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EXTENDED TO NOVEMBER 15, 2017

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.

Department of the Treasury Internal Revenue Service

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

Fo	r cale	hdar year 2016 or tax year beginning		, and ending					
		of foundation		A Employer identification	n number				
MCCORMICK FAMILY FDN AGENT 80397									
	<u> </u>	WILMINGTON TRUST COMPA	30-0166827						
		and street (or PO box number if mail is not delivered to street	B Telephone number						
	110	0 N MARKET ST			717-255-2	045			
		town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here			
_	MII	MINGTON, DE 19890							
G	Chec	k all that apply Initial return	initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here			
		Final return	Amended return		2 Formum ampairmations in	pooting the 95% test			
		Address change	Name change		2. Foreign organizations in check here and attach of	computation East,			
H	_	k type of organization X Section 501(c)(3) ex			E If private foundation st				
Ļ			Other taxable private founda	ition	under section 507(b)(1)(A), check here . 🕨 📖			
		arket value of all assets at end of year J Accounting	-	L Accrual	F If the foundation is in a				
			her (specify)		under section 507(b)(1)(B), check here			
	►\$		mn (d) must be on cash b			T (4)			
	art	The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes			
	T-	necessanly equal the amounts in column (a)		III COITIE		(cash basis only)			
	1	Contributions, gifts, grants, etc., received	543,555.		N/A				
į	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary	2.	2.		STATEMENT 1			
•	3	cash investments Dividends and interest from securities	9.	9.		STATEMENT 2			
•	5.	Gross rents	9.	<u> </u>		GIRIEPENI Z			
> . •	1 .	Net rental income or (loss)							
7017	۔ما	· · · · · · · · · · · · · · · · · · ·							
7		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				·			
9	7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.					
à	8	Net short-term capital gain							
	9	Income modifications	7						
	10a	Gross sales less returns and allowances							
	l b	Less Cost of goods sold							
	C	Gross profit or (loss)							
	11	Other income							
	12	Total. Add lines 1 through 11	543,566.	11.					
	13	Compensation of officers, directors, trustees, etc	27,500.	0.		0.			
	14	Other employee salaries and wages .							
er	15	Pension plans, employee benefits							
Ses	16a	Legal fees		·					
Dec.	, b	Accounting fees STMT 3	600.	<u>0.</u>		0.			
Ä	C	Other professional fees				ļ			
tive	17	Interest _	-			 			
Operating and Administrative Expense	18	Taxes				 			
į	19	Depreciation and depleton CEIVED							
E	20	Occupancy Travel, conferences, and meetings 2017 Printing and publications				 			
Ą	21	Travel, conferences, and meetings 2017			<u> </u>	 			
9	22	Printing and publications Other expenses STMT 4	1,621.	0.		0.			
ţį	23 24	Other expenses Total operating and administrative.	1,021.	<u> </u>		<u> </u>			
ēra	24	expenses. Add lines 13 through 23	29,721.	0.		0.			
õ	26	Contributions, gifts, grants paid	543,750.	<u> </u>		543,750.			
		Total expenses and disbursements.	343,130.		<u> </u>	343/130.			
	-	Add lines 24 and 25	573,471.	0.		543,750.			
	27	Subtract line 26 from line 12	5,5,1,10			3.37733.			
	l	Excess of revenue over expenses and disbursements	-29,905.						
	1	Net investment income (if negative, enter -0-)	23,700.	11.	1				
		Adjusted net income (if negative, enter -0-)			N/A				
			<u></u>						

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

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٠	/ () -	WILMINGTON	TRUST	COMPANY

Fo	orm 9!	90-PF (2016) C/O WILMINGTON TRUST CO	MPANY	30-	0166827	Page 2
		Attached schedules and amounts in the description	Beginning of year	End of	year	
Ц	-art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	25,077.	171.	···· / · · · · · · · · · · · · · · ·	171.
	3	Accounts receivable				
		Less allowance for doubtful accounts				
	4	Pledges receivable ►				
	1	Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable				
	1	Less allowance for doubtful accounts	i			
ş	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
¥	10a	Investments - U.S. and state government obligations				
	1	Investments - corporate stock				
	1	Investments - corporate bonds				
	111	· •				
	'	Less, accumulated depreciation	1			
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis				
	'-	Less, accumulated depreciation	1 1			
	15	Other assets (describe				
	1	Total assets (to be completed by all filers - see the				
	1.0	instructions Also, see page 1, item ()	25,077.	171.		171.
-	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
Ę	1		 			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable				
	22	Other liabilities (describe				
	22	Total liabilities (add lines 17 through 99)	0.	0.		
_	23	Total liabilities (add lines 17 through 22)	 			
	}	Tograduoid and total of the transfer of the tr	1			
S		and complete lines 24 through 26 and lines 30 and 31.				
Š	24	Unrestricted				
ala	25	Temporarily restricted	[
Net Assets or Fund Balances	26	Permanently restricted Foundations that do not follow SFAS 117, check here				
ڄ	1	, ,				
5		and complete lines 27 through 31.	25,077.	171.		
ats	27	Capital stock, trust principal, or current funds	25,077.	0.		
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.		
¥ te	29	Retained earnings, accumulated income, endowment, or other funds	25,077.	171.		
ž	30	Total net assets or fund balances	23,011.			
			25,077.	171.		
_	31	Total liabilities and net assets/fund balances			<u> </u>	
F	art	Analysis of Changes in Net Assets or Fund B	Balances			
_			30			
1		net assets or fund balances at beginning of year - Part II, column (a), line	; 3U	1	25	,077.
_	•	it agree with end-of-year figure reported on prior year's return)	•	2	_20	,905.
		r amount from Part I, line 27a	SEE STA			,000.
		r increases not included in line 2 (itemize)	SEE SIA	TEMENT J 3	<u>_</u>	172.
		lines 1, 2, and 3	•	5		1.
		eases not included in line 2 (itemize) ROUNDING	solumn (h) kan 20	6		171.
0_	rota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	omini (n), inte so		Form 990-	PF (2016)

C/O WILMINGTON TRUST COMPANY

Part IV Capital Gains	and Losses for Tax on		t Income					
	ribe the kind(s) of property sold (e arehouse, or common stock, 200 s			(P-P	v acquired urchase onation		acquired day, yr)	(d) Date sold (mo , day, yr)
1a					<u> </u>			
b NO	NE							
<u>c</u>								
<u>d</u>				 				
e	(f) Depreciation allowed	(n) Co.	st or other basis	 _		(h) C	ain or (loss	<u> </u>
(e) Gross sales price	(or allowable)		expense of sale				s (f) minus (
a								
<u>b</u>								
<u>C</u>		 						
d e		 						
	g gain in column (h) and owned b	v the foundation	т оп 12/31/69			Gains (C	Col (h) gain	minus
	(j) Adjusted basis		ccess of col (I)	_		(k), but	not less that	n -0-) or
(i) F M V as of 12/31/69	as of 12/31/69	over	col (j), if any			Losses	(from col (п))
<u>a</u>		 						
<u>b</u>								
E d		+						
6		+						······
	(If gain, also ent	er in Part I, line	7	1				
2 Capital gain net income or (net ca		-0- in Part I, line		<u>} 2</u>	!			
3 Net short-term capital gain or (los	s) as defined in sections 1222(5)	and (6)						
If gain, also enter in Part I, line 8,	column (c)							
If (loss), enter -0- in Part I, line 8 Part Y Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Inves	tment Inc	ome		
(For optional use by domestic private								
				,				
If section 4940(d)(2) applies, leave th	ns part blank							
Was the foundation liable for the sect			•	iod?			•	Yes X No
If "Yes," the foundation does not quali 1 Enter the appropriate amount in e	my under section 4940(e). Do not o each column for each year, see the			ntnes				
(a)	(b)		or manning any or	(c)			Outub	(d)
Base penód years Calendar year (or tax year beginnin		istributions	Net value of nor		le-use assets	_	(col. (b) div	ution ratio ided by col (c))
2015		74,600.			1,124			511.209964
2014	5:	92,000.			17			823.529412
2013		23,100.			1,553			336.831938 465.832531
2012 2011		84,000. 40,750.			$\frac{1,039}{10,196}$			53.035504
2011		10/150.	<u> </u>		10/150	'	<u> </u>	33.033304
2 Total of line 1, column (d)						2	36,	190.439349
3 Average distribution ratio for the 5	i-year base period - divide the tota	I on line 2 by 5,	or by the number (of years				
the foundation has been in existen	ice if less than 5 years					3	7,	238.087870
						1	į.	7 700
Finter the net value of noncharitable	le-use assets for 2016 from Part X	i, line 5	-			4	 	7,782.
5 Multiply line 4 by line 3						5	5.	6,326,800.
Widthply lifte 4 by lifte 3	-	-	•			-	1	0,020,000
Enter 1% of net investment income	e (1% of Part I, line 27b)					6		0.
7 Add lines 5 and 6		-				7	5	6,326,800.
3 Enter qualifying distributions from	Dart VII line 4					8	1	543,750.
If line 8 is equal to or greater than		•			-		L	- 22,130.
	line 7 check the hox in Part VI lin	e 1h, and comp	lete that part using	1 a 1% to	ax rate			

MCCORMICK FAMILY FDN AGENT 80397

of Part I, line 27b a All other formestin foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, cot (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add dines 1 and 2 Subtitis A (micome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 1 as based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 credits-Pyments a 2016 estimated tax payments and 2015 overpayment credided to 2016 Exempt foreign organizations -1s withheld at source 1 tax paid with application for extension of time to file (Form 8868) 6 c 6 credits-Pyments organizations -1s withheld at source 1 tax paid with application for extension of time to file (Form 8868) 6 c 6 credits and payments And kens 5a through 6d 7 roda credits and payments And kens 5a through 6d 8 credits and payments of underspayment of astimated tax. Check here is 6 form 2200 is attached 9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 During the tax year, did the foundation attempt to immlence any national, state, or local legislation or did it participate or intervene in any political campaign? 11 During the sur, did line foundation attempt to immlence any national, state, or local legislation or did it participate or intervene in any political campaign? 11 A X 12 B Line the amount of any jof tax on political expenditures (section 495) imposed during the year 13 C Line foundation file 7 by 6 and 1		m 990-PF (2016) C/O WILMINGTON TRUST COMPANY		<u>-0166</u> 1			Page 4
Dukis of ruling or determinable letter	P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	ıstrı	ictio	ns)
b Domestic boundations that meet the section 4490(e) requirements in Part V, check here	1	a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1					
b Domestic foundations that meet the section 4940(e) requirements in Part V, chack here		Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		1			
of Part I, line 27b • All Other Gonzests 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 O_ 4 O_ 5 All office formore) (ax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment flacomes. Subtract line 4 from line 3. Taxo or less, enter -0- 5 Cendits/Pyments 2 016 estimated tax payments and 2015 overpayment condited to 2016 5 Exempt foreign organizations -1 saw withheld at source 6 Tax paid with application for exdension of time to the (Form 8868) 6 Exempt foreign organizations -1 saw withheld at source 6 Tax paid with application for exdension of time to the (Form 8868) 6 Edd 7 Total credits and payments. Add lines 6a through 6d 8 Ethic any geneity for underpayment of estimated tax. Check here in the form 220 is attached 9 Tax due if the total of lines 3 to do 8 is more than line 7, inter amount ower 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Despayment. If line 7 is more than the total of lines 5 and 8 is more than line 7, inter amount ower 10 Despayment. If line 7 is more than the total of lines 5 and 8 is more than line 7, inter amount ower 10 Despayment. If line 7 is more than the total of lines 5 and 8. Inter the amount overpaid 10 Despayment. If line 7 is more than the total of lines 5 and 8. Inter the amount overpaid 10 Despayment. If line 7 is more than the total of lines 5 and 8 is more than line 7, internal overpaid 10 Despayment. If line 7 is more than the total of lines 5 and 8. International overpayment of line 10 to be Credited to 2017 settinated tax. Properties of line 10 to 10 t			1				0.
2 Tax under section S11 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) 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. If zero or less, enter -0- 5 Gredita-Pyments 2 2016 estimated tax payments and 2015 overpayment credited to 2016 5 Beamfort foreign organizations -1 tax withheled at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Earnet foreign organizations -1 tax withheled at source 6 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owned 7 Total credits and payments Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax. 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 owned 9 0 0 - 10 Overpayment, if any 7 is more than the total of lines 5 and 8, enter the amount overgald 11 Enter the amount of any 10 to be Credited to 2017 statistated tax 12 Boung that tax year, did the foundation attempts to mitisence any national, state, or local legislation or did it participate or intervene in any opitical campaign? 10 If a speak more than \$100 during the year (either directly) for political purposes (see instructions for the definition)? 12 If the answer is "Yes" to 1 ₂ or 1 ₅ . attrach a cletafied description of the activities and copies of any materials published or distributived by the foundation in connection with the activities. 1 Bound that a cletafied description of the activities. 1 Bound that a cletafied description of the activities. 2 If Yes, "attrach a cletafied description of the activities. 3 Has the foundation file Form 1124-PUI, for the year? 4 Clint the amount (if any) pand by the foundation during the year for political expenditure tax imposed on foundation magners by 0 . 2 If it is the foundation new unrelated bursiness pross incorporation, or bylaws, or other similar instruments?						,	
2 Tax under section S11 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) 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. If zero or less, enter -0- 5 Gredita-Pyments 2 2016 estimated tax payments and 2015 overpayment credited to 2016 5 Beamfort foreign organizations -1 tax withheled at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Earnet foreign organizations -1 tax withheled at source 6 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owned 7 Total credits and payments Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax. 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 owned 9 0 0 - 10 Overpayment, if any 7 is more than the total of lines 5 and 8, enter the amount overgald 11 Enter the amount of any 10 to be Credited to 2017 statistated tax 12 Boung that tax year, did the foundation attempts to mitisence any national, state, or local legislation or did it participate or intervene in any opitical campaign? 10 If a speak more than \$100 during the year (either directly) for political purposes (see instructions for the definition)? 12 If the answer is "Yes" to 1 ₂ or 1 ₅ . attrach a cletafied description of the activities and copies of any materials published or distributived by the foundation in connection with the activities. 1 Bound that a cletafied description of the activities. 1 Bound that a cletafied description of the activities. 2 If Yes, "attrach a cletafied description of the activities. 3 Has the foundation file Form 1124-PUI, for the year? 4 Clint the amount (if any) pand by the foundation during the year for political expenditure tax imposed on foundation magners by 0 . 2 If it is the foundation new unrelated bursiness pross incorporation, or bylaws, or other similar instruments?		c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		1			
3	2		2	1			0.
4 Subtitle A (income) bits (formestic section 4947(a)/1) frusts and taxable foundations only. Others enter-0-) 5 Tax based on investment lincome. Subtract line 4 from land 3. If zero or less, enter-0- 5 Gedita-Pyments a 2016 estimated bits payments and 2015 overpayment credited to 2016 6 Beauty prograph of the strength of the streng	3	•	3				
5 Tab based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Payments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source 6 to 1 Expand with application for excession of time to file (Form 8868) 6 Eackup withhelding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 7 Total credits and payments Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 8 Eater any genalty for underpayment of estimated tax. Check nees	4	·····					
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a 2016 estimated tax payments and 2015 overpayment creded to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add times 6 at through 60 8 Enter any penalty for underpayment of astimated tax. Check here	6						
b Exempt frienge organizations - tax withheld at source	•						
to Tax paid with application for extension of time to file (Form 8868) 6 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 If Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. Page 11 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 optifical campaign? 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 optifical campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optifical campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optifical campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optifical campaign. 16 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optifical campaign. 16 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optifical campaign. 16 During the tax year, did the foundation with the activities. 2 During the any were is "Yes" to It a or It., a state has activities. 2 During the any were it is a fine to the activities. 3 During the any were in the power in the po			_				
d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 60 8 Enter any penalty for underpayment of estimated tax. Check here			7				
7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here							
8 Enter any penalty for underpayment of estimated tax. Check here ☐ If Form 2220 is attached 9 Tax due if the total of hines 5 and 8 is more than line 7, enter amount owed 10 Overpayment, if time 7 is more than the total of times 5 and 8, enter the amount overpald 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax. ▶ Refunded ▶ 10 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax. ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 13 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? 15 Did it spend more than \$100 during the year (either directly) for political purposes (see instructions for the definition)? 16 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 16 Did the foundation flee Form 1120-POL for they sar? 17 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation engaged in any activities that have not previously been reported to the IRS. 18 Has the foundation engaged in any activities that have not previously been reported to the IRS. 19 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instination, dissolution, or substantial contraction during the year? 10 If "Yes," attach a detailed description of the activities. 21 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 22 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 23 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 24 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 25 Was there a liquidation, terminat	_		┥,	1			Λ
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 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 Ba Enter the states to which the foundation reports or with which it is registered (see instructions) PA 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 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses X 	6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		-			
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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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) PA 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X		· · · · · · · · · · · · · · · · · · ·		ļ	6	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) PA 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X	7	* *	χV	ļ-			
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	-	and the second second second at any annearing the jour in 100, complete that it, our (e), and that		•			
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	82	Enter the states to which the foundation reports or with which it is requstered (see instructions)					
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	-4						
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	h						
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	-				8h	x	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	۵	·	alendar	F	<u>~"</u>		
10 Did any persons become substantial contributors during the tax year? if 'Yes,' attach a schedule listing their names and addresses 10 X	,		Livilual		١	1	x
The state of the s	10			F	-		
	·V	עם און אין אין אין אין אין אין אין אין אין אי		Eorm		-PF	

Part 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		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege	is?		
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	X	
Website address ► N/A			
14 The books are in care of ► M AND T BANK Telephone no. ► 71			
	<u>▶1710</u>	<u></u>	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		T / 7	· []
and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	N/A	
16 At any time during calendar year 2016, 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	ــــــــــــــــــــــــــــــــــــــ	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
foreign country			<u> </u>
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	162	NO
1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X	7 No		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_ NO		
a disqualified person?	3 No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	No		
(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)	No		
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)?	/A 1b		
Organizations relying on a current notice regarding disaster assistance check here	· 🔲 📗		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2016?	. 10	-	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section $4942(j)(3)$ or $4942(j)(5)$).			
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	7		
before 2016?	l No		
If "Yes," list the years ▶,,,,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	/A 2b		1
, , ,	A 2b		
s If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	No		
b if "Yes," did it have excess business holdings in 2016 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 grft 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 2016.)	/A 3b		1
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	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 2016?	4b		<u>x</u>
	Form 9 9	0-PF	(2016)

Form 990-PF (2016)

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

Form 990-PF (2016)

Total. Add lines 1 through 3

All other program-related investments. See instructions.

	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	7,901.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	7,901.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,901.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	119.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	7,782.
6	Minimum investment return. Enter 5% of line 5	6	389.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	389.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	389.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	389.
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	389.
P	art XII Qualifying Distributions (see instructions)	E1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		E 4 0
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	543,750. 0.
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	
Þ	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	543,750.
B			
1	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
1 5		5	0. 543,750.

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7	50.950	,		389.
2 Undistributed income, if any, as of the end of 2016			,,,,,,,,,,	
a Enter amount for 2015 only			0.	
b Total for prior years			, , , , , , , , , , , , , , , , , , , ,	
		0.		_
3 Excess distributions carryover, if any, to 2016				
a From 2011 540,240.	1			
b From 2012 483,948.				
c From 2013 523,022.				
d From 2014 591, 999.				
e From 2015 544,544.	1			
f Total of lines 3a through e	2,683,753.			
4 Qualifying distributions for 2016 from	•			
Part XII, line 4 ▶\$ 543,750.				
a Applied to 2015, 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 2016 distributable amount	1		.,	389.
e Remaining amount distributed out of corpus	543,361.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as indicated below:	7			
	3,227,114.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,221,114.		·····	
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 2015 Subtract line			0	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2017				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 2011	E40 040			
not applied on line 5 or line 7	540,240.	······································	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9 Excess distributions carryover to 2017.	2 606 274			
Subtract lines 7 and 8 from line 6a	2,686,874.			
0 Analysis of line 9				
a Excess from 2012 483,948.	}			
b Excess from 2013 523,022.				
c Excess from 2014 591,999.				
d Excess from 2015 544,544.				
e Excess from 2016 543, 361.				

623581 11-23-16

Form **990-PF** (2016)

•					
MCCORMI	CK FAMILY FI	ON AGENT 80	397		
Form 990-PF (2016) C/O WIL	MINGTON TRUS	T COMPANY		30-01	66827 Page
Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			· • • • • • • • • • • • • • • • • • • •		
b Check box to indicate whether the found) foundation described i		4942(j)(3) or 49	342(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(a) 2010	(11) 2013	(6) 2014	(4) 2013	(c) iuiai
investment return from Part X for				}	}
each year listed			 	 	
b 85% of line 2a			 		
c Qualifying distributions from Part XII,					{
line 4 for each year listed			ļ	 	
d Amounts included in line 2c not					ĺ
used directly for active conduct of	ł				ł
exempt activities _			`	<u> </u>	
e Qualifying distributions made directly	ł		{		į
for active conduct of exempt activities	į		<u> </u>		į
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter	ļ		į į		
(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	}		ĺ)	j

c "Support" alternative test - enter

listed

- (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

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes grits, grants, etc. (see instructions) to individuals or organizations under 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.
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form **990-PF** (2016)

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C/O WILMINGTON TRUST COMPANY

3 Grants and Contributions Paid During the Y		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year				
]		
		ļ		
AMERICAN LITERACY CORP	NONE	1	GENERAL	
3201 PAXTON ST		ţ		
HARRISBURG, PA 17111	<u> </u>			5,000.
AMERICAN RED CROSS OF THE SUSQUEHANNA	NONE	}	GENERAL	
VALLEY				
1804 N SIXTH STREET				
HARRISBURG, PA 17102-1001	 		+	5,000.
FOUNDATION FOR ENHANCING COMMUNITIES	NONE		GENERAL	
HARRISBURG, PA 19101	 		 	250.
		}		
BETHESDA MISSION	NONE		GENERAL	
PO BOX 3041				
HARRISBURG, PA 17105	<u> </u>		 	25,000.
BIG BROTHERS BIG SISTERS OF THE	NONE		GENERAL	
CAPITAL REGION				
1500 NORTH 2ND STREET				
HARRISBURG, PA 17102				5,000.
	TINUATION SHEE	T(S)	▶ 3a	543,750.
b Approved for future payment		}		
NONE				
			}	
	 		 	
	 			
7-1-1				
Total			<u>▶ 3b</u>	m 990-PF (2016)
			10	nn タタレーアア (2016

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	-------------------

Enter gross amounts unless otherwise indicated	Unrelated	business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	Amount	Tancton income
a	 		}		
b	 				
c					
d	 		<u> </u>		
e					<u></u>
1		·	11		
g Fees and contracts from government agencies		·			
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1		1 1		
investments			14		
4 Dividends and interest from securities			14	9.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	1				
7 Other investment income					
8 Gain or (loss) from sales of assets other	<u> </u>				
than inventory	}		}		
O Not income on (loss) from consultations	<u> </u>		11		
10 Gross profit or (loss) from sales of inventory	ļ				
	 				
11 Other revenue:	1 1		1		
<u>a</u>	 				
b					
c					
d	 				L
e	\				
12 Subtotal Add columns (b), (d), and (e)		0.		11.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	-			. 13 _	11.
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	me is reported in	column (e) of Part XVI-A			nplishment of
523621 11-23-16					Form 990-PF (2016

MCCORMICK FAMILY FDN AGENT 80397 C/O WILMINGTON TRUST COMPANY 30-0166827 Form 990-PF (2016) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1<u>b(</u>5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ___ Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/AUnder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge return with the prepa Sign Here X | Yes Signature of officer or trus Title Date PTIN Print/Type preparer's name Check Preparer's signature Date self- employed Paid 11/08/17 P00697308 THOMAS STEPHON

Form 990-PF (2016)

302-651-1035

Firm's EIN > 51-0055023

Preparer

Use Only

Firm's name ► WILMINGTON TRUST COMPANY

Firm's address ► 1100 N MARKET STREET DE3-C070

WILMINGTON, DE 19890-0001

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient BOYS AND GIRLS CLUB OF CENTRAL PA NONE GENERAL 1227 BERRYHILL ST HARRISBURG, PA 17104 20,000. BRETHREN HOUSEING NONE GENERAL 219 HUMMEL STREET HARRISBURG, PA 17104 15,000. CENTRAL PA FOOD BANK NONE GENERAL 3908 COREY ROAD 10,000. HARRISBURG, PA 17109 CLEVE J FREDRICKSON LIBRARY NONE GENERAL 100 N 19TH ST CAMP HILL, PA 17101 3,500. COMMUNITY CHECK-UP CENTER OF SOUTH NONE GENERAL HARRISBURG INC 38 C HALL MANOR HARRISBURG, PA 17104 12,500. CULTURE ENRICHMENT FUND NONE GENERAL PO BOX 12084 HARRISBURG, PA 17101 10,000. DAUPHIN COUNTY LIBRARY SYSTEM NONE GENERAL 101 WALNUT STREET HARRISBURG, PA 17101 15,000. ELIZABETHTOWN COLLEGE NONE GENERAL ONE ALPHA DRIVE ELIZABETHTOWN, PA 17022-2298 5,000. GOODWILL REYSTONE AREA FOUNDATION NONE GENERAL 1150 GOODWILL DRIVE HARRISBURG, PA 17101 2,000. GRETNA MUSIC NONE GENERAL ONE ALPHA DRIVE ELIZABETHTOWN, PA 17022 3,500. Total from continuation sheets 503,500.

3 Grants and Contributions Paid During the	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager status of or substantial contributor recipient		Contribution	Amount
GRETNA THEATRE	NONE		GENERAL	
РО ВОХ 578	1		1	
MT GRETNA, PA 17064				5,000
BOSLER MEMORIAL LIBRARY	NONE		GENERAL	
158 W. HIGH STREET	1		ţ	
CARLISLE, PA 17013-2988				10,000
HARRISBURG ACADEMY	NONE		GENERAL	
10 ERFORD ROAD	}		}	
WORMLEYSBURG, PA 17043				10,000
HARRISBURG SINGERS	NONE		GENERAL	
PO BOX 10501	1			
HARRISBURG, PA 17105				1,500
HARRISBURG SYMPHONY ORCHESTRA	NONE		GENERAL	
800 CORPORATE CIRCLE	į į		ļ	
HARRISBURG, PA 17110				35,000
HOSPICE OF CENTRAL PA	NONE		GENERAL	
1320 LINGLESTONW ROAD HARRISBURG, PA 17110				15,000
MARKISBONG, PA 1/110			 	13,000
JEWISH FEDERATION OF GREATER	NONE		GENERAL.	
HARRISBURG	}			
3301 NORTH FRONT STREET HARRISBURG, PA 17110				5,000
JOSHUA GROUP	NONE		GENERAL	
1442 MARKET STREET	}			
HARRISBURG, PA 17103	-		-	15,000
CRAMINAL MANAGEMENT CO.			CANAGE OF THE STATE OF THE STAT	
CENTRAL YOUTH BALLET PA	NONE		GENERAL	
HARRISBURG, PA 17103				5,000
PINNACLE HEALTH FOUNDATION	none		GENERAL	
HARRISBURG, PA 17103				40,000
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y		 		Γ
Recipient	If recipient is an individual,		T	
Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
LEG UP FARM INC	or substantial contributor	recipient	GENERAL	
4880 NORTH SHERMAN STREET			}	
MOUNT WOLF, PA 17347-9637				3,500
GAMUT THEATRE GROUP	NONE		GENERAL	
HARRISBURG, PA 17104				20,000.
CAPITAL REGION ARTS AND ENTERTAINMENT	NONE		GENERAL	
HARRISBURG, PA 17101				10,000.
HAAC FOUNDATION	NONE		GENERAL	
HARRISBURG, PA 17111				10,000.
PENNSYLVANIA FRIENDS OF AGRICULTURE PO BOX 8736 CAMP HILL, PA 17001	NONE		GENERAL	2,500.
CHAIL HILLI, TA 17001	 			2,300.
PERRY COUNTY COUNCIL OF THE ARTS PO BOX 354 NEWPORT, PA 17074	NONE		GENERAL	6,000.
admicki, ik 1/0/4	 			
PINE STREET PRESBYTERIAN CHURCH 310 NORTH THIRD STREET HARRISBURG, PA 17101	NONE		GENERAL	15,000.
BARKISBURG, FA 1/101				13,000.
SPECIAL OLYMPICS PENNSYLVANIA 2570 BLVD OF THE GENERALS	NONE		GENERAL	5.000
NORRISTOWN, PA 19403	 		 	5,000.
ST STEPHEN'S EPISCOPAL SCHOOL 215 NORTH FRONT STREET HARRISBURG, PA 17101-1407	NONE		general	10,000.
CUMBERLAND COUNTY HISTORICAL SOCIETY	NONE		GENERAL,	
IARRISBURG, PA 17101		·		5,000.
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the				Γ
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
SUSQUEHANNA ART MUSEUM	NONE		GENERAL	
PO BOX 11818				5 000
HARRISBURG, PA 17108				6,000
THE HISTORICAL SOCIETY OF DAUPHINE	NONE		GENERAL	
COUNTY				
219 SOUTH FRONT STREET HARRISBURG, PA 17104				20,000.
madibbond, IN 17101				20,000.
THE NATIVITY SCHOOL OF HARRISBURG 2135 NORTH 6TH ST PO BOX 5500	NONE		GENERAL	
HARRISBURG, PA 17110-0550				20,000.
		·		
THE CALVANTON ADMY	NOVE		GENERAL	
THE SALVATION ARMY 1122 GREEN STREET	NONE		GENERAL	
HARRISBURG, PA 17102				50,000.
BETA PI BOULE INCORPORATED	NONE		GENERAL	
BAIR FI BOOM INCORPORATED	DICTIE		GENERAL	
HARRISBURG, PA 17110				5,000.
UNITED WAY OF THE CAPITAL REGION	NONE		GENERAL	
2235 MILLENIUM WAY				
ENOLA, PA 17025				22,500.
	}			
GIRL SCOUTS IN THE HEART OF PA	NONE		GENERAL	
HARRISBURG, PA 17104		 		10,000.
DAUPHIN COUNTY BAR ASSOCIATION	NONE		GENERAL	
HARRISBURG, PA 17103			+	7,500.
	}			
WITF	NONE		GENERAL	
4801 LINDALE ROAD				25 000
HARRISBURG, PA 17111				25,000.
	1			
PAXTON MINISTRIES	NONE		GENERAL	
HARRISBURG, PA 17103				10,000.
Total from continuation sheets				

MCCORMICK FAMILY FDN AGENT 80397 C/O WILMINGTON TRUST COMPANY

30-0166827

3 Grants and Contributions Paid During the				ļ
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	or substantial contributor recipient		ļ
CHRISTIAN CHURCHES UNITED OF THE TRI-COUNTY AREA	NONE		GENERAL	
				}
HARRISBURG, PA 17103				2,500
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				}
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Total from continuation sheets				1

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 irs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

MCCORMICK FAMILY FDN AGENT 80397 C/O WILMINGTON TRUST COMPANY

30-0166827

Organiz	zation type (check or	ne):
Filers o	f:	Section:
Form 99	00 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	10-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
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 4, 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, line 1. Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the close of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for uelty to children or animals. Complete Parts I, II, and III.
	year, contributions of is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
out it mu	ist answer "No" on F	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 be filling 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) (2016)

Name of organization
MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

Employer identification number

30-0166827

Part I	Contributors	(See instructions).	Use duplicate copies	of Part I if ad	ditional space is neede	ed.
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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	ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANNE MCCORMICK TW #3803 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	<u> </u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ANNE MCCORMICK TW #99807 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 351,550.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MARGARET MCCORMICK TW #7608 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 161,005.	Person X 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.)

Employer identification number

30-0166827

C/O WILMINGTON TRUST COMPANY Noncash Property (See instructions). Use duplicate copies of Part 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. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ -			

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number MCCORMICK FAMILY FDN AGENT 80397 C/O WILMINGTON TRUST COMPANY <u>30-01</u>66827 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (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 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 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 Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAV	INGS AND TEN	IPORARY C	CASH IN	NVESTMENTS	STATEMENT 1
SOURCE		REVE			(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
US GOVT INTEREST			2.		2.	
TOTAL TO PART I, LI	NE 3		2.		2.	
FORM 990-PF	DIVIDENI	OS AND INTER	REST FROM	SECUR	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	REV	A) ENUE BOOKS		
DIVIDENDS	9).	0.	9.	,	9.
TO PART I, LINE 4	9). 	0.	9.		9.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	
TAX PREP FEES	-	600.		0.		0.
TO FORM 990-PF, PG	1, LN 16B =	600.		0.		0.
FORM 990-PF		OTHER E	XPENSES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	
MISC OFFICE EXPENSES	S	1,621.		0.		0.
TO FORM 990-PF, PG	1, LN 23	1,621.		0.		0.
			====			

FORM 990-PF	OTHER	INCREASES	IN	NET	ASSETS	OR	FUND	BALANCES	STATEMENT	5
DESCRIPTION									AMOUNT	
STOP PAYMENT	ON 2015	CHARITABI	LE D	ISTI	RIBUTION	ī			5,0	00.
TOTAL TO FORM	990-PF	, PART II	Ι, Ι	LINE	3				5,0	00.



P.O. Box 1377 Buffalo, NY 14240

Account Summary Section

Statement of Value and Activity

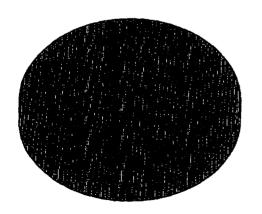
December 1, 2016 - December 31, 2016

Market Value Summary

•	This Period	1/1/16 to 12/31/16
Beginning Market Value	\$45.69	\$25,076.63
Cash Additions	\$130,000.00	\$573,179.25
Cash Disbursements	-\$129,875.00	-\$598,095.72
Income	\$0.00	\$10.53
Change in Market Value	\$0.00	\$0.00
Ending Market Value	\$170.69	\$170.69
Realized Gains/Losses (Included in Total Above)	\$0.00	\$0.00

Asset Allocation Summary

Investment Objective: Preservation of Principal: Minimize volatility and produce income through a portfolio of investment grade fixed income securities.



100%	Total Assets Value	\$170.69
100%	Cash & Equivalents	\$170.69
	Asset Class	Balance

Asset Detail

Statement of Value and Activity

December 1, 2016 - December 31, 2016

Asset Detail

Description	Shares/Par Value	Market Value Current Price	Tax Cost Unrealized G/L	Est. Ann. Income Current Yield
Cash & Equivalents				
Wilmington US Govt Money	45.69	\$45,69	\$45.69	\$0.00
Mkt CL Admn TICKER: AliXX		1.0000	\$0.00	0.00%
Wilmington US Govt Money	125.00	\$125.00	\$125.00	\$0.01(i)
Mkt CL Admn TICKER: AllXX		1.0000	\$0.00	0.01%
Total Cash & Equivalents		\$170.69	\$170.89 \$0.00	\$tuo 1
Total All Assets		\$170.69	\$170.69 \$0.00	\$0.01