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Form 990-PF

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Internal Revenue Service For calendar year 2016 or tax year beginning and ending A Employer identification number Name of foundation THE WILLIAM A AND ETHEL M MCCALL 45-4244480 FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 3219 S. TORREY PINES DRIVE 310 702-795-0912 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here 89146 LAS VEGAS, NV Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization. E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 1,371,029. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not expenses per books income income necessarily equal the amounts in column (a)) (cash basis only) 250,000 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 543 543 STATEMENT 27 27 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) RECEIVED 63 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. \$00 00 Capital gain net income (from Part IV, line 2) MAR 1 0 2017 Net short-term capital gain Income modifications Gross sales less returns 10a and allowances OGDEN. UT b Less Cost of goods sold c Gross profit or (loss) 11 Other income 570 250,570 Total Add lines 1 through 11 15,000. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Administrative Expenses 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes Depreciation and depletion 19 Occupancy 21 Travel, conferences, and meetings Printing and publications 22 1,024 0 STMT 3 0. 23 Other expenses 24 Total operating and administrative 16,024 0. expenses Add lines 13 through 23 62,000 62,000. Contributions, gifts, grants paid 26 Total expenses and disbursements 78,024 62,000. Add lines 24 and 25 27 Subtract line 26 from line 12 172,546 & Excess of revenue over expenses and disbursements 570 b Net investment income (if negative, enter -0-) N/A C_Adjusted net income (if negative, enter -0-)

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

623511 11-23-16

Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

(a) Base period years Calendar year (or tax year beginning in) (col. (b) divided by col. (c)) 766,678 55,000 .071738 2015 35,500. 612,067. 2014 .058000 281,290. 25,600. .091009 2013 24,288 9,000. .370553 2012

2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

Multiply line 4 by line 3

2011

Enter 1% of net investment income (1% of Part I, line 27b)

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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<u>.591300</u>

.118260

1,177,853.

139,293.

139,299.

62,000.

6.

2

3

5

6

. THE WILLIAM A AND ETHEL M MCCALL

<u>Form</u>	990-PF (2016) FOUNDATION		<u>-4244</u>			Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	4948	- see	instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	<u> </u>			<u>11.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u> </u>			0.
3	Add lines 1 and 2	3				11.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				11.
6	Credits/Payments:					
a	2016 estimated tax payments and 2015 overpayment credited to 2016		}			
b	Exempt foreign organizations - tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	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 owed	- 9			_	11.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax					
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi	ne in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit	on)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub		r			
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	٠.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					ļ
	managers. ► \$ 0.			1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	ı, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6						
	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 si	ate law				1
	remain in the governing instrument?			6	X	ļ
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	ΧV		7	X	_
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NV					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for continuous claiming status as a private operating status as a private operating status as a private operating status as a section of the continuous claiming status as a section of the continu	alendar				
	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	<u>STMT</u>		10	X	
			Fo	rm 99 0)-PF	(2016)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

623541 11-23-16

during the year?

Yes X No

N/A

3Ь

4a

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X

THE WILLIAM A AND ETHEL M MCCALL Form 990-PF (2016) FOUNDATION 45-4244480 Page 6 Part 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No 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)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes No If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b. If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average (e) Expense account, other allowances hours per week devoted to position (If not paid, enter -0-) (a) Name and address JAMES B. MCCALL PRESIDENT 3219 S TORREY PINES DR LAS VEGAS, NV 89146 1.00 7,500. 0. 0. JOHN WALKER SECRETARY/TREASURER 1735 DEEP POWDER DRIVE BILLINGS, MT 59105 1.00 7,500. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average (d) Contributions to employee benefit plans and deferred (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 ` 'hourś per week devoted to position (c) Compensation compensation allowances NONE

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) To	pe of service (c) Compensation
NONE	
	1
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	s the Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
Total. And lines I tillough 3	Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	1,195,790.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,195,790.
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	1,195,790.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	17,937.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,177,853.
6_	Minimum investment return Enter 5% of line 5	6	58,893.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	58,893.
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)		
С	Add lines 2a and 2b	2c	11.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	58,882.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	58,882.
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	58,882.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	62,000.
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:		
а	Suitability test (prior IRS approval required)	3a	· · · · · · · · · · · · · · · · · · ·
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	62,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	62,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies fo	r the section

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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				58,882.
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				}
b From 2012 7, 786.				
c From 2013 11,535.				
d From 2014 4,897.				i
e From 2015 16,666.	40.004			
f Total of lines 3a through e	40,884.		· · · · · · · · · · · · · · · · · · ·	
4 Qualifying distributions for 2016 from				
Part XII, line 4: > \$ 62,000.			0.	
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				58,882.
e Remaining amount distributed out of corpus	3,118.			30,002.
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below.	:			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	44,002.			
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	<u></u>	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			_	
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				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	44,002.			
10 Analysis of line 9:				
a Excess from 2012 7,786.				
b Excess from 2013 11,535.	ļ			
c Excess from 2014 4,897.	ļ			
d Excess from 2015 16,666.				
e Excess from 2016 3,118.				L
				Earm QQD_DE (2010)

THE WILLIAM A AND ETHEL M MCCALL Form 990-PF (2016) FOUNDATION 45-4244480 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (b) 2015 (d) 2013 (a) 2016 (c) 2014(e) Total income from Part I or the minimum 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 d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "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 c "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 (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV 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).) JAMES B. MCCALL 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. 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 gifts, 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

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c Any submission deadlines:

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

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

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3 Grants and Contributions Paid During the		Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
IFE SKILLS FORE MONTANA YOUTH		PUBLIC	GENERAL FUND	
21 N. 27TH STREET				
ILLINGS, MT 59101				10,00
NATIONAL ASSOCIATION OF BLIND VETERANS		PUBLIC	GENERAL FUND	
00 EAST WEEL STREET, AT JERNIGAN				
PLACE BALTIMORE, MD 21230-4998				10,00
OPERATION SMILE		PUBLIC	GENERAL FUND	
3641 FACULTY BLVD.				
VIRGINIA BEACH, VA 23453				25,00
SALVATION ARMY		PUBLIC	GENERAL FUND	
2900 PALOMINO LANE				
LAS VEGAS, NV 89107				15,00
TOURO UNIVERSITY		PUBLIC	GENERAL FUND	
874 AMERICAN PACIFIC DRIVE				
HENDERSON NV 89014 Total		<u> </u>	▶ 3a	2 00 62 00
b Approved for future payment			- 32	62,00
NONE				
Tabl		<u> </u>	.	
Total			<u>▶ 3b </u>	orm 990-PF (20

Part XVI-A	Analysis of Income-Producing Activities
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nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					
c					
d	1 1				
e	1 1				
f					-
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	525990	543.			
4 Dividends and interest from securities	525990	27.			
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					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue.		,	1		
a	_				
b	_	- 			
C	_				
d	_				
e	_				
2 Subtotal. Add columns (b), (d), and (e)		570.		0.	0.
3 Total Add line 12, columns (b), (d), and (e)				13	570.
See worksheet in line 13 instructions to verify calculations.	.)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	the foundation's exempt purposes (other than by providing funds for such purposes).	Sillinetit Of
		_
		
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• Form 990-PF (2016)	THE WILLIAM A AND ETHEL M MCCALL FOUNDATION	45-4244480	Dogg 40
			Page 13
	mation Regarding Transfers To and Transactions and Relat	uonsnips with Noncharitable	

the Code (other than section 501(c(3)) organizations (\$77, related to political organizations? (1) Cash (2) Other assets 14(2) X (2) Other assets 5 Other transactions; (1) Sales of assets to an anotheritable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Sential of Facilities, equipment, or other assets (3) Period of Facilities, equipment, or other assets (3) Period of Facilities, equipment, or other assets (3) Period of Facilities, equipment, analysis to a membership of fundrasing solicitations (3) Period of Facilities, equipment, analysis to a membership of fundrasing solicitations (4) Period of Samp of the above 17°C, complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or paid collowing schedule. Column (6) should always show the fair market value of the goods, other assets, or paid collowing schedule. (5) Name of organization (6) Amount involved (6) Name of noncharitable exempt organization or sharing prangement, show in sacion 501(c) of the Code (other than section 501(c)(3)) or in section 527? 3) If the convent of the code (other than section 501(c)(3)) or in section 527? 3) If the code of the code (other than section 501(c)(3)) or in section 527? 4) If the code of the code (other than section 501(c)(3)) or in section 527? 5) If the code of the code (other than section 501(c)(3)) or in section 527? 6) If the code of the code (other than section 501(c)(3)) or in section 527? 6) If the code of the code (other than section 501(c)(3)) or in section 527? 7) If the code of the code (other than section 501(c)(3)) or in section 527? 8) If the code of the code (other than section 501(c)(3)) or in section 527? 8) If the code of the code (other than section 501(c)(3)) or in section 527? 8) If the code of the code (other than section 501(c)(3)) or in section 527? 9) If the code of the code (other than section 501(c)(3)) or in section 527? 1) If the code of the code (other than section 501(c)(3)) or in		organization directly or indir	, , ,				on 501(c) of		Yes	No
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Signature of officer or trustee Date Title	Sign ,	w O a	12/15	<u></u>	×011		retur			
Print/Type preparer's name Preparer's signature Preparer's signature Date Check ☐ if PTIN self- employed STEPHANIE SAND, CPA Preparer Use Only Firm's name ➤ STEWART, ARCHIBALD & BARNEY, LLP Firm's address ➤ 7881 W. CHARLESTON BLVD., SUITE 250 LAS VEGAS, NV 89117 Phone no. (702)579-7000		James 1) mi	all	12/6/2011	7 7 2	🖎	∐ Yes	لـــا	No
Paid Preparer Use Only STEPHANIE SAND, CPA Stephanie Cond. CPA 03/06/17 P00168247				I D			Charle of DTIN			
Paid Preparer Use Only Firm's address ▶ 7881 W. CHARLESTON BLVD., SUITE 250 LAS VEGAS, NV 89117 P00168247 P00168247 Ponn's EIN ▶ 88-0382649 Phone no. (702)579-7000		Trint/Type preparer's na	ame	Preparer's SI	gnature	Date	<u> </u>			
Preparer Use Only Firm's address ► 7881 W. CHARLESTON BLVD., SUITE 250 LAS VEGAS, NV 89117 Preparer Use Only Firm's name ► STEWART, ARCHIBALD & BARNEY, LLP Firm's EIN ► 88-0382649 Phone no. (702)579-7000	Paid	COMPRESSES.	CAND CD3	Stepha	mie Dond, CAA	102 (05 (15		1	0.45	
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LAS VEGAS, NV 89117 Phone no. (702)579-7000	JUC 011	·	Q1 W CUA	חו המשטי	N DI VID. CIT	ጣይ ጋደሳ				
						15 430	Phone no (702) 5	70-	7000	1
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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

2016

Name of the organization
THE WILLIAM A AND ETHEL M MCCALL

THE WILLIAM A AND ETHEL M MCCALI FOUNDATION

Employer identification number

45-4244480

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 X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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

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)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
THE WILLIAM A AND ETHEL M MCCALL
FOUNDATION

Employer identification number

45-4244480

Part I	Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES B. MCCALL 3219 S TORREY PINES DR LAS VEGAS, NV 89146	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

THE WILLIAM A AND ETHEL M MCCALL

FOUNDATION

Employer identification number

45-4244480

(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions)	Date received
_			
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
		\$	
(a)			
No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Part I			
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions)	Date received
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
		\$	
(a)			
No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
		 \$	
3453 10-18-16			990, 990-EZ, or 990-PF) (

Employer identification number

THE	WILLIAM	Α	AND	ETHEL	M	MCCALL

the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional (b) Purpose of gift	columns (a) through (e) and the followings, charitable, etc., contributions of \$1,000 or le	section 501(c)(7), (8), or (10) that total more than \$1,000 for ng line entry. For organizations ss for the year (Enter this info once)			
(b) Purpose of gift					
	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, ar	(e) Transfer of gift	of gift Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee			
	Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift	Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4			

FORM 990-PF INTERES	ST ON SAVI	NGS AND	TEMPORA	RY CASH	INVESTMENTS	STATEMENT	1	
SOURCE			(A) REVENUE PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME		
BNY MELLON CHARLES SCHWAB		348. 195. 543.		348. 195.				
TOTAL TO PART I, LI				543.				
FORM 990-PF	DIVIDEND	os and i	NTEREST	FROM SEC	CURITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	GA:	ITAL INS DENDS	(A) REVENUI PER BOOK				
CHARLES SCHWAB	27	7.	0.		27.	27.		
TO PART I, LINE 4	NE 4 27.		0.		27.	27.		
FORM 990-PF		ОТН	ER EXPEN	SES		STATEMENT	3	
		(A) EXPENSI PER BOO		(B) INVEST- T INCOME			(D) CHARITABLE PURPOSES	
LICENSE PROFESSIONAL FEES PROGRAM FEES			50. 652. 322.	().).		0.	
TO FORM 990-PF, PG 1, LN 23		1,0	024.	().		0.	

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 4

NAME OF CONTRIBUTOR

JAMES B. MCCALL

ADDRESS

3219 S. TORREY PINES DR.

LAS VEGAS, NV 89146