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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		idar year 2015 or tax year beginning		<u>, 2</u> 015, a	nd ending		, 20
		pundation			A Employe	er identification numb	per
TH	IE MCV	VILLIAMS FOUNDATION				47-68627,00	
NL	ımber ar	nd street (or P O box number if mail is not delivered to street address)		Room/suite	e B Telephor	e number (see instruc	ctions)
		TEENTH STREET on, state or province, country, and ZIP or foreign postal code			_	(304) 233-245	50
		• • • • • • • • • • • • • • • • • • • •			C If exempt	tion application is pen-	ding, check here 🕨 🗌
		IG, WV 26003					
G	Cneci	call that apply: Initial return Initial return Initial return		public cha	unty D 1. Foreigi	n organizations, check	chere ▶
		☐ Final return ☐ Amended			2. Foreigi	n organizations meetir	na the 85% test.
_	Chasl	Address change Name cha			check	here and attach comp	outation ▶ 🗀
_	Crieci	type of organization: Section 501(c)(3) exempt p	orivate founda	ation		foundation status was 07(b)(1)(A), check here	s terminated under
屵	Secur	on 4947(a)(1) nonexempt charitable trust			on		· ·
•			i: 🗹 Cash		r intrie tout	ndation is in a 60-mon	th termination
	line 1				under sec	ction 507(b)(1)(B), chec	ck here ▶
Þ	art I		e on cash basis	:)			
	ai t i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue		Net investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions).)	expenses p books	'e' `-'	ıncome	income	purposes
	1	Contributions, gifts, grants, etc., received (attach schedule)	 	70.45			(cash basis only)
	2	Check ► ☐ If the foundation is not required to attach Sch B	6993	76.16		** *	<u> </u>
	3	Interest on savings and temporary cash investments	,		*	***	***
	4	Dividends and interest from securities		55.26	155.26		
	5a	Gross rents	112	08.84	11208.84		* *
	b	Net rental income or (loss)		-0-		<u> </u>	* *
Φ	6a	Net gain or (loss) from sale of assets not on line 10		, » 50.34	* *	,	*
2	b	Gross sales price for all assets on line 6a		58.31	*		
Revenue	7	Capital gain net income (from Part IV, line 2)			i	<u> </u>	<u> </u>
æ	8	Net short-term capital gain					-
	9	Income modifications	` *		> 4		<u> </u>
	10a	Gross sales less returns and allowances					1
	b	Less: Cost of goods sold		-			1
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					, ,
	12	Total. Add lines 1 through 11	71249	00 57	11204.44		
	13	Compensation of officers, directors, trustees, etc.		5000	11364.41 5000		
benses	14	Other employee salaries and wages		3000	3000		5000
ä	15	Pension plans, employee benefits				·	
츛	16a	Legal fees (attach schedule)	251	39.21	2589.21		2500.04
ÚÌ A	Ь	Accounting fees (attach schodule)	230		2303.21		2589.21
ĭve	С	Other professional fees (attack se ledelle) FD	106	59.87	1969.87		1000.0-
istrativ	17	Interest	130		1303.67		1969.87
ist	18	Taxes (attach schedule) (see instructions)					
dmin	19	Taxes (attach schedule) (see instructions) 4. 2016 Depreciation (attach schedule) and depletion 6.					
ğ	20						<u> </u>
ďρ	21	Travel, conferences, and meetings FN 117.					
and	22	Printing and publications					
	23	Other expenses (attach schedule)					
Operating	24	Total operating and administrative expenses.					
er		Add lines 13 through 23	955	9.08	9559.08		9559.08
၉	25	Contributions, gifts, grants paid					
_	26	Total expenses and disbursements. Add lines 24 and 25	955	9.08	9559.08		9559.08
	27	Subtract line 26 from line 12:					
İ		Excess of revenue over expenses and disbursements	70293	9.44			
		Net investment income (if negative, enter -0-)			1944.38		
		Adjusted net income (if negative, enter -0-)					
		ranti Flantication A.A.M. 11 1 1 11					

Par	ŧΠ	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End of y	rear
			(a) Book Value	(b) Book Val	ue	(c) Fair Market Value
	1	Cash—non-interest-bearing	-0-	440	50.50	44050.50
	2	Savings and temporary cash investments		808	376.68	80876.68
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Fieures receivable				7
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable	1			
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
i		Less: allowance for doubtful accounts				_
Assets	8	Inventories for sale or use				
SS	9	Prepaid expenses and deferred charges		-		
ٔ کھ	10a	Investments—U.S. and state government obligations (attach schedule)				•
	b	Investments—corporate stock (attach schedule)		409,0	45.30	415646.59
	C	Investments—corporate bonds (attach schedule)	-0-	171,5	89.62	169350.40
- 1	11	Investments – land, buildings, and equipment. basis ▶	\$			
		Less. accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				<u> </u>
	14	Land, buildings, and equipment: basis ▶				
		Less. accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers-see the				
		ınstructions. Also, see page 1, item I)				709924.17
	17	Accounts payable and accrued expenses				**
ις i	18	Grants payable				
=	19	Deferred revenue				
运 [3	20	Loans from officers, directors, trustees, and other disqualified persons				
· <u>B</u> 2	21	Mortgages and other notes payable (attach schedule)			,,,	* * *
4	22	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)				
	23	Total liabilities (add lines 17 through 22)				
Balances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				3
<u>ا ۾</u>	24	Unrestricted				
<u>بر</u> ق	25	Temporarily restricted				,
	26	Permanently restricted				s.**
됩		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.				*
ò 2	27	Capital stock, trust principal, or current funds				
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund				8
8 2	29	Retained earnings, accumulated income, endowment, or other funds				
ĕ 3	30	Total net assets or fund balances (see instructions)				
<u>₹</u> इ	31	Total liabilities and net assets/fund balances (see	· ·	-	-	
~		ınstructions)	-0-	705 5	62.10	•
Part		Analysis of Changes in Net Assets or Fund Balances			<u>02.101</u>	
		net assets or fund balances at beginning of year-Part II, colu	ımn (a), line 30 (must	agree with		
	end-	of-year figure reported on prior year's return)			1 1	-0-
2	Enter	amount from Part I, line 27a			2	
3	Othe	r increases not included in line 2 (itemize) ▶		·	3	-0-
4	Add I	lines 1, 2, and 3			4	702,939.44
5	Decr	eases not included in line 2 (itemize) UNREALIZED CAPITAL LO	OSS	· · ·	5	(2,574.40)
		net assets or fund balances at end of year (line 4 minus line 5)-		€ 30	6	700,365.04
						orm 990-PF (2015)

		kınd(s) of property sold (e g , real estat e, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>						
b						
<u>C</u>						
<u>d</u>						
е			,			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g)
a						
b_						
C						
d						
е			<u> </u>			
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69		ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		ot less than -0-) or from col (h))
a						
b						
C						
d						
е						_
2	Capital gain net income or		also enter in Pa , enter -0- in Pai		2	
3		ı or (loss) as defined ın sections I, line 8, column (c) (see ınstru				
				,	3	-0-
Part		er Section 4940(e) for Redu			Income	
Was t	s," the foundation does not	e this part blank. section 4942 tax on the distribu qualify under section 4940(e). I unt in each column for each ye	o not complete	this part.		✓ Yes □ No
<u>'</u> -			di, see ille liisiit		aking any entries.	(d)
Cal	(a) Base penod years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value of	(c) f noncharitable-use a	ssets Col (b)	stribution ratio divided by col (c))
	2014					
	2013					
	2012		-			
	2011					
	2010					
_						
2	Total of line 1, column (d)	or the 5-year base period—div				0-
3		or the 5-year base period—div ation has been in existence if le				
4	Enter the net value of nonc	charitable-use assets for 2015 t	from Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27t	o)		. 6	
7	Add lines 5 and 6				. 7	
8		ns from Part XII, line 4				-0-
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box i	n Part VI, line 1b	, and complete	that part using a	1% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	<u>instrı</u>	<u>ıctio</u>	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1			<u> </u>			
	Date of ruling or determination letter: January, 2016 (attach copy of letter if necessary—see instructions)						
b	The second state of the se						
_	here and enter 1% of Part I, line 27b All others demostic foundations enter 2% of line 27b. From the foreign enter 2% of line 27b.			J. ~			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		Æ.	S			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		38	83			
3	Add lines 1 and 2		38	1			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		-0-				
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	š <i>i</i>	38	-			
	Credits/Payments: 2015 estimated tax payments and 2014 overpayment credited to 2015 6a	* *					
a b	Exempt foreign organizations—tax withheld at source 6b		\$ z	~			
c	Tax paid with application for extension of time to file (Form 8868) 6c	. grá					
d		ŵ!	***				
7	Backup withholding erroneously withheld			1 388 3			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			\vdash			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		38	83			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10						
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11		-0-				
	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	12 3	Yes	No			
-	participate or intervene in any political campaign?	1a		1			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		1			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		3. 3.	18			
	published or distributed by the foundation in connection with the activities.			M.			
C							
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	1	*	· 🖟 ,			
•	(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. ▶ \$			~ ~			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		,			
	If "Yes," attach a detailed description of the activities.	348		Ť			
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?	3 4a	\vdash	1			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	\vdash	_			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1			
	If "Yes," attach the statement required by General Instruction T.	*	Ž	† Ť			
6	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?	6		1			
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	✓				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			T.			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	ا ا	-				
9	·	8b	<u> </u>				
3	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"		ŭ	^ -			
	complete Part XIV	9		1			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		$\vdash \vdash \vdash$	۲			
	names and addresses	10	1	1			
			يــــــــــــــــــــــــــــــــــــــ				

Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
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 instructions)	11		/
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			1
	Website address ▶			
14	Website address ► The books are in care of ► JAMES T MCCLURE, TRUSTEE Telephone no. ► (Compared to the compared to the comp)
4-	Located at ► 60 FOURTEENTH STREET, WHEELING, WV ZIP+4 ►	26003-		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			▶ ⊔
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other author	ty	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		/
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name the foreign country ▶	DI ,	***	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	disqualified person?	- 1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	. 3%		
	 (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes (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)?		Ì	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		''	1
	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.)		Ç,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	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)?			-3
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	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 2015?	1c	_	į
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	,		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	1		} :
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) to	10-] ,
_	all years listed, answer "No" and attach statement—see instructions)	2b		/
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20			
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 2015 as a result of (1) any purchase by the foundation of	- 1		,
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the day 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 2015.)	- 1	1	
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		1
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	 - 	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?			\ \sigma^{\chi}

•				
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Pari	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)			
5a	During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . Yes (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes (3) No			~
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b	-	
С	Organizations relying on a current notice regarding disaster assistance check here			è
6a	If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
þ	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If "Yes" to 6b, file Form 8870.	6b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
7a b	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?.	7b		1
Part	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E	mploye	es,	

and Contractors							
1 List all officers, directors, trustees, foundation	on mana	agers and th	eir cor	npensatio	n (see i	nstructions).	
(a) Name and address	hou	e, and average rs per week ed to position	(If i	mpensation not paid, nter -0-)	empl	Contributions to oyee benefit plans ferred compensation	(e) Expense account, other allowances
JAMES T MCCLURE 60 FOURTEENTH STREET, WHEELING, WV 26003-3430	TRUST 40	EE		5000		0	
						_	
2 Compensation of five highest-paid employe "NONE."	es (oth	er than thos	se incl	uded on li	ine 1—	see instruction	s). If none, ente
(a) Name and address of each employee paid more than \$50,0	000	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			_				

Part V	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mpioyees,
3 F	ive highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		- }
Total nu	ımber of others receiving over \$50,000 for professional services	-0-
Part I	A Summon of Direct Charitable Activities	
rait iz	X-A Summary of Direct Charitable Activities	
	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	f Expenses
1		
		.
2		-
		.
		+
3		-
		- {
4		
•		-
		- }
Part I	X-B Summary of Program-Related Investments (see instructions)	
Descn	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		_
_		
2		-
		-
All oth	er program-related investments. See instructions	
3		
J		- [
		-
Total. A	dd lines 1 through 3	
		Form 990-PF (201

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	gn found	ations,
	see instructions.)		
_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	-0-
b	Average of monthly cash balances	1b	248,365
С	Fair market value of all other assets (see instructions)	1c	136,753
d	Total (add lines 1a, b, and c)	1d	355,118
е	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	-0-
3	Subtract line 2 from line 1d	3	355,118
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	-0-
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	355,118
6	Minimum investment return. Enter 5% of line 5	6	17,756
Part		oundation	าร
	and certain foreign organizations check here ▶ □ and do not complete this part.)	_	
1	Minimum investment return from Part X, line 6	1	27,756
2a	Tax on investment income for 2015 from Part VI, line 5 2a 39	^> ×	
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	39
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,717
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	17,717
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>line 1 </u>	7	17,717
Part	XII Qualifying Distributions (see instructions)		
- -	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	9,420
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	-0-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,420
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,420
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualities for the section 4940(a) reduction of tay in these years	9	iodiidation

Pall	Undistributed income (see instructi	ons)			
1	Distributable amount for 2015 from Part XI, line 7	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
•					17,717
2	Undistributed income, if any, as of the end of 2015:				
a	Enter amount for 2014 only			-0-	
þ	Total for prior years: 20,20,20	*- *-	0-		
3	Excess distributions carryover, if any, to 2015:				
a b	From 2010				و
_					ζ*
C C		, , , ,			
ď					
f					
4	Total of lines 3a through e	-0-			
7	line 4. b. ¢	Ì Ì			
а	Applied to 2014, but not more than line 2a .				
	Applied to undistributed income of prior years			0-	
~	(Election required—see instructions)			ĺ	
С	Treated as distributions out of corpus (Election		-0-		
Ū	required—see instructions)	_			
d	Applied to 2015 distributable amount	-0-			
e	Remaining amount distributed out of corpus				9,420
5	Excess distributions carryover applied to 2015	-0-			
•	(If an amount appears in column (d), the same	-0-			<u>-0-</u>
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	-0-			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	,	-0-		'
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				8
	been issued, or on which the section 4942(a)	/ [*]			•
	tax has been previously assessed	ا الله الله الله الله الله الله الله ال	-0-		,
d	Subtract line 6c from line 6b. Taxable	7" QM 8			
	amount-see instructions	* *	-0-		*
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions	- (-0-	•
f	Undistributed income for 2015. Subtract lines	*			
	4d and 5 from line 1. This amount must be				
_	distributed in 2016				8,297
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				1
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)		İ		ı
8					
0	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).		}		
9	Excess distributions carryover to 2016.				
9	Subtract lines 7 and 8 from line 6a	İ			
10	Analysis of line 9:				
_	Excess from 2011		İ		
a b	Excess from 2011				
C			1		
d	Excess from 2013				
u e	Excess from 2014 Excess from 2015				ı
	CACCOC HOIT 2010			I	

	XIV Private Operating Foundate					
1a	If the foundation has received a ruling foundation, and the ruling is effective for			private operating	N//	
b	Check box to indicate whether the found	dation is a private	operating founda	tion described in sect	ion 🗍 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(c) rotal
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test-enter:					
	(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part X, line 6 for each year listed					
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)					
	(3) Largest amount of support from			 		
	an exempt organization	·		<u> </u>		
	(4) Gross investment income		<u></u>			-0-
art	XV Supplementary Information	າ (Complete th	is part only if t	he foundation had	d \$5,000 or ma	re in assets at
	any time during the year—	see instruction	<u>ıs.) </u>			
1	Information Regarding Foundation N					
а	List any managers of the foundation w before the close of any tax year (but or					by the foundation
ONE						
b	List any managers of the foundation of ownership of a partnership or other en			•		ge portion of the

other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

JAMES T MCCLURE, TRUSTEE, 60 FOURTEENTH STREET, WHEELING, WV 26003-3430

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

SEE ATTACHED

c Any submission deadlines:

NONE

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

NONE

Par	XV Supplementary Information (cont.	inued)			
3	Grants and Contributions Paid During t	he Year or Approv	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Julia Co.	Purpose of grant or contribution	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a	Paid during the year	or substantial contributor	recipient		
				1	1
	Total		<u> </u>	▶ 3a	 -
b	Approved for future payment				
	Total				

	_	Analysis of Income-Producing Ac as amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	
	J	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
١	a	gram service revenue.			 		
	b						
	C						
	ď						
	е						
	f .						
_	_	Fees and contracts from government agencies			ļ		
2		nbership dues and assessments					
3		rest on savings and temporary cash investments dends and interest from securities			 	<u> </u>	
5		rental income or (loss) from real estate.		. Av		4 ***	×
J		Debt-financed property	* **	* · · · · · · · · · · · · · · · · · · ·	i in San Sin a	** **	
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8	Gair	or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events					
10	Gro	ss profit or (loss) from sales of inventory					
11	Oth	er revenue: a				<u> </u>	
	b .						
	C.						
	d .			 		-	
12	e Sub	total. Add columns (b), (d), and (e)	. 41		1 2 7		
				· · · · · ·	······	13	<u> </u>
		ksheet in line 13 instructions to verify calculation					
Pa	rt X\	I-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lin	e No. ▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repr	orted in column	(e) of Part XVI	-A contributed in	mportantly to the
		document of the foundation of exempt par					
		 	-				
		 				···	
		 					
			- 				
		 					
		 					
		 					
		+					
		 					
							
		 					

Firm's address ▶

Part	AVII	Exempt Org	_	_	sters 10	and Ira	nsactio	ns and H	telationsnij	os with iv	ioncna	ritabi	е	
1	Did th	e organization d			ngage in	any of the	followin	g with any	other organ	zation des	cribed	7	Yes	No
		tion 501(c) of the	e Code (oth	er than s	ection 50	1(c)(3) org	anızatıor	ns) or in se	ection 527, re	elating to p	olitical			
	_	izations?										*		
а		fers from the rep	-											
	• -	ash										1a(1)		✓
		her assets .										1a(2)		✓
b		transactions:												
		les of assets to										1b(1)		√
		irchases of asse ental of facilities,										1b(2)		1
		emai of facilities, eimbursement ar									• •	1b(3) 1b(4)		1
		ans or loan guar									• •	1b(4)		· 🗸
		erformance of se										1b(6)		\
С		ng of facilities, ed										1c		· /
-		answer to any o											faır m	arke
		of the goods, ot												
	value	in any transaction	n or sharing	g arrange	ment, sh	ow in colu	mn (d) th	ne value of	f the goods, o	other asset	ts, or se	rvices	recei	ved.
(a) Line	no (l) Amount involved	(c) Nam	e of noncha	arıtable exer	mpt organizat	tion	(d) Descri	ption of transfer	s, transaction	s, and sha	ring arr	angeme	ents
						 -								
					<u> </u>			_						
	_													
		 -	 		-									
														
_														
													•	
	一十													
2a		foundation dire												
	descr	ibed in section 5	01(c) of the	Code (ot	her than	section 50	11(c)(3)) c	r in sectio	n 527?		[] Yes	· 🗸	No
b	If "Ye	s," complete the		chedule.									_	
		(a) Name of organi	zation			b) Type of or	ganization		(c) Description	of relation	ıshıp		
														
	Unda	and the of normal lands	de aloro that I ha		l thus roturns					La Al-a l-a-4 -6 -	((L -1 - 6 - A	
Sign		penalties of perjury, I on t, and complete Decla										<u> </u>		
			~/		1.0	-1		LICTEE		Į.	May the IF with the p			
Here		ature of officer or trus	tee			Daté	Title	USTEE	<u> </u>	i	(see instruc			
		Print/Type preparer			Preparer's	signature	11116		Date			TIN		
Paid		7. V. V. V. V. V. V. V. V. V. V. V. V. V.			-,	J				Check self-er	nployed			
Prep		Firm's name			 				'	Firm's EIN				
Use (UNIY	Firm's address >								Phono no				

Firm's EIN ▶ Phone no

Schedule B

(Form 990, 990-EZ, or 990-PF) **Schedule of Contributors**

OMB No 1545-0047

47-6862700

2015

Department of the Treasury Internal Revenue Service

THE MCWILLIAMS FOUNDATION

► 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.irs.gov/form990.

Name of the organization Employer identification number

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (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** 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 331/3 % 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

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).

Name of organization

THE MCWILLIAMS FOUNDATION

47-6862700

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BETTY JANE MCWILLIAMS HOLDING TRUST JAMES T. MCCLURE, TRUSTEE 60 FOURTEENTH STREET, WHEELING, WV 26003-3430	\$ 61,892.10	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ESTATE OF BETTY JANE MCWILLIAMS JAMES T. MCCLURE, EXECUTOR 60 FOURTEENTH STREET, WHEELING, WV 26003-3430	\$170,000.00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BETTY JANE MCWILLIAMS, CHARLES SCHWAB & CO CUST. IRA ROLLOVER, ACCT#6190-8134 500 ROUTE 909 HCC #207, VERONA, PA 15147-3863	\$396,688.28	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BETTY JANE MCWILLIAMS, CHARLES SCHWAB & CO CUST. 500 ROUTE 909 HCC #207, VERONA, PA 15147-3863 ACCT #6190-8136	\$9,327.37	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BETTY JANE MCWILLIAMS, CHARLES SCHWAB & CO CUST. IRA ROLLOVER, 500 ROUTE 909 HCC #207 VERONA, PA 15147-3863 ACCT #6190-8137	\$61,468.41	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copie	es of Part II if additional space	ce 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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

Part I. Schedule 16a.

Spilman Thomas & Battle, PLLC 1233 Main Street, Suite 4000 Post Office Box 831 Wheeling, WV 26003-8731

Preparation of Form 1023 \$2590.21

Part I. Schedule 16c.

Fort Pitt Capital Group
Foster Plaza Ten
680 Andersen Drive
Pittsburgh, PA 15220

Investment Management Fee \$1969.87

Part II Schedule 10b.

Equity Funds	Quantity	Column (b) Book Value	Column (c) Market Value
AT&T INC	150.0000	4854.00	5161.50
ABBOTT LABORATORIES	400.0000	15,931.63	17,964.00
ALLERGAN PLC F	50.0000	13,553.71	15,625.00
ARTHUR J GALLAGHER&C	400.0000	17,020.15	16,376.00
AXIALL CORP	113.0000	2,788.84	1,740.20
GENERAL ELECTRIC CO	819.0000	20,153.02	25,551.85
HONEYWELL INTL INC	50.0000	4,822.00	5,178.50
LOWES CORPORATION	200.0000	7,166.00	7,680.00
MEDTRONIC PLC F	250.0000	17,466.60	19,230.00
MICROSOFT CORP	100.0000	4,202.00	5,548.00
ROCKWELL AUTOMATION	200.0000	21,544.05	20,522.00
SANDISK CORP	50.0000	2,665.00	3,799.50
SYNCHRONY FINANCIAL	32.0000	761.77	973.12
URBAN OUTFITTERS INC	900.0000	19,123.42	20,475.00
VERIZON COMMUNICATN	400.0000	18,089.93	18,488.00
VF CORPORATION	250.0000	17,006.87	15,562.50
WENDYS COMPANY	1,400.0000	11,932.61	15,078.00
XILINX INC	150.0000	6,042.00	7,045.50
ARTISAN MID CAP FUND INV	446.3810	20,213.42	17,846.31
CONESTOGA SMALL CAP	232.9390	8,102.41	8,325.24
DIAMOND HILL LARGE CAP	1,376.2220	30,218.78	29,506.20

HARBOR INTERNATIONAL	476.3550	31,300.00	28,309.78	
MAINSTAY LARGE CAP	3,347.5940	31,300.00	31,3333.48	
RAINIER SMALL MID CAP	463.8760	17,694.91	17,353.60	
WELLS FARGO SMALL CAP	388.3740	8,833.91	6,924.71	
SCHWAB INTERNATIONAL EFT	959.0000	26,986.16	26,430.04	
SCHWAB US BROAD MARKE EFT	ET 564.0000	28,200.00	27,658.56	

Part II Schedule 10c.

Bonds Funds	Quantity	Column (b) Book Value	Column (c) Market Value
AMERICAN CENTURY GINNIE	6,132.0410	65,857.83	65,551.52
METROPOLITAN WEST HIGH	2,002.4940	18,898.53	18,242.72
METROPOLITAN WEST TOT	5,993.7280	64,778.91	63,653.39
TEMPLETON GLOBAL BOND	1,891.4310	22,054.35	21,902.77

The McWilliams Foundation

A NONPROFIT ORGANIZATION

60 14th Street, Wheeling, West Virginia 26003

GRANT APPLICATION

This Grant Application is meant to be simple and user-finendly. Brevity appreciated. But please do not hesitate to provide additional useful information in .pdf attachments Required pdf attachments (1) Bio/CV, (2) Project Budget, (3) Completed W9

PERSONAL/ORGANIZATIONAL NAME:
ADDRESS: E-ADDRESS: SKYPE OR OTHER CONTACT: NAME OF NONDROCIT US CONDUIT (IF ADDITIONS)
NAME OF NONPROFIT US CONDUIT (IF APPLICABLE):
PROJECT TITLE: TOTAL PROJECT BUDGET: US\$ AMOUNT BEING REQUESTED: US\$ OTHER POTENTIAL AND/OR SECURED IN-KIND AND FINANCIAL SUPPORT (NAMES/ AMOUNTS):
OTHER POTENTIAL AND/OR SECURED IN-KIND AND FINANCIAL SUPPORT (NAMES/ AMOUNTS):
PROJECT DESCRIPTION:
WHY DID YOU CREATE THIS PROJECT?
HOW DOES THIS PROJECT FULFILL YOUR CHARITABLE PURPOSES AND MISSION?
HOW WILL YOU EVALUATE THE SUCCESS OR FAILURE OF THIS PROJECT?
"I CERTIFY THAT ALL THE ABOVE/ATTACHED INFORMATION IS ACCURATE AND THAT ALL FUNDS GRANTED WILL BE SPENT ONLY FOR TAX EXEMPT CHARITABLE PURPOSES; I PROMISE TO PROVIDE THE MCWILLIAMS FOUNDATION WITH PROOF OF EXPENDITURES/FINAL EVALUATION OF THE PROJECT; I PLEDGE THAT I AND MY ORGANIZATION WILL NOT USE ANY OF THESE FUNDS TO INFLUENCE LEGISLATION, INFLUENCE THE OUTCOME OF ANY ELECTION, OR CARRY ON ANY VOTER REGISTRATION DRIVES; AND I RECOGNIZE THAT, UPON ACCEPTANCE, THE APPLICATION BECOMES A BINDING CONTRACTUAL AGREEMENT."
ELECTRONIC SIGNATURE:
DATE: