Form **990-PF**

EXTENDED TO NOVEMBER 15, 2018 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

SCHWED AUG 17 2018

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

A Employer destification number 36 - 72 9 3 18 7	For c	alen	dar year 2017 or tax year beginning		, and ending		
Total plane market and the control of the control o						A Employer identification	number
The continue of the continue	_TI	ΙE	MCNAMARA PURCELL FOUND	ATION		36-7293187	
Cry or fours, state or province, country, and ZIP or foreign postal code WINPIELD, II, 60190 G Check all but sapply: Interest that s	_		•	ddress)	Room/suite		60
Contributions and direction controlled and services and							
G Check all flat apply:				ostal code		If exemption application is pe	ending, check here
Address change Name change Name change Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexample character to the section 4947(a)(1) nonexample character to the section 4947(a)(1) nonexample character to the section 501(c)(a) exempt private foundation Section 4947(a)(1) nonexample character to the section 501(c)(a) exempt private foundation Section 4947(a)(1) nonexample character to the section 501(c)(a) exempt private foundation Section 4947(a)(1) nonexample character to the section 501(c)(a) exempt private foundation Section 4947(a)(b), check here Se				D 1. Foreign organizations	, check here		
## Check type of organization: *** Section 501(c)(3) exempt private foundation			Final return	Amended return		2 Faveler executations may	eting the 95% test
Section 4947(9)(1) nonexempt charitable trist Other taxable private foundation						check here and attach cor	inputation Discrete
Far market value of all assets at end of year	H_C		· · · · · · · · · · · · · · · · · · ·		- 1		. []
(from Part II, cot.) (c), line 16) ▶ S 19,387,305. (Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (e) Part I, column (d) must be on cash basis.) Part II Contributions, or III Part II Part I	L Fai					1	•
Part Inalysis of Revenue and Expenses (the local of Expenses (the local of Amounts in columne (b), it an right may not receive the color of Expenses (the local of Amounts in columne (b), it an right may not receive the color of Expenses (the local of Amounts in columne (b), it an right may not receive the color of Expenses (the local of Amounts in columns (b) (the local of Expenses (the local of Amounts in columns (b)) (the local of Expenses (the local of Amounts in columns (b)) (the local of Expenses (the local of Exp			· I —		Addidai		
The total of amounts an columns (b), (c), and (of man not not not not not not not not not no					s.)		(),
1 Contributions, gifts, grants and wides 10 kg, 279	Pa	t I	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and			(d) Disbursements for charitable purposes
Check			necessarily equal the amounts in column (a))				(cash basis only)
teterest on savings and temporary Dividends and interest from securities A Dividends and interest from securities Sa Gross creats D Net rental income or (loss) Sa Hat gain or (loss) from sale of seasors not on fine 10 D Gross asker price for all 2, 211, 041. 7 Capital gain reli income (from Part IV, Inne 2) 8 Net short-term capital gain 9 Income modifications 10 Income modifications 10 Income modifications 10 Income modifications 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of offices, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes STMT 3 13,100. 8,100. 0. 15. 15. 17 Total operation and depletion Occupancy 21 Total operation and depletion Occupancy 22 Printing and publications 23 20 Other professional fees 17 Interest 23 13,100. 36,705. 37 Subtract line 26 from line 12, desired. 385,282. 385,282. STATEMENT: 1 387,702. 381,702.							****
385,282 385,282 STATEMENT 1 1 1 1 1 1 1 1 1	1		Interest on savings and temporary	24	200 MARIE		
D Net rental norme or (loss) 914,702.		4	"Y	385,282.	385,282.		
Section Companies Compan	Ì	5a	Gross rents &		20000	38.	
D Gross aleas profe for all 2, 211, 041. To aprital gain net income (from Part IV, Ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 8 Net short-term capital gain of income (from Part IV) (ine 2) 9 14, 702. 9 14,		b	Net rental income or (loss)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·		
New Stuff certification Security Secur	a	6a	Gross sales price for all 0 11 0 11		3.7 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m	A STATE OF THE STA	
New Stuff certification Security Secur	Ken	7	dopote on this ve		914.702.		SCEIVED OF
Income modifications Income Incom	æ		· · ·				0 0 000
b Less Cost of goods sold c Gross profit or (loss) 11 Other income 2		9	Income modifications		7. A		LAN A TOIO O
to test Cost or goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 3 13,100. 8,100. 0. 0. 0. 0. 14,450. 0. 0. 0. 0. 0. 0. 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees T Interest 18 Taxes STMT 3 13,100. 8,100. 0. 0. 15 Pension plans, employee benefits 18 Taxes T Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 15. 0. 15. 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 827,025. 12,550. 800,075.		10a					COEN HE
11 Other income							* 4.83
12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 16 Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. 28 Excess of revenue over expenses and disbursements b Net investment income (if respanse, enter -0-) 11,408,263. 1,297,221. 0. 0. 0. 0. 0. 0. 4,450. 0. 0. 4,450. 0. 0. 0. 13,100. 8,100. 0. 0. 14,450. 0. 0. 15. 0. 12,550. 4,465. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	l		. , ,				
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 16a Legal fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 15 Pension plans, employee benefits 0				1,408,263.			
15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 3 13,100. 8,100. 0. Depreciation and depletion Coccupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 827,025. 12,550. 800,075.		13		0.	0.		0.
16a Legal fees		14	Other employee salaries and wages				
C Other professional fees 17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements b Net investment income (if negative, enter -0-) 29 Total expenses and disbursements b Net investment income (if negative, enter -0-) 20 Cotter professional fees 13,100. 8,100. 0. 15. 0. 15. 12,550. 4,465. 800,075.							ļ
C Other professional fees 17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements b Net investment income (if negative, enter -0-) 29 Total expenses and disbursements b Net investment income (if negative, enter -0-)	186			8 900	4 450		4 450
Printing and publications 23 Other expenses STMT 4 15 15 15			•	- 0,500.	4,430.	 	=,=50.
Printing and publications 23 Other expenses STMT 4 15 15 15	ie E		•				
Printing and publications 23 Other expenses STMT 4 15 15 15	rativ			13,100.	8,100.		0.
Printing and publications 23 Other expenses STMT 4 15 15 15	ist		·	<u> </u>			
Printing and publications 23 Other expenses STMT 4 15 15 15	ijĦ						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)							
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	a an			15.	0.	 	15.
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	atips A		- · · · · ·				
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	peri		-		12,550.		4,465.
Add lines 24 and 25 827,025. 12,550. 800,075. 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1,284,671.	q			805,010.		ļ	795,610.
27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (If negative, enter -0-) 1,284,671.		26	•	927 025	10 550		900 075
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1,284,671.	\dashv	27		021,025.	12,550.		800,075.
b Net investment income (If negative, enter -0-)	ĺ			581.238.			
3-7-	ļ		·		1,284,671.		
5 900-PE (2017)	\perp					N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

12,221,269. Form **990-PF** (2017)

Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

$\overline{}$	1990-Pr (2017) THE MCNAMARA PURCELL FOUNDATION			729318		Page 4	
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940		48 -	see instr	uction	S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" or		í	·		and the same	
	Date of ruling or determination letter: (attach copy of letter if necessary-see				<u> </u>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and		25,6	<u>93.</u>			
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, lin		ستسكشت			0.	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -	U-)	2		25,6		
_	Add lines 1 and 2	<u></u>	3		<u>43,0</u>	0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter-	-U-) -	4		25,6		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	ļ	5 38 2 #		<u>∡3,0</u>	93.	
6	Credits/Payments: 2017 estimated tax payments and 2016 overpayment credited to 2017 6a	21,241.			4.7		
	Exempt foreign organizations - tax withheld at source 6b	0.					
	Tax paid with application for extension of time to file (Form 8868) 6c	32,000.			, ,		
	Backup withholding erroneously withheld 6d	0.				3	
	Total credits and payments. Add lines 6a through 6d	<u>`</u> -			53,2	41.	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	 	8		<u> </u>	0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u>▶</u> †	9				
10	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		27,5	48.	
		548. Refunded	11			0.	
	rt VII-A Statements Regarding Activities	_ · - · Notaliava					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	l it participate or intervene i	n	133	Yes	No	
	any political campaign?	, ,		18		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e instructions for the definit	ion .	11		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater		••	177			
	distributed by the foundation in connection with the activities.	•		1			
C	Did the foundation file Form 1120-POL for this year?			10)	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	osed on foundation		li v] ,	
	managers. > \$0.			ĽŽ.		نلق	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	1 202	X	
	if "Yes," attach a detailed description of the activities.				3 3 3 3 3		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	articles of incorporation, or			- ta	السمايد	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			/3 48		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?		Ŋ	/A 4		177	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5	N 3 5 5	X	
_	If "Yes," attach the statement required by General Instruction T.				* * * * * * * * * * * * * * * * * * * *	13 3	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					43. 4	
	By language in the governing instrument, or Divities language in that offers with a monde the severning instrument as that no monde to it divities to the control of the severning instrument.	that another water the same of	la	*	ľ		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions	mat conflict with the state	aw		Х		
7	remain in the governing instrument?	ant (a) and Doot (A)		. 6			
1	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II,	COI. (C), AND PART XV		_7	+^-		
ء ۾	Enter the states to which the foundation reports or with which it is registered. See instructions.						
oa	IL						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	eral (or designate)					
,	of each state as required by <i>General Instruction G?</i> If "No," attach explanation	oral (or accignate)		81	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j	i)(3) or 4942(i)(5) for calen	dar .	<u>"</u>			
-	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XI			9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their is			10	_	X	
					90-PF		
						•	

Page 5

Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	30 3	<u> 4 E 1</u>	
14	The books are in care of ► ELLIE CURRIE Telephone no. ► 312-6		451	
	Located at ► 27 W 332 CHURCHILL ROAD, WINFIELD, IL ZIP+4 ►6	0190		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year	 N	/A	. Ш
			Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	70.0	, , ,	
	foreign country		*	Ka.
Pa	ort VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	2 791	Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		"	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		, , , , , , , , , , , , , , , , , , ,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		35/40	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		1.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No	-		3, 1
	for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No"	Ė		
	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.)			38
ь	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			Ĭ.
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	23	, ;é	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		آئن.	
	before the first day of the tax year beginning in 2017?	1 <u>c</u>	3 *8	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		}
	defined in section 4942(j)(3) or 4942(j)(5)):	徐阳	1.	
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No		1	*:
	before 2017? Yes A No If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	33	,	3 6 3
,	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	3 > 3		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			-
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			1
	>		,	, 4
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year?	1		
t	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after		ļ	
	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		1	
	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 2017.)		 	لــــــــــــــــــــــــــــــــــــ
	,	- <u>3b</u> 4a	\vdash	x
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	·	 	 **
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	.	1	X
_	nad not over temperature from populary action and day of the any year beginning in 2017	Form 99	0-PF	

Form 990-PF (2017) THE MCNAMARA PURCELL FOUN	DATION		36-72931	37 Page	6	
Part VII-B Statements Regarding Activities for Which Fo	orm 4720 May Be R	equired (continu	ued)	Yes No	_	
5a During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any other registration drive? (3) 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 described in section 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) Yes X No (8) If any answer is Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions (8) Organizations relying on a current notice regarding disaster assistance, check here (9) If Yes' to guestion 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (9) If Yes' attach the statement required by Regulations section 53.4945-5(d). (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (1) Yes' to 6b, file Form 8870. (1) Yes' to 6b, file Form 8870. (1) Yes' to 6b, file Form 8870. (2) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) Yes' to 6b, file Form 8870. (2) At any time during the tax year, was the foundation a party to a prohibited tax shelter transac						
Paid Employees, and Contractors					_	
1 List all officers, directors, trustees, and foundation managers and th		(c) Compensation	(d) Contributions to	(e) Expense	_	
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	account, other	er	
SEE STATEMENT 7		0.	0.	0.	<u>•</u>	
					_	
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."			_	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances	er	
					- - -	
Total number of other employees paid over \$50,000			Form	990-PF (201	0	

Form 990-PF (2017	THE MCNAMARA PURCELL FOUNDATION	36-	7 2 9 3 1 8 7 Page 7
Rart VIII	nformation About Officers, Directors, Trustees, Foundational Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-	paid independent contractors for professional services. If none, enter "N	IONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NOI	VE		
Total number of of	thers receiving over \$50,000 for professional services	L	0
PartilX-A S	Summary of Direct Charitable Activities		
number of organiz	n's four largest direct charitable activities during the tax year. Include relevant statistica ations and other beneficiaries served, conferences convened, research papers produce	ll information such as the id, etc.	Expenses
1N/?	<u> </u>		
2			
3			
4			
	ummary of Program-Related Investments		
	argest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 <u>N/2</u>	<u> </u>		
2			
All other program-	-related investments. See instructions.		
3			
Total, Add lines	1 through 3	_ _	0.

Form **990-PF** (2017)

Page 8

Form 990-PF (2017)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	17,646,125.
	Average of monthly cash balances	1b	686,061.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	18,332,186.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	18,332,186.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	274,983.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,057,203.
6	Minimum investment return. Enter 5% of line 5	6	902,860.
ίĞ	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
_			902,860.
1	Minimum investment return from Part X, line 6 Tax on investment income for 2017 from Part VI, line 5 25,693.		302,000.
2a		J in	
D		2c	25,693.
C	Add lines 2a and 2b	3	877,167.
3	Distributable amount before adjustments. Subtract line 2c from line 1	4	0,7,107.
4	Recoveries of amounts treated as qualifying distributions	5	877,167.
5	Add lines 3 and 4	6	0.
6	Deduction from distributable amount (see instructions)	7	877,167.
<u>-</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		017,107.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	11	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	800,075.
b	Program-related investments - total from Part IX-B	16	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	: 30LL	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	800,075.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	800,075.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies f	or the section
	10.10(+) duratura of the continue of the con		

Part XIII Undistributed Income (see instructions)

Tare All Tare and the same and			(b)	(c)	(d)
		(a) Corpus	Years prior to 2016	20 16	2017
Distributable amount for 2017 free	om Part XI,				877,167.
line 7					
2 Undistributed income, if any, as of the	end of 2017			749,790.	
a Enter amount for 2016 only	<u> </u>				
b Total for prior years:			0.		
3 Excess distributions carryover, I	 f anv. to 2017;				
a From 2012	,			,	,
b From 2013				*	
c From 2014			,	<u> </u>	
d From 2015			,	* * *	
e From 2016			. , , , ,		
f Total of lines 3a through e	<u> </u>	0.			7 1 1 1 1 1 1
4 Qualifying distributions for 201	7 from				
Part XII, line 4: ► \$8	300,075.		1. 3 + 9 + x (1	749,790	
a Applied to 2016, but not more	than line 2a		" # N # / N #	* * * * * * * * * * * * * * * * * * * *	
b Applied to undistributed incom	e of prior		0	. Charles this	
years (Election required - see ii	nstructions)	<u> </u>	1 4 5 5 5 6 5 7 5 5		
c Treated as distributions out of		0.			F0 20F
(Election required - see instruc	mount	111116 * + 4 1	715925612		50,285.
d Applied to 2017 distributable a	out of corous	0.	4 1 1 1 1 1 1 1 2		<u> </u>
e Remaining amount distributed 5 Excess distributions carryover applies		0			
(If an amount appears in column (a),	the same amount				
must be shown in column (a))	lump as				
6 Enter the net total of each col indicated below:	IUIIIII as				
a Corpus Add lines 3f, 4c, and 4e Su	btract line 5	0	• 3 & a & x 3 & x 4 x 4		
b Prior years' undistributed inco	me. Subtract				
line 4b from line 2b				1 · * * * * * * * * * * * * * * * * * *	
e Enter the amount of prior year	rs'		•		
undistributed income for which deficiency has been issued, o	ch a notice of	` ,			
the section 4942(a) tax has b	een previously		1).	
assessed				n . l	* 1,
d Subtract line 6c from line 6b.	Taxable			o.	
amount - see instructions					
e Undistributed income for 201	16. Subtract line).
4a from line 2a. Taxable amo	WIII - See IIISU. 17. Subtract				
f Undistributed income for 20 lines 4d and 5 from line 1. The	ne amount muct				826,882.
	ווס מוווטטווו וווטסנ				820,882.
be distributed in 2018 7 Amounts treated as distribut	ions out of				
corpus to satisfy requiremen	its imposed by	1			ļ
section 170(b)(1)(F) or 4942	2(a)(3) (Election				
may be required - see instru	ctions)		0.		
8 Excess distributions carryov	ver from 2012				<u> </u>
not applied on line 5 or line			0.		
9 Excess distributions carryo	ver to 2018.		.		
Subtract lines 7 and 8 from	line 6a		0.		
10 Analysis of line 9:					
a Excess from 2013		_			
b Excess from 2014		_			
c Excess from 2015		_		1	
d Excess from 2016		_	1		
e Excess from 2017					Form 990-PF (2017

	AMARA PURCE			36-72	93187 Page 10
Part:XIV Private Operating For	oundations (see ins	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating	}		
foundation, and the ruling is effective for	r 2017, enter the date of t	he ruling	▶ <u> </u>		
b Check box to indicate whether the found	lation is a private operatin	g foundation described in		4942(j)(3) or 49)42(₁)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	·/
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				}	
each year listed	<u> </u>			 	
b 85% of line 2a	 			 	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not]				
used directly for active conduct of	Į				
exempt activities	 -	 		/	
e Qualifying distributions made directly	Ì			i	
for active conduct of exempt activities.	[[
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	 		/	 	
alternative test relied upon:	}			}	
a "Assets" alternative test - enter-	ł			}	
(1) Value of all assets	 	 		 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	Í				
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,	i .				
dividends, rents, payments on securities loans (section	1			Ì	1
512(a)(5)), or royalties)			(<u> </u>	
(2) Support from general public			}		
and 5 or more exempt organizations as provided in			ł		}
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			j		j
an exempt organization				 	
(4) Gross investment income	12		(Alle Carried Alle of	1 05 000 5	<u> </u>
Part XV Supplementary Info			the foundation i	nad \$5,000 or mor	e in assets
at any time during t		uctions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation wh			ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed r	nore man-\$3,000)(3ee s	ection-307(a)(2).)			
PHILIP J. PURCELL					
b List any managers of the foundation who other entity) of which the foundation ha			or an equally large portio	in of the ownership of a pa	rthership or
NONE					
2 Information Regarding Contribut					
Check here X if the foundation of the foundation makes gifts, grants, etc.,					ests for funds. If
a The name, address, and telephone num	ber or email address of th	e person to whom applic	ations should be address	ed:	· · · · · · · · · · · · · · · · · · ·
N/A					
b The form in which applications should b N/A	pe submitted and information	tion and materials they sh	ould include;		
c Any submission deadlines:		<u></u>			
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or o	other factors:	
N/A					
723601 01-03-18					Form 990-PF (2017)

3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or contribution	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
	}	}		
		}		
SEE ATTACHED STATEMENT		}		
DE ATTACHE DIATEMAN		<u> </u>		795,610.
		ļ		
	 			
		}		
		 		
	- 			
		}		
	}	}		
		L	<u> </u>	
Total			▶ 3a	795,610.
b Approved for future payment	1			
NONE				
		İ		
		}		
		}		
		}		
		}		
		ļ	ļ	
			}	}
				{
		}		l
Total			► 3b	0.
			i	orm 990-PF (2017)

Part XVI-A Analysis of Income-Producing

nter gross amounts unless otherwise indicated.	Unrelate (a) Business	d business income (b)	(c) Exclu-	d by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue	code	Amount	sion	Amount	function income
a					
ь	-		+-+-		
·	- 		+ - +		
<u></u>			+-+		
e	- 		 		
g Fees and contracts from government agencies			+-+		
2 Membership dues and assessments	1		+		
3 Interest on savings and temporary cash	 				
investments	1 1		_ii_		
4 Dividends and interest from securities			14	385,282.	
5 Net rental income or (loss) from real estate:	\$ 2 5 9		3"7 (I)	23 8 1 1 1 2 3 3	化化学 化二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	} }				
property					
7 Other investment income	L				
8 Gain or (loss) from sales of assets other	} }			044 500	n
than inventory			18	914,702.	L
9 Net income or (loss) from special events			- -		
O Gross profit or (loss) from sales of inventory	 		+-+		
1 Other revenue,	1		1 1		
<u>a</u>			+		
b			+-+		
c	— 		+-+		
de			-+		
2 Subtotal. Add columns (b), (d), and (e)	- Y & # (0	. & 3	1,299,984.	0.
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		- 1	13 _	1,299,984.
See worksheet in line 13 instructions to verify calculations	.)				
Part XVI=B Relationship of Activitie		mplishment of E	xempt P	urposes	
Line No. Explain below how each activity for which			-A contribut	ed importantly to the accom	nplishment of
the foundation's exempt purposes (other th	nan by providing fun	ds for such purposes).			
N/A					
					
				· 	
					
					
					
					
	· · · · · · · · · · · · · · · · · · ·				

Form 990-PF (2017) THE MCNAMARA PURCELL FOUNDATION 36-7293187

| Part XVIII | Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

b	(other the Transfer (1) Cass (2) Other tra (1) Sales (2) Puro (3) Ren (4) Reir (5) Loa (6) Pero Sharing If the anior service	organization directly or indir- ian section 501(c)(3) organi- is from the reporting foundal the rassets ansactions: as of assets to a noncharitation chases of assets from a non- ital of facilities, equipment, of imbursement arrangements insignifications or managements or loan guarantees formance of services or mer of facilities, equipment, mai swer to any of the above is ' cas given by the reporting for (d) the value of the goods, of	zations) or in section toon to a noncharitable exempt organizate acharitable exempt or other assets mbership or fundrais ling lists, other asset "Yes," complete the fundation. If the foundation. If the foundation, or serving the reservence of the serving th	n 527, relating ble exempt org on rganization ing solicitation its, or paid emp ollowing scher idation receive ces received.	to polit anizatio is bloyees dule. Co d less ti	ical organizations? n of: lumn (b) should alv han fair market valu	ways show the fair r	narket value of the ge			X
a)L	ne no	(b) Amount involved	(c) Name of	noncharitable	exemp	organization	(d) Description	of transfers, transaction	s, and sh	aring arrangem	ents
				N/A							
											
			 								
	 -										
											
											
							-+ -				
											
_	+-						 				
											
	ın sectio	undation directly or indirect in 501(c) (other than sectior complete the following sche (a) Name of orgi	n 501(c)(3)) or ın sed edule.	· ·		e tax-exempt organi pe of organization		(c) Description of re		Yes [□ No
					N/A						
					N/A						
					N/A						
	Und	er penalties of perjury, I declare the	hat I have examined this	return, including	accompa	nying schedules and st	atements, and to the be	est of my knowledge			
Sig He	gn and	pelief, it is true, correct, and com-			taxpayer)		tion of which preparer h		retur shov	the IRS discuss in with the preparent below? See I	arer [
_		Print/Type preparer's na	me	Preparer's si			Date	Check If	PTIN		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	•		l i	self- employed			
Pa		DANIEL J. 1	LUTZ	DANIEL	J.	LUTZ	06/26/18			322028	3
	eparer	Firm's name ► DEL						Firm's EIN ► 8			
Us	e Only							1			
		Firm's address ▶ 11			DRIV	Æ		1.	101	106.11	
		CH	ICAGO, IL	60606				Phone no. (3		486-10	
									FO:	m フラリード F	. (2017)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number Name of the organization THE MCNAMARA PURCELL FOUNDATION 36-7293187 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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) (2017)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

THE MCNAMARA PURCELL FOUNDATION

36-7293187

Parttl	Contributors (see instructions). Use duplicate copies of Part I is	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PHILIP J. PURCELL 27 W 332 CHURCHILL ROAD WINFIELD, IL 60190	\$108,279.	Person X 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 Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash 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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-01		\$	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

THE MCNAMARA PURCELL FOUNDATION

36-7293187

Parell	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - \$				
(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			
		\$				
(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			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - \$				
723453 11-01	-17	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)			

Employer identification number

antilli	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	columns (a) through (e) and the following, charitable, etc., contributions of \$1,000 or less	section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations so for the year (Enter this info once) \$				
(a) No. from	Use duplicate copies of Part III if addition (b) Purpose of gift	al space is needed. (c) Use of gift	(d) Description of how gift is held				
Part I		(0,000					
<u>-</u>							
		(e) Transfer of gift	- 4				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) I dipose of gill	(0) 030 01 911	(c) Boom pulsive ment girl to mote				
- -							
-	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
-	(e) Transfer of gift						
	Transferee's name, address, a	Relationship of transferor to transferee					
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
	(e) Transfer of gift						
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
MORGAN STANLEY	385,282	•	0. 385,282.	385,282.	
TO PART I, LINE 4	385,282	•	385,282.	385,282.	
FORM 990-PF		ACCOUNTI	NG FEES	Si	ratement 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DELOITTE TAX LLP	_	8,900.	4,450.		4,450.
TO FORM 990-PF, PG	1, LN 16B	8,900.	4,450.		4,450.
FORM 990-PF		TAX	ES	Si	PATEMENT 3
DEGGD I DUITON		(A)	(B)	(~)	
DESCRIPTION		EXPENSES	NET INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION FEDERAL TAX		EXPENSES PER BOOKS	NET INVEST- MENT INCOME		CHARITABLE PURPOSES
FEDERAL TAX FOREIGN TAX PAID		EXPENSES	MENT INCOME 0.	ADJUSTED	CHARITABLE
FEDERAL TAX	 1, LN 18 =	EXPENSES PER BOOKS	NET INVEST- MENT INCOME 0. 8,100.	ADJUSTED	CHARITABLE PURPOSES 0.
FEDERAL TAX FOREIGN TAX PAID	1, LN 18	EXPENSES PER BOOKS 5,000. 8,100.	NET INVEST- MENT INCOME 0. 8,100.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0.
FEDERAL TAX FOREIGN TAX PAID TO FORM 990-PF, PG	1, LN 18	EXPENSES PER BOOKS 5,000. 8,100. 13,100. OTHER E (A) EXPENSES	NET INVEST- MENT INCOME 0. 8,100.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0.
FEDERAL TAX FOREIGN TAX PAID TO FORM 990-PF, PG FORM 990-PF	1, LN 18 =	EXPENSES PER BOOKS 5,000. 8,100. 13,100. OTHER E (A) EXPENSES	NET INVEST- MENT INCOME 0. 8,100. 8,100. XPENSES (B) NET INVEST- MENT INCOME	ADJUSTED NET INCOME ST. (C) ADJUSTED	CHARITABLE PURPOSES 0. 0. TATEMENT 4 (D) CHARITABLE
FEDERAL TAX FOREIGN TAX PAID TO FORM 990-PF, PG FORM 990-PF DESCRIPTION	-	5,000. 8,100. 13,100. OTHER E	NET INVEST- MENT INCOME 0. 8,100. 8,100. XPENSES (B) NET INVEST- MENT INCOME	ADJUSTED NET INCOME ST. (C) ADJUSTED	CHARITABLE PURPOSES 0. 0. 1ATEMENT 4 (D) CHARITABLE PURPOSES

24,467 SHS STANDARD & POORS 45,033 SHS ISHARES TRUST DJ SELECT 2,039,045. 3,994,932 44,486 SHS THE FINANCIAL SEL SECT SPDR FD 618,420. 1,241,604 26,581 SHS VANGUARD TTL WRLD STK INDX 1,000,473. 1,873,905 38,700 SHS WISDOM TREE JPN TO DIV 1,426,873. 2,296,071 10,000 SHS ISHARES MSCI EMERGING MKTS ETF 348,707. 471,200 3,117,277.863 SHS FEDERATED INSTL PRM VAL OBL IS (PVOXX) 3,116,966 1,165 SHS ALLERGAN PLC SHS (AGN) 199,632. 190,571 2,508 SHS CARDINAL HEALTH INC (CAH) 200,047. 221,062 3,645 SHS DAVITA INC (DVA) 200,001. 263,351 15,003 SHS TENET HEALTHCARE CORP COM NEW (THC) 199,543. 227,445 14,825 SHS TEVA PHARMACEUTICALS ADR (TEVA) 199,994. 280,934 FOTAL TO FORM 990-PF, PART II, LINE 10B 11,833,365. 18,999,401 FORM 990-PF OTHER INVESTMENTS STATEMENT 6 CONTINENTAL HEALTHCARE FUND (QP) LP COST 500,000. 500,000	FORM 990-PF	CORPORATE STOCK		STATEMENT 5	
### A SHS ISHARES TRUST DJ SELECT	DESCRIPTION		BOOK VALUE		
15,003 SHS TENET HEALTHCARE CORP COM NEW (THC) 14,825 SHS TEVA PHARMACEUTICALS ADR (TEVA) 199,543. 227,445 280,934 TOTAL TO FORM 990-PF, PART II, LINE 10B 11,833,365. 18,999,401 FORM 990-PF OTHER INVESTMENTS STATEMENT 6 VALUATION METHOD DESCRIPTION CONTINENTAL HEALTHCARE FUND (QP) LP COST 500,000. 500,000	45,033 SHS ISHARES TRUST 44,486 SHS THE FINANCIAL 26,581 SHS VANGUARD TTL 38,700 SHS WISDOM TREE OF SHARES MSCI 3,117,277.863 SHS FEDER (PVOXX) 1,165 SHS ALLERGAN PLC 3,508 SHS CARDINAL HEAL	T DJ SELECT L SEL SECT SPDR FD WRLD STK INDX JPN TO DIV EMERGING MKTS ETF ATED INSTL PRM VAL OBL I SHS (AGN) TH INC (CAH)	2,039,045. 618,420. 1,000,473. 1,426,873. 348,707. S 3,118,259. 199,632. 200,047.	3,994,932. 1,241,604. 1,873,905.	
FORM 990-PF OTHER INVESTMENTS STATEMENT 6 VALUATION BOOK VALUE CONTINENTAL HEALTHCARE FUND (QP) LP COST 500,000. 500,000	15,003 SHS TENET HEALTHCARE CORP COM NEW (THC) 14,825 SHS TEVA PHARMACEUTICALS ADR (TEVA)		199,543.	227,445. 280,934.	
VALUATION FAIR MARKET DESCRIPTION METHOD BOOK VALUE VALUE CONTINENTAL HEALTHCARE FUND (QP) LP COST 500,000. 500,000	TOTAL TO FORM 990-PF, PART II, LINE 10B		11,833,365.	18,999,401.	
DESCRIPTION METHOD BOOK VALUE VALUE CONTINENTAL HEALTHCARE FUND (QP) LP COST 500,000. 500,000	FORM 990-PF	OTHER INVESTMENT	S	STATEMENT 6	
	DESCRIPTION				
TOTAL TO FORM 990-PF, PART II, LINE 13 500,000. 500,000	CONTINENTAL HEALTHCARE	FUND (QP) LP COST	500,000.	500,000.	
	TOTAL TO FORM 990-PF, P.	ART II, LINE 13	500,000.	500,000.	

FORM 990-PF		- LIST OF OFFICERS, I		STAT	EMENT 7
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
DAVID P. PURCELL 27 W 332 CHURCHILI WINFIELD, IL 60190		TRUSTEE*	0.	0.	0.
MICHAEL J. PURCELI 27 W 332 CHURCHILI WINFIELD, IL 60190	ROAD	TRUSTEE* 0.00	0.	0.	0.
PAUL M. PURCELL 27 W 332 CHURCHILI WINFIELD, IL 60190		TRUSTEE* 0.00	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, 2017 ATTACHMENT TO AND MADE PART OF FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Recipient		Foundation Status	Purpose of	
Name & Address	Relationship	of Recipient	Contribution	Amount of Gift
Chicago Chapter of Spinal Cord Society	Kelationship	Of Recipient	Contribution	Amount of Ont
Chicago Chapter of Spinal Cold Society 618 N Lemont Ave Chicago, IL 60646	None	PC	Unrestricted	\$ 5,000
Multiple Myeloma Research				
3 Forest Street New Cannan, CT 06840	None	PC	Unrestricted	\$ 25,000
Peggy Notebaert Nature Museum				
2430 N Cannon Dr Chicago, IL 60614	None	PC	Unrestricted	\$ 6,000
University of Notre Dame	- None		0004.10404	
724 Grace Hall Notre Dame, IN 46556	None	PC	Linearinated	\$ 10,000
Cristo Rey Network	None		Unrestricted	\$ 10,000
14 East Jackson Boulevard, Suite 1200		n	1	
Chicago, IL 60604	None	PC	Unrestricted	\$ 10,000
Pathways Awareness Foundation				
150 N Michigan Ave	None	DC.	Linuagementani	£ 5000
Chicago, IL 60601 Cystic Fibrosis Foundation	None	PC	Unrestricted	\$ 5,000
150 N Michigan Ave		<u>_</u>		
Chicago, IL 60601	None	PC	Unrestricted	\$ 5,000
MS Research Center Of NY 521 West 57th Street		ı		
New York, NY 10019	None	PC	Unrestricted	\$ 30,000
Anzona State University				
707 S College P O Box 875005	None	PC	Unrestricted	\$ 10,000
Tempe, AZ 85287 Evans Scholars Green Coat Gala	None	PC	Unrestricted	\$ 10,000
One Bnar Road	l l			
Illinois 60029	None	PC	Unrestricted	\$ 12,000
Sts Faith, Hope & Charity				
191 Linden Street Winnetka, IL 60093	None	PC	Unrestricted	\$ 25,000
Brain Research Foundation	None		Officeurolea	23,000
111 W Washington St	1			1
Chicago, IL 60602	None	PC	Unrestricted	\$ 27,500
Declan Drumm Sullivan Memorial Foundation	ĺ			[[
3539 Long Grove Road Long Grove, IL 60047	None	PC	Unrestricted	\$ 10,000
Evans Scholars Invitational	1			10,000
One Briar Road	1)
Illinois 60029	None	PC	Unrestricted	\$ 5,000
Loyola Academy - Second Century Campaign 1100 Laramie	1			
Wilmette, IL 60091	None	PC	Unrestricted	\$ 25,000
USD - Center for Peace and Commerce				
5998 Alcalá Park		50	11	7.500
San Diego, CA-92110	None	PC	Unrestricted	\$ 7,500
15998 Alcalá Park	1			
San Diego, CA 92110	None	PC	Unrestricted	\$ 7,500
ALS - Les Turner ALS Foundation 1900 N Lake Shore Dr	{	· - -	- -	
Chicago, IL 60611	None	PC	Unrestricted	\$ 10,000
American Enterprise Institute	T			
1150 17th St NW Washington, DC 20036	None	PC	Unrestricted	\$ 50,000
Intermountain Healthcare	140HE	 	Oniestricted	50,000
36 South State Street	1			
Salt Lake City, UT 84111 Junior Achievement of Chicago	None	PC	Unrestricted	\$ 20,000
1651 W Washington Blvd #404	1]	\
Chicago, IL 60661	None	PC	Unrestricted	\$ 5,000
Loyola Academy - Ignatian Educator Fund]			
540 Hibbard Rd Winnetka, IL 60093	None	PC	Unrestricted	\$ 10,000
Carl's Kids	None		Omesticled	10,000
3212 Winfield Dr	1		}	1
Durham, NC 27707	None	PC PC	Unrestricted	\$ 5,000
Connie Dwyer Breast Center at St. Michael's Medical Center	1	}	}	1
111 Central Avenue Newark, NJ 07102	None	PC	Unrestricted	\$ 10,000
Lune Children's Memonal Hospital Foundation	110110	 	0.1103010100	10,000
225 E Chicago Ave	1	}	{	}
Chicago, IL 60611	None	PC PC	Unrestricted	\$ 12,000

Movember Foundation					
P O Box 1595	Nama	PC	Unrecharted	•	10,000
Culver City, CA 90232	None	PC	Unrestricted	\$	10,000
Richard Burt MD - Northwestern Research Project 680 N Lake Shore Dr Ste 1118				ļ	
Chicago, IL 60611	None	PC	Unrestricted	\$	5,000
Stanford University Dr. Steven Coutre Research Fund	110110		- CHICOGISCO	+*	
450 Serra Mall				ļ	
Stanford, CA 94305	None	PC	Unrestricted	S	10,000
University of Notre Dame - Men's Golf				T	
724 Grace Hall				1	
Notre Dame, IN 46556	None	PC	Unrestricted	\$	10,000
University of Notre Dame - Notebaert Scholarship Fund					
724 Grace Hall			1	1	
Notre Dame, IN 46556	None	PC	Unrestricted	\$	50,000
Baruch College Benefit Fund - Dinner Honoree Hugh Lamle			1	1	
17 Lexington Avenue, 23rd Street New York, NY 10010	None	PC	Unrestricted	s	10,000
Children's Home + Aid	11010		5.11.55.1.56.55	+*	10,000
125 S Wacker Dr			1	ł	
Chicago, IL 60606	None	PC	Unrestricted	\$	10,000
Cristo Rey Jesuit High School			1	ł	
4302, 1852 W 22nd PI Chicago, IL 60608	None	PC	Unrestricted	\$	10.000
Evans Scholars Par Club	14016	 	Sinconoted	+*	.0,000
One Bnar Road			1)	
Illinois 60029	None	PC	Unrestricted	\$	5,000
Evans Scholars Foundation - Match Play Challenge			1	1	
One Bnar Road Illinois 60029	None	PC	Unrestricted	\$	5,000
Hospital for Special Surgery - Camissa Research Project	None	-	Onestricted	+*	5,000
One Briar Road				1	
Illinois 60029	None	PC	Unrestricted	\$	10,000
McGlinn Family Regional Cancer Center at Reading Hospital			1	1	
Memory of Terry McGlinn 6 Avenue and Spruce Street,		ĺ	1	İ	1
West Reading, PA 19611	None	PC	Unrestricted	s	1,000
MS Society Illinois State Chapter Dinner of Champions				 	
525 W Monroe St#1510			1	1.	
Chicago, IL	None	PC	Unrestricted	\$	90,600
MS Society Utah State Chapter 525 W Monroe St#1510			1	1	
Chicago, IL	None	PC	Unrestricted	s	12,500
Northwestern Memorial Hospital Foundation			1	 	
251 E Huron Street]	}	1.	
Chicago, IL 60611	None	PC PC	Unrestricted	\$	5,000
Northwestern University - WCAS Mathematical Method Program in memory of Nathan Popkins			1	1	
633 Clark Street			1		
Evanston, IL 60208	None	PC	Unrestricted	\$	1,000
Our Lady of Perpetual Help Convent - Need Family Fund memory					
of Bob Poden		ĺ	1	1	
1775 Grove St Glenview, IL 60025	None	PC	Unrestricted	\$	1,000
St Ambrose Church - Renovation	14016	 '-	Onestricted	+*	1,000
1012 E 47th Street		ţ	1	1	
Chicago, IL 60653	None	PC	Unrestricted	\$	50,000
St Ambrose Church - General Pansh Fund		 			
1012 E 47th Street	None	PC	Unrestricted	\$	15,000
Chicago, IL 60653 St. Mary of the Assumption Park City - General Parish Fund	INOIDE	 	Offication	+*	13,000
310 E 137th Street			}	1	
Chicago, IL 60827	None	PC PC	Unrestricted	\$	15,000
St Theresa School - Tuition Assistance Fund in Memory of Bob			1	1	
Wilmouth 247 W 23rd Street			1	1	
Chicago, IL 60616	None	PC	Unrestricted	s	1,000
TCU Business School Building Campaign		†		† <u>*</u> -	.,,,,,,,
110 S Main St			1	1	
South Bend, IN 46601	None	PC	Unrestricted	\$	75,000
University of Notre Dame - LaSalle Street Forum Dinner		1	1	1	
724 Grace Hall	None	PC	Unrestricted	s	21,010
INotre Dame IN 46556	140110	 '-'	Janesariolea	+*-	
Notre Dame, IN 46556 Washington University, CFK Memorial in Memory of Chuck Knight					
Notre Dame, IN 46556 Washington University, CFK Memorial in Memory of Chuck Knight 1 Brookings Drive			1	}	
Washington University, CFK Memorial in Memory of Chuck Knight 1 Brookings Drive St Louis, MO 63130	None	PC	Unrestricted	\$	10,000
Washington University, CFK Memorial in Memory of Chuck Knight 1 Brookings Drive St Louis, MO 63130 Waterford School General Fund		PC	Unrestricted	\$	10,000
Washington University, CFK Memorial in Memory of Chuck Knight 1 Brookings Drive St Louis, MO 63130		PC PC	Unrestricted Unrestricted	\$	10,000

', -