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## Form **990-P**F

# EXTENDED TO AUGUST 15, 2016 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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

For	cal	endar year 2015 or tax year	beginning			, and er	ding		
Na	ame	of foundation						A Employer identification	number
7	PH!	E MCNAMARA PU	RCELL FOUND	ATIC	N			36-7293187	
		r and street (or P O box number if					Room/suite	B Telephone number	
2	27 W 332 CHURCHILL ROAD							847-405-10	69
	-	r town, state or province, cou	untry, and ZIP or foreign p	ostal co	de			C If exemption application is pe	nding, check here
_		ck all that apply:	Initial return		Initial return of a fo	ormer public c	harit.	<b>D</b> 1. Foreign organizations	chack hare
G	CHE	ск ан шагарріу.	Final return	<u> </u>	Amended return	oriner public c	панц	1. Toreign organizations	, check here
<u> </u>			Address change	F	Name change			Foreign organizations med check here and attach cor	eting the 85% test,
<u>~ H</u>	Che	ck type of organization:	<b>X</b> Section 501(c)(3) e	xempt n				E If private foundation stat	•
<i>€</i> a		Section 4947(a)(1) nonexem	<del></del> , , <u>, , , , , , , , , , , , , , , , ,</u>		axable private founda	ation		under section 507(b)(1)	
' <u> </u>		market value of all assets at		ıng metl	nod: X Cash	Accri	ual	F If the foundation is in a 6	, ,-
- (	fron	n Part II, col (c), line 16)		ther (sp	ecify)			under section 507(b)(1)	
	▶\$	16,351	L <b>, 2</b> 9 <mark>6 • (Part I, coll</mark>	ımn (d)	must be on cash b	asis)			
	art	Analysis of Revenue an (The total of amounts in cotur necessarily equal the amount	nd Expenses mns (b), (c), and (d) may not	(8	) Revenue and penses per books	(b) Net in inco		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<u></u> —	T	1 Contributions, gifts, grant	ts, etc., received		100,000.	*	>, 🕺	N/A · · · ·	,
山上でする。	1	2 Check I if the foundation	on is not required to attach Sch. B				• •		` ,
	1 :	Interest on savings and tempo cash investments	vary						
S S	4	4 Dividends and interest fro	om securities		353,956.	35	3,956.		STATEMENT 1
<b>G</b> )		<b>5a</b> Gross rents							
		Net rental income or (loss)	·						
	ا ام	68 Net gain or (loss) from sale of			622,449.	, <u> </u>		\$*	, t
	킭	b Gross sales price for all assets on line 6a	1,549,248.					. <u>.</u>	
	Kevenu	7 Capital gain net income (from					2,449.	. 1 %	- * · * · * * · * * · * * · * · * · * ·
•	Ι'	8 Net short-term capital ga	ın	*		\$ (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)			* **
	1	9 Income modifications Gross sales less returns	I			<u> </u>		<u> </u>	· · · · · · · · · · · · · · · · · · ·
	11	0a and allowances	<del></del>	<del> </del>		i.			
		b Less Cost of goods sold c Gross profit or (loss)		ix .		* 1 5 %		) (SMMC 5V	<u></u>
	1	'							V5 (1)
	1		ıh 11	-1	,076,405.	97	6,405.		* ` `
	13				0.		0.		0.
	1.			13					
	1:	5 Pension plans, emalovee	benefits 1 3 2016						
	<u>اور</u>	6a Legal fees	JOE IN DOM	S					
	Sens	b Accounting fees	STMT 2	75	9,740.		4,870.		4,870.
ı	ğ	c Other professional fees	OGDEN, UI	لط					
	<u>9</u> 1	/ Interest	STMT 3	-	32,841.	<del></del>	5,841.		0.
	Administrative			$\vdash$	34,041.		J,041.	-	1.483
:			זונ				<del></del>	<del> </del>	" 3 <u>,</u> "
	Adm 2		meetings						
	P 2								
		- ·	STMT 4		15.		0.		15.
:					<del></del> .		<del></del>		
	- Bera	expenses. Add lines 131			42,596.	1	0,711.		4,885.
•	ة <sub>2</sub>	•			554,000.				550,500.
	2	6 Total expenses and disb	ursements.						
	$\perp$	Add lines 24 and 25		-	<u>596,596.</u>	1	0,711.		555,385.
	2	7 Subtract line 26 from line	e 12;	ļ	150 000				1
		& Excess of revenue over expen			479,809.	^_	F C A 4		
		b Net investment income		<u> </u>		96	<u>5,694.</u>	NT / 3	
	501	c Adjusted net income (if r	negative, enter -0-)	<u> </u>				N/A	7 000 DF 101 II

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Form **990-PF** (2015)

11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Fo	rm 90	7293187 Page 2			
ſĒ	) årt	Balance Sheets Attached schedules and amounts in the description column should be for and of war amounts only	Beginning of year	End o	of year
	aiit	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	1,966,384.	3,124,285.	3,124,285.
	3	Accounts receivable -	**		
		Less; allowance for doubtful accounts			1
	4	Pledges receivable ►			7
		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	on on his was allowed	· · · · · · · · · · · · · · · · · · ·	
40	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ass	102	Investments - U.S. and state government obligations	-		<del>,,</del>
	1	Investments - corporate stock STMT 5	9,520,460.	8,942,368.	13,224,011.
	1	Investments - corporate bonds	3/320/100.	0,512,5001	13,224,011.
	1	Investments - land, buildings, and equipment basis	inia Will	***	
	١	Less accumulated depreciation	11:2~ File &	******	Sandra Marshall
	12	Investments - mortgage loans			
	13	Investments - other	· · · · · · · · · · · · · · · · · · ·	_	
		Land, buildings, and equipment basis			
	'-	Less accumulated depreciation	. Ma. 18	A. NAME OF THE PARTY OF THE PAR	
	15	Other assets (describe OTHER RECEIVABLE	103,000.	3,000.	3,000.
		Total assets (to be completed by all filers - see the	103,000.	3,000.	3,000.
	'"	Instructions. Also, see page 1, item I)	11,589,844.	12,069,653.	16,351,296.
	17	Accounts payable and accrued expenses	11/303/011.	12,000,000.	10,331,230.
	18	Grants payable			
	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		"'	
Ē	21	Mortgages and other notes payable			
<u>:</u> "	ı	Other liabilities (describe )	3°2 \		
	1			-	
	23	Total fiabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			<u> </u>
Ses	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
ā		Foundations that do not follow SFAS 117, check here			
Ĕ		and complete lines 27 through 31.			, ,
0	27	Capital stock, trust principal, or current funds	0.	0.	
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balanc	29	Retained earnings, accumulated income, endowment, or other funds	11,589,844.	12,069,653.	
Ž	30	Total net assets or fund balances	11,589,844.	12,069,653.	
			44 500 044	40 000	
	31_	Total liabilities and net assets/fund balances	11,589,844.	12,069,653.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	·	
		t agree with end-of-year figure reported on prior year's return)	30		11,589,844.
	•	amount from Part I, line 27a		1 2	479,809.
		Increases not included in line 2 (itemize)		2 3	479,809.
		ines 1, 2, and 3		4	12,069,653.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	12,069,653.
523					Form <b>990-PF</b> (2015)

THE MCNAMARA PURCELL FOUNDATION

Part IV Capital Gains a	ind Losses for Tax on In	vestment	Income					
	ibe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs			I. b	low acquired - Purchase - Donation	, ,,	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 14,100 SHS MEDT					D	V	ARIOUS	01/06/15
	TANDER CONSUMER	USA HL	D INC		P	0	1/23/14	07/06/15
c CAPITAL GAIN DI	STRIBUTION			<del> </del>	P	<b>-</b>		
<u>d</u>	<u></u> ,			+		_		<u> </u>
<u>e</u>				т,		<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (los (e) plus (f) minus	; (g)
a 1,004,675.			446,79					<u>557,876.</u>
ь 487,986.			480,00	10.				7,986. 56,587.
<u>c</u> 56,587.								36,367.
<u>d</u>								<u> </u>
Complete only for assets showing	g gain in column (h) and owned by t	he foundation	on 12/31/69			/I) G	Sains (Col. (h) gai	n minus
Complete only for access snown	(j) Adjusted basis		cess of col. (I)			còl. (k	<), but not less the	an -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			L	Losses (from col.	(h))
a								557,876.
b								7,986.
С								56,587.
<u>d</u>								
e		<u></u>						
2 Capital gain net income or (net cap	If gain, also enter If (loss), enter -0	n Part I, line In Part I, line	7 7	}	2			622,449.
3 Net short-term capital gain or (los	•			[				
If gain, also enter in Part I, line 8,	,	J (0).		}				
If (loss), enter -0- in Part I, line 8	1 0 1 4040/	<b>B</b>	<del></del> .		3		N/2	4
** * '	nder Section 4940(e) for	-				ncon	ne	
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment ir	ncome.	.)			
If section 4940(d)(2) applies, leave th	is part blank.							
		auat of amilia	ar in the bees no	rio dO				Yes X No
Was the foundation liable for the sect If "Yes," the foundation does not quali			•	ilour				162 [22] NO
	ach column for each year; see the ir			entries.				
(a)	(b)		<u> </u>	(c)			Duete	(d) ibution ratio
Base period years Calendar year (or tax year beginnir	Advisted avalifying dia	tributions	Net value of n			sets	(col. (b) d	ivided by col. (c))
2014	65	5,702.			,986,5			.043753
2013	65	7,665.			,423,4			.048994
2012		5,251.			<u>,463,9</u>			.055413
2011		2,940.			,337,8			.048769
2010		1,215.		10	,689,3	<u>67.</u>	ļ <del></del>	.045954
								242002
2 Total of line 1, column (d)							2	.242883
3 Average distribution ratio for the 5	•	on line 2 by 5,	or by the numbe	r of yea	ars			.048577
the foundation has been in exister	ice it less than 5 years						3	.040377
4 Enter the net value of noncharitab	le-use assets for 2015 from Part X,	line 5					4   3	16,498,522.
- Litter the flet value or florichantab	ic-use assets for 20 to from 1 art A,	illio 5					<del>-                                    </del>	20,150,522
5 Multiply line 4 by line 3							5	801,449.
• manapy mas a 25 mas s								•
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6	9,657.
	,							
7 Add lines 5 and 6							7	811,106.
6 Finter availé une distributeurs	Dort VII. June 4							555,385.
8 Enter qualifying distributions from	·	است مالات			N/ 4=		8	222,203.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	iete that part usi	ng a 1º	% tax rate.			

	rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struct	ions	Page 4		
			-	7		
18	Exempt operating foundations described in section 4940(d)(2), thete left and enter the on the fi	,		. `		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1 0	3.	14.		
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	<u> </u>	, 3.	<del>14.</del>		
	of Part I, line 27b		į.			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	. Z		~~~~		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1.0	2.	0.		
3	Add lines 1 and 2	19	, 3:			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	19	, 3:	<u> 14.</u>		
	Credits/Payments.	"%(*.	*	ŧ		
	2015 estimated tax payments and 2014 overpayment credited to 2015  6a 19,705.	ŵ,				
	Exempt foreign organizations - tax withheld at source	100	\$	a		
C	Tax paid with application for extension of time to file (Form 8868)  6c 20,000.	·	ŔŢ.	٨,		
đ	Backup withholding erroneously withheld					
	Total credits and payments. Add lines 6a through 6d	39	, 7	<u>05.</u>		
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	20	, 39	91.		
	Enter the amount of line 10 to be: Credited to 2016 estimated tax > 20,391. Refunded > 11			0.		
	rt VII-A Statements Regarding Activities	I 8882 € T	7	- Na		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	- XXXX 1	Yes	-		
	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	ı İ				
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?	1c		X		
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	ŀľ		199		
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			1 3.		
е	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?	2		X		
	If "Yes," attach a detailed description of the activities	ŀ				
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	3		X		
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?	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			ł		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	20148		· '		
	By language in the governing instrument, or	ľ.	^			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	- XX.  -				
	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 Part XV	7	X	<u> </u>		
		Zzix .				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	<u>IL</u>					
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	Ь—		
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			<u>.</u>		
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X		
10	10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses					

orm	990-PF (2015) THE MCNAMARA PURCELL FOUNDATION 36-729	3187		Page
Pa	rt VII-A   Statements Regarding Activities (continued)	т—	Yes	No
	At the state of th		162	140
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			x
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1,0		x
_	If "Yes," attach statement (see instructions)	12	х	^
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		<u> </u>
	Website address ► N/A  The books are in care of ► ELLIE CURRIE  Telephone no. ► 312-6	28-2	151	
4		0 - <u>2</u>	40T	
		0190		Г
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N	/A	•
	and enter the amount of tax-exempt interest received or accrued during the year	1/	Yes	No
6	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		res	1
	securities, or other financial account in a foreign country?	16	A &.	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	,		ىئى.
_	foreign country	_L,	ş.i	W.
'n	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		127	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	N
la	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1.		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	š.		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1	
	for the benefit or use of a disqualified person)?			
	(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.)			
h	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	·	l	
~	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b	1	
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		ł	1
٠	before the first day of the tax year beginning in 2015?	1c		X
,	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u>"</u>	<b>†</b>	š
	defined in section 4942(j)(3) or 4942(j)(5)):		3.	. All (1)
_	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			. Æ
a				
			172	1
	If "Yes," list the years \( \)			
D		1	*	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.)  N/A			
		2b	4 50	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	, ,		Ĭ.
	<b></b> ,,,			3
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	Ì	*	1
	during the year?			
b	If "Yes," did it have excess business holdings in 2015 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,			
	Form 4720, to determine if the foundation had excess business holdings in 2015)  N/A	3b	<u> </u>	$\perp$
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
	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 2015?	4b	1	l X

Form 990-PF (2015) THE MCNAMARA PURCELL FOUR Part VII_B   Statements Regarding Activities for Which F		oguirod	36-72931	L <b>87</b> Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to: <ol> <li>Carry on propaganda, or otherwise attempt to influence legislation (section influence the outcome of any specific public election (see section 4955); or any voter registration drive?</li> <li>Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions)</li> <li>Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions).</li> <li>If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?</li> <li>"Yes," attach the statement required by Regulations section 53.4945</li> <li>Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?</li> <li>Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</li> <li>Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</li> </ol> </li> <li>Did the foundation during the year, was the foundation a party to a prohibited tax set if "Yes," did the foundation receive any proceeds or have any net income attributed and Employees, and Contractors</li> </ul>	ectly,  ectly,  You  or  You  A Page of the page of th	es X No N/A  S No es X No N/A	5b X	
1 List all officers, directors, trustees, foundation managers and their of				
(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
2 Compensation of five highest-paid employees (other than those incl (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
NONE  Total number of other employees paid over \$50,000	devoted to position		compensation	allowances

Form 990-PF (2015) THE MCNAMARA PURCELL FOUNDATION		7293187 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
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) Type of service	(c) Compensation
NONE	1,7,1	
	1	
	<del>-</del>	
	1	
	1	
	_	
	1	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		<del></del> .
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A		
2	-	
3		
		<u> </u>
4		
Port IV P C of Dua warm Dalated Investments		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on line.	as 1 and 2	Amount
27/2	es i aliu 2.	Amount
1 N/A		
2		
	,	
All other program-related investments. See instructions.	,	
3		
Total. Add lines 1 through 3	<u></u>	0.

Form **990-PF** (2015)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 13,667,944. a Average monthly fair market value of securities 1a 3,081,825. b Average of monthly cash balances 1b 1c c Fair market value of all other assets 16,749,769. 14 d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 0. 2 Acquisition indebtedness applicable to line 1 assets 2 ,749,769. 3 Subtract line 2 from line 1d 3 251,247. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 16,498,522. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 5 824,926. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) 824,926. Minimum investment return from Part X, line 6 19,314. Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) 19,314. c Add lines 2a and 2b 2c 805,612. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 4 805,612. 5 5 Add lines 3 and 4 6 6 Deduction from distributable amount (see instructions) 805 .612 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 555,385. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За b Cash distribution test (attach the required schedule) 3b 555,385. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income, Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 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.

Form **990-PF** (2015)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7		<b>M</b> • •	* *	
2 Undistributed income, if any, as of the end of 2015				805,612.
a Enter amount for 2014 only			511,066.	
<b>b</b> Total for prior years:	**************************************			*
b Total for prior years.	* 4	0.		
3 Excess distributions carryover, if any, to 2015:			* 4 %**	1. A 80 .
a From 2010				
<b>b</b> From 2011			* **	
c From 2012	. *;* ;			\$ ,
d From 2013	. ***			*
e From 2014				
f Total of lines 3a through e	0.		, , ,	,
4 Qualifying distributions for 2015 from	1.		*	
Part XII, line 4: ► \$ 555, 385.	·			`
· · · · · · · · · · · · · · · · · · ·	, ,		511,066.	`,
a Applied to 2014, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·	* , *	311,000.	·
b Applied to undistributed income of prior	ŕ	0.		:
years (Election required - see instructions)	*	Ü•		
c Treated as distributions out of corpus	^			
(Election required - see instructions)	0.			44 210
d Applied to 2015 distributable amount	< *			44,319.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.	,		0.
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	0.			/ 3*
<b>b</b> Prior years' undistributed income. Subtract	- 3, 4,			, ; ; ;
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	. 4 44	-	<b>%</b> 4, · ^4	**,7
amount - see instructions		0.	, , , , , , , , , , , , , , , , , , ,	
e Undistributed income for 2014. Subtract line	,*** <b>%</b> .			
4a from line 2a. Taxable amount - see instr.	* /		0.	,
f Undistributed income for 2015. Subtract	,			- <del></del>
lines 4d and 5 from line 1. This amount must	4			
be distributed in 2016		ř.		761,293.
7 Amounts treated as distributions out of		<u>.</u> * >,		
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 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				Į.
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				,
e Excess from 2015				· · · · · · · · · · · · · · · · · · ·

Form 990-PF (2015) THE MCNA  Part XIV   Private Operating Foundary		LL FOUNDATI		36-7 <u>2</u> N/A	193187 Page 10
1 a If the foundation has received a ruling or o	· · · · · · · · · · · · · · · · · · ·		-A, question 5)	N/A	<del></del>
foundation, and the ruling is effective for 2		• • •			
b Check box to indicate whether the foundat	•		in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g loundation described	Prior 3 years	1 +3+2())(0) 01 +	J
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for		(-/	(0,7====	(4/2	
each year listed  b 85% of line 2a	- <del></del>				
c Qualifying distributions from Part XII.			1	<del>-</del>	
· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
line 4 for each year listed  d Amounts included in line 2c not			<del> </del>	<del></del>	
•					
used directly for active conduct of					
exempt activities				<del>                                     </del>	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:			i		
a "Assets" alternative test - enter:					
(1) Value of all assets			<del> </del>		
(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)			ļ		
(3) Largest amount of support from					
an exempt organization			<u> </u>		
(4) Gross investment income	nation (Complet	a this new entri	if the foundation	had \$5 000 as ma	l consta
Part XV Supplementary Informat any time during the			ir the loundation	nad \$5,000 or mo	re iii assets
		3000013.7			
1 Information Regarding Foundation	•	han 20/ of the total cont		farradation bafara the elec	a af ami tau
a List any managers of the foundation who he year (but only if they have contributed more)			ributions received by the	Touridation before the clos	be of any tax
PHILIP J. PURCELL				-	
b List any managers of the foundation who	own 10% or more of the	stock of a corporation	or an equally large portu	on of the ownership of a n	artnershin or
other entity) of which the foundation has a			or an equally large porti	on of the ownership of a po	a the ship of
NONE					
2 Information Regarding Contribution	, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here <b>X</b> if the foundation only				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (se					
a The name, address, and telephone number	or e-mail address of th	ne person to whom appl	cations should be addres	ssed:	<u> </u>
N/A					
<b>b</b> The form in which applications should be	submitted and informat	ion and materials they s	hould include;		
N/A c Any submission deadlines:	<del></del>				
		<del>.</del>			
d Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields	kinds of institutions, or	other factors:	
N/A					

3 Grants and Contributions Paid During the Y	ear or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE ATTACHED STATEMENT				550,500.
		ļ		
Total		·-	<b>▶</b> 3a	550,500.
<b>b</b> Approved for future payment				
NONE				
		]		
		<del></del>	-	
		<u> </u>	1	
Total			► 3b	0.

**Analysis of Income-Producing Activities** 

<del></del>	Lincolate	d business income	Evalu	ided by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	741100111	code	Amount	TEMOCROTI INCOME
a			<del> </del>		<del></del>
b			├	<u> </u>	_ <del>_</del>
C			<del> </del>		
d			<u> </u>		
e		<del></del>		-	
f			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash					
investments	<u> </u>	<del></del>			
4 Dividends and interest from securities			14		* **
5 Net rental income or (loss) from real estate:	2	* ×	13.00	/4 <sup>1</sup> · ,	* * * *
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property	<u>[</u>				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	622,449.	
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.	,ă	976,405.	0.
13 Total. Add line 12, columns (b), (d), and (e)					976,405.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	a the Acco	mplichment of Eve	mnt	Durnoses	·
Part XVI-B Relationship of Activities to	o the Acco	inhiisiineni oi Exe	ampı	Purposes	
Line No. Explain below how each activity for which inco	me is reported i	n column (e) of Part XVI-A	contrib	outed importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other than					
N/A					
	-			•	
	_				
		_	-		
				<del>.</del>	
		<del></del>			
	-				
	<del></del>	<del></del>			
		<del></del>			
					<del></del>

					g with any other organization		on 501(c) of		Yes	No
					7, relating to political organ	izations?				1
		rom the reporting founda	ation to a noncharitab	ole exempt org	janization of;					37
	Cash							18(1)		X
(2)	Other	assets						18(2)		<u> </u>
<b>b</b> Oth	ner trans	sactions:								
٠,		of assets to a noncharitat	- <del>-</del>					1b(1)		$\frac{x}{x}$
٠,		ases of assets from a nor	•	rganization				1b(2)		<u>x</u>
		of facilities, equipment,	or other assets					1b(3)		X
		ursement arrangements						1b(4)		X
		or loan guarantees						1b(5)		X
٠,		mance of services or me						1b(6)		X
	•	facilities, equipment, mai	Ŧ :		pioyees dule. Column <b>(b)</b> should al	wave chow the foir n	norkat valua of the a		otc I	
					ed less than fair market valu				513,	
		) the value of the goods, (			d 1635 than fall that ket valu	io in any tranouotion	or snaring arrangen	ioni, onow in		
(a) Line r	<del></del>	(b) Amount involved			exempt organization	(d) Description	of transfers, transaction	ns, and sharing arra	ingement	ts
-,	'	(0)	(3) (11)	N/A		\-,	· · · · · · · · · · · · · · · · · · ·			
	+-					-				
	+-				<del>_</del>				•	
				_	-					
					<del></del> -					
	$\top$	*******								
							-			
				_						
<b>2a</b> Is	the foun	dation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described		_		_
ın	section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 527?			X Yes	<u> </u>	No
b lf	Yes," co	mplete the following sch			· · · · · · · · · · · · · · · · · · ·	<del>,                                     </del>				
		(a) Name of org	janization		(b) Type of organization		(c) Description of re	lationship		
			<u></u>		N/A	<u> </u>				
					N/A				_	
		<u> </u>			N/A	<del> </del>			_	
			<del></del>	-	<u> </u>	<del> </del>				
	11-2	nanature of narrow Laborate	that I have everyned the	roturn makadar-	accompanying schedules and s	tatements and to the ho	st of my knowledge			
Sign					taxpayer) is based on all informa			May the IRS or return with the		
Here		77735	ン`)		17/8/16	Tous	TEE	shown below		7 <b>.</b>
	Z_	ature of afficer or trustee			,	Title	1 6-12-	_ X Yes	<u> </u>	J No
	Sign	Ature of officer or trustee		Preparer's s	Date	Date	Check I if	PTIN		
		Print/Type preparer's na	11116	Lichard 2 S	ignature	Date	self- employed			
Paid		DANTET T	T.TITY 7	DANTET	J. LUTZ	06/27/16	San ampleyee	P01322	იაგ	
Prep	arer	DANIEL J.  Firm's name ► DEL		LLP DANIEL	о. пота	00/4//10	Firm's EIN ► 8			—
Use		Litm s name ► DRT	OTITE TAX	חחב			FILLIS EIN PO	. T002/	1 41	
	J	Firm's address ▶ 11	1 SOITTH W	ACKER 1	DRIVE	· <del></del>		<del>.</del>	_	
			IICAGO, IL				Phone no. (3)	12) 486	-104	0.0
		<u>CII</u>	<u></u>	55555	<del></del>		Tritolie ilo. 19	Form <b>99</b>		

# Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

	THE MCNAMARA PURCELL FOUNDATION	36-7293187
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
• •	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See instructions
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling iny one contributor. Complete Parts I and II. See instructions for determining a contributor's	• •
Special Rules		
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount EZ, line 1. Complete Parts I and II	or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a libutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ of cruelty to children or animals Complete Parts I, II, and III	
year, contribution is checked, enter purpose Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a constant exclusively for religious, charitable, etc., purposes, but no such contributions totaled maker here the total contributions that were received during the year for an exclusively religious to complete any of the parts unless the <b>General Rule</b> applies to this organization because if able, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule B on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	• • • • • • • • • • • • • • • • • • • •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

#### THE MCNAMARA PURCELL FOUNDATION

36-7293187

Pårt 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	PHILIP J. PURCELL  6300 N. SAGEWOOD DR., SUITE H-110  PARK CITY, UT 84098	\$ <u>100,000</u> .	Person X Payroli
(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 Complete Part II for noncash contributions)

Employer identification number

## THE MCNAMARA PURCELL FOUNDATION

36-7293187

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(See IIISU UCUUTS)	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	.(d) Date received
		\$	<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

HE MC	NAMARA PURCELL FOUNDATI	ON		36-7293187
art III	Exclusively religious, charitable, etc., contributer. Complete completing Part III, enter the total of exclusively religious	columns (a) through (e) and the follow , charitable, etc., contributions of \$1,000 or l	WING line entry, For organization	9
) No.	Use duplicate copies of Part III if additiona	al space is needed		
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	nsferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
_				
		(e) Transfer of gif	t	
+	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-				
-		(e) Transfer of gif	t	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECUE	RITIES S'	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	353,956	•	0. 353,956.	353,956.	
TO PART I, LINE 4	353,956	•	353,956.	353,956.	
FORM 990-PF		ACCOUNTI	NG FEES	S'	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DELOITTE TAX LLP		9,740.	4,870.		4,870.
TO FORM 990-PF, PG	1, LN 16B	9,740.	4,870.		4,870.
FORM 990-PF		TAX	ES	S'	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAX FOREIGN TAX PAID		27,000. 5,841.	0. 5,841.		0.
TO FORM 990-PF, PG	1 T.N 18	32,841.	5,841.		0.
TO FORM 350 FF, FG	======================================	32,011.	3,041.		
FORM 990-PF		OTHER E	XPENSES	S	TATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
IL FILING FEE	-	15.	0.		15.
TO FORM 990-PF, PG	1, LN 23	15.	0.		15.
	=				

4 4 1 K

FORM 990-PF CORPORATE S			STATEMENT 5		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
24,467 SHS STANDARD & POOR 45,033 SHS ISHARES TRUST DO 44,486 SHS THE FINANCIAL STANDARD SHS VANGUARD TTL WRITE SHS WISDOM TREE JPN 0 SHS MEDTRONIC INC (MDT) 0 SHS SANTANDER CONSUMER US 10,000 SHS ISHARES MSCI EMI	J SELECT EL SECT SPDR FD LD STK INDX TO DIV SA HLD INC	3,134,792. 2,281,478. 750,045. 1,000,473. 1,426,873. 0. 0. 348,707.	1,060,101. 1,531,597.		
TOTAL TO FORM 990-PF, PART	II, LINE 10B	8,942,368.	13,224,011.		

FORM 990-PF	PART VIII - LIS TRUSTEES ANI	STATEMENT 6			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID P. PURCELL 27 W 332 CHURCHILI WINFIELD, IL 60190		TRUSTEE*	0.	0.	0.
MICHAEL J. PURCELL 27 W 332 CHURCHILL WINFIELD, IL 60190	ROAD	TRUSTEE*	0.	0.	0.
PAUL M. PURCELL 27 W 332 CHURCHILI WINFIELD, IL 60190		TRUSTEE*	0.	0.	0.
PHILIP J. PURCELL 27 W 332 CHURCHILI WINFIELD, IL 60190		MANAGER* 0.00	0.	0.	0.
*AS NEEDED		0.00	0.	0.	0.
TOTALS INCLUDED ON	N 990-PF, PAGE (	6, PART VIII	0.	0.	0.

# McNamara Purcell Foundation EIN # 36-7293187 FOR THE YEAR ENDED DECEMBER 31, 2015 ATTACHMENT TO AND MADE PART OF FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Recipient	Γ	Foundation Status	Purpose of	
Name & Address	Relationship	of Recipient	Contribution	Amount of Gift
TCU Block Endowed Chair				
110 S Main St				s 10 000
South Bend IN 46601	None	PC	Unrestricted	10 000
Chicago Chapter of Spinal Cord Society 618 N Lemont Ave				ł
Chicago, IL 60646	None	PC	Unrestricted	\$ 5000
Multiple Myeloma Research				i I
3 Forest Street New Cannan, CT 06840	None	PC	Unrestricted	\$ 31 500
Peggy Notebaert Nature Museum				
2430 N Cannon Dr	None	PC	Unrestricted	\$ 6000
Chicago IL 60614 Robert T Jones Memorial Scholarship Fund	1			
1185 6th Ave 19 Fl New York, NY 10036	None	PC	Unrestricted	\$ 2 000
University of Notre Dame	None		Officenticled	2 500
724 Grace Hall	N	PC	Unrestricted	s 50 000
Notre Dame, IN 46556 COSGRIFF	None	PC	Unrestricted	3 30 000
PO Box 141				اا
Havestraw, NY 10927	None	PC	Unrestricted	\$ 10,000
Cnsto Rey - Father John Foley 14 East Jackson Boulevard Suite 1200				i
Chicago, IL 60604	None	PC	Unrestricted	\$ 10 000
Cristo Rey Network				
14 East Jackson Boulevard, Suite 1200 Chicago IL 60604	None	PC	Unrestricted	s 10,000
Hospital for Special Surgery		· · · · ·	51,155070104	10,000
535 East 70th Str	l	_	l	1
New York, NY 10021	None	PC	Unrestricted	S 10 000
Pathways Awareness Foundation 150 N. Michigan Ave				
Chicago IL 60601	None	PC	Unrestricted	\$ 5000
Cystic Fibrosis Foundation				
150 N Michigan Ave Chicago, IL 60601	None	PC	Unrestricted	s 5 000
MS Research Center Of NY				
521 West 57th Street New York NY 10019	None	PC	Unrestricted	\$ 30,000
Wasatch Mountain Amateur Hockey Association	1,0	1.5		
P O Box 1921, West Jordan				ll
Utah 84088 West Coast Renegades Amateur Hockey Association	None	PC	Unrestricted	\$ 2000
Park City Utah 84098				
	None	PC	Unrestricted	\$ 2 000
National MS Society - Utah				
6364 S. Highland Drive Salt Lake City, UT 84121	None	PC	Unrestricted	\$ 5 000
Anzona State University				
707 S College P O Box 875005				
Tempe AZ 85287 F A.R E Food Allergy Research & Education Association	None	PC	Unrestricted	\$ 10 000
1585 Broadway 2426				
New York, NY 10036	None	PC	Unrestricted	\$ 10 000
Evans Scholars general operating account				
One Bnar Road Illinois 60029	None	PC	Unrestricted	s 5 000
Evans Scholars Green Coat Gala	1			
One Briar Road	1		14	1
Illinois 60029 Judge Memorial Principal Search	None	PC	Unrestricted	\$ 5000
650 South 1100 East			ŀ	
Salt Lake City UT 84102	None	PC	Unrestricted	\$ 50 000
St John Berchman's (Father Watt)	1		1	
PO Box 131 % George W Galena AK 99741	None	PC	Unrestricted	s 5 000
Sts. Farth, Hope & Chanty	1			1
191 Linden Street	l		l	اا
Winnetka IL 60093 TCU Equestrian Endowed Scholarship	None	PC	Unrestricted	\$ 10 000
110 S Main St.				
South Bend IN 46601	None	PC	Unrestricted	\$ 5,000
Brain Research Foundation		]	1	
111 W Washington St Chicago, IL 60602	None	PC	Unrestricted	\$ 25,000
Declan Drumm Sullivan Memorial Foundation	1.000	<u> </u>		20,500
3539 Long Grove Road	1		l	1
Long Grove, IL 60047	None	PC	Unrestricted	\$ 10 000
Daniel Murphy Scholarship Fund 309 W Washington St #1250				
Chicago IL 60606	None	PC	Unrestricted	\$ 5 000
Davis County Youth Hockey Association				
550 N 200 W Bountiful UT 84010-6975	None	PC	Unrestricted	s 1 000
DOURSER OT 04010-0373	HONE	1	, omesuicieu	1 1000

Evans Scholars Invitational			!		
One Briar Road			i	1	
Illinois 60029	None	PC	Unrestricted	\$	4,000
Inner-City Scholarship Fund				1	
1011 1st Avenue #1400			i	1	
New York, NY 10022	None	PC	Unrestricted	\$	10 000
Loyola Academy - Needy Family Fund		<u>.</u>			
1100 Laramie			l l	1	
Wilmette, IL 60091	None	PC	Unrestricted	\$	10 000
Madeleine Choir School					
205 E 1st Ave				1	
Salt Lake City, UT 84103	None	PC	Unrestricted	s	50 000
USD - Center for Peace and Commerce					
5998 Alcalá Park			1	1	
San Diego, CA 92110	None	PC	Unrestricted	l s	7 500
USD - Discretionary Athletics Fund				+*-	
5998 Alcalá Park			1	1	
San Diego, CA 92110	None	PC	Unrestricted	s	7 500
A Silver Lining Foundation	1.000			+	
134 N LaSalle - Suite 1218			į.	1	
Chicago, IL 60602	None	PC	Unrestricted	<b>S</b>	10,000
ALS - Les Turner ALS Foundation					
900 N Lake Shore Dr			i i	1	
Chicago, IL 60611	None	PC	Unrestricted	\$	5 000
American Diabetes Association					
1701 North Beauregard Street				1.	
Alexandna, VA 22311	None	PC	Unrestricted	<u> </u>	2,500
American Enterprise Institute				1	
1150 17th St NW	N	PC	Unrestricted	s	50,000
Washington DC 20036	None	PC	Unirestricted	-	30,000
Intermountain Healthcare 36 South State Street				1	
Salt Lake City, UT 84111	None	PC	Unrestricted	s	20 000
Race Swami	Hone		- CINESDICICO	+	20 000
Glendale, UT 84729				1	
	None	PC	Unrestricted	s	2 500
Junior Achievement of Chicago				7	
651 W Washington Blvd #404				1	
Chicago IL 60661	None	PC	Unrestricted	S	10 000
Loyola Academy - Ignatian Educator Fund				1	
540 Hibbard Rd	1			1	
Winnetka IL 60093	None	PC	Unrestricted	s	10 000
SMU - Cox School of Business Dean & Discretionary Fund					
6212 Bishop Blvd				Į.	
Dallas TX 75275	None	PC	Unrestricted	\$	5,000
Catholic Extension				7	
150 S Wacker Dr					
Chicago IL 60606	None	PC	Unrestricted	S	2,000
Carl Kids					
3212 Winfield Dr			1	1	
Durham, NC 27707	None	PC	Unrestricted	\$	5 000
Melanoma Research Foundation					
1411 K St NW #500					
Washington, DC 20005	None	PC	Unrestricted	S	5,000

**Total 2015 Contributions** 

\$ 550,500