Form	990- T 960	E	Exte	nded to No			2010			0 0 0 0 7 OMB No 1545-0687
		1	(a lendar year 2017 or other tax ye	nd proxy tax ur ear beginning	nder se	ction 6033(, and end	(e)) ng		_	2017
Depa	treent of the Treasury			.irs.gov/Form990T for					\ \	open to Public Inspection f 01(c)(3) Organizations Only
Δ [Check box if		Name of organization (מוניו וא מ סטונטונט	D Emplo	yer identification number
, ,	address changed		Name of organization (E	Oneck Dox ii nami	e changed	and see mstruc	10113 /		(Emplo	yees' trust, see tions)
B E	xempt under section	Print	THE DERENER	FOUNDATIO	N _				13	3-3661341
X]501(C)(3/1)Z	or Type	Number, street, and roor							ted business activity code structions)
<u>_</u>]408(e) []220(e)/	турс	530 EAST 76						<u> </u>	
	408A530(a) 529(a)	 	City or town, state or pro	Y 10021	or foreigr	n postal code			9000)99
C Bo	ok value of all assets	Λ4 -	F Group exemption num		<u> </u>	₩ F04/		104/		-
H De			G Check organization type ary unrelated business act		orporation	X 501(c Stateme	 _) trust	Other trust
			poration a subsidiary in an						Yes	X No
			tifying number of the parei			diary controlled	group,			(40
			JAY LIEBERMA				Telephor	ie number 🕨 2	212-	744-2727
Pa	rt I Unrelated	d Trac	de or Business Inc	ome		(A) Incom	1e ((B) Expense	s	(C) Net
1 a	Gross receipts or sale	s						- M N N N N N N N N N N N N N N N N N N		
b	Less returns and allow	wances		c Balance	1c					
2	Cost of goods sold (S				2					
3	Gross profit Subtract				3					
4 a	Capital gain net incom				4a		 			
b			Part II, line 17) (attach Forn	n 4797)	4b					
	Capital loss deduction			tach atatamant\	4c	29	947.	***************************************		29947
5 6	Rent income (Schedu		ips and S corporations (at	iach statement)	5		747.			23341
7	Unrelated debt-finance		me (Schedule F)		7					
8			and rents from controlled (organizations (Sch. F)	8					
9	•		on 501(c)(7), (9), or (17) c	-	1					
10	Exploited exempt activ			,	10					
11	Advertising income (S	Schedule	e J)		11					
12	Other income (See ins	struction	is, attach schedule)		12					
13	Total. Combine lines			 	13		947.			29947
Pa	Title Deductio	ns No	ot Taken Elsewhe	re (See instructions	for limita	tions on dedu	ctions.)			
			utions, deductions mus		ted with t	ne unrelated,	VE CE	TOTAL S	T T	
14		icers, di	rectors, and trustees (Sch	edule K)		نه ا		2 2018	14	
15 16	Salaries and wages	2000				B003	SEP 1	2 2018	15	
16 17	Repairs and mainten Bad debts	ance			-	1 L-			17	
18	Interest (attach sche	dule)				!	OGDE	./// ,	18	
19	Taxes and licenses	uu.u,							19	
20		ons (Se	e instructions for limitation	rules)					20	
21	Depreciation (attach					2	1			
22			n Schedule A and elsewhe.	e on return		22			22b	
23	Depletion								23	
ᡂ 24	Contributions to defe	erred co	mpensation plans						24	
24 25 25	Employee benefit pro	ograms							25	
₩ 26	Excess exempt expe					•			26	
€ 0 27	Excess readership co								27	
الا 28 29	Other deductions (at							•	28	0
^^	Total deductions. Ad			n loce deduction. Cubt.	ract line 00	from line 10			29	29947
☐ ³⁰ Ⅲ 31			ncome before net operatin In (limited to the amount on		iaci iiiie 29		State	ment 16	30	7935
岁 32	·		ncome before specific ded		from line				32	22012
Z 33			y \$1,000, but see line 33 ir						33	1000
SCANNED 31 32 33 34			income. Subtract line 33			than line 32, ent	er the sma	ller of zero or		
ທີ່	line 32								34	21012
		. Dance	work Reduction Act Notic	- and instructions						Form QQO_T /201

Form 990-1	THE DERFNER FOUNDATION 13-366	1341	Page 2
Part I			
35	Organizations Taxable as Corporations. See instructions for tax computation		
	Controlled group members (sections 1561 and 1563) check here ▶		
,a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)		
	(1) \$ (2) \$ (3) \$		
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		_
	X Tax rate schedule or Schedule D (Form 1041)	36	6603.
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	6603.
Part I	Tax and Payments		
41 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a	1	
b	Other credits (see instructions)	1	
C	General business credit Attach Form 3800	1 1	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1	
6	Total credits Add lines 41a through 41d	418	
42	Subtract line 41e from line 40	42	6603.
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	43	
44	Total tax. Add lines 42 and 43	44	6603.
	Payments A 2016 overpayment credited to 2017 45a 15688.		
	2017 estimated tax payments	1 1	
	Tax deposited with Form 8868 25000 .		
	Foreign organizations: Tax paid or withheld at source (see instructions) 45d		
	Backup withholding (see instructions) 45e]	
	Credit for small employer health insurance premiums (Attach Form 8941)	-	
g	Other credits and payments Form 2439		
40	Form 4136 Other Total ▶ 45g	∤	10600
46	Total payments Add lines 45a through 45g	46	40688.
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	34085.
49 50	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid Enter the amount of line 49 you want Credited to 2018 estimated tax Samount of line 49 you want Refunded Samount of line 49 you want Samount of l	50	0.
	Enter the amount of line 49 you want. Credited to 2018 estimated tax 34 085. Refunded Statements Regarding Certain Activities and Other Information (see instructions)	1 30_1	
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority		Yes No
•	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file		103 110
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the foreign country		
	here		x
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor 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 penury, declare that I have examined this return, including accompanying schedules and statements, and to the best of my known correct, and complete Declaration of preparer (other than taxpayer) is based on fall information of which preparer has any knowledge	wledge and belief, it i	is true,
Sign			
Here		ay the IRS discuss the preparer shown bel	
	Signature of office Date Title	structions)? X Y	es No
	Print/Type preparer's name Preparer's signature Date Check r	f PTIN	
Paid	LAWRENCE M. self-employed		
Prepa	CINCREDG Y SAA M / Daho / 20/10	P00369	9138
Use C	Inly Firm's name ► LAWRENCE M. GINSBERG, CPA, VPC Firm's EIN	32-004	10827
	201 WEST PASSAIC STREET, SUITE 206		
	Firm's address ► ROCHELLE PARK, NJ 07662 Phone no 2	01 - 845 - 3	3087
		Form 9	90-T (2017)

723711 01-22-18

Schedule A - Cost of Goods	Sold. Enter	method of inver	ntorv v	aluation ► N/A					
1 Inventory at beginning of year	1		т -	Inventory at end of year	r		6		
2 Purchases	2		_	Cost of goods sold. Su		ine 6			
3 Cost of labor	3			from line 5 Enter here and in Part I,					
4 a Additional section 263A costs				line 2					
(attach schedule)	4a		8	Do the rules of section	ction 263A (with respect to			Yes	No
b Other costs (attach schedule)	4b			property produced or a	cquirec	i for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income ((see instructions)	From Real	Property an	d Pe	rsonal Property I	Leas	ed With Real Pro	per	ty)	
Description of property									-
(1)									
(2)									
(3)	<u> </u>								
(4)									
	2. Rent receiv	ed or accrued				24.5-			
(a) From personal property (if the percorent for personal property is more 10% but not more than 50%)	than	of rent for	personal	conal property (if the percental property exceeds 50% or if ed on profit or income)	nge	3(a) Deductions directl columns 2(a) a	y conno ind 2(b)	ected with the income in (attach schedule)	
(1)				·					
(2)									
(3)			-			_			
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns 2	(a) and 2(b) En	ter				(b) Total deductions. Enter here and on page 1,			
here and on page 1, Part I, line 6, column		<u> </u>		<u> </u>	<u> </u>	Part I, line 6, column (B)	<u> </u>		0.
Schedule E - Unrelated Deb	t-Financed	l Income (see	ınstru	ctions)					
			1 2	Gross income from		Deductions directly co to debt-finan			
1 Description of debt-fine	anced property		_	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	Ì	(b) Other deductions (attach schedule)	
							_		
(1)			-				\dashv	 -	
(2)									
(3)			 				-		
(4)			-				+		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property h schedule)	6	. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deduction (column 6 x total of column 3(a) and 3(b))	
(1)	·		+	%		-	_	· · · · · · · · · · · · · · · · · · ·	
(2)				%					
(3)				%					
(4)				%					
			-			Enter here and on page 1, Part I, line 7, column (A)		Enter here and on page Part I, line 7, column (E	
Totais				.		0			0.
Total dividends-resolved deductions use	dudad ia aalumi			- 1	<u> </u>	<u>`</u>			7

Form 990-T (2017)

			Exempt (Controlled O	rganizatio	ons				
Name of controlled organization	Name of controlled organization 2. Employer identification number		3. Net uni (loss) (see	3. Net unrelated income (loss) (see instructions) payi		al of specified nents made	include	of column 4 t d in the contr tion's gross ii	ntrolling connected with income	
(1)			 				-			
2)			 							-
3)			<u> </u>	_						
4)			 				 			
onexempt Controlled Organ	nizations					·				
7. Taxable Income	8. Net unrelated ind (see instructi		9 , Total	of specified payr made	nents	10. Part of column the controlling gross				ductions directly connecte income in column 10
1)	<u> </u>									
2)			T		1	<u>-</u> .		,		
3)										
4)			1		7					
						Add colur Enter here and line 8, o		1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
otals					▶			0.		0
chedule G - Investme	ent Income of a tructions)	a Sectio	n 501(c)(7), (9), or	(17) Or	ganizatior	1			
	cription of income			2. Amount of	ıncome	3. Deduction directly connectation (attach scheduler)	ected	4. Set-a	esides chedule)	5. Total deductions and set-asides (col 3 plus col 4)
1)				 		(uttach sone	10.0,	_		(cor o plus cor 4)
.,										
3)			<u>-</u>	-	+	-				
4)				 	-			- .	-	
				Enter here and o Part I, line 9, co	on page 1, lumn (A)	······································	L	······································		Enter here and on page Part I, line 9, column (B
otals					0.					0
Schedule I - Exploited		ty Incor	ne, Othe	r Than Ad		ng Income			······································	···l
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly with p	expenses y connected production inrelated ess income	4. Net incomfrom unrelated business (cominus colum gain, compute through	I trade or olumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrela business inco	that ted	6. Exp attributa colum	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)			- -	 -				-		
2)	- -	 		<u> </u>			_			
3)	<u> </u>			 					_	
4)				 	-				_	+
	Enter here and on page 1, Part I, line 10, col (A)	page line 1	nere and on a 1, Part I, 0, col (B)		<u></u> (, 1	 .	· iva· ·	Enter here and on page 1, Part II, line 26
otals <u>•</u> Schedule J - Advertis			0.	<u> </u>			_			0
Part I Income From				solidated	Basis					
1. Name of penodical	2. Gross advertisin income	a 1	3. Direct Ivertising costs	or (loss) (ca		5. Circula e income		6. Reads		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
1)									_	
3)										
(4)	1	1		[1	I		1	

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

columns 2 through 7 on a line-by-line basis.) 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 7. Excess readership costs (column 6 minus 2. Gross advertising income 3. Direct 6. Readership 5. Circulation 1. Name of penodical column 5, but not more than column 4) advertising costs ıncome costs (1) (2) (3) (4) 0. ▶ 0. 0. Totals from Part I 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 0 0. 0. Totals, Part II (lines 1-5)

S	ched	ule	K -	Compe	nsation	of Off	ficers, i	Directors,	and	Trustees	(see instructions))

1 Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2017)

SCHEDULE I (Form 1041)

Alternative Minimum Tax - Estates and Trusts

Attach to Form 1041.

OMB No 1545-0092

2017

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust

Go to www.irs.gov/Form1041 for instructions and the latest information.

THE DERFNER FOUNDATION 13-3661341 Part I Estate's or Trust's Share of Alternative Minimum Taxable Income 22012. 1 Adjusted total income or (loss) (from Form 1041, line 17) 2 Interest 2 3 Taxes 3 4 Miscellaneous itemized deductions (from Form 1041, line 15c) 5 Refund of taxes 5 Depletion (difference-between regular tax and AMT) 7935. See Statement 19 Net operating loss deduction. Enter as a positive amount 7 7 8 Interest from specified private activity bonds exempt from the regular tax 8 9 Qualified small business stock (see instructions) 9 10 Exercise of incentive stock options (excess of AMT income over regular tax income) 10 11 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 11 12 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 12 13 Disposition of property (difference between AMT and regular tax gain or loss) 13 14 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 14 15 Passive activities (difference between AMT and regular tax income or loss) 15 16 Loss limitations (difference between AMT and regular tax income or loss) 16 17 Circulation costs (difference between regular tax and AMT) 17 18 Long-term contracts (difference between AMT and regular tax income) 18 19 Mining costs (difference between regular tax and AMT) 19 20 Research and experimental costs (difference between regular tax and AMT) 20 21 Income from certain installment sales before January 1, 1987 21 22 Intangible drilling costs preference 22 23 23 Other adjustments, including income-based related adjustments 24 Alternative tax net operating loss deduction (See the instructions for the limitation that applies) 24 29947 25 Adjusted alternative minimum taxable income. Combine lines 1 through 24 25 Note: Complete Part II below before going to line 26. N/A26 Income distribution deduction from Part II, line 44 26 N/A 27 Estate tax deduction (from Form 1041, line 19) 27 28 Add lines 26 and 27 28 29947. 29 Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25 29 If line 29 is \$24,100 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c The estate or trust isn't liable for the

- alternative minimum tax
- Over \$24,100, but less than \$176,850, go to line 45

\$176.850 or more, enter the amount from line 29 on line 51 and go to line 52

P	art II Income Distribution Deduction on a Minimum Tax Basis N/A		
30	Adjusted alternative minimum taxable income (see instructions)	30	
31	Adjusted tax-exempt interest (other than amounts included on line 8)	31	
32	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	32	
33	Capital gains for the tax year allocated to corpus and paid or permanently set aside for		
	charitable purposes (from Form 1041, Schedule A, line 4)	33	
34	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	34	
35	Capital gains computed on a minimum tax basis included on line 25	35 (
36	Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount	36	
37	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 30 through 36. If zero or less, enter -0-	37	
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38	_
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	39	
40	Total distributions Add lines 38 and 39	40	
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41	
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40	42	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) (2017)

Scho	edule I (Form 1041) (2017) THE DERFNER FOUNDATION			13-	-3661341	Page 2
Pa	art II Income Distribution Deduction on a Minimum Tax Ba	asis (conti	nued)	N/ <i>P</i>	4	
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from	line 37				
	If zero or less, enter -0-			43		
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 o	r line 43				
	Enter here and on line 26			44		
PE	art III Alternative Minimum Tax					
45	Exemption amount			45	\$24,100.0	0
46	Enter the amount from line 29	46	29947	<u>.</u>		
47	Phase-out of exemption amount	47	\$80,450.00_	_		
48	Subtract line 47 from line 46 If zero or less, enter -0-	_48	0	.		
49	Multiply line 48 by 25% (0 25)			49		0.
50	Subtract line 49 from line 45 If zero or less, enter -0-	_		50		1100.
51	Subtract line 50 from line 46			51	<u>.</u>	<u> 847.</u>
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends	or has a gair	on lines 18a and 19			
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary) Oth	erwise, if line	9 51 is -			
	● \$187,800 or less, multiply line 51 by 26% (0 26)					
	• Over \$187,800, multiply line 51 by 28% (0 28) and subtract \$3,756 from the result			52		<u> 1520.</u>
53	Alternative minimum foreign tax credit (see instructions)			53		
54	Tentative minimum tax Subtract line 53 from line 52		•	54		L520.
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from S	chedule G, lı	ne 2a)	55		5603.
56	Alternative minimum tax Subtract line 55 from line 54 If zero or less, enter -0- Enter	r here and or	1			
_	Form 1041, Schedule G, line 1c	_		56		<u>0.</u>
Pa	art IV Line 52 Computation Using Maximum Capital Gains	Rates				
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedu		•			
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, s	ee the Instr	uctions			
	before completing this part.					
57	Enter the amount from line 51	1	1	57		
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax					
	Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for					
	Form 1041, whichever applies (as refigured for the AMT, if necessary)	58		_		
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2)					
	(as refigured for the AMT, if necessary) If you didn't complete					
	Schedule D for the regular tax or the AMT, enter -0-	59	_ _	_		
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the		•			
	AMT, enter the amount from line 58 Otherwise, add lines 58 and 59 and enter					
	the smaller of that result or the amount from line 10 of the Schedule D Tax					
	Worksheet (as refigured for the AMT, if necessary)	60	L <u> </u>	_		
61	Enter the smaller of line 57 or line 60			61		
62	Subtract line 61 from line 57			62		
63	If line 62 is \$187,800 or less, multiply line 62 by 26% (0 26) Otherwise, multiply line 62	2 by	_			
_	28% (0 28) and subtract \$3,756 from the result	1	• • • • • • • • • • • • • • • • • • •	63		
64		64	\$2,550.00	4 1		
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D					
	Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions					
	for Form 1041, whichever applies (as figured for the regular tax). If you didn't					
	complete Schedule D or either worksheet for the regular tax, enter the amount					
	from Form 1041, line 22, if zero or less, enter -0-	65		4		
66	Subtract line 65 from line 64 If zero or less, enter -0-	_66		-		
67		67		-		
68	Enter the smaller of line 66 or line 67 This amount is taxed at 0%	68		-		
69	Subtract line 68 from line 67	69				
7198	62 12-20-17			Sch	edule I (Form 104	11) (2017)

If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Otherwise, go to line 78.

78 Subtract line 77 from line 67

79 Multiply line 78 by 20% (0 20)
If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise, go to line 80.
80 Add lines 62, 77, and 78
80

81 Subtract line 80 from line 57

82 Multiply line 81 by 25% (0 25)83 Add lines 63, 76, 79, and 82

84 If line 57 is \$187,800 or less, multiply line 57 by 26% (0 26) Otherwise, multiply line 57 by 28% (0 28) and subtract \$3,756 from the result

85 Enter the smaller of line 83 or line 84 here and on line 52

Schedule I (Form 1041) (2017)

79

85

Form 990-T Description of Organization's Primary Unrelated Statement 15 Business Activity

INCOME RECEIVED THROUGH A DONATED S-CORPORATION INTEREST AND INVESTMENTS IN PUBLICLY TRADED PARTNERSHIPS.

To Form 990-T, Page 1

Form 990-T Net Ope	rating Loss D	eduction	Statement 16
P Tax Year Loss Sustained	Loss reviously Applied	Loss Remaining	Available This Year
12/31/16 7935.	0.	7935.	7935.
NOL Carryover Available This Yea	r	7935.	7935.
Form 990-T Income (Loss) from Pa	rtnerships	Statement 17
Partnership Name	Gross I	ncome Deductions	Net Income or (Loss)
BUCKEYE PARTNERS LP DOMINION MIDSTREAM PARTNERS LP ALLIANCE HOLDINGS GP, LP ALLIANCE RESOURCE PARTNERS LP AMERIGAS PARTNERS LP COLUMBIA PIPELINE PARTNERS LP EQT MIDSTREAM PARTNERS LP ENBRIDGE ENERGY PARTNERS LP ENTERPRISE PRODUCT PARTNERS LP HOLLY ENERGY PARTNERS LP MAGELLAN MIDSTREAM PARTNERS LP ONEOK PARTNERS LP PLAINS ALL AMERICAN PIPELINE LP SPECTRA ENERGY PARTNERS LP TC PIPELINES LP WILLIAMS PARTNERS LP HEDGE VENTURES LP EAGLE'S VIEW OPPORTUNITIES FUND FULL VALUE PARTNERS LP TALLGRASS ENERGY PARTNERS LP WESTLAKE CHEMICAL PARTNERS LP PHILLIPS 66 PARTNERS LP SHELL MIDSTREAM PARTNERS LP	1 5 LP 6	2607. 2929. 333. 453. 1173. 1371. 7505. 7529. 1955. 2607. 197. 135. 2019. 2423. 4894. 6392. 7935. 20577. 3545. 5182. 2103. 2656. 9470. 10611. 1576. 53446. 3859. 4916. 2899. 4124. 1128. 1845. 9984. 0. 4390. 43565. 11. 0. 1876. 2351. 705. 792. 1433. 1733. 130. 304.	-32212019824652. 624041498264216375531141187010571225717. 19984. 20825. 1147587300174.
Total to Form 990-T, Page 1, line	e 5 20	130. 304. 1727. 175941.	25786.

Form 990-T II	ncome (Loss) fro	m S Corporat	ions	Statement 18
S Corporation Name	Gross Income	Losses	Deductions	Net Income or (Loss)
406 REALTIES INC	4643.	-482.	0.	4161.
To Form 990-T, line 5	4643.	-482.	0.	4161.
Schedule I	Net Operating Lo	ss Carryover	:	Statement 19
Tax Year Loss Sustain	Loss Previous ned Applie	_		Amount
12/31/16 793	35.	0.		7935.
Total to Schedule I, Lin	ne 7			7935.