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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rep

OMB No 1545-0052 2009

_			nat apply	Ť	ax year begi Initial retu			Initial	eturn (	, <b>2009</b> , of a former p	ublic chai	rity			Final re	eturn	_
			'FF'/		Amended			,		s change		—	Name change		J	•	
		e IRS el. wise, nt /pe.	Name of for	undat			_					•	A Employeric		ation num	nber	_
Use	e th	e IRS															
!	lab	el.	MCCORMI	CK	FAMILY I	DN AC	SENT							30-	016682	27	
Otl	hen	wise,			et (or PO box			delivered	to street	address)	Room/su	ııte	B Telephone numi				
_	pri	nt															
			21 E MA	RKE	T STREET	Γ								(71	7) 25!	5-2045	
	See Specific City or town, state, and ZIP code				de							C If exemption a pending, check		ion is	▶	ight ceil	
												D 1 Foreign or		ons, check h	nere . ►	$\Box$	
			YORK, F	PA 1	L7401-120	)5							2 Foreign or	ganızatı	ons meeting	the	
1 C	hec	k type	of organiza 947(a)(1) no value of al	ation	X Sect	on 501(	(c <u>)(3)</u> ex	empt pr	ivate fo	oundation			85% test, check here and attach computation				
	S	ection 4	947(a)(1) no	nexe	mpt charitable	e trust	Ot	her taxa	ble pri	vate foundat	ion		E If private four	ndation	etatue wae t	erminated -	_
F	air	market	value of al	II ass	ets at end	J Acco	unting n	nethod:	_ <u>X</u> Ca	ash Acc	rual		under section			- L	╛
0	f ye	ear (fro	m Part II, co	ol. (c	), line		ther (spe						F If the foundat				_
		▶ \$			10.			(d) mus	t be or	cash basis.)			under section				
Par	t l	Analy	sis of Reve	enue	and Expens	es (The	(a) P	evenue a	nd T	(h) Not :=::-	otmon*		lal Admeted ==			bursements	
					mns (b), (c), ai ial the amoun			enses pe		(b) Net inve		,	(c) Adjusted ne income	.		charitable urposes	
_					of the instruc			books								basis only)	
1	1	Contribut			received (attach so		L	494	583.								
2	2	Check			dation is <b>not</b> red B								<del> </del>				
3	3	Interest			porary cash inve		<u> </u>		-								
4	4	Dividen	ds and inter	est fr	om securities				3.		3.					STMT	_1
5	5 a	Gross r	ents				<u> </u>										
	b	Net rent	al income or (I	loss) _													
. 6					of assets not on	line 10									<del></del>		
	D	Gross sa assets o	iles price for al n line 6a	"								PI	ECEIVE				
7			=		(from Part IV,						<u> </u>				ပ္ကု		
					ıın						-12		AV 1 7 20	<del>10  </del>	8		
							<u> </u>				089	_M	AY I & CU	10	<u>&amp;</u>		_
'"			les less return wances • • •												1 00		
			st of goods so				-				-   -	$\cap$	GDEN,	JT			
		•	•		ach schedule)												
11					hedule)		<u> </u>	A O A	FOC		2						
12					<u>ah 11</u>		ļ		586.		3.		· · · <del>-</del>				
13					rectors, trustees	• •	<del> </del>	20,	000.	2	0,000.	-	11	IONT			
14					and wages .		<u> </u>				NONE NONE			IONE			
15					benefits		-				NONE		N	IONE			—
16					ule)		<u> </u>										
					schedule)		<u> </u>										
17 18 19 20					attach schedu		-	<u> </u>									
17							-	<del>.</del>						-			_
18	-	•			page 14 of the ins		<del></del>		_								_
15		•			edule) and de	•	<u> </u>			<u> </u>		-					
											NONE		<u> </u>	IONE	<del></del>		_
22					meetings					<u> </u>	NONE			IONE			
			•		s schedule) ST)		<b>——</b>		122.		122.			OIVE			_
23			•						144.		144.		<u> </u>		<del></del>	<del></del>	_
24					ninistrative ex	•		20	122	່	0,122.		N	IONE			
24			-						462.		U, 144.		N	OIVE		474,46	62
25			. •	_	its paid		<u> </u>	494		າ	0,122.		N	IONE	<del></del>	474,46	
26					ents Add lines 2	4 and 25	· -	<b>ユブサ</b>	J04.		U, 144.			OIVE		7/7,70	<u>ے د</u>
27			t line 26 fro						2.								
					es and disbursem		<del></del>				- 0 -						
					(if negative, e		<del></del>				- U <b>-</b>			-		<u></u>	
1	C	<u>Adjuste</u>		ne (II	negative, ente		<u> </u>	e 30 of t								990-PF (200	

Part I		Balance Sheets Attached schedul	Attached schedules and amounts in the description column should be for end-of-year		End o	f year
		amounts only (Se	ee instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	<i></i>			
		Savings and temporary cash investments		8.	10.	<u> </u>
	3	Accounts receivable				
		Less. allowance for doubtful accounts	·			·
	4	Pledges receivable				
		Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors,	trustees, and other			
		disqualified persons (attach schedule) (see	page 16 of the instructions)			
	7	Other notes and loans receivable (attach	schedule)			
		Less: allowance for doubtful accounts				
ı		Inventories for sale or use				
Assets		Prepaid expenses and deferred charges				
ISS		Investments - U S and state government oblig				
		Investments - corporate stock (attach sol				
ŀ	11	Investments - corporate bonds (attach so Investments - land, buildings, and equipment basis				
		and equipment basis Less accumulated depreciation (attach schedule)				
1	12	Investments - mortgage loans				
	14	Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	Į.			
		(attach schedule)				
	ΙÞ	Other assets (describe				
		Total assets (to be completed by all file				
$\perp$		instructions Also, see page 1, item I) .		8.	10.	<u> </u>
	17	Accounts payable and accrued expenses	s			
ŀ	18	Grants payable				
S	19	Deferred revenue				
≝		Loans from officers, directors, trustees, and ot	1			
Liabilities		Mortgages and other notes payable (atta				
		Other liabilities (describe	,			
	23	Total liabilities (add lines 17 through 22	2)			
	_	Foundations that follow SFAS 117 and complete lines 24 through 26	, check here			
န္ဓ	24	Unrestricted				
ž		Temporarily restricted			-	
ala	25					
	20	Permanently restricted				
Fund		Foundations that do not follow SF	···/ —			
Ē		check here and complete lines 27		8.	10	
- 1		Capital stock, trust principal, or current f	T T	0.	10.	
Net Assets		Paid-in or capital surplus, or land, bldg , and ed				
Ass		Retained earnings, accumulated income, endo	,			
핗	30	Total net assets or fund balances (see				
Z		instructions)		8.	10.	
		Total liabilities and net assets/fund bal	· ' ' ' '	_		
		of the instructions)		8	10.	
		Analysis of Changes in Ne	<del></del>			
1		net assets or fund balances at begin	<del>-</del> -		_	
		of-year figure reported on prior year'				8.
2	Enter	amount from Part I, line 27a			2	2.
3	Other	r increases not included in line 2 (ite	emize) 🕨		3	
4	Add I	lines 1, 2, and 3			4	10.
		eases not included in line 2 (itemize	١		-	
		net assets or fund balances at end		ne 5) - Part II. column (b)		10.
_			<u>, , , , , , , , , , , , , , , , , , , </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	·	Form <b>990-PF</b> (2009)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income	_		raye u
	I describe the kind(s) of property sold (	_	(b) How acquired P-Purchase D-Donation		(d) Date sold (mo , day, yr )
1a			D DUNG, ON		
_b					
<u>c</u>					
_d				<u> </u>	
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
_a					
b	<u></u>				
С					
d					
е					
Complete only for assets sho	wing gain in column (h) and owne	d by the foundation on 12/31/69		Gains (Col (h) g	
(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	col	(k), but not less Losses (from co	•
a					
b					
C					
d					
e					
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Net short-term capital gain	or (loss) as defined in sections 122	,	<u>-</u>		
	line 8, column (c) (see pages 13 ar				
	ine 8		3		
		ced Tax on Net Investment Inc			,
	•	outable amount of any year in the b	ase perio	od? [	Yes X No
		see page 18 of the instructions be	fore mak	ing any entries.	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	/ col (c))
2008	594,695.	64.			937500000
2007	598,753.	4,179.			662120124
2006	587,043.	938.	<u> </u>		541577825
2005	585,834.	2,261.	-		393631137
2004	588,558.	733.		802.944	406548431
2 Total of line 1, column (d)	,	, , , <u>. ,</u> ,	2	11123279	941377517
•	for the 5-year base period - divide	• •			
number of years the found	lation has been in existence if less	than 5 years	3	2224.65	588275503
4 Enter the net value of non-	charitable-use assets for 2009 fror	m Part X, line 5	4		425.
		• • • • • • • • • •			
5 Multiply line 4 by line 3			5		945,479.
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7	<u> </u>	945,479.
8 Enter qualifying distributio	ns from Part XII, line 4		8		474,462.
If line 8 is equal to or gre Part VI instructions on pag	eater than line 7, check the box i	n Part VI, line 1b, and complete t	hat part	using a 1% tax	x rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructio	ons)
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 ruling letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_	1	ONE
	here and enter 1% of Part I, line 27b			
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-) 2			
3	Add lines 1 and 2		1	<u>ione</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		1	<u>IONE</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1	<u>IONE</u>
6	Credits/Payments:			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1	<u>ione</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		1	<u>IONE</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<del></del>	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities		····	т
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?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			٠,
	of the instructions for definition)?	<u>1b</u>		<u> </u>
	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		٠ ~	- ,
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	, , , , , , , , , , ,			
	(1) On the foundation >\$(2) On foundation managers >\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers  \$			X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2	<del>-</del>	
2	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		Т Х
4-		4a		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		<u> </u>
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
3	If "Yes," attach the statement required by General Instruction T			<del></del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
Ū	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► STMT 3			
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 year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? 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		X
		•		

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A			
14	The books are in care of ▶ M AND T BANK Telephone no ▶(717) 255-2	045_		
	Located at ► P. O. BOX 2961, HARRISBURG, PA ZIP + 4 ► 17101			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· []
Dart	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15  VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
ıa	During the year did the foundation (either directly or indirectly).  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	to, anguga mana ana ara ara arang a property mana anguarana panaan			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after	-		
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	<u>.</u> .		
	to all years listed, answer "No" and attach statement - see page 20 of the instructions )	2b	-	<u> X</u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Data (			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beguest, or (3) the lapse			
	of 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 2009 )	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2009?	4ь		<u> X</u>

NONE

NONE

NONE

NONE

Part VIII	and Contractors (continued)	yees,
3 Five highe	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
	er of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A	Summary of Direct Charitable Activities	
	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ns and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1NONE_		
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)	I
Describe the	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE		
2		
	ram-related investments. See page 24 of the instructions	
3NONE_	· 	
Total. Add I	nes 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ign foundation	ons,
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	NONE
b	Average of monthly cash balances	1b	431.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	431.
e	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	NONE
3		1 ~ 1	431.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	6.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	425.
6	Minimum investment return. Enter 5% of line 5		21.
Par	To the control of the instructions (Section 4942(j)(3) and (j)(5) private the private that		
_		1	21.
1	Minimum investment return from Part X, line 6		
2a	Tax on investment income for 2009 from Part VI, line 5	믝	
b		ا ہے ا	NONE
	Add lines 2a and 2b  Distributable amount before adjustments. Subtract line 2c from line 1	2c	21.
3 4			NONE
5	Recoveries of amounts treated as qualifying distributions	1 - 1	21.
	Deduction from distributable amount (see page 25 of the instructions)	-	NONE
6 7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		NONE
•	line 1 · · · · · · · · · · · · · · · · · ·	.   7	21.
Par	t XII Qualifying Distributions (see page 25 of the instructions)	- 11 - 12 - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		454 460
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	474,462.
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.,	1 _ 1	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		110110
a	Suitability test (prior IRS approval required)		NONE
b	Cash distribution test (attach the required schedule)		NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	474,462.
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 page 26 of the instructions)		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		474,462.
	Note: The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating w	nother the for	undation

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

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		rage 3
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7	_			21.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			NONE	
b	Total for prior years 20_07_,20,20		NONE		
3	Excess distributions carryover, if any, to 2009				
	From 2004				
	From 2005				
С.	From 2006				
	From 2007				
	From 2008	2 054 474			
	Total of lines 3a through e	2,954,474.			
4	Qualifying distributions for 2009 from Part XII, line 4: > \$ 474,462.				
2	Applied to 2008, but not more than line 2a			NONE	
	ĺ		-	NONE	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		NONE		
C	Treated as distributions out of corpus (Election	370377			
	required - see page 26 of the instructions)	NONB			
	Applied to 2009 distributable amount	474 441			21.
е 5	Remaining amount distributed out of corpus	474,441. NONE			NONE
6	Excess distributions carryover applied to 2009. (If an amount appears in column (d), the same amount must be shown in column (a) )  Enter the net total of each column as	NONA			NONE
_	indicated below:  Corpus Add lines 3f, 4c, and 4e. Subtract line 5	3,428,915.			
		3,420,515.			
D	Prior years' undistributed income Subtract line 4b from line 2b		NONE		
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		NONE		
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions		NONE		
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions	·- <u>··</u> -—·		NONE	
f	Undistributed income for 2009. Subtract lines				
٠	4d and 5 from line 1 This amount must be				
7	distributed in 2010				NONE
′	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	NONE			
8	instructions)	NONE			
•	applied on line 5 or line 7 (see page 27 of the	588,521.			
	instructions)	300,321.			
9	Excess distributions carryover to 2010.	2,840,394.			
10	Subtract lines 7 and 8 from line 6a	2,010,074.			
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008 594,692.				
	Excess from 2009				

	rt XIV Private Oper	ating Foundations (	see page 27 of the		+ VII-Δ α	LOCT	ion 9)	NOT	λD	PLICABI
	If the foundation has					uest	1011 37	NOI	AP.	PUICADI
ıa	foundation, and the ruling			•	-					
ь	Check box to indicate who				. –		4942(j)	(2) 05	$\neg$	4942(j)(5)
Ь	Check box to indicate with	Tax year	private operating rounda				4542(j)	(3) 01		4942(J)(5)
2 a	Enter the lesser of the ad-	<u> </u>	(1.) 2000	Prior 3 years					(e) T	otal
	justed net income from Part  I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(a)	2006				
	return from Part X for each									
	year listed			<del></del>	<del></del>					
b	85% of line 2a				<del></del> -	<del></del> -				
C	Qualifying distributions from Part									
d	XII, line 4 for each year listed .  Amounts included in line 2c not				ļ					
u	used directly for active conduct									
_	of exempt activities	-	<u> </u>							
e	Qualifying distributions made directly for active conduct of				ļ					
	exempt activities Subtract line									
3	2d from line 2c		<u> </u>							
•	alternative test relied upon									
а	"Assets" alternative test - enter									
	(1) Value of all assets		<del>"</del>							
	(2) Value of assets qualifying under section									
h	4942(j)(3)(B)(i)									
	enter 2/3 of minimum invest-									
	ment return shown in Part X,									
_	line 6 for each year listed		· . <u>-</u> .							<del></del>
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)		<u> </u>	<u> </u>						<del></del> -
	port from an exempt									
	organization									
Dа		ary Information (Co	omplete this part	only if the found:	tion bac	4 6	5 000	or mo	<b>70</b>	in accete
ı u	at any time of	during the year - see	page 28 of the in:	structions.)	ition nat	φ.	,,000	01 1110		iii assets
1	Information Regarding		<del></del>	<del></del>						
a	List any managers of	the foundation who h	ave contributed more	than 2% of the tota	l contribut	ions	receive	d by t	ne fe	oundation
	before the close of any	tax year (but only if th	ney have contributed in	nore than \$5,000). (S	ee section	507	(d)(2).)			
	SEE ATTACE	HED DETAIL								
b	List any managers of	the foundation who	own 10% or more of	the stock of a corpo	oration (or	an	equally	large p	orti	on of the
	ownership of a partner									
	SEE ATTACE	HED DETAIL				_				
2	Information Regarding			•						
	Check here ► X if t	he foundation only r	makes contributions	to preselected charit	able orga	nıza	tions ar	nd doe	s no	ot accept
	unsolicited requests f				28 of th	e in	struction	ns) to	indiv	viduals or
	organizations under ot	<u></u>	<del></del>							
а	The name, address, an	d telephone number o	t the person to whom	applications should be	e addresse	d:				
b	The form in which app	lications should be sub	omitted and information	on and materials they	should incl	ude:				
	Amu audamioniau da - 41º		<del> </del>							
C	Any submission deadling	1103.								

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

t XV Supplementary Information ( Grants and Contributions Paid Du	ing the Year or Appr	oved for Fu	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
Paid during the year				
SEE STATEMENT 16			İ	
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Total			▶ 3a	474,4
Approved for future payment				
		1		
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		1		
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			1	

Part XV	-A Analysis of Income-Produc	cing Activ	/ities			
	amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e)
	m service revenue	(a) Business code	(b)	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
•						the metrodecions ;
			<del></del>	-		
f						
g Fee	s and contracts from government agencies					
2 Membe	ership dues and assessments					
	on savings and temporary cash investments					
4 Dividen	ds and interest from securities			14	3.	
5 Net ren	ital income or (loss) from real estate <sup>.</sup>					
a Del	bt-financed property					
b No	t debt-financed property					
6 Net rent	al income or (loss) from personal property .					<u></u>
7 Other II	nvestment income					
8 Gain or	(loss) from sales of assets other than inventory					, <u>-</u>
9 Net inc	ome or (loss) from special events					
10 Gross p	profit or (loss) from sales of inventory					
11 Other r	evenue. a					<del></del>
Ь				-		
d				ļ		
e						
	al. Add columns (b), (d), and (e)				3.	
	Add line 12, columns (b), (d), and (e)				13	3.
	heet in line 13 instructions on page 28 to			A D		
	Relationship of Activities					
Line No.	Explain below how each activithe accomplishment of the fo					
•	page 29 of the instructions )	unuation s	exempt purposes (or	iner man i	by providing failes for	such purposes). (See
	programme measurement,			·		· · · · · · · · · · · · · · · · · · ·
						<del></del>
	<del>                                     </del>		<del></del>		<del></del>	<del></del>
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-			NOT APPLICABLE	F.		
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	<del>                                     </del>		<del></del>			

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	ın sed	ne organization directly ction 501(c) of the Co									Yes	No
а	Trănsf	zations? ers from the reporting fou		•	•							
		ısh								l . I		<u>X</u>
		her assets								1a(2)		<u>X</u>
b		transactions.										v
		eles of assets to a nonchar										<u>X</u>
		irchases of assets from a l ental of facilities, equipme								1b(2) 1b(3)		X
		eimbursement arrangemei								1b(4)		X
		ans or loan guarantees .								1b(5)		X
		erformance of services or i								1b(6)		X
c		g of facilities, equipment,								1c		X
		answer to any of the								the	fair r	narket
	value	of the goods, other	assets, or serv	rices given by th	ne reporting fo	undation	If the found	dation rece	eived less	than	fair i	narket
	value	in any transaction or	sharing arrang	gement, show in	column (d) tl	ne value	of the good	s, other a	assets, or	service	es rec	eived.
		<del></del>				<del></del>						
(a) L	ine no	(b) Amount involved	(c) Name of r	noncharitable exempt	organization	( <b>d</b> ) De:	scription of transfe	ers, transacti	ons, and shar	ng arra	ngeme	nts
	_		_									
		***										
				<u> </u>								
			-									
2a		foundation directly or								$\neg$		No
		n 501(c) of the Code (other		001(c)(3)) or in sec	tion 52//		• • • • • • •	• • • • •	L	Y €	es	л ио
D	if Yes	"complete the following," can Name of organization		(b) Tyne	of organization			(c) Description	n of relations	hin		
		(-,										
		······································		-			•					
				_								
		-										
	Under	penalties of perjury, I decla	re that I have explete Declaration	amined this return, i	ncluding accompa	nying sche	edules and stater	nents, and t	o the best o	f my ki r has ar	nowled	ge and
	Juin 1,		1	1/ 7	tanpayor or ildi	ı					.,	gu
	_	Lars	yli =	suma.			<u>/20/201</u> 0	Exec.	Directo	or_		
5	Sı	gnature of officer or trustee	/ LARRY	A. HARTMAN		Date		Title				
Sign Here		_	_	_	Date		Check If		Preparer's in number (Se	e Signa	ature o	
igi	aid arer's Only	Preparer's	مو مجدد	2-	12/20	1/2010	self-employ	ed <b>►</b>	page 30 of the	he instr	uctions	:)
S	Paid Preparer's Use Only	signature	THOMOS	M DELITEDO		2010		I FINE S	_			
	Prep. Use	Firm's name (or yours if self-employed), address,		ON REUTERS FARRAR COUR		COUNTI	LING)	EIN ►				
		and ZIP code	RICHMO		1, SUIIE		3236	Phone no	804-7	27-2	150	
			KICHM	עא, עמער אור	<del></del>		0230	L LUONE 110				(2009)

orm **990-PF** (2009)

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

Department of the Treasury

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Internal Revenue Service Name of the organization **Employer identification number** 30-0166827 MCCORMICK FAMILY FDN AGENT Organization type (check one) Section: Filers of: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable 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 331/3% 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, charitable, etc., contributions of \$5,000 or more 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). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

JSA

for Form 990, 990-EZ, or 990-PF

ae	of	of Part I

Name of organization		
MCCORMICK FAMILY	FDN AGENT	

	Employer identification number
1	20 01//027

Dart I	Contributors	1000	inctructions	١
rarui	Contributors	(See	instructions	ı

			·
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	VANCE C MCCORMICK TW 21 E MARKET ST YORK, PA 17401	\$19,160.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ANNE MCCORMICK TW  21 E MARKET ST  YORK, PA 17401	\$311,923.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	ANNE MCCORMICK TW  21 E MARKET ST  YORK, PA 17401	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4_	MARGARET MCCORMICK TRUST  21 E MARKET ST  YORK, PA 17401	\$156,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET INVESTMENT INCOME	3
REVENUE AND EXPENSES PER BOOKS	3
	TOTAL
DESCRIPTION	DIVIDENDS

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	NET	INVESTMENT	INCOME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		122.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	122.	122.	
			DESCRIPTION		OTHER NON-ALLOCABLE EXPENSE -	TOTALS	

STATE(S) WHERE THE FOUNDATION IS REGISTERED

STATEMENT 3

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

LARRY A HARTMAN EXECUTIVE DIR

ADDRESS:

M & T BANK, P. O. BOX 2961

HARRISBURG, PA 17401

TITLE:

EXEC. DIR.

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 8

COMPENSATION ..... 20,000.

TOTAL COMPENSATION:

20,000.

\_\_\_\_\_

RECIPIENT NAME:

RECORDING FOR THE BLIND

AND DYSLEXIC

ADDRESS:

20 ROSZEL RD

PRINCETON, NJ 08540

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

PERRY COUNTY COUNCIL OF

THE ARTS

ADDRESS:

PO BOX 354

NEWPORT, PA 17074

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID ...... 5,000.

RECIPIENT NAME:

AMERICAN RED CROSS OF THE

SUSQUEHANNA VALLEY

ADDRESS:

1804 N SIXTH STREET

HARRISBURG PA, PA 17102-1001

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

UNITED WAY OF THE CAPITAL

REGION

ADDRESS:

2235 MILLENIUM WAY

ENOLA, PA 17025

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

TRI-COUNTY ASSN FOR THE

BLIND

ADDRESS:

1800 N SECOND ST

HARRISBURG, PA 17102

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

DAUPHIN COUNTY LIBRARY SYSTEMS

ADDRESS:

101 WALNUT ST.

HARRISBURG, PA 17101

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

NAMING DOWNTOWN BRANCH - 3 YR PLEDGE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

ELIZABETHTOWN COLLEGE

ATTN: BUSINESS OFFICE

ADDRESS:

ONE ALPHA DR

ELIZABETHTOWN, PA 17022-2298

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

**EDUCATION** 

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

MESSIAH COLLEGE

ADDRESS:

ATTN: DEBBIE OWEN

GRANTHAM, PA 17027

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

MARGRET MCCORMICK ENDMT NURSING SCHOLARSHP FD

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

HARRISBURG SYMPHONY

**ORCHESTRA** 

ADDRESS:

800 CORPORATE CIRCLE

HARRISBURG, PA 17110

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

**EDUCATION PROGRAMS** 

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

HUMANE SOCIETY OF HARRISBURG AREA

ADDRESS:

7790 GRAYSON ROAD

HARRISBURG, PA 17111

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PUBLIC SUPPORT

FOUNDATION STATUS OF RECIPIENT:

N/A

RECIPIENT NAME:

CARLISLE FAMILY YMCA

ADDRESS:

311 SOUTH WEST ST

CARLISLE, PA 17013

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

BETHESDA MISSION

ADDRESS:

PO BOX 3041

HARRISBURG, PA 17105

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

DAUPHIN COUNTY HISTORICAL SOCIETY

SOCIETY

ADDRESS:

219 S FRONT ST

HARRISBURG, PA 17104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

COMPUTERIZING MANUSCRIPT ARCHIVES

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

WITF

ADDRESS:

CAPITAL CAMPAIGN

HARRISBURG, PA 17111

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

MATCH FOR THE MAY PLEDGE CAMPAIGN

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

CENTRAL PENNSYLVANIA BLOOD

BANK

ADDRESS:

8167 ADAMS DRIVE

HUMMELSTOWN, PA 17036

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

PUBLIC SUPPORT

FOUNDATION STATUS OF RECIPIENT:

N/A

AMOUNT OF GRANT PAID ...... 5,000.

RECIPIENT NAME:

YWCA GREATER HARRISBURG

C/O R A CURL

ADDRESS:

123 FORESTER ST

HARRISBURG, PA 17102

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

SUPPORT OF WORKS EMPLOYMENT PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

PINNACLEHEALTH HOSPICE

ADDRESS:

3705 ELMWOOD DRIVE

HARRISBURG, PA 17110

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CAMP DRAGONFLY

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

STRAND-CAPITOL PERFORMING

ARTS CENTER

ADDRESS:

50 NORTH GEORGE STREET

YORK, PA 17401

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

THE SECOND MILE

ADDRESS:

1402 SOUTH ATHERTON ST

STATE COLLEGE, PA 16801

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

PUBLIC SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID ...... 5,000.

RECIPIENT NAME:

SPECIAL OLYMPICS

PENNSYLVANIA

ADDRESS:

2570 BLVD OF THE GENERALS

NORRISTOWN, PA 19403

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

HOSPICE OF CENTRAL

PENNSYLVANIA

ADDRESS:

1320 LINGLESTOWN ROAD

HARRISBURG, PA 17110

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

GRETNA MUSIC

ADDRESS:

ONE ALPHA DRIVE

ELIZABETHTOWN, PA 17022

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

JUMP STREET

ADDRESS:

123 FORSTER STREET

PA 17102

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

PAXTON MINISTRIES

ADDRESS:

2001 PAXTON STREET

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

CENTRAL PA FOOD BANK

ADDRESS:

3908 COREY ROAD

HARRISBURG, PA 17109

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

OPEN STAGE OF HARRISBURG

ADDRESS:

223 WALNUT STREET

HARRISBURG, PA 17101

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

CULTURAL ENRICHMENT FUND

ADDRESS:

PO BOX 12084

HARRISBURG, PA 17101

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

PROJECT FORWARD LEAP FDN

ADDRESS:

...

1377-C SPENCER AVE

LANCASTER, PA 17603

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

EXEMPT PRIVATE FDN

RECIPIENT NAME:

CHANNELS

ADDRESS:

3305 N. 6TH STREET

HARRISBURG, PA 17110

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

PUBLIC SUPPORT

FOUNDATION STATUS OF RECIPIENT:

N/A

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

SUSQUEHANNA ART MUSEUM

ADDRESS:

301 MARKET STREET

HARRISBURG, PA 17101

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

BRETHREN HOUSING ASSOC.

ADDRESS:

. .

219 HUMMEL STREET

HARRISBURG, PA 17104

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

COMMUNITY CHECK-UP

CENTER

ADDRESS:

38-C HALL MANOR

HARRISBURG, PA 17104

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

WHITAKER CENTER FOR

SCIENCE AND THE ARTS

ADDRESS:

THE KUNKEL BUILDING

HARRISBURG, PA 17101

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

MCCORMICK FAMILY FDN AGENT
FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

NATIONAL CIVIL WAR MUSEUM

ADDRESS:

1 LINCOLN CIRCLE AT HARRISBURG, PA 17105

RELATIONSHIP:

A/N

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

AMERICAN LITERACY CORP

ADDRESS:

3201 PAXTON ST

HARRISBURG, PA 17111

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL FUNDING

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

TOTAL GRANTS PAID:

474,462.

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