215	None 501(c)3	General Fund	
Visitation Hospital Foundation			
Nashville TN 37221	None 501(c)3	General fund	1,500
Linda's Hope			
Nashville TN 37215	None 501(c)3	General fund	
Mary Queen of Angels School	170 Rosewood		
		General Fund	
	1318 Fairvie		
Fairview TN 37062	None Public	Operating	
Namedia COX Fund Nashrrilla TN 37203	None on M	ָּבְּבְיִינִי בְּבְּיִבְּיִבְּיִרְיִי	
Bishop's Annual Appeal	21st Avenue	S	
		Operating	
Catholic Charities	21st Avenue South		•
Nashville TN 37215	щ	Operating	1,000
Vanderbilt	21st Avenue South		
Nashville ?		General	
-	Box 38	1	
Chatawa MS 39632	None 501(c)(3)	General	
Christ the King Church	Bermont Blv		
Nashville TN 37215	None Church	General	

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WILLAMSFAM Williams Family Charitable

62-1495295 FYE: 12/31/2014

Federal Statements

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Y	Address	ł	
Address	Relationship	Status	Purpose	Amount
Big Brothers	1600 56th Ave North	Ave North		
Nashville TN 37209	None	501(c)(3)	General	
Father Ryan High School	700 Norwood	d Dr		
Nashville TN 37203	None	501(c)(3)	General	1,000
Center for Action & Contemplation Box 12464	tion Box 12464			
Albuquerque NM 87195	None	501(c)(3)	General	
Bike & Build	6153 Ridge	. 4		
Philadelphia PA 19128	None	501(c)(3)	General	
Orphans Heart	1015 Sikes	Blvd		
_ Lakeland FL 33815	None	501(c)(3)	Operating	2,000
Miscellaneous-\$500 or less			,	
		501(c)(3)	Operating	2,200
Total				31,200

/