, Form 990-T	. (C& E 9610)	EXTE Exempt Orga	NDED TO NOV						OMB No 1545-0887
\$	4	(aı	(and proxy tax under section 6033(e)) Indian year 2017 or other tax year beginning, and ending						
Department of the Tr	easury	· ·	irs gov/Form990T for in					,	Open to Public Inspection for 01(c)(3) Organizations Only
A Check bo		► Do not enter SSN numbe Name of organization (Check box if name c				ation is a 50 i(c)(D Emplo	yer identification number
address		JOHN C & CA		_		· ·			yees' trust, see ctions)
B Exempt under	section Print	PRIVATE FOU							6-4153563
X 501(c)(3	# /. / Tvna	Number, street, and room		x, see in	struction	S.			ted business activity codes structions)
408(e)	7550(6)	9 WOODLEY R						_	
408A L	_J530(a)	City or town, state or pro	• • •	r foreigi	n postal c	ode		9000	000
529(a) Book value of all a	ussets	WINNETKA, I F Group exemption num	-	<u> </u>				1900	300
C Book value of all a at end of year	27,394.			poration	X	501(c) trust	401	(a) trust	Other trust
		nary unrelated business acti	· · · · · · · · · · · · · · · · · · ·						NERSHIPS
I During the tax	ear, was the cor	poration a subsidiary in an	affiliated group or a pare	nt-subsi	diary con	trolled group?	>	Ye	s X No
If "Yes," enter tl		itifying number of the parer	· · · · · · · · · · · · · · · · · · ·						
J The books are		WARADY AND D					one number		
		de or Business Inc	ome	,	(A)	Income	(B) Expens	ses	(C) Net
1a Gross receip	ots or sales s and allowances	-	c Balance	,,					
	s and allowances ds sold (Schedul	e Δ. line 7)	C Dalatice	1c 2					
-	. Subtract line 2 t	•		3					
•	net income (atta			4a	•				
		Part II, line 17) (attach Forn	n 4797)	4b					
= -	deduction for tru		•	4c					
5 Income (los	s) from partnersi	hips and S corporations (at	tach statement)	5		616.			616.
6 Rent income	(Schedule C)			6					
		me (Schedule E)		7				_	
		and rents from controlled o		8					
A		on 501(c)(7), (9), or (17) o	rganization (Schedule G)						· · · · · · · · · · · · · · · · · · ·
•		ome (Schedule I)		10					
_	income (Schedul			11					
	e (See instructio bine lines 3 throi	ns; attach schedule)		12		616.			616.
Part II De	ductions N	ot Taken Elsewhe	re (See instructions fo	or limita	ations or	deductions.)			010
(Exc	cept for contrib	utions, deductions mus	t be directly connecte	d with	the unre	lated busines	s income.)		
14 Compensa	tion of officers, d	irectors, and trustees (Sch	edule K)					14	
15 Salaries an	d wages				F	RECEIV	ED	15	
16 Repairs an	d maintenance						IOI	16	
Bad debts 18 Interest (at			/		C115	NOV 1 3 2	2018 80-52	17	
	tach schedule)				0	,,,,,,	88	18_	
19 Taxes and		an and a section of the lambet of	- ruloo\			GDEN,		19	
		e instructions for limitation	rules)	1			01	20	
-	n (attach Form 4	on Schedule A and elsewhe	re on return			21 22a		22b	
23 Depletion	Ciation Ciaimed C	of Schedule A and ciscwice	C on return			[224]		23	
	ns to deferred co	ompensation plans						24	
	enefit programs							25	
	mpt expenses (S							26	
	dership costs (Si	chedule J)						27	
	ctions (attach so							28_	
	ctions Add lines							29	616
		income before net operatin		ct line 2	9 from lin	ie 13		30	616
		n (limited to the amount on		المسمد	. 00			31	616
		income before specific ded			30			32	1,000
33 Specific de	auction (General	ly \$1,000, but see line 33 in e income Subtract line 33	from line 32. If line 32 is	o) nreater	than line	32 enter the st	maller of zero or	33	1,000
34 Unrelated line 32	vusiness taxabli	e moome Subhactime 33	1 OH MIC OZ. 11 MIC OO 15	y calci	mun mic	oe, onto the si		34	0

JOHN C & CAROLYN NOONAN PARMER

Form 880-	T(2017) PRIVATE_FOUNDATION 36-	4153	563		F	Page 2
Part	III Tax Computation					
35	Organizations Taxable as Corporations. See instructions for tax computation.					
•	Controlled group 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 that order):	1	- }			
	(1) \$ (2) \$ (3) \$		i			
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	1				
	(2) Additional 3% tax (not more than \$100,000)	1				
c		▶ :	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			0.
37	Proxy tax. See instructions		37			
38	Alternative minimum tax	· }-	38			
39	Tax on Non-Compliant Facility Income. See instructions	1	39			
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40			0.
Part			10 [
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a					
b	Other credits (see instructions) 41b		- 1			
C	General business credit. Attach Form 3800 41c					
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	\dashv				
e	Total credits. Add lines 41a through 41d		41e			
42	Subtract line 41e from line 40	· · · ·	42			0.
	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach sche	-	43			<u> </u>
43	Total tax. Add lines 42 and 43		44			0.
44		-	-			
	Payments: A 2016 overpayment credited to 2017 2017 estimated to apyments					
0	2017 estimated tax payments 45b					
6	Tax deposited with Form 8868 45c 45c	-	-			
d	· · · · · · · · · · · · · · · · · · ·	\dashv				
e	Backup withholding (see instructions) 45e		-			
1	Credit for small employer health insurance premiums (Attach Form 8941) 45f 6th accordance and accordance premiums (Attach Form 8941)		- 1			
g	Other credits and payments: Form 2439	- 1	- 1			
	Form 4136 Other Total ▶ 45g					
46	Total payments. Add lines 45a through 45g	·	46			
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			<u>0.</u>
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	▶	49			0.
50	Enter the amount of line 49 you want: Credited to 2018 estimated tax	<u> </u>	50			
	Statements Regarding Certain Activities and Other Information (see instructions)				. т	
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					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country					
	here >			-		<u>X</u>
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trus	t? .		<u> </u> _		<u>X</u>
	If YES, see instructions for other forms the organization may have to file.					l
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$					
Sian	Under penalties of peruly, I declare that I have examined this return, including accompanying schedules and statements, and to the best of correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	my Knowle	edge and	belief, it is tr	ue,	
Sign	11/2/18 Trustee	May	the IRS	discuss this r	eturn v	with
Here		1	-	shown below	`	٦ ا
	Signature of officer Date / Title	ınstr	uctions)?	X Yes		No
	Print/Type preparer's name Preparer's signature Date/ Check L	ıf	PTIN			
Paid	self- emp	loyed				
Prepa	rer PATRICK J BITTERMAN / 6/2011			<u> 12858</u>		
Use C	Firm's name QUARLES & BRADY, LLP	IN 📐	39	<u>-0432</u>	63	0
	300 N LASALLE STREET, SUITE 4000		_			
	Firm's address ► CHICAGO, IL 60654 Phone	10. 31		<u> 15-50</u>	_	
				Form 991)_T /	(2017)

723711 01-22-18

Form 990-T (2017) PRIVATE FOUNDATION

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory v	aluation N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year 6						
2 Purchases	2		3	Cost of goods sold. Su		ine 6			
3 Cost of labor	3]	from line 5. Enter here			1		
4a Additional section 263A costs			1	line 2			7_		
(attach schedule)	4a		8	Do the rules of section	263A (v	with respect to		Yes	No
b Other costs (attach schedule)	4b]	property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?	_	·			<u></u>
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pei	sonal Property	Lease	ed With Real Pro	per	ty) 	
1. Description of property									
(1)									
(2)						-			
(3)									
(4)									
	2. Rent receiv	ed or accrued							
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for p	ersonal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ige	3(a) Deductions directl columns 2(a) a	y conn ind 2(b)	ected with the income (attach schedule)	ın
(1)	·							 	
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter 🕨			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Del	ot-Financed	Income (see	ınstru	ctions)					
			2	Gross income from		3. Deductions directly co to debt-finan			
1. Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
(1)			†	· · · · · · · · · · · · · · · · ·				•	
(2)				-	-				
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average ac of or allo debt-finance		adjusted basis illocable to nced property ischedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)				%			1		
(2)				%					
(3)				%					
(4)			1	%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on page Part I, line 7, column	
Totals				•		O	۱.		0.
Total dividends-received deductions in	cluded in column				·	<u> </u>	<u> </u>		0.
		-							_ ``

Form 990-T (2017)

Form 990-T (2017)

Form 990-7 (2017) PRIVATE FOUNDATION

36-4153563

Page 5

Part II	Income From Periodicals Reported on	a Separate Basis	(For each penodical listed i	n Part II	, fill ın
	columns 2 through 7 on a line-by-line basis.)				

1. Name of period	lical	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)							
(2)							
(3)							
(4)							
Totals from Part I		0.	0.				0
		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)	>	0.	0.	1			0

Schedule K - Compensation of Officers, 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)

FORM 990-		SS) FROM PARTNERS S CORPORATIONS	HIPS	STATEMENT	1
DESCRIPTIO	ON			TRUOMA	
	 ARTNERS LP #23-2432			1,30	5.
ENERGY TRA	1,26				
	SISTICS PARTNERS LP			-19	
	DSTREAM PARTNERS L			-3	
	MIDSTREAM PARTNERS ESOURCE PARTNERS LP		NAL 2017)		1.
SUBURBAN I	-1,32				
SUNOCO LOG	1,11	2.			
PLAINS ALI	-1,50				
TOTAL TO E	FORM 990-T, PAGE 1,	LINE 5		61	6.
FORM 990-1	. NET	OPERATING LOSS D	EDUCTION	STATEMENT	2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/06	39,068.	32,908.	6,160.	6,160	_
12/31/07	74,770.	0.	74,770.	74,770	
12/31/08	79,204.	0.	79,204.	79,204	
12/31/09	73,926.	0.	73,926.	73,926	
12/31/10	27,422.	0.	27,422.	27,422	
12/31/11	7,760.	0.	7,760.	7,760	
12/31/12 144,124.		0.	144,124.	144,124	
12/31/15 12/31/16	1,179. 4,877.	0. 0.	1,179. 4,877.	1,179 4,877	
NOL CARRYO	VER AVAILABLE THIS	YEAR	419,422.	419,422	