Form **990-PF**Department of the Treasury
Internal Revenue Service

(0)2, 1)

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

**Return of Private Foundation** 

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

For calendar year 2017 or tax year beginning		, and ending		
Name of foundation			A Employer identificati	on number
SHARLENE R. WILLIAMS FAMI			30-011046	7
Number and street (or P O box number if mail is not delivered to stre	· ·	Room/suite	B Telephone number	000
238 N. MCPHERSON CHURCH R			910-864-3	
City or town, state or province, country, and ZIP or foreign FAYETTEVILLE, NC 28303	postar cone		C If exemption application is	s pending, check here
G Check all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organization	and about hore
Final return	Amended return	ormer public charity	i. Foreign organizatio	ins, check here
Address change	Name change		Foreign organizations in the check here and attach	meeting the 85% test.
	exempt private foundation	OV	1	
	Other taxable private foundation	- 1	E If private foundation s under section 507(b)(	
I Fair market value of all assets at end of year   J Accour		Accrual	}	a 60-month termination
(from Part II, col. (c), line 16)	Other (specify)		under section 507(b)	
▶\$ 1,707,693. (Part I, colu	ımn (d) must be on cash bası	s.)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	5,764.	5,764.		STATEMENT 1
4 Dividends and interest from securities	45,577.	45,577.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 73,717. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain	53,997.	<u>,,,                                  </u>		
7 Capital gain net income (from Part IV, line 2)		53,997.		
8 Net short-term capital gain				
9 Income modifications Gross sales less returns 10a and allowances				
b Less Cost of goods sold c Gross profit or (loss)			<u> </u>	
c Gross profit or (loss)				
11 Other income				
12 Total. Add lines 1 through 11	105,338.	105,338.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages			<del> </del>	
15 Pension plans, employee benefits		<u> </u>		
9 16a Legal fees	700	ļ <u>.</u>	<u> </u>	
b Accounting fees c Other professional fees STMT 3 STMT 4	700.	0.	<del></del>	700.
c Other professional fees STMT 4	28,594.	28,594.	<u> </u>	0.
17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	531.	40.	<del> </del>	0.
19 Depreciation and depletion		40.		·
E 20 Occupancy	1,500.	0.		1,500.
21 Travel, conferences, and meetings	2/3001		<del> </del>	1500
22 Printing and publications				
23 Other expenses RECEIVED				
expense Add lines A13 through 2318	31,325.	28,634.		2,200.
25 Contribu <b>gan</b> is, girts, grants paid	83,888.	<u> </u>		83,888.
26 Total expenses and disbursements  Add lines 24 an QSDEN; UT				
	115,213.	28,634.		86,088.
27 Subtract line 26 from line 12:	.0 075	{		
Excess of revenue over expenses and disbursements     Net investment income (if negative, enter -0-)	<9,875.	76,704.	<del> </del>	
C Adjusted net income (if negative, enter -0-)	<del></del>	10,104.	N/A	<del></del>
	i .	ì	1 11/43	1

SHARLENE R. WILLIAMS FAMILY FOUNDATION

30-0110467

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Form 990-PF (2017)

Form 990-PF (2017)

orm 990-PF (2017) SHARLENE R. WILLIAMS FAMILY FOUNDATION 30-0110 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i			ige <u>4</u> S)
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)  b Domestic foundations that meet the section 4940(e) requirements in Part V, check here   □ X and enter 1%		76	7.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here			<u>/·</u>
c 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		76	7.
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-		76	7.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0.			
b Exempt foreign organizations - tax withheld at source 6b 0.			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld 0.			
7 Total credits and payments. Add lines 6a through 6d			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		1	5.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed9		78	12.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded 11			
Part 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 participate or intervene in		Yes	
any political campaign?	1a	<u> </u>	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	$\rightarrow$	<u>X</u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		ļ	
distributed by the foundation in connection with the activities.			
c Did the foundation file Form 1120-POL for this year?	1c	$-\!\!\!\!+$	<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1	İ	
(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ► \$0.		1	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	$\rightarrow$	<u>X</u>
If "Yes," attach a detailed description of the activities.	1 1	ŀ	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		]	v
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?  b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4a		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b		X
If "Yes," attach the statement required by General Instruction T.	5		<u> </u>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or	1	1	
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	
7 - 1- 10 - 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1			
8a Enter the states to which the foundation reports or with which it is registered. See instructions.   NC			
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	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			$\nu$
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. 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 names and addresses	10		
Fo	orm <b>990</b> -	-PF (	2017)

orm 990-PF (2017) SHARLENE R. WILLIAMS FAM	ILY FOUNDATIO	<u>N</u> _	<u> 30-01104</u>	67	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		ł
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		i		
any voter registration drive?		Ye	s X No	1	ł
(3) Provide a grant to an individual for travel, study, or other similar purposes	? ·	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1	1
4945(d)(4)(A)? See instructions		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		- 1	
the prevention of cruelty to children or animals?		Y€	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	1	İ	-
section 53,4945 or in a current notice regarding disaster assistance? See instri			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check l	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		}	
expenditure responsibility for the grant?		I/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			- }	{
a personal benefit contract?	: : : : : : : : : : : : : : : : : : :	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Y€	s X No	- 1	1
b If "Yes," did the foundation receive any proceeds or have any net income attribu		_	N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1	_	
List all officers, directors, trustees, and foundation managers and t	heir compensation	<del></del>			
List all officers, all octors, a discess, and four dation managers and t	<del></del>	(c) Compensation	(d) Contributions to employee benefit plans	(e) F	xnense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	and deferred		xpense nt, other
CUADIENE D WILLIAMS	to position	enter -0-)	compensation	allov	wances_
SHARLENE R. WILLIAMS 238 N MCPHERSON CHURCH ROAD	TRUSTEE				
FAYETTEVILLE, NC 28303	0.00	0.	0.		0.
CAROLYN R. ARMSTRONG	TRUSTEE	<del> </del>	<u></u>		<u> </u>
238 N MCPHERSON CHURCH ROAD	IKOSIEE				
FAYETTEVILLE, NC 28303	0.00	0.	0.		0.
FRIEITEVILLE, NC 20303	0.00	<u></u>	<u> </u>		<u> </u>
	<del></del>	<del> </del>			
	<b>{</b>	1			
		Ļ	;		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average	Ţ	(d) Contributions to	(e) E	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acc ou	nt, other wances
NONE	devoted to position	<del>                                     </del>	compensation	4110	
			•		
		<u> </u>			
	1				
		<del>                                     </del>	-		
	i	•			
				<u> </u>	
	1				
			<del></del>	<u> </u>	
	1				
Total number of other employees paid over \$50,000	<del> </del>	<del></del>	<u>'</u>	L	0

	0110	467 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	Ţ	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1N/A		
	-	
2	<del> </del> -	
	1	
	<u> </u>	
3	-	
	†	
4		
	-	
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 <u>N/A</u>	1	
	-	
2	<del>                                     </del>	
	]	
All other program related investments. Con native trans	<b>├</b>	
All other program-related investments. See instructions.  3	1	
	]	
	-	
	4	
	1	
Total. Add lines 1 through 3		0.
	For	m <b>990-PF</b> (2017)

SHARLENE R. WILLIAMS FAMILY FOUNDATION

For	m 990-PF (2017) SHARLENE R. WILLIAMS FAMILY FOUNDATION	<u> 30-</u>	<u>-0110467</u>	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>	
a	Average monthly fair market value of securities	1a	1,697,	398.
b	Average of monthly cash balances	1b	20,	285.
C	Fair market value of all other assets	1c		
ď	Total (add lines 1a, b, and c)	1d	1,717	683.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0.			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	1,717,	683.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	25,	765.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,691,	918.
6_	Minimum investment return. Enter 5% of line 5	6	84,	596.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ and do not complete this part.)	id certain	· · · · · · · · · · · · · · · · · · ·	
1	Minimum investment return from Part X, line 6	1	8.1	596.
	1 1	<del>-                                    </del>	091	270.
2 a b	Income tax for 2017. (This does not include the tax from Part VI.)	1		
		2c		767.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.3	829.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4		0.3	829.
6	Deduction from distributable amount (see instructions)	5		0.
7	·	7	93	829.
<u>_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1			049.
<u>P</u>	art XII Qualifying Distributions (see instructions)			
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	86,	088.
b	Program-related investments - total from Part IX-B	16		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
a	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	86,	088.
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	5		767.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	85	321.

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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				83,829.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			83,888.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2017:		0.		
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 86,088.				
a Applied to 2016, but not more than line 2a	ŀ		83,888.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				2,200.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	İ	
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				81,629.
7 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)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013			1	
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				200 25 : (5)

Form 990-PF (2017) SHARLEN	E R. WILLIA	MS FAMILY E	FOUNDATION I-A. guestion 9)	30-01 N/A	10467 Page 10
1 a If the foundation has received a ruling or			1		
foundation, and the ruling is effective for					
b Check box to indicate whether the found			in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	Todalication decembed	Prior 3 years		1
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014 /	(e) Total
investment return from Part X for	(-)		(4)	<del></del>	
-					
each year listed			<del> </del>	<del> /</del>	
b 85% of line 2a	<del></del>	<del></del>		<del> </del>	<del> </del>
c Qualifying distributions from Part XII,					
line 4 for each year listed	<del></del>			/	
d Amounts included in line 2c not					i
used directly for active conduct of		1	1 /		
exempt activities		<del> </del>	<del> /-</del>	+	
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			<del>  -/</del>	<del></del>	
alternative test relied upon:			/		
a "Assets" alternative test - enter:			\'		
(1) Value of all assets	_ <del></del>	ļ		<del></del>	
(2) Value of assets qualifying		/	1		
under section 4942(j)(3)(B)(i)		/	<u> </u>		
b "Endowment" alternative test - enter 2/3 of minimum investment return	ı	,			
shown in Part X, line 6 for each year		1			
listed	! 				<u> </u>
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section		<i>Y</i>			
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					<u> </u>
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t				•	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	-	than 2% of the total con	tributions received by the	he foundation before the clo	se of any tax
year (but only if they have contributed m					,
SHARLENE R. WILLIAMS					
b List any managers of the foundation who	o own 10% or more of t	ne stock of a corporation	(or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation has			(		<b>-</b>
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:	<del></del>	
Check here 🕨 🔲 if the foundation o				s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other cond	itions, complete items 2	a, b, c, and d.	
a The name, address, and telephone number	per or email address of t	he person to whom appl	cations should be addr	essed:	
SHARLENE R. WILLIAMS	FAMILY FOU	INDATION, 9	10-864-3232	2	
238 N. MCPHERSON CHU	RCH ROAD, H	AYETTEVILL	E, NC 28303	3	
b The form in which applications should b					
WRITTEN REQUEST EXPL				COST	
c Any submission deadlines:					
SEPTEMBER 30	<del></del>				
d Any restrictions or limitations on awards					
N. CAROLINA ORGANIZA	TIONS OR CE	HAPTERS OF	NAT'L CHARI	TIES	

r arnee amounte uniace athonyica indicated	l unrelated l	ousiness income	Excluded by	y section 512, 513, or 514	(e)
r gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue;	code		code	741104111	TOTIONO I MICE MICE
	- <del>    -</del>		-	+	
	1 1	<u> </u>			
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments	<u> </u>		14	5,764. 45,577.	
Dividends and interest from securities	<del></del>		14	45,577.	
let rental income or (loss) from real estate:					
Debt-financed property	<del></del>		<del>-   </del>		
Not debt-financed property Net rental income or (loss) from personal			<del>-   -   -</del>		
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory			18	53,997.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
·	_				
)		<del></del>			
	1				
			<del>-   -   -  </del>		
Subtotal. Add columns (b), (d), and (e)	-		5.1	105,338.	
otal. Add line 12, columns (b), (d), and (e)	<del> </del>	<u></u>	<u> </u>	13	105,3
worksheet in line 13 instructions to verify calculations	.)				
art XVI-B Relationship of Activitie	s to the Accor	nolishment of	Exempt P	irnoses	
· · · · · · · · · · · · · · · · · · ·	<del></del>	<u></u>			
e No. Explain below how each activity for which i				importantly to the accomp	lishment of
the foundation's exempt purposes (other ti	nan by providing tund	s for such purposes)			

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
- 1	

For <u>m 99</u>	0-P <u>F (</u> 201	7) SHARL	ENE	R. WI	<u>LLIAMS</u>	FAMILY FOUN	DATION_	30-01	10 <u>467</u>	Pa	ge <b>13</b>
Part :	XVII	Information Re Exempt Organ			sfers to a	nd Transactions a	nd Relations	ships With Nonch	aritable		
1 Did	the oras	·			of the followin	ng with any other organization	on described in se	etion 501/c)		Yes	No
	_	-		-		g to political organizations?		0.000 00 1(0)			
		om the reporting found		-		•					
	Cash	on the reporting round	411011110	a nononana	ibio oxompt or	gamzanon oi.			1a(1)		X
	Other as	ceate						•			X
	ner transa							•	1a(2)		
		i assets to a noncharita	hla avar	ממותבחות לחת	tion				15/11		x
		ses of assets from a no							1b(1)		X
		of facilities, equipment,		-	or garnzation			• •	1b(2)		X
		rsement arrangements		422612					1b(3)		X
٠,		r sement arrangements or Ioan guarantees						•	1b(4)		X
٠,		nance of services or me	mhorch	un or fundra	icina colicitatio	nne			1b(5)		X
		acilities, equipment, ma							1b(6)		X
							wave chow the fau	r market value of the goods		ats	1_41
								on or sharing arrangement		5 to,	
		the value of the goods,					be in any nansaen	on or snaring arrangement	, 311011 111		
(a) Line n		) Amount involved	T T			e exempt organization	(d) Descript	ion of transfers, transactions, ar	nd sharing arr	arngeme	ents
· · ·	†- <u>`</u>	<u></u>		.,	N/A	<u>_</u>				<u> </u>	
	-			<del></del>							
	1		T								
			†			_ <del></del>		<del>-</del>			
	_		<del>                                     </del>			<del></del>		<del></del>			
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		<del></del>						<del></del>			
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		<del></del>			-	<del></del>		<del></del>			
								<del></del>			
			1					<del></del>			
	<u> </u>		<del>                                     </del>			····	<del>-  </del>	<del>-</del>			
	T								<del></del>		
2a  s	the found	ation directly or indirec	tlv affilia	ited with, or	related to, one	or more tax-exempt organ	izations described				
		)1(c) (other than sectio				or more tax exempt organ	Lations soconous	•	Yes	X	ON [
		plete the following sch		,,(0), 0 0.	JOH 021 1					المعال	
		(a) Name of org		n		(b) Type of organization		(c) Description of relatio	nship		
		N/A				,,,,,,	<u> </u>	·····	<del></del> -		
							†*****************************	<del></del>			
							<u> </u>				
							T				
									<del></del>		
						ng accompanying schedules and			May the IRS	die ouee	thie
Sign		s true, correct, and cor	πplete Di	eclaration of pr	reparer (other tha	in taxpayer) is based on all inform	mation of which prepa	arer nas any knowledge	return with the	e prepa	rer
Here		سفركمه	1	Lel	Muy	- 15/8/18	TRUST	TEE	X Yes		i No
	Signat	ure of officer or trustee				Date	Title				
	F	rınt/Type preparer's na	ame		Preparer's s	ignature	Date	Check If PTI	N		
					10	. D. O.D., CPA	5/3/18	self- employed			
Paid		CHRISTOPHE	R G	DIXON	المامة سال	· is · CAN, CIR	131711	P	00274	879	)
Prep	arer 🕞	irm's name 🕨 HAI				BERT, LLP		Firm's EIN ► 56-			
Use (	Only									-	

Firm's address ► PO BOX 53349

FAYETTEVILLE, NC 28305-3349

Part IV   Capital Gains and Los	ses for Tax on Investment Income				<del></del>
(a) List and 2-story bri	describe the kind(s) of property solock warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a MARIN INCOME II	VESTORS - SHORT	-TERM	P	VARIOUS	12/31/17
b MARIN INCOME IN			P	VARIOUS	12/31/17
c .8 SH BANCO BRA			P	11/30/15	05/11/17
d 9000 SH GOODYEA			P	11/30/15	05/15/17
e 223 SH KINDER I	MORGAN			11/30/15	06/05/17
1 10000 SH MORGAL	N STANLEY		P	11/30/15	07/17/17
g CAPITAL GAINS I	DIVIDENDS				
<u>h</u>					
				<u> </u>	<u> </u>
	<del></del> _			<del> </del>	
<u>k</u>					
			<u> </u>		
m	<del></del>		<del> </del>	<b>-</b>	
<u>n</u>	<del></del>	·	<del></del>	<del> </del>	
0	(6) Depresenting allowed	(a) Cook or other hours		) Cour or (loop)	L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)	
a 43,203.		processor of the contract of t	(-)	(1)	43,203.
b 43,203.					11,112.
c 8.		4.		-	4.
d 9,315.		9,624.	<del></del>		<309.>
e		74.			<74.>
10,000.		10,018.			<18.>
g 79.					79.
h					
1					
<u></u>					
k	<del></del>				
<u>m</u>	<del></del>				
<u>n</u>					
Complete poly for accets chave	g gain in column (h) and owned by	the foundation on 10 P4 (CO			
Complete only for assets showing	<del></del>	T	(I) Lo: Gains (excess	sses (from col. (h)) of col. (h) gain ove	) rool(k).
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	but r	not less than "-0-")	
a		****		<del></del>	43,203.
b	<del></del>				11,112.
С					4.
d					<309.>
е					<74.>
f					<18.>
g					79.
h				·	
1				<del> </del>	
<u> </u>					
<u>k</u>		<del> </del>			
		<del> </del>			
<u>m</u>			<del></del>		
0		<del>                                     </del>			
<u> </u>	<del></del>				
2 Capital gain net income or (net ca	pital loss) { If gain, also enter	r in Part I, line 7 0-" in Part I, line 7			53, <u>997.</u>
3 Net short-term capital gain or (los					
If gain, also enter in Part I, line 8,	o) ao ucinicu in sections 1222(5) ar column (c).	iiu (0).			
If (loss), enter "-0-" in Part I, line 8	· <b>· · ·</b>			N/A	

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVEI PER BO	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
MARIN INCOME INVEST	ORS		3,790. 1,974.		3,790. 1,974.	
TOTAL TO PART I, LI	NE 3		5,764.		5,764.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO	
MARIN INCOME INVESTORS RAYMOND JAMES	41,831 3,825		0.	41,831. 3,746.		
TO PART I, LINE 4	45,656	. 7	9.	45,577.	45,57	7.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
TAX PREPARATION FEE	as	700.		0.		700.
TO FORM 990-PF, PG	1, LN 16B	700.		0.		700.
	=		====			

FORM 990-PF C	OTHER PROFES	SIONAL FEE	S		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) DJUSTED T INCOME		
INVESTMENT FEES	28,594.	28,5	94.		•	0.
TO FORM 990-PF, PG 1, LN 16C	28,594.	28,5	94.			0.
FORM 990-PF	TAXES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) DJUSTED T INCOME	_	
FOREIGN TAXES 990PF TAXES	40. 491.		40.			0.
TO FORM 990-PF, PG 1, LN 18 =	531.		40.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			BOOK V	ALUE	FAIR MAIRKE	r
RAYMOND JAMES		_	22	3,463.	251,6	57.
		TOTAL TO FORM 990-PF, PART II, LINE 10B				
TOTAL TO FORM 990-PF, PART II	I, LINE 10B	=		3,463.	251,6	57.
TOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER INV	= ESTMENTS	22	3,463.	251,6	57.
	OTHER INV	ESTMENTS LUATION ETHOD	BOOK V			7
FORM 990-PF	OTHER INV VA M	LUATION	BOOK V		STATEMEINT FAIR MARKE	7 T