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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For	calend	dar year 2016 or tax year beginning , a	and ending				
	me of fou	<del></del>			A Emplo	oyer identification number	
_							
		AM FAMILY FOUNDATION				-4026502	
		d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite	1	hone number (see instructions	3)
		VERIZON WAY VC44EO27  In state or province, country, and ZIP or foreign postal code			900	8-578-2200	
		ING RIDGE NJ 07920			C If exer	mption application is pending,	check here
			rn of a former public cl	narity	D 1 F0	oreign organizations, check he	re l
	OTICOK .	Final return Amended	•	ianty	ŀ		_
		Address change Name cha			1	reign organizations meeting the was test check here and attach	
	Choole 6	type of organization X Section 501(c)(3) exempt private			ł		
						ate foundation status was tern n 507(b)(1)(A) check here	ninated under
			e private foundation	-1	1		
		rket value of all assets at  J Accounting method	X Cash Acc	ruai	1	foundation is in a 60-month te section 507(b)(1)(B), check h	
		rear (from Part II, col (c), Other (specify)	h		unger	Section Ser (B)(1)(B), Gleat II	o.c
	<u>ne 16)</u> <b>art l</b>		<u> </u>		L		(d) Disbursements
	aiti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions) )	books	incoi	ne	income	purposes (cash basis only)
7	1	Contributions, gifts, grants, etc., received (attach schedule)	3,975,000				
2017	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B					
G3	3	Interest on savings and temporary cash investments	2	<u></u>	2	2	
<b>₽</b> ==4	4	Dividends and interest from securities	18,279		18,279	18,279	
>	5a	Gross rents					
<u>[6]</u>	b	Net rental income or (loss)					
Ž	6a	Net gain or (loss) from sale of assets not on line 10	14,559				
[S	b	Gross sales price for all assets on line 6a 14,559					
Ž,	7	Capital gain net income (from Part IV, line 2)			14,559		
Ž	8	Net short-term capital gain				0	
SCANREVenueAY	9	Income modifications					! 
U y	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)				<del></del>	<del></del>
	11	Other income (attach schedule)	4 007 040	<u> </u>	20 040	10 001	
_	12	Total. Add lines 1 through 11	4,007,840		32,840	18,281	
penses	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages				~	
Su	15	Pension plans, employee benefits				DE	
	16a	Legal fees (attach schedule)				RECEIV	
ш	ь	Accounting fees (attach schedule)				MI -	<del>50 7</del>
<u>≤</u>	c	Other professional fees (attach schedule)			7/8		70/
rat	17	Interest			-	Lucy 201	. 79/ 7  8
ist	18	Taxes (attach schedule) (see instructions)				OCO	.   3
Ë	19	Depreciation (attach schedule) and depletion			. , ,	"-N T	
투	20	Occupancy					**
4	21	Travel, conferences, and meetings					
Jue	22	Printing and publications					
<u> </u>	23	Other expenses (att sch )					
Ĕ	24	Total operating and administrative expenses.	_				
era		Add lines 13 through 23	0		78	0	0
Operating and Administrative Ex	25	Contributions, gifts, grants paid	1,260				0
_	26	Total expenses and disbursements. Add lines 24 and 25	1,260		78	0	0
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	4,006,580				
	b	Net investment income (if negative, enter -0-)			32 <u>,</u> 762		
	C	Adjusted net income (if negative, enter -0-)		I		18,281	1

	Part II	Balance Sheets Attached schedules and amounts in the description column should be for and of war amounts only. (See instructions	าก	Beginning of year	End of	year
_	Parț II	should be for end-of-year amounts only (See instructions	()	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing				
`	2	Savings and temporary cash investments		25,000	4,031,580	4,035,346
İ	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
i	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att. schedule)				
		Less allowance for doubtful accounts ▶	0		_	
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U S and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)				
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch )				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe ▶	)			
	16	Total assets (to be completed by all filers – see the				
		instructions Also, see page 1, item I)		25,000	4,031,580	4,035,346
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons				
lab	21	Mortgages and other notes payable (attach schedule)				
۲	22	Other liabilities (describe ▶	)			
	23	Total liabilities (add lines 17 through 22)	·	0	0	
		Foundations that follow SFAS 117, check here	▶ X			
ces		and complete lines 24 through 26 and lines 30 and 31.	_			
2	24	Unrestricted		25,000	4,031,580	
Net Assets or Fund Balan	25	Temporarily restricted				
B 70	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here	<b>▶</b> □			•
느		and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds				
šet	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
AS	29	Retained earnings, accumulated income, endowment, or other funds				
et '	30	Total net assets or fund balances (see instructions)		25,000	4,031,580	
z	31	Total liabilities and net assets/fund balances (see				
$\Box$		instructions)		25,000	4,031,580	
_	Part II	I Analysis of Changes in Net Assets or Fund Balan	ces			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), lir	ne 30 (mu	st agree with		
	end-c	f-year figure reported on prior year's return)			1	25,000
		amount from Part I, line 27a			2	4,006,580
3	Other	increases not included in line 2 (itemize) ▶			3	
4	Add I	nes 1, 2, and 3			4	4,031,580
5		eases not included in line 2 (itemize)			_ 5	
_6	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5) – Part II,	column (	b), line 30	6	4,031,580
						- 000 DE

Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income	<del>,</del>			
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr )
1a Capital Gain Di	stribution					
_ b			<u> </u>			
С					<del></del>	
_d			<del> </del>			
_e		T	<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	r other basis ense of sale		(h) Gain ( (e) plus (f)	minus (g)
a 14,559						14,559
<u>b</u>		<del> </del>		<u> </u>		
d d				ļ.———		
e		<del>                                     </del>				
	g gain in column (h) and owned by the f	oundation on 12/31/	69		C (C-)	(6) 000 000
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (i)			(h) gain minus ess than -0-) <b>or</b> m col (h))
	30 01 12/01/30	0707 031	()/, 11 ()/,	<u> </u>		14,559
_ab	<del></del>	<del>                                     </del>				14,555
c	<del></del>			<b></b>		
d		<del>                                     </del>	<del></del>			
е						
2 Capital gain net income or (net c	apıtal loss) If gaın, also enter in If (loss), enter -0- in			2		14,559
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (	_		-		21,000
	, column (c) (see instructions) If (loss),					
Part I, line 8				3		
Part V Qualification Ur	nder Section 4940(e) for Redu	ced Tax on Net	Investment Inco	ome		
(For optional use by domestic private	foundations subject to the section 4940	0(a) tax on net inves	tment income)			
If section 4940(d)(2) applies, leave th	ns part blank					N/A
Mas the foundation liable for the see	tion 4042 tay on the distributable assetu	ot of anan	h			
	tion 4942 tax on the distributable amour lify under section 4940(e) Do not comp		base penod?			Yes No
<del></del>	each column for each year, see the inst		ing any entries			
(a)		Tuctions before maki		<del></del>	<del></del>	(d)
Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net valu	(c) ie of noncharitable-use asse	ets		ibution ratio ivided by col. (c))
2015					(55. (5) 4	
2014						
2013						
2012						
2011						
2 Total of line 1, column (d)				2	<del></del>	
	5-year base period – divide the total on		•			
number of years the foundation h	has been in existence if less than 5 year	S		3	<del> </del>	
<b></b>		_				
4 Enter the net value of noncharita	ble-use assets for 2016 from Part X, line	<b>e</b> 5		4	<del> </del>	
5 Multiply line 4 by line 2				ے ا		
5 Multiply line 4 by line 3				5	+	
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		
8 Enter qualifying distributions from If line 8 is equal to or greater than	n Part XII, line 4 n line 7, check the box in Part VI, line 1t	b and complete that	nart lising a 1% tav	rate See th	1	
Part VI instructions			. pair comig a 170 tax			

Form	990-PF (2016) McADAM FAMILY FOUNDATION 47-402650	2				Pa	age <b>4</b>
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see ins	tructions	)				
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 instruct	ions)	l				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	_1_			(	<u>655</u>
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		l				
	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				0
3	Add lines 1 and 2		3				<u>655</u>
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			(	655
6	Credits/Payments			ļ			
а	2016 estimated tax payments and 2015 overpayment credited to 2016		]				
þ	Exempt foreign organizations – tax withheld at source 6b		]	1			
С	Tax paid with application for extension of time to file (Form 8868)		]				
d	Backup withholding erroneously withheld 6d		<u> </u>	1			
7	Total credits and payments Add lines 6a through 6d		7	<u> </u>			
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8	\			20
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				<u>675</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>&gt;</b>	10				
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refu	nded 🕨	11				
_Pa	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					Yes	No
	participate or intervene in 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 definition)?				1b		X
	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					'	)
С	Did the foundation file Form 1120-POL for this year?			N/A	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					'	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		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, article	s of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a_		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5_		X
	If "Yes," attach the statement required by General Instruction T						ļ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?				6	X	<u> </u>
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 Pa	art XV	,	7_	X	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	NV						1
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	<b> </b>
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	5, "					
	complete Part XIV				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		_				
	names and addresses	Stmt	1_		10	X	<u> </u>

Pa	irt 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	ļ	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		N/A			
	person had advisory privileges? If "Yes," attach statement (see instructions)		-	12	ļ	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ LOWELL C McADAM  Tele	phone no 🕨	908-5	78-	220	0
	ONE VERIZON WAY VC44E027					
	Located at ▶ BASKING RIDGE NJ	ZIP+4 ▶	07920	)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here					▶ 🗍
	and enter the amount of tax-exempt interest received or accrued during the year	▶ :	15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
_	the foreign country					
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1		
	disqualified person?	Yes	X No		i	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No	<b> </b>		
	(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 )	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regula	itions				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here					
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		/-			
	were not corrected before the first day of the tax year beginning in 2016?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	<del></del>		[ [		
	6e, Part XIII) for tax year(s) beginning before 2016?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					}
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				i	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		3T / B	ا ا		
	all years listed, answer "No" and attach statement – see instructions )		N/A	<u>2b</u>		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
٥-	▶ 20 , 20 , 20 , 20 Pot the foundation to the control of the con					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		X No			
	at any time during the year?	Yes	MO NO			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			j		1
	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 30 years first phase holding payed? (Lee School & C. Form 1720 to distance of the	T		]		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	[ ,, ]		[
A ~	foundation had excess business holdings in 2016 )	2	M/A	3b		X
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos.			4a		<u> </u>
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize i charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in		N/A	4b		]
_	emandatio pulpose that had not been removed from Jeopardy before the first day of the tax year beginning in	2010/		orm 99	n.PF	(2016)
			r	UIIII <b>U</b>	I	(2010)

orm	990-PF (2016) <b>McADAM FAMI</b>	LY FOUNDATION	47-4	026502			Page <b>6</b>
Pa	irt VII-B Statements Regard	ing Activities for Which Forn	n 4720 May Be R	equired (conti	nued)		
5a	During the year did the foundation pay of						
	(1) Carry on propaganda, or otherwise		n 4945(e))?	Y	es X No	İ	
	(2) Influence the outcome of any specif			_		Į.	
	directly or indirectly, any voter regis				es 🛚 No		
	(3) Provide a grant to an individual for t		?		es X No	1	
	(4) Provide a grant to an organization of				_	1	
	section 4945(d)(4)(A)? (see instruct				es X No	ļ	
	(5) Provide for any purpose other than	•	or educational	_	_	- 1	
	purposes, or for the prevention of c	·	,	□ Y	es X No		
b	If any answer is "Yes" to 5a(1)-(5), did	·	nder the exceptions d	escribed in		1	
	Regulations section 53 4945 or in a cur				N/A	5b	l
	Organizations relying on a current notic				▶ 🗂 🕽		
С	If the answer is "Yes" to question 5a(4),					- 1	
_	because it maintained expenditure resp	·		N/A 🗌 Y	'es 🗌 No	1	Ì
	If "Yes," attach the statement required to	•		, [] .			Ì
6a	Did the foundation, during the year, rec		nav premiums				
Ju	on a personal benefit contract?	cive any fanas, ancony of maneony, to	pay premiants		'es 🗓 No	1	
b	Did the foundation, during the year, pay	nremiums directly or indirectly on a	nersonal henefit contr			6b	x
v	If "Yes" to 6b, file Form 8870	premiums, directly of mancolly, on a	personal benefit conti	act.			<del>-  </del> -
7a	At any time during the tax year, was the	foundation a party to a prohibited tax	shelter transaction?		es X No	1	
	If "Yes," did the foundation receive any	, · · · · · · · · · · · · · · · · · · ·		_	N/A	7b	
		fficers, Directors, Trustees, I					
	and Contractors	mocra, birectora, rruateea, i	Ouridation main	agers, mgmy	r aid Employ	,,,	
1 1	ist all officers, directors, trustees, for	undation managers and their compe	nsation (see instruc	tions)			
		Tradition managers and their compe			(d) Contributions to	1	
	(a) Name and	address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
	(a) None and	544.555	devoted to position	enter -0-)	plans and deferred compensation	other	allowances
T.C	WELL C MCADAM	BASKING RIDGE	DIRECTOR				
	E VERIZON WAY VC44E027	NJ 07920	0.00	o	٥	İ	0
	E VENTZON HAI VC44E027	NO 07320		<del>-</del>			<u>~</u>
	<del></del>	<del></del>			<del></del>	├	
					•	1	
	<del></del>				<del></del>		<del></del>
	Compensation of five highest-paid e	mpleyees (ather then these include		l		<u> </u>	
_	"NONE"	inproyees (other than those include	a on line 1 – see ins	tructions). Il fion	e, enter		
		<del></del>	<del></del>		(d) Contributions to	Ι	
	(a) Name and address of each employee	and more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
	(a) Name and address of each employed	paid more man 950,000	devoted to position	(c) compensation	plans and deferred compensation	other	allowances
NIC.	NE	· · · · · · · · · · · · · · · · · · ·	<del></del>		compensation		
NC	INE.					1	
			<del>-                                    </del>	<del></del>		<del> </del>	
						[	
			<del>-  </del>	<del> </del>			
			}			1	
				<u> </u>	<del></del>	<del>                                     </del>	
			1				
				ļ	<del> </del>		
						)	
	<del> </del>			l	L		
ota	I number of other employees paid over \$	50 000				1	ი

	ADAM FAMILY FOUNDATION	47-4026502	Page <b>7</b>
Part VIII Inform and C	nation About Officers, Directors, Trustees, ontractors (continued)		mployees,
3 Five highest-paid i	ndependent contractors for professional services (s	see instructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	<del></del>		
Total number of others re-	ceiving over \$50,000 for professional services		
			<u> </u>
Part IX-A Sum	mary of Direct Charitable Activities		
	t direct charitable activities during the tax year. Include relevant statistical	information such as the number of	F
	iaries served, conferences convened, research papers produced etc		Expenses
1 N/A			
2			<del></del>
•			
3			
	<del></del>		
4			
Part IX-B Sum	mary of Program-Related Investments (se	ee instructions)	
	m-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1 N/A			
,			
•			
All other program-related investr	ments See instructions		
3			
		i	

Form **990-PF** (2016)

Total. Add lines 1 through 3

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2016)

6

0

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2016) MCADAM FAMILY FOUNDATION **Undistributed Income** (see instructions) (a) (b) (c) (d) 2016 2015 Corpus Years prior to 2015 Distributable amount for 2016 from Part XI. 0 line 7 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only b Total for prior years 20 \_\_\_\_ , 20 \_\_\_ , 20 \_\_\_\_ Excess distributions carryover, if any, to 2016 a From 2011 **b** From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2016 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount - see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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) Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2012 b Excess from 2013 Excess from 2014 Excess from 2015 Excess from 2016

Pa	rt XIV Private Operating Fou	ındations (see ın:	structions and Par	t VII-A, question 9	)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ting		
	foundation, and the ruling is effective for 2016, enter the date of the ruling					
b	Check box to indicate whether the found	ation is a private opera	ating foundation descri	bed in section 49	942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) 10tai
	investment return from Part X for					
	each year listed	L				
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				Ĺ	
d	Amounts included in line 2c not used directly	-				
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities				l	
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			,	1	
	alternative test relied upon					
а	"Assets" alternative test – enter			t.	j	
	(1) Value of all assets				ļ	
	(2) Value of assets qualifying under		!			
	section 4942(J)(3)(B)(I)	<u> </u>				
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in				}	
	Part X, line 6 for each year listed	<del></del>		ļ		
С	"Support" alternative test – enter				]	
	(1) Total support other than gross	-				
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization				l	
	, -		<del></del>			
Pa	rt XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5 000 or	more in assets at
	any time during the ye		-	tile louildation ii	au \$5,000 OI	more in assets at
1	Information Regarding Foundation Ma					
	List any managers of the foundation who	-	e than 2% of the total	contributions received	by the foundation	n
_	before the close of any tax year (but only					,,
	N/A			(555 555	, ,	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally large	e portion of the	
	ownership of a partnership or other entity		•		•	
	N/A					
2	Information Regarding Contribution, C	Grant, Gift, Loan, Sch	nolarship, etc., Progr	ams:		
	Check here ▶ ☐ If the foundation only	makes contributions	to preselected charital	ble organizations and o	does not accept	
	unsolicited requests for funds If the foun					der
	other conditions, complete items 2a, b, c	, and d				
а	The name, address, and telephone number	oer or e-mail address	of the person to whom	applications should be	e addressed	
	N/A					
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include		
	N/A Any submission deadlines			<del></del>		
C	N/A					
d	Any restrictions or limitations on awards,	such as by geograph	cal areas, charitable fi	ields, kinds of institution	ns, or other	
	factors	, 5 - 5 - F · ·			,	
	N/A					

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to Amount status of any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year N/A **▶** 3a Approved for future payment N/A Total ▶ 3b

inter gross am	ounts unless otherwise indicated	(a) Business code	business income (b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue	Dusiness code	Amount	code	Amount	(See instructions)
				TT		
		-				
f						
g Fees ar	nd contracts from government agencies					
	p dues and assessments					
3 Interest on	savings and temporary cash investments					2
	and interest from securities					18,279
5 Net rental ii	ncome or (loss) from real estate					
a Debt-fir	nanced property					
	ot-financed property					
	ncome or (loss) from personal property		4			
7 Other inves						
	s) from sales of assets other than inventory			1 1		14,559
·	or (loss) from special events					
	t or (loss) from sales of inventory					
	nue a		· ·			
			<del></del>			
c						
е						
2 Subtotal A	dd columns (b), (d), and (e)			0	0	32,840
		<del></del>				
3 Total. Add	line 12, columns (b), (d), and (e)				13	32,840
	fine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)				13	32,840
	in line 13 instructions to verify calculations)	Accomplishme	nt of Exempt	Purposes		32,840
See worksheet	Relationship of Activities to the A  Explain below how each activity for which income	ie is reported in co	umn (e) of Part XV	/I-A contribu	ited importantly to the	
See worksheet Part XVI-B Line No.	Relationship of Activities to the A	ie is reported in co	umn (e) of Part XV	/I-A contribu	ited importantly to the	
See worksheet Part XVI-B Line No.  ▼	Relationship of Activities to the A  Explain below how each activity for which income	ie is reported in co	umn (e) of Part XV	/I-A contribu	ited importantly to the	
See worksheet Part XVI-B Line No.  ▼	Relationship of Activities to the A  Explain below how each activity for which income	ie is reported in co	umn (e) of Part XV	/I-A contribu	ited importantly to the	
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See worksheet Part XVI-B Line No.  ▼	Relationship of Activities to the A  Explain below how each activity for which income	ie is reported in co	umn (e) of Part XV	/I-A contribu	ited importantly to the	

Part XVII	Information Reg Exempt Organiz		To and Transaction	ons and Relationships W	ith Noncharitable		
1 Did the ora			of the following with any	other organization described		Yes	No
	601(c) of the Code (other			ection 527, relating to political			
•		lation to a noncharitab	le exempt organization o	of			
(1) Cash	g /		o oxompt organization o	•	1a(1)		Х
(2) Other a	issets				1a(2)		X
<b>b</b> Other trans	actions						
	of assets to a noncharit				1b(1)		X
	ses of assets from a no		ganization		1b(2)		X
	of facilities, equipment				1b(3)		X
	ursement arrangements	3			1b(4)		X
	or loan guarantees	omborobio er filmdreini			1b(5)		X
	nance of services or mi facilities, equipment, m				1b(6) 1c		X
				mn (b) should always show the	<del></del>	l	
				the foundation received less that			
				the goods, other assets, or serv			
(a) Line no	(b) Amount involved		table exempt organization		transactions, and sharing arrangeme	ents	
A/A							
					<del></del>		
-	·						
			· · · · · · · · · · · · · · · · · · ·				
			<del> </del>				
described ii b If "Yes," cor		Code (other than section hedule	lated to, one or more tax on 501(c)(3)) or in section	on 527?	· · · · · · · · · · · · · · · · · · ·	es X	No
N/A	ay Marie of Gigariization	10	7 Type of organization	(c) Descri	ption of relationship		<del></del>
<del></del>							
					·		
<u> </u>			· · · · · · · · · · · · · · · · · · ·				
ign lere	nalties of perjury, I declare the nide complete Declaration of proceedings of the complete Declaration of procedure of officer or trustee	at I have examined this return reparer (other than taxpayer	s based on all information of		May the IRS discuss this r	eturn	No
<del></del>		<del></del>	Date		<u> </u>		
aid	pe preparer's name		Preparer's signatur		Date	Check self-em	
reparer	F. BAUER	E Decree Ci	- LA		04/25/17		
se Only Firm's r		F. Bauer CI			PTIN P00003		
Firm's a	address ► 371 G Sewel	anttown Ros			Firm's EIN ► 68-030		
	<u>26%61</u>	T, NO 000	30-9257		Phone no 856-34		

Schedule B (Form 990, 990-EZ, or 99Q-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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

MCADAM FAMILY	FOUNDATION	47-4026502
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	
•	overed by the <b>General Rule</b> or a <b>Special Rule</b> . b, (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See
General Rule		
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling sproperty) from any one contributor. Complete Parts I and II. See instructions for determinations.	
Special Rules		
regulations under sect 13, 16a, or 16b, and th \$5,000 or (2) 2% of the	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support tended in section 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Planat received from any one contributor, during the year, total contributions of the greater element on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts	Part II, line r of (1) s I and II
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a year, total contributions of more than \$1,000 exclusively for religious, charitable, scier purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, a	ntific,
contributor, during the contributions totaled muduring the year for an	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received religious, charitable, etc., purpose. Don't complete any of the parts unless to this organization because it received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions and contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable, etc., contributions that were received nonexclusively reli	ceived the
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fost answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, o	m 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1

⊃age **2** 

Schedule 6 (Form 990, 990-EZ, 01 990-PF) (2016)	
Name of organization	Employer identification number
McADAM FAMILY FOUNDATION	47-4026502
Part I Contributors (See instructions) Use duplicate copies	of Part Lif additional space is needed

Part I	Contributors (See instructions) Use duplicate copies	s of Part I if additional space is ne	eaea
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOWELL C MCADAM ONE VERIZON WAY VC44E027 BASKING RIDGE NJ 07920	s 3,975,000	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)
(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)

4/25/2017 12·54 PM		Charitable Purpose	\$					
	Form 990-PF, Part I, Line 16c - Other Professional Fees	Net Adjusted Investment Net	\$ \$ 87	10 - Substantial Contributors		City, State, Zip	BASKING RIDGE NJ 07920	
DUNDATION Federal Statements		Total	w   w	ent 1 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors		Address		
6666655555 McADAM FAMILY FOUNDATION 47-4026502 FYE: 12/31/2016		Description	INVESTMENT ADVISORY FEES Total	Statement 1	Stateme Name		LOWELL C MCADAM ONE VERIZON WAY	