67

33

20

Form 990-T (2016)

1,000

enter the smaller of zero or line 32

33

34

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32,

Form	990-T (2016) JONATHAN & KATHLEEN ALTMAN FNDTN	8	5-0470898		Page 2
_Pa	rt III · Tax Computation				
35	Organizations Taxable as Corporations. See instructions for tax computation Controll	ed grou	JP qı		
	members (sections 1561 and 1563) check here See instructions and				
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in the	at order	r)		
	(1) \$ (2) \$ (3) \$			1 1	
b	Enter organization's share of (1) Additional 5% tax (not more than \$11,750)		\$]	
	(2) Additional 3% tax (not more than \$100,000)		\$] [
C	Income tax on the amount on line 34		•	35c	
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on				
	the amount on line 34 from Tax rate schedule or Schedule D (Form 1	041)	•	36	
37	Proxy tax. See instructions		•	37	
38	Alternative minimum tax			38	
39	Tax on Non-Compliant Facility Income. See instructions			39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			40	
Pa	rt IV Tax and Payments				
41a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a		\sqcap	
b	Other credits (see instructions)	41b]	
C	General business credit Attach Form 3800 (see instructions)	41c] J	
d	Credit for pnor year minimum tax (attach Form 8801 or 8827)	41d]]	
е	Total credits. Add lines 41a through 41d			41e	
42	Subtract line 41e from line 40			42	
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att. s	sch)		43	
44	Total tax. Add lines 42 and 43	•		44	0
45a	Payments A 2015 overpayment credited to 2016	45a	6,333		
ь	2016 estimated tax payments	45b		1	
С	Tax deposited with Form 8868	45c		1	
d	Foreign organizations Tax paid or withheld at source (see instructions)	45d		1 1	
е	Backup withholding (see instructions)	45e		1	
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f		1	
g	Other credits and payments Form 2439			1	
9	Form 4136 Other Total ▶	45g			
46	Total payments. Add lines 45a through 45g	LM_		46	6,333
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached		▶ □	47	
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed		▶	48	
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	l	>	49	6,333
50	Enter the amount of line 49 you want Credited to 2017 estimated tax ▶ 6,3		Refunded >	50	
	art V Statements Regarding Certain Activities and Other Inform	ation	(see instructions)		
51	At any time during the 2016 calendar year, did the organization have an interest in or a s				Yes No
-	over a financial account (bank, secunties, or other) in a foreign country? If YES, the organ	_	•		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the nar	ne of th	ie foreign country		{ {
	here ▶				X_
52	Dunng the tax year, did the organization receive a distribution from, or was it the grantor	of, or to	ansferor to, a foreign trust?	•	X
	If YES, see instructions for other forms the organization may have to file				
53	Enter the amount of tax-exempt interest received or accrued during the tax year	;			
	Under penalties of penjung declare that I have examined this return, including accompanying schedules and statemen	ts, and to	the best of my knowledge and belief	ıt ıs	
Sig	true, comandation Complete (Deblaration Complete) (afficiently an tax payer) is based on all information of which preparer	nas any	knowledge		May the IRS discuss this return
He					with the preparer shown below (see instructions)?
	Signature of official L. Peters, Sr. V. Date Title				X Yes No
		al	Date	Check	if PTIN
Paid	DEBORAH S. REISS DEBORAH S. REISS	<u> </u>	11/13/17	self-em	ployed P00610952
Pre	parer Firm's name > RPC CPAS + CONSULTANTS, LLP			EIN	85-0454285
	Only 1227 S. ST FRANCIS DRIVE, SUIT	E B			
	Firm's address > SANTA FE, NM 87505		Phon	e no	505-982-4496
					Form 990-T (2016)

Form	990-T <u>(</u> 2016) J C	ONATHAN 8	KATHI	EEN	ALTM	<u>AN</u>	FNDTN	<u>85-0</u>	<u>470898</u>			P	age 3
Sch	edule A - Cost	of Goods Sol	ld. Enter n	nethod	of inve	ntor	y valuation ▶						
1	Inventory at beginning	ng of year	1			6	Inventory at end of ye	ear			6		
2	Purchases		2			7	Cost of goods sold	Subtrac	t line 6 from	Г		<u>-</u>	
3	Cost of labor		3				line 5 Enter here and	I in Part	1, line 2	:	7		
4a	Additional sec 263A costs (attach schedule)		4a			8	Do the rules of section	n 263A	(with respect to			Yes	No
b	Other costs (attach schedule)		4b				property produced or	acquire	d for resale) apply				
5	Total. Add lines 1 th	rough 4b	5				to the organization?	•	,,]	
			n Real Pro	operty	and Pe	erso	nal Property Lea	sed V	Vith Real Proper	rtv)		
	e instructions)						, ,			•	•		
1 Desc	nption of property												
(1)	N/A												
(2)													
(3)													
(4)													
			2 Rent received	or accrue	d_							_	
	(a) From personal proper	ty (if the percentage of	rent		(b) From re	eal and	i personal property (if the		3(a) Deductions	direc	tly connected with the	ıncome	
	for personal property is	s more than 10% but n	ot	P	ercentage of	rent fo	or personal property exceeds		ın columns 2	2(a) a	and 2(b) (attach schedu	ule)	
	more th	nan 50%)			50% or if the	rent is	s based on profit or income)						
(1)													
(2)													
(3)													
(4)													
Total				Total					(b) Total deduction	S.			
(c) T	otal income. Add total	als of columns 2(a) and 2(b) [Enter					Enter here and on pa		l ,		
here :	and on page 1, Part I	, line 6, column (/	A)				>		Part I, line 6, column	(B)	<u> </u>		
Sch	edule E - Unrel	ated Debt-Fir	nanced In	come	(see ins	truct	ions)						
						_			3 Deductions directly of	conn	ected with or allocable	to	
	1 Description	of debt-financed prop	ertv				income from ar to debt-financed		debt-fina	ance	property		
	. 2000 (300)	ar dose midness prop	,	1			property	(a) :	Straight line depreciation	1	(b) Other dec	ductions	
									(attach schedule)	\perp	(attach sch	edule)	
(1)	N/A												
(2)													
(3)													
(4)										\perp			
	4 Amount of average		rage adjusted ba	sis		-	Column			-	8 Allocable d	eductions	
	acquisition debt on or allocable to debt-financed		for allocable to financed property	, i			4 divided		Gross income reportable column 2 x column 6)	ı	(column 6 x total		าร
	property (attach schedule		ttach schedule)			b	y column 5	`		_	3(a) and :	3(b))	
(1)							%						
(2)							%			\perp			
(3)							<u> %</u>	<u></u>					
(4)							%						
									here and on page 1,	ſ	Enter here and		
								Part I	line 7, column (A)		Part I, line 7, co	olumn (E	3)
Total	s						•						
Total	dividends-received	deductions inc	duded in colu	mn 8						• [

Schedule F - Interest, Annu	ities, Royalti	es, and Rent					s (see	instruction	ons)	
	ļ		Exemp	t Controlled	Orga	nizations				,
 1 Name of controlled organization 	idei	2 Employer ntification number		related income e instructions)	l e	otal of specified yments made	ındu	art of column ded in the co anization's gr	ontrolling	6 Deductions directly connected with income in column 5
(1) N/A										
(2)										
(3)	ì									
(4)										<u> </u>
Nonexempt Controlled Organizati	ons					,				
7 Taxable Income	l l	Net unrelated income oss) (see instructions)		9 Total of speci payments mad		included	of column 9 in the cont on's gross	rolling		Deductions directly needed with income in column 10
(1)										
(2)						<u> </u>				
(3)						 				
(4)			l			 				
						Enter her	umns 5 and e and on pa ne 8, column	age 1,	Ent	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
Totals Schedule G - Investment Inc	nome of a C	notion E04/c)	(7) (0)	01/4710	raani-	ation (unct- :-	tions)		
investment in	come or a S	,	(7), (9), 	or (17) O	rganiz	ation (see	- instruc	aions)		
1 Description of income		2 Amount of in	псоте	directly	ductions connected schedule		4 Set-			6 Total deductions and set-asides (col. 3 plus col. 4)
(1) N/A										
(2)										
(3)										
(4)										
		Enter here and or Part I, line 9, col								nter here and on page 1, lart I, line 9, column (B)
Totals Schedule I – Exploited Exert	nnt Activity	Income Othe	r Than	Advertisi	no Inc	oma (see	inetnic	tions)		
Schedule 1 - Exploited Exem	ipt Activity	Titome, One	i illati	Auverusi	ig iii	Oille (Sec	msuuc	10115)		1
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expension directly connected production unrelate business in	with of side	4 Net income from unrelated or business (cc 2 minus colum if a gain, com cols 5 throug	trade ilumn n 3) pute	5 Gross inc from activity is not unrel business inc	that ated		enses able to mn 5	7 Excess exempt expenses (cofumn 6 minus column 5, but not more than column 4)
(1) N/A										
(2)										
(3)					I					
(4)					1					
	Enter here and o page 1, Part I, line 10, col (A)	page 1, P	art I.							Enter here and on page 1, Part II, line 26
Totals • Advantage	<u></u>									
Schedule J - Advertising In Part I Income From P			Ca===	lidated D						
Part I Income From P	eriodicais R	eported on a	Consc							1
1 Name of penodical	2 Gross advertising income	3 Direct advertising	- 1	4 Advertising gain or (loss) 2 minus coli : a gain, compicols 5 throug	(col 3) If ute	5. Circulati income	on		dership sts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A										
(2)	ļ									_
(3)	ļ				{					_
(4)	 									
Totals (carry to Part II, line (5))			1		}					

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns

2_through 7 on a	<u>a line-by-line basi</u>	s)				
1. Name of penodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A						
(2)						
(3)					<u> </u>	
(4)				[<u></u>	<u> </u>
Totals from Part I	1		j			
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	i	L				1

Schedule K - Compensation of Officers, I	Directors, and	Trustees	(see instructions)
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1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	

Form 990-T (2016)

110230 Jonathan & Kathleen Altman Fndtn

85-0470898

Federal Statements

FYE: 12/31/2016

Statement 1 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps

Name of Partnership or S-Corp		Gross Income	Direct Deductions (Part	t only)	Net Income
PHILLIPS 66 PARTNERS LP MAGELLAN MIDSTREAM PARTNERS ORDINARY INCOME ON PTP SALE	, \$	-15,884 -388 16,933	\$	\$	-15,884 -388 16,933
TOTAL	\$	661	\$	0 \$	661

11/13/2017 9:21 AM