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Form **990-PF**Department of the Treasury
Internal Revenue Service**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.
► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning

, and ending

Name of foundation MCCORMICK FAMILY FDN AGENT 80397 C/O WILMINGTON TRUST COMPANY		A Employer identification number 30-0166827
Number and street (or P.O. box number if mail is not delivered to street address) 1100 N MARKET ST	Room/suite	B Telephone number 717-255-2045
City or town, state or province, country, and ZIP or foreign postal code WILMINGTON, DE 19890		C If exemption application is pending, check here <input type="checkbox"/> 6
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation 04 <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 431.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		607,068.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		7.	7.		STATEMENT 1
4 Dividends and interest from securities		47.	47.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		607,122.	54.		
13 Compensation of officers, directors, trustees, etc.		27,500.	0.		27,500.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees					
c Other professional fees					
17 Interest					
18 Taxes					
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses STMT 3		319.	0.		0.
24 Total operating and administrative expenses. Add lines 13 through 23		27,819.	0.		27,500.
25 Contributions, gifts, grants paid		579,000.			579,000.
26 Total expenses and disbursements. Add lines 24 and 25		606,819.	0.		606,500.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		303.			
b Net investment income (if negative, enter -0-)			54.		
c Adjusted net income (if negative, enter -0-)				N/A	

MCCORMICK FAMILY FDN AGENT 80397

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C/O WILMINGTON TRUST COMPANY

30-0166827

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	128.	431.	
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	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 ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment basis ▶				
Less accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	128.	431.	431.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds	171.	171.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	28 Retained earnings, accumulated income, endowment, or other funds	-43.	260.	
	29 Total net assets or fund balances	128.	431.	
	30 Total liabilities and net assets/fund balances	128.	431.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	128.
2 Enter amount from Part I, line 27a	2	303.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	431.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	431.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7
If (loss), enter -0- in Part I, line 7 } 2

3 Net short-term capital gain or (loss) 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 3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	672,800.	4,107.	163.817872
2017	589,400.	2,890.	203.944637
2016	543,750.	7,782.	69.872783
2015	574,600.	1,124.	511.209964
2014	592,000.	17.	34,823.529412

2 Total of line 1, column (d)

2 35,772.374668

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years

3 7,154.474934

4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5

4 9,224.

5 Multiply line 4 by line 3

5 65,992,877.

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

6 1.

7 Add lines 5 and 6

7 65,992,878.

8 Enter qualifying distributions from Part XII, line 4

8 606,500.

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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)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)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% 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-)

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-

6 Credits/Payments:

a 2019 estimated tax payments and 2018 overpayment credited to 2019

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 lines 6a through 6d

8 Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached9 **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**11 Enter the amount of line 10 to be: **Credited to 2020 estimated tax**

Refunded

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.

c Did the foundation file **Form 1120-POL** for this year?

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 **\$** 0.e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. **\$** 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

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, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

If "Yes," attach the statement required by *General Instruction T*

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?

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 2019 or the tax year beginning in 2019? See the 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

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		
5		X
6	X	
7		X
8a		
8b		
9		X
10		X

N/A

N/A

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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		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► M AND T BANK Telephone no. ► 717-255-2045 Located at ► PO BOX 2961, HARRISBURG, PA ZIP+4 ► 17101		
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 N/A		
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Organizations relying on a current notice regarding disaster assistance, check here N/A		
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 2019?		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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 statement - see instructions.) N/A c 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2019?		X

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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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

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

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 a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If "Yes" to 6b, file Form 8870.

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LARRY A HARTMAN 29 ALMOND DRIVE HERSHEY, PA 17033	EXECUTIVE DIRECTOR 8.00	22,500.	0.	0.
SUSAN RODRIGO 511 JOYCE ROAD CAMP HILL, PA 17105	ADMIN SERVICE 8.00	5,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

(continued)

[illegible]

0

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1	N/A	
2		
3		
4		

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	
2		
	All other program-related investments. See instructions.	
3		
Total. Add lines 1 through 3		0.

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	9,364.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	9,364.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,364.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	140.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,224.
6	Minimum investment return. Enter 5% of line 5	6	461.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	461.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	1.
b	Income tax for 2019 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	460.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	460.
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	460.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	606,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
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	606,500.
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	606,500.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				460.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014	591,999.			
b From 2015	544,544.			
c From 2016	543,361.			
d From 2017	589,255.			
e From 2018	672,596.			
f Total of lines 3a through e	2,941,755.			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 606,500.				
a Applied to 2018, 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 2019 distributable amount				460.
e Remaining amount distributed out of corpus	606,040.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	3,547,795.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				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 2014 not applied on line 5 or line 7	591,999.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	2,955,796.			
10 Analysis of line 9:				
a Excess from 2015	544,544.			
b Excess from 2016	543,361.			
c Excess from 2017	589,255.			
d Excess from 2018	672,596.			
e Excess from 2019	606,040.			

N/A

- ☐ 4942(j)(3) or ☐ 4942(j)(5)

- (4) Gross investment income

[illegible]

N/A

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future 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 recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AFRICAN AMERICAN CHAMBER OF COMMERCE 436 7TH AVE STE 2220 PITTSBURGH, PA 15219	NONE		GENERAL	0.
AMERICAN RED CROSS 1804 N SIXTH STREET HARRISBURG, PA 17102-1001	NONE		GENERAL	5,000.
ART ASSOCIATION OF HARRISBURG 21 NORTH FRONT STREET HARRISBURG, PA 17101	NONE		GENERAL	12,000.
BETA PI BOULE INCORPORATED P.O. BOX 60252 HARRISBURG, PA 17106-0252	NONE		GENERAL	5,000.
BETHESDA MISSION 611 REILY STREET HARRISBURG, PA 17102	NONE		GENERAL	35,000.
Total	SEE CONTINUATION SHEET(S)			574,000.
b Approved for future payment				
THE AMERICAN LITERACY CORPORATION P.O. BOX 61942 HARRISBURG, PA 17106	NONE		GENERAL	5,000.
Total				5,000.

MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

30-0166827

Part XX Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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 recipient	Purpose of grant or contribution	Amount
BIG BROTHERS BIG SISTERS OF THE CAPITAL REGION 1500 NORTH 2ND STREET HARRISBURG, PA 17102	NONE		GENERAL	7,500.
BOSLER MEMORIAL LIBRARY 158 W. HIGH STREET CARLISLE, PA 17013-2988	NONE		GENERAL	0.
BOYS AND GIRLS CLUB OF HARRISBURG 1227 BERRYHILL ST HARRISBURG, PA 17104	NONE		GENERAL	20,000.
BRETHERN HOUSING ASSOCIATION 219 HUMMEL STREET HARRISBURG, PA 17104	NONE		GENERAL	10,000.
CAMP HEBRON 957 CAMP HEBRON ROAD HALIFAX, PA 17032	NONE		GENERAL	5,000.
CAPITAL AREA GREENBELT ASSOC. INC 1346 SOUTH 19TH STREET HARRISBURG, PA 17104	NONE		GENERAL	2,500.
CENTRAL PA CONSERVANCY 401 E LOUTHER ST STE 308 CARLISLE, PA 17013	NONE		GENERAL	0.
CENTRAL PA FOOD BANK 3908 COREY ROAD HARRISBURG, PA 17109-5929	NONE		GENERAL	10,000.
CENTRAL PA YOUTH BALLET 5 N. ORANGE STREET #3 CARLISLE, PA 17013-2988	NONE		GENERAL	30,000.
CHRISTIAN CHURCHES UNITED OF THE TRI-COUNTY AREA 413 S 19TH ST HARRISBURG, PA 17104	NONE		GENERAL	7,500.
Total from continuation sheets				517,000.

MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

30-0166827

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	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
Name and address (home or business)				
CLEVE J FREDRICKSEN LIBRARY 100 N 19TH ST CAMP HILL, PA 17011	NONE		GENERAL	5,000.
COMMUNITY CHECKUP CENTER OF SOUTH HARRISBURG 38C HALL MNR HARRISBURG, PA 17104	NONE		GENERAL	0.
CRAM CHRISTIAN RECOVERY AFTERCARE MINISTRY, INC 509 DIVISION ST HARRISBURG, PA 17110	NONE		GENERAL	0.
CULTURE ENRICHMENT FUND 301 MARKET STREET #5 HARRISBURG, PA 17101	NONE		GENERAL	0.
DAUPHIN COUNTY LIBRARY SYSTEM 101 WALNUT STREET HARRISBURG, PA 17101	NONE		GENERAL	10,000.
DIAKON ADOPTION & FOSTER CARE 1 SOUTH HOME AVE TOPTON, PA 19562	NONE		GENERAL	10,000.
DREAMWRIGHTS CENTER FOR COMMUNITY ARTS 100 CARLISLE AVE YORK, PA 17401	NONE		GENERAL	25,000.
ELIZABETHTOWN COLLEGE ONE ALPHA DRIVE ELIZABETHTOWN, PA 17022-2298	NONE		GENERAL	5,000.
GAMUT THEATRE GROUP 15 N. 4TH STREET HARRISBURG, PA 17101	NONE		GENERAL	15,000.
GEISINGER HOLY SPIRIT 503 N 21ST ST CAMP HILL, PA 17011	NONE		GENERAL	5,000.
Total from continuation sheets				

MCCORMICK FAMILY FDN AGENT 80397
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	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
Name and address (home or business)				
GIRL SCOUTS IN THE HEART OF PA 350 HALE AVENUE HARRISBURG, PA 17104	NONE		GENERAL	0.
GRETNA MUSIC 200 PENNSYLVANIA AVENUE MT GRETN, PA 17064	NONE		GENERAL	0.
GRETNA THEATRE 200 PENNSYLVANIA AVENUE MT GRETN, PA 17064	NONE		GENERAL	5,000.
HAMILTON HEALTH CENTER 110 S 17TH ST HARRISBURG, PA 17104	NONE		GENERAL	0.
HARRISBURG ACADEMY 10 ERFORD ROAD LEMOYNE, PA 17043	NONE		GENERAL	0.
HARRISBURG AREA RIVERBOAT SOCIETY 107 N FRONT ST # 110 HARRISBURG, PA 17101	NONE		GENERAL	7,000.
HARRISBURG SYMPHONY ORCHESTRA 800 CORPORATE CIR STE 101 HARRISBURG, PA 17110	NONE		GENERAL	45,000.
HOSPICE OF CENTRAL PA 1320 LINGLESTONW ROAD HARRISBURG, PA 17110	NONE		GENERAL	20,000.
JEWISH FOUNDATION OF GREATER HBG 3301 N FRONT ST HARRISBURG, PA 17110	NONE		GENERAL	0.
JOSHUA GROUP 1442 MARKET STREET HARRISBURG, PA 17103	NONE		GENERAL	15,000.
Total from continuation sheets				

MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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 recipient	Purpose of grant or contribution	Amount
LEAF PROJECT 554 WARM SPRINGS ROAD LANDISBURG, PA 17040	NONE		GENERAL	0.
LEBANON VALLEY COLLEGE 101 COLLEGE AVENUE ANNVILLE, PA 17003	NONE		GENERAL	3,000.
LEG UP FARM INC 4880 NORTH SHERMAN STREET EXT MOUNT WOLF, PA 17347-9637	NONE		GENERAL	7,500.
MARANATHA CARLISLE 20 N HANOVER ST SUITE 202 CARLISLE, PA 17013	NONE		GENERAL	2,500.
MESSIAH COLLEGE ONE COLLEGE AVENUE, SUITE 3010 MECHANICSBURG, PA 17055	NONE		GENERAL	10,500.
MISSION OF MERCY 22 SOUTH MARKET STREET, STE. 6D FREDERICK, MD 21701	NONE		GENERAL	2,500.
NATIONAL CIVIL WAR MUSEUM 1 LINCOLN CIR HARRISBURG, PA 17103	NONE		GENERAL	0.
NATIVITY SCHOOL 21 DAVIDSON AVE BUFFALO, NY 14215	NONE		GENERAL	0.
NEW HOPE MINISTRIES 5228 E. TRINDLE ROAD MECHANICSBURG, PA 17050	NONE		GENERAL	0.
PAXTON MINISTRIES 2001 PAXTON STREET HARRISBURG, PA 17111-1093	NONE		GENERAL	6,500.
Total from continuation sheets				

MCCORMICK FAMILY FDN AGENT 80397
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
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 recipient	Purpose of grant or contribution	Amount
PENNSYLVANIA FRIENDS OF AGRICULTURE PO BOX 8736 CAMP HILL, PA 17001-8736	NONE		GENERAL	0.
PINE STREET PRESBYTERIAN CHURCH 310 NORTH THIRD STREET HARRISBURG, PA 17101	NONE		GENERAL	30,000.
PINNACLE HEALTH FOUNDATION P.O. BOX 8700 HARRISBURG, PA 17105-8700	NONE		GENERAL	20,000.
SHALOM HOUSE 9 SOUTH 15TH STREET HARRISBURG, PA 17104	NONE		GENERAL	3,000.
SPECIAL OLYMPICS PENNSYLVANIA 2570 BLVD OF THE GENERALS, SUITE 124 NORRISTOWN, PA 19403	NONE		GENERAL	5,000.
ST STEPHEN'S EPISCOPAL SCHOOL 215 NORTH FRONT STREET HARRISBURG, PA 17101-1407	NONE		GENERAL	10,000.
STATE STREET ACADEMY OF MUSIC 110 STATE STREET HARRISBURG, PA 17101	NONE		GENERAL	0.
SUSQUEHANNA FOLK MUSIC SOCIETY 378 OLD YORK ROAD NEW CUMBERLAND, PA 17070	NONE		GENERAL	3,000.
THE ARC OF DAUPHIN COUNTY 2569 WALNUT ST, HARRISBURG, PA 17103 HARRISBURG, PA 17103	NONE		GENERAL	5,000.
THE HARRISBURG SINGERS 150 NORTHGATE DRIVE CAMP HILL, PA 17011	NONE		GENERAL	1,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
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 recipient	Purpose of grant or contribution	Amount
THE HISTORICAL SOCIETY OF DAUPHIN CO 219 S FRONT STREET HARRISBURG, PA 17104	NONE		GENERAL	10,000.
THE NATIVITY SCHOOL OF HARRISBURG 2135 NORTH 6TH ST, 2ND FLOOR HARRISBURG, PA 17110-0550	NONE		GENERAL	20,000.
THE SALVATION ARMY 1122 GREEN STREET HARRISBURG, PA 17102	NONE		GENERAL	25,000.
THEATRE HARRISBURG 513 HURLOCK STREET HARRISBURG, PA 17110-1489	NONE		GENERAL	25,000.
UNITED WAY OF THE CAPITAL REGION 2235 MILLENIUM WAY ENOLA, PA 17025-1497	NONE		GENERAL	22,500.
VISION RESOURCES OF CENTRAL 1130 SOUTH 19TH STREET HARRISBURG, PA 17104-2912	NONE		GENERAL	11,500.
WEST SHORE SYMPHONY ORCHESTRA P.O. BOX 125 MECHANICSBURG, PA 17055	NONE		GENERAL	2,500.
WHITAKER CENTER FOR SCIENCE AND THE ARTS 222 MARKET ST HARRISBURG, PA 17101	NONE		GENERAL	25,000.
WITF 4801 LINDALE ROAD HARRISBURG, PA 17111	NONE		GENERAL	0.
YORK SYMPHONY ORCHESTRA 50 N. GEORGE STREET YORK, PA 17401	NONE		GENERAL	6,000.
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income	
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1 Program service revenue:							
a _____							
b _____							
c _____							
d _____							
e _____							
f _____							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments				14	7.		
4 Dividends and interest from securities				14	47.		
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							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a _____							
b _____							
c _____							
d _____							
e _____							
12 Subtotal. Add columns (b), (d), and (e)			0.		54.	0.	
13 Total. Add line 12, columns (b), (d), and (e)					13	54.	

(See worksheet in line 13 instructions to verify calculations.)

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

[illegible]

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

Employer identification number

30-0166827

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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 additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VANCE C MCCORMICK TW #11801 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 26,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	ANNE MCCORMICK TW #3803 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 9,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	ANNE MCCORMICK TW #99807 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 390,168.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	MARGARET MCCORMICK TW #7608 ONE M & T PLAZA, 8TH FLOOR BUFFALO, NY 14203	\$ 181,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

MCCORMICK FAMILY FDN AGENT 80397
C/O WILMINGTON TRUST COMPANY

30-0166827

Part II **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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization

Employer identification number

MCCORMICK FAMILY FDN AGENT 80397**C/O WILMINGTON TRUST COMPANY****30-0166827****Part III**

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 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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
US GOVT INTEREST	7.	7.	
TOTAL TO PART I, LINE 3	7.	7.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	47.	0.	47.	47.	
TO PART I, LINE 4	47.	0.	47.	47.	

FORM 990-PF OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS EXPENSE	255.	0.		0.
ADMINISTRATIVE EXPENSE	64.	0.		0.
TO FORM 990-PF, PG 1, LN 23	319.	0.		0.