

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



### Form 990-PF

### **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.

► Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

OMB No 1545-0052

Depart	ment	of the Treasury		social security numbers on m 990-PF and its separate				Open to Public Inspection
	_	lar year 2014 or tax year		in 950-FF and its separate	and e		.govnomoopn	Open to Fublic inspection
		foundation					A Employer identificatio	n number
		WILLIAM A A	ND ETHEL M	MCCALL				
		NDATION					45-4244480	)
Num	oer an	d street (or P O box number if	mail is not delivered to street	address)		Room/suite	<b>B</b> Telephone number	
3:	219	S. TORREY	PINES DRIVE			310	702-795-09	912
City	or to	wn, state or province, cou	intry, and ZIP or foreign p	ostal code			C If exemption application is	pending, check here
_L	AS	VEGAS, NV	89146					
G C	neck	all that apply:	Initial return	Initial return of a fo	rmer public	charity	D 1. Foreign organization	is, check here
			Fınal return	Amended return			2. Foreign organizations m	eeting the 85% test .
			Address change	Name change		<del> </del>	Foreign organizations m check here and attach c	omputation
H C		• •	X Section 501(c)(3) ex				E If private foundation st	
		tion 4947(a)(1) nonexem		Other taxable private founda		1	under section 507(b)(1	
		rket value of all assets at e		-	L Acc	ruai	F If the foundation is in a	
(ire		Part II, col. (c), line 16)		ther (specify) imn (d) must be on cash i	hasis )		under section 507(b)(1	I)(D), CHECK Here
	rt I			T .		nvestment	(c) Adjusted net	(d) Disbursements
Га		Analysis of Revenue an (The total of amounts in columnecessarily equal the amount	mns (b), (c), and (d) may not	(a) Revenue and expenses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grant		400,000.			N/A	,
<u>ଫ</u> ୁମ ମ			n is not required to attach Sch B	2007000		-		
7	_	Interest on savings and tempo cash investments	-					
?		Dividends and interest fro	om securities					
<b>-</b>	5a	Gross rents						
_	b	Net rental income or (loss)						
Σ 5 0	6a	Net gain or (loss) from sale of	assets not on line 10					
금리	b	Gross sales price for all assets on line 6a						
SCANNEL MIN 0 2 Revenue	7 Capital gain net income (from Part IV, line 2)					0.		
	8	Net short-term capital gai	ın			<del>-</del>		
$\mathcal{O}$	9	Income modifications Gross sales less returns	İ				<u> </u>	
<b>দ্রে</b>	10a	and allowances				<del></del>		
		Less Cost of goods sold	<u> </u>				-	
		Gross profit or (loss)						- //
		Other income	.h 11	400,000.	-	0.		<u> </u>
	12 13	Total Add lines 1 throug  Compensation of officers, dire		0.		0.		0.
		Other employee salaries a						
		Pension plans, employee						
ės		Legal fees						
E(			1					
낊	Ç.	Accounting fees /Other professional fees						
<u>8</u>	17	Interest	181				_	
rati	18	Taxes R 0 1 2015						
nist	19	Depreciation and depletic	on_1œ				-	<u> </u>
Ē	20	Occupancy EN. U	T					
Ă	21_	I ravel, contenences, and		-		·		
ä	22	Printing and publications		2,743.	<u> </u>	0	-	0.
ing	23	Other expenses	STMT 1	4,143.		<u> </u>		- 0.
Operating and Administrative Expenses	24	Total operating and admexpenses. Add lines 13 to		2,743.		0.		_ 0.
ŏ	25	expenses. Add lines 13 to Contributions, gifts, gran		35,500.	<del> </del>	U		35,500.
	26							
	20	Add lines 24 and 25	, p. somonto.	38,243.		0 .		35,500.
	27		e 12:					
		Excess of revenue over exper		361,757.				
	l .	Net investment income				0 .		
	C	Adjusted net income (ff.	negative, enter -0-)		<u> </u>	<del></del>	N/A	1

THE WILLIAM A AND ETHEL M MCCALL

Form 990-PF (2014) FOUNDATION	<u>45-4</u>	45-4244480 Page 2			
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market		
1 Cash - non-interest-bearing	602,400.	965,062.	965	,062.	
2 Savings and temporary cash investments					
3 Accounts receivable ►					
Less: allowance for doubtful accounts			·		
4 Pledges receivable ►					
Less; allowance for doubtful accounts		_		<del></del>	
5 Grants receivable					
6 Receivables due from officers, directors, trustees, and other					
disqualified persons					
7 Other notes and loans receivable					
Less: allowance for doubtful accounts					
9 Prepaid expenses and deferred charges  100 Invectments - U.S. and state government obligations					
9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations					
To a investments - 0.5. and state government obligations					
b Investments - corporate stock c Investments - corporate bonds					
- I					
11 Investments - land, buildings, and equipment basis  Less accumulated depreciation					
12 Investments - mortgage loans					
13 Investments - other					
14 Land, buildings, and equipment: basis			<u>-</u>		
Less accumulated depreciation					
15 Other assets (describe ▶					
16 Total assets (to be completed by all filers - see the					
instructions. Also, see page 1, item I)	602,400.	965,062.	965	,062.	
17 Accounts payable and accrued expenses		905.			
18 Grants payable					
10 Defendation					
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable					
음 21 Mortgages and other notes payable					
22 Other liabilities (describe >)					
23 Total liabilities (add lines 17 through 22)	0.	905.			
Foundations that follow SFAS 117, check here					
and complete lines 24 through 26 and lines 30 and 31.					
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
25 Temporarily restricted					
26 Permanently restricted					
Foundations that do not follow SFAS 117, check here					
and complete lines 27 through 31.					
27 Capital stock, trust principal, or current funds	0.	0.			
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	0.	0.			
29 Retained earnings, accumulated income, endowment, or other funds	602,400.	964,157.			
30 Total net assets or fund balances	602,400.	964,157.			
	602 400	065 060			
31 Total liabilities and net assets/fund balances	602,400.	965,062.			
Part III Analysis of Changes in Net Assets or Fund Ba	lances				
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 3	0				
(must agree with end-of-year figure reported on prior year's return)		1	602	,400.	
2 Enter amount from Part I, line 27a		2		,757.	
3 Other increases not included in line 2 (itemize)		3		0.	
4 Add lines 1, 2, and 3		4	964	<u>,157.</u>	
5 Decreases not included in line 2 (itemize)				0.	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	964 Form <b>990-</b> 1	<u>,157.</u>	

orm 990-PF (2014) <b>FO</b>	UNDAT	LIAM A AND E'S ION Desses for Tax on Inc						4	15-424	4480	Page 3
(a) List and des	scribe the k	ind(s) of property sold (e.g., or common stock, 200 shs.	, real estate,	Income	1 1	low ac - Purc - Dona	equired hase ation		acquired day, yr.)	(d) Dat (mo., da	
a b No	ONE										
C	OME:										
d											
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		t or other basis xpense of sale					Gain or (loss) us (f) minus (		
a											
b C	_										
d							-				
e Complete only for coasts show		solume (b) and award but	ha faundation	02.12/21/60					0-1 (h)		
Complete only for assets show (i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any				. (k), but	Col. (h) gain not less than s (from col. (	1 -0-) or	
a										-	
b	-										
<u>c</u> d											<del></del>
e							1				
Capital gain net income or (net Net short-term capital gain or (	loss) as def	ined in sections 1222(5) and	ın Part I, line	7 7	}	2_					
If gain, also enter in Part I, line If (loss), enter -0- in Part I, line		c).			<b>)</b>	3					
Part V Qualification	Under S	Section 4940(e) for	Reduced	Tax on Net	inv	estn	nent Inc	ome			•
For optional use by domestic privilege of section 4940(d)(2) applies, leave was the foundation liable for the section of the s	e this part b ection 4942	lank. I tax on the distributable am	ount of any ye	ear in the base pe		e.)				Yes	X No
f "Yes," the foundation does not q 1 Enter the appropriate amount					entries	S					
(a) Base period years Calendar year (or tax year begir	nning in)	( <b>b)</b> Adjusted qualifying dist	tributions	Net value of no	(c) oncha	rıtable			Distrib (col. (b) div		
2013			<u>5,600.</u> 9,000.				1,290 4,288				<u>91009</u> 70553
2012 2011			9,000. 0.				4,200	,	<u>_</u> .	• •	70333
2010			0.								
2009			0.			_			1		
<ul><li>Total of line 1, column (d)</li><li>Average distribution ratio for the</li></ul>	ne 5-vear ba	ase period - divide the total c	on line 2 by 5,	or by the numbe	r of ye	ears		2		. 4	61562
the foundation has been in exis			• ,	·				3			92312
4 Enter the net value of nonchar	table-use as	ssets for 2014 from Part X, I	line 5					4			,067.
5 Multiply line 4 by line 3								5	-	56	,501.
6 Enter 1% of net investment inc	come (1% o	f Part I, line 27b)						_6			0.
7 Add lines 5 and 6								7			,501.
8 Enter qualifying distributions f								8	<u> </u>	35	,500.
If line 8 is equal to or greater the See the Part VI instructions.	han line 7, c	theck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	l% tax	rate.				

THE WILLIAM A AND ETHEL M MCCALL

Form 990-F[20]145 FOUNDATION  Fact VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)  1a Extension programmy countabloses dissocrated in section 4940(f)(2), check here ▶ □ and enter "Wir on line 1. Date of Luing or disternation state in the section 4940(e) requirements in Part V, check here ▶ □ and enter "Wir on line 1. Date of Luing or disternation state in the section 4940(e) requirements in Part V, check here ▶ □ and enter "Wir on line 1. Date of Luing or disternation state in the section 4947(s) It trusts and taxable foundations only. Others enter -0-)  2	Form	1990-PF (2014) FOUNDATION 45-4	4244	480		Page 4
Dates of ruling or determination letter:  (aftech copy of feet if Inecessary-see instructions)  b Demestic boundations that meet the section 4940(e) requirements in Part V, check here > and enter 1%  of Part I, lee 279  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-)  3 Add lines 1 and 2  3 C.  Subtitle A (normon) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  6 B						
Dates of ruling or determination letter:  (aftech copy of feet if Inecessary-see instructions)  b Demestic boundations that meet the section 4940(e) requirements in Part V, check here > and enter 1%  of Part I, lee 279  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-)  3 Add lines 1 and 2  3 C.  Subtitle A (normon) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0-  6 B	1a			-		
b Domestic foundations that meet the section 4940(c) requirements in Part V, chack here ▶ and enter 1% of Part I, line 12; oct. (b).  2 A All Other domestic foundations enter 2% of line 27b. Exempt foreign organizations ester 4% of Part I, line 12; oct. (b).  2 Tax Under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  4 Subtilité A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment iscome. Subtract line 4 from line 3. It zero rises, enter -0-  5 Cordistrayments:  5 0_0.  6 Cordistrayments:  5 0_0.  6 Cordistrayments:  5 0_0.  7 0_0.  8 Enter any panetary foreign organizations - tax withheld at source  6 0_0.  8 Enter any panetary for underpoyment of estimated tax. Check here □ if Form 2220 is attached  8 Enter any panetary for underpoyment of estimated tax. Check here □ if Form 2220 is attached  9 Tax due, If the total of lines 5 and 8 is minor than hine 7, enter amount overpaid  10 Enter the amount of line 10 to be. Credited to 2015 estimated tax ▶ Returned ▶ 10  11 Enter the amount of line 10 to be. Credited to 2015 estimated tax ▶ Returned ▶ 11  12 During the tax year, did the foundation attempt to inflience any national, state, or local legislation or did it participate or intervene in any ophistical campaign?  10 During the tax year, did the foundation attempt to inflience any national, state, or local legislation or did it participate or intervene in any ophistical campaign?  10 During the tax year, did the foundation attempt to milience any national, state, or local legislation or did it participate or intervene in any ophistical campaign?  10 During the tax year, did the foundation affective indirective						
of Part I, line 27b 4 All Other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 O. 5 Add lines 1 and 2 5 Subtite A, (normsetic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lincome. Subtract line 4 from line 3.1 tzero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3.1 tzero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3.1 tzero or less, enter -0- 5 O. 6 Text based on investment lincome. Subtract line 4 from line 3.1 tzero or less, enter -0- 6 Better transport organizations - tax withheld at source 6 Better 1 tzero or less, enter -0- 6 Better 1 and a spaniens. Add lines 8 a through 8d 6 Better any penalty for underpayment or estimated tax. Port of 1 tzero or less, enter -0- 7 O. 8 Enter any penalty for underpayment or estimated tax. Port and tax or line 4 to line 5 and 8 through 8d 6 Enter the any department of line 10 to lice. Text enter the 1 to line 5 and 8, enter the annount overpaid 1 Diverpayment. If line 7 a more than the 10tol of lines 5 and 8, enter the annount overpaid 1 Diverpayment. If line 7 a more than 10to drine 5 and 8, enter the annount overpaid 1 Diverpayment. If line 7 a more than 10to drine 5 and 8, enter the annount overpaid 2 Diverpayment. If line 7 a more than 10to drine 5 and 8, enter the annount overpaid 3 Diverpayment. If line 6 a more time 10to drine 1 line	b					0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  Subfille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment lineame. Subtract line 4 from line 5. If zero or less, enter -0-  5 Tox based on investment lineame. Subtract line 4 from line 5. If zero or less, enter -0-  5 Tox based on investment lineame. Subtract line 4 from line 5. If zero or less, enter -0-  5 Tox based on investment lineame. Subtract line 4 from line 5. If zero or less, enter -0-  6 Text paid with application for extension of time to file (Form 8588)  6 Total credits and payments. Add lines 6s through 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  8 Tax die. If the total of lines 5 and 6 is more than line 7, enter amount owed  9 O.  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Tenter the amount of line 10 to the Credited to 2015 estimated tax.  12 Total credits and payments. Regarding Activities  13 Total credits and payments. See than 10 to the see that the amount overpaid  14 Total credits and payments. Plane 7 is more than the total of lines 5 and 8, enter the amount overpaid  15 Total credits and payments. Plane 7 is more than the total of lines 5 and 8, enter the amount overpaid  16 Tenter the amount of line 10 to the Credited to 2015 estimated tax.  17 Total credits and payments. Plane 7 is more than the total of lines 5 and 8, enter the amount overpaid  18 During the tax year, dut the clumdation attempts to influence any national, state, or local legislation or did it participate or intervale in any payment to did the form 1200 during the year for political expenditures (section 4955) imposed during the year for political expenditures (section 4955) imposed during the year for political expend						
3 Add lines 1 and 2 Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment fincome. Subtract line of 4 from line 3. If zero or less, enter -0- 6 CredityPayments; 2 C904 estimated tax payments and 2013 overpayment credited to 2014 6 Exempt foreign organizations - 1 ax withheld all source 6 Tax pad with application for actions on of time to file (Form 8868) 6 Ed 6 Total credits and payments. Add lines 6 a through 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 a through 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 attrough 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount own 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount own 10 Total payments. If line 7 is more than 10 to 0 be. Gredited to 2015 estimated tax ▶	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
3 Add lines 1 and 2 Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment fincome. Subtract line of 4 from line 3. If zero or less, enter -0- 6 CredityPayments; 2 C904 estimated tax payments and 2013 overpayment credited to 2014 6 Exempt foreign organizations - 1 ax withheld all source 6 Tax pad with application for actions on of time to file (Form 8868) 6 Ed 6 Total credits and payments. Add lines 6 a through 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 a through 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 attrough 6 d 6 Enter any penalty for underpayment of estimated 1ax. Check here ☐ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount own 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount own 10 Total payments. If line 7 is more than 10 to 0 be. Gredited to 2015 estimated tax ▶		· · · · · · · · · · · · · · · · · · ·				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Crediss/Payments:  2 014 estimated tax payments and 2013 overpayment credited to 2014 b Exempl foreign organizations - tax withheld at source Tax paid with application for exertesion of time to the (Form 8869) d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d d S Tax due, If the total of lines 5 and 8 simple state of the amount overpaid Trax due, If the total of lines 5 and 8 simple state and the amount overpaid Total credits. There is now than the total of lines 5 and 8, enter the amount overpaid Total credits. There is now than the total of lines 5 and 8, enter the amount overpaid Total credits. Take Temporary of the amount overpaid Total credits. Statements Regarding Activities Tax due, If the total of lines 5 and 8, enter the amount overpaid Total credits. Statements Regarding Activities Tax due, If the total of lines 5 and 8, enter the amount overpaid Total credits. Statements Regarding Activities Total credits. Statements Regarding Activities Total credits. Statements Regarding Activities Total supraging?  Did if spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  If the answer is "Yes" to ta or 15, attach a detailed descorption of the activities and copies of any materials published or distributed by the foundation machine activities and copies of any materials published or distributed by the foundation on connection with the activities  Did if spend more than \$100 during the year (either directly or indirectly) for political campes of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the fou						
\$ Credita-Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 \$ Exempt foreign organizations - tax withheld at source \$ Tax paid with application for extension of time to file (Form 8868) \$ Each	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
2 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withhold at source c Tax paid with application for extension of time to tile (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here of the form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than hine 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than hine 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than hine 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than hine 7, enter amount owed 9 Tax due. If the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of lines 10 to bic: Oredited to 2015 estimated tax ▶ 10 1 11 Enter the amount of lines 10 to bic: Oredited to 2015 estimated tax ▶ 10 1 12 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 any political campaign? 1 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  If the answer is "Yes" to 1 or 15, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 1 Did it spend from \$120-POL for this year? 2 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. (	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				0.
b Exempt foreign organizations - Tax withheld at source	6	Credits/Payments:			•	
c Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached  9 Tax due, If the folat of lines 5 and 6 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 owerpaid  11 Enter the amount of line 10 to be: Credited to 2015 estimated tax. ►  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  1ff the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  c Did the foundation in Form 1120-PDI. for this year?  1gh Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  1gh Time 1120-PDI. for this year?  2 Enter the amount (if any) at 2 to political expenditures (section 4955) imposed during the year:  2 In "Yes," attach a detailed description of the activities  3 In "Yes," attach a detailed description of the activities  4 In the foundation managers. S. O  2 Has the foundation managers and payment anature managers. S. O  2 Has the foundation have any payment an	a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a			•	
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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  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?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  NV  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  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 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  STMT 2	2	Has the foundation engaged in any activities that have not prewously been reported to the IRS?		2		<u> X</u>
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	10		2	-	x	
	_10	DITTI				(2014)

423531 11-24-14

orm	1 ME WILLIAM A AND ETHEL M MCCALL 1990-PF (20,14) FOUNDATION 45-424	4400		D <b>-</b>
	1990-PF (20,14) FOUNDATION 45-424  ort VII-A Statements Regarding Activities (continued)	4480		Page 5
	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 instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	'''		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► JAMES B. MCCALL Telephone no. ► 702-7	95-0	912	
	Located at ► 2470 ST. ROSE PARKWAY, STE 310, HENDERSON, NV ZIP+4 ►8	9074	-77	75
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	. !	Yes	No
	securities, or other financial account in a foreign country?	16		_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	- 1		
_	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		<b>N</b>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
18	During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disgualified person?  Yes X No	1 1		ı
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
	a disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(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.)	1		
ŧ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
(	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 2014?	1c -		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	į		
	defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		ĺ	
	before 2014? Yes X No	Ì		
	If "Yes," list the years \( \sum_{			
'	••			ļ
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)  N/A	2b	1	!
	the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	-20		
3:	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ŀ		
•	during the year?	1	ŀ	}
1	b if "Yes," did it have excess business holdings in 2014 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 bequest; 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 2014)  N/A	3b		<u></u>
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b 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 2014?	4b		X
	F	orm <b>99</b> 0	0-PF	(2014)

423551 11-24-14 Form **990-PF** (2014)

Total number of other employees paid over \$50,000

#### THE WILLIAM A AND ETHEL M MCCALL

Form 990-PF (2014) FOUNDATION	45-42	244480 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(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		<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
1 N/A		
2		
2		
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 line	s 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.  3		
Tatal Add loans 4 Abras on O	<b>▶</b>	Λ

Form **990-PF** (2014)

	m 990-PF (2014) <b>FOUNDATION</b>	45-42444	80 Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, see instruc	ctions)
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	0.
b	Average of monthly cash balances	1b	621,388.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	621,388.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	<u>.</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	621,388.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>9,321.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	612,067.
6	Minimum investment return. Enter 5% of line 5	6	30,603.
Р	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
_	foreign organizations check here   and do not complete this part.)	<del></del>	20 602
1	Minimum investment return from Part X, line 6	1	<u>30,603.</u>
2a		- 1	
b	Income tax for 2014. (This does not include the tax from Part VI.)	4	•
C		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,603.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	<u>30,603.</u>
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	30,603.
Р	Part XII Qualifying Distributions (see instructions)		
<u> </u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		" <u>.</u> ,,
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	35,500.
b	Program-related investments - total from Part IX-B	1b	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	
	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	<u>35,500.</u>
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35,500.

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

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

FOUNDATION

45-4244480 Page 9

Part XIII Undistributed Income (see	instructions)			
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7	·	· · · · · · · · · · · · · · · · · · ·		30,603.
2 Undistributed income, if any, as of the end of 2014				•
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011 d From 2012 7,786.				
e From 2013 11,535.				
f Total of lines 3a through e	19,321.			
4 Qualifying distributions for 2014 from	13/3221			
Part XII, line 4: ►\$ 35,500.				
a Applied to 2013, but not more than line 2a			0.	
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 2014 distributable amount				30,603.
e Remaining amount distributed out of corpus	4,897.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,218.			
<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.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2015				0.
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 2009		-		
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.		-		
Subtract lines 7 and 8 from line 6a	24,218.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011			1	
c Excess from 2012 7,786.				
d Excess from 2013 11,535.				
e Excess from 2014 4,897.				F 000 DE (00 :::
423581 11-24-14				Form <b>990-PF</b> (2014)

FOUNDATION

45-4244480

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year OPERATION SMILE PUBLIC GENERAL FUND 3641 FACULTY BLVD. VIRGINIA BEACH, VA 23453 20,000. PUBLIC GENERAL FUND SALVATION ARMY 2900 PALOMINO LANE 12,000. LAS VEGAS, NV 89107 PUBLIC GENERAL FUND LIFE SKILLS FORE MONTANA YOUTH 821 N. 27TH STREET 2,000. BILLINGS, MT 59101 PUBLIC GENERAL FUND TOURO UNIVERSITY 874 AMERICAN PACIFIC DRIVE 1,500. HENDERSON, NV 89014 ▶ 3a 35,500. Total b Approved for future payment NONE **▶** 3b Total Form 990-PF (2014)

FOUNDATION Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Uniterated	business income	Exclu	ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Iunction income
a	_				
b	_				
<u> </u>					
d					
e				<u> </u>	
g Fees and contracts from government agencies		·			
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:		·			
a Debt-financed property					
b Not debt-financed property			<u> </u>		
Net rental income or (loss) from personal					
property			<u> </u>		
Other investment income					
Gain or (loss) from sales of assets other	1				
than inventory		<del></del>	-		
Net income or (loss) from special events			<u> </u>		
Gross profit or (loss) from sales of inventory			ļ		
Other revenue:					
a	l l				
b	-		-		
·	1		<del> </del> -		
d	<del>-</del>	_·····	<del>                                     </del>	<del>                                     </del>	-
				0.	<del>                                     </del>
Subtotal Add columns (b) (d) and (a)		() .			I G
		0.			
Total Add line 12, columns (b), (d), and (e)	s.)	0.	J		<u> </u>
2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities				13	
B Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	0
Part XVI-B Relationship of Activities	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	
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Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	
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Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities  ine No. Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	
Total Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	C
B Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	mplishment of Ex	kemp	ot Purposes	0

990-PF (2014)	FOUNDATION		45-4244480	Page 13
+ Y\/II	nformation Bogarding Transfers To	and Transactions and Palatic	anahina With Manaharitahla	

		Exempt Organi	izations						
1		•			g with any other organizatio		on 501(c) of	Yes	s No
_		(other than section 501(c) from the reporting founda			7, relating to political organi	izations?			
a	(1) Cash		ation to a noncharita	Die exempt ort	janization of.			1a(1)	x_
	(1) Cash (2) Othe							1a(2)	X
h	Other tran								<del> </del>
Ī		of assets to a noncharitat	ble exempt organiza	tion				1b(1)	x_
		hases of assets from a nor	· -					1b(2)	
	` '	al of facilities, equipment, (	•					1b(3)	X X X X X
		bursement arrangements						1b(4)	X
	(5) Loan	s or loan guarantees						1b(5)	X
	(6) Perfo	ormance of services or me	mbership or fundrai	sıng solicitatio	ns			1b(6)	X
C	Sharing o	f facilities, equipment, ma	iling lists, other asse	ts, or paid em	oloyees			1c	<u> </u>
d					dule. Column <b>(b)</b> should alv				
					ed less than fair market valu	e in any transaction	or sharing arrangement	, show in	
		d) the value of the goods,				1 40			
<b>a</b> ) L	ine no	(b) Amount involved	(c) Name of		exempt organization	(0) Description	of transfers, transactions, an	d sharing arranger	ments
				N/A					<del></del>
			<del> </del>						
		··	<del></del>		44				
						-	<u> </u>		
			<del></del>	_					
						_			
					<del></del>				
		<del></del>							
	-	-							
2a	Is the for	indation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described			
	ın sectioi	n 501(c) of the Code (othe	r than section 501(c	)(3)) or in sect	ion 527?			Yes	X No
b	If "Yes," o	complete the following sch			(1) T (	· · · · · · · · · · · · · · · · · · ·	(-) Description of relation	nohin	
		(a) Name of org	janization		(b) Type of organization		(c) Description of relation	isiip	<del></del>
		N/A	<del>, , , , , , , , , , , , , , , , , , , </del>	***				· <del></del>	·
						<u></u>			
		<del></del>				-			
	Unde	er penalties of perjury, I declare	that I have examined th	is return, includir	I ng accompanying schedules and	statements, and to the	best of my knowledge	May the IRS discus	no thus
Si	ign and	pelief, it is true, correct, and cor	mplete Declaration of p	reparer (other tha	n taxpayer) is based on all inform	nation of which prepare	r nas any knowledge	eturn with the prep shown below (see	parer
	ere	x James L	9. huch	X lies	Sent 8/20/2014	5 Pres	edent	X Yes	No No
	Sig	nature of officer or trustee	 e	<del>-   /- /-</del>	Date	Title	L		
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PTII	N	
				54.1	· C		self- employed		
P	aid	STEPHANIE	SAND, CPA	3 Johna	me Word CPA	03/30/15	P	0016824	7
	reparer	Firm's name ► STE		CHIBALD	& BARNEY, L	LP	Firm's EIN ► 88-	0382649	
U	se Only								
					N_BLVD., SUI	TE 250			
		LA	AS VEGAS,	NV 891	.17		Phone no. (702	<u>) 579-70</u>	
								Form <b>990-P</b>	<b>F</b> (2014)

## Schedule B

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2014

Name of the organization
THE WILLIAM A AND ETHEL M MCCALL

FOUNDATION

Employer identification number

45-4244480

Organization type (check one). Filers of: Section: 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 X 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 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization
THE WILLIAM A AND ETHEL M MCCALL
FOUNDATION

Employer identification number

45-4244480

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed.
(a)	(b)	(c)
	N 11 12 12 15 4	T

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(a) Type of contribution
1	JAMES B. MCCALL  3219 S TORREY PINES DR  LAS VEGAS, NV 89146	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b></b> \$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

THE WILLIAM A AND ETHEL M MCCALL

**FOUNDATION** 

Employer identification number

45-4244480

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<del></del>	
		\$	
(a)		(c)	
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Ecca. promot memoral property given	(see instructions)	
	3-14	\$	990, 990-EZ, or 990-PF) (

### WILLIAM A AND ETHEL M MCCALL  **COUNDATION** **COUNDATION** **COUNDATION** **Country of the process of the	lame of organ				Employer identification number
Part II   Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,00 they from any execution of the property of the pro			LL		45 4044400
(a) No. Part   (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transferer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (f) Description of how gift is held Part    (a) No. Part    (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part    (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (f) No. Part    (g) No. Part    (h) Purpose of gift (e) Use of gift (d) Description of how gift is held Part    (h) Purpose of gift (e) Use of gift (d) Description of how gift is held Part    (g) No. Part    (h) Purpose of gift (e) Use of gift (d) Description of how gift is held Part    (h) Purpose of gift (e) Transfer of gift (d) Description of how gift is held Part    (e) Transfer of gift (d) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (e) Transfer of gift (e) Description of how gift is held Part    (f) Transfer of gift (e) Description of how gift is held Part    (f) Transfer of gift (f) Description of how gift is held Part    (f) Transfer of gift (f) Description of how gift is held Part    (f) Transfer of gift (f) Description of how gift is held Part    (	Part III	Exclusively religious, charitable, etc., contribut the year from any one contributor. Complete colur completing Part III, enter the total of exclusively religious, char	nns (a) through (e) and the follow aritable, etc., contributions of \$1,000 or	WING line entry, For organization	r (10) that total more than \$1,000 for
(e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (from Part 1  (e) Transfer of gift  (e) Transfer of gift  (from Part 1  (from Part 1  (gransfer of gift)  (h) Purpose of gift (h) Pur	(a) No.	Ose duplicate copies of Part III if additional sp	pace is needed.	<del></del>	
(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (a) No. from Part 1  (b) Purpose of gift (c) Use of gift (d) Description of how gift is held  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (a) No. Part 1  (b) Purpose of gift (c) Use of gift (d) Description of how gift is held  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (e) Transfer of gift  (f) Description of how gift is held  (h) Purpose of gift (d) Description of how gift is held  (e) Transfer of gift (d) Description of how gift is held  (e) Transfer of gift (d) Description of how gift is held	from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
(a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift (d) Description of how gift is held  Transferee's name, address, and ZIP + 4  (e) Transfer of gift (d) Description of how gift is held  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (f) Description of how gift is held  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (f) Description of how gift is held  (g) No. (h) Purpose of gift (d) Description of how gift is held  (g) No. (h) Purpose of gift (d) Description of how gift is held  (h) Purpose of gift (d) Description of how gift is held					
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(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transfer to transferee  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transfer to transferee  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transfer to transferee  (e) Transfer of gift  (f) Description of how gift is held  (e) Transfer of gift  (f) Description of how gift is held		(h) Purpose of gift	(c) Use of gift	(d) Des	crintian of how gift is held
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(a) No. from Part I  (b) Purpose of gift (c) Use of gift (d) Description of how gift is held  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (a) No. from Part I  (b) Purpose of gift (c) Use of gift (d) Description of how gift is held  (e) Transfer of gift	-		(e) Transfer of gif		
(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (a) No. from Part I  (b) Purpose of gift  (c) Use of gift  (d) Description of how gift is held  (e) Transfer of gift  (d) Description of how gift is held  (e) Transfer of gift  (f) Use of gift  (h) Description of how gift is held  (e) Transfer of gift		Transferee's name, address, and 2			ansferor to transferee
(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee  (a) No. from Part I  (b) Purpose of gift  (c) Use of gift  (d) Description of how gift is held  (e) Transfer of gift  (d) Description of how gift is held  (e) Transfer of gift  (f) Use of gift  (h) Description of how gift is held  (e) Transfer of gift	-				
(a) No. from Part I  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift	from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
(a) No. from Part I  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift	-		(e) Transfer of git		
(e) Transfer of gift					ansferor to transferee
(e) Transfer of gift					
	(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee	-	(e) Transfer of gift			
		Transferee's name, address, and a	ZIP + 4	Relationship of tr	ansferor to transferee

FORM 990-PF	OTHER EXPENSES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LICENSE PROFESSIONAL FEES	25. 2,718.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	2,743.	0.		0.	
FORM 990-PF LIST O	F SUBSTANTIA PART VII-A,	L CONTRIBUTOR LINE 10	S S	TATEMENT 2	
NAME OF CONTRIBUTOR	ADDR	ESS			
JAMES B. MCCALL	3219	S. TORREY PI	NES DR.		

LAS VEGAS, NV 89146