Fogm. 990-PF

Depaidment of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No 1545-0052

Open to Public Inspection Internal Revenue Service For calendar year 2017 or tax year beginning 05/22, 2017, and ending 12/31 Name of foundation A Employer identification number MURBHY FAMILY FOUNDATION 82-1704692 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) FOUNDATION SOURCE 501 SILVERSIDE RD (800) 839-1754City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. . . WILMINGTON, DE 19809-1377 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method X Cash I Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 16) ▶ \$ 5,138. (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable (c) Adjusted net total of amounts in columns (b), (c), and (d) (b) Net investment éxpenses per may not necessarily equal the amounts in income income purposes books (cash basis only) column (a) (see instructions)) 5,000.微緻 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 2 attach Sch B. 3 Interest on savings and temporary cash investments. Dividends and interest from securities . . Gross rents Net rental income or (loss) **海域都是有名的。然后是是其他是是一种** Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain. . Income modifications : 10 a Gross sales less returns **斯特尼斯里斯斯斯**斯坦尼克 and allowances . b Less Cost of goods sold . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 5,170. 170. 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) JO 16 a Accounting fees (attach schedule) inistrative Other professional fees (attach schedule). . . 17 18 Taxes (attach schedule) (see instructions). . . 19 Depreciation (attach schedule) and depletion. Adm: 19 20 pup 21 22 Travel, conferences, and meetings Printing and publications [23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23. **对数据的数据数据数据数据** O 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 5,170. Excess of revenue over expenses and disbursements . . b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). . JSA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

经验证据的

	art II		Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
	aut II	Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	g			
	1		ash investments			<u> </u>
		Accounts receivable		the parties to be one the parties on the high a second		をすべい : 1 · かいれば
			ful accounts			
	1	Pledges receivable		A Samuel Marie Commence of the		The Same of the Sa
		Less allowance for doubt	ful accounts ▶			
	5	Grants receivable	 			
	6	Receivables due from of	ficers, directors, trustees, and other			
		disqualified persons (atta	ficers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans re-	ceivable (attach schedule)	But There is		The same of the second bulleting
		Less allowance for doubt	ful accounts		1 - And 14 American Commission Consults and	and the section of th
ţs				,		
Assets	9		erred charges			
As	10a		government obligations (attach schedule).			
	1.00	Investments - corporate e	tock (attach schedule) ATCH 1	_	5,170	5,138.
	1		ponds (attach schedule)			7,200
	11 ^C	Investments - land, buildings, and equipment basis	bonds (attach schedule)	777 . 2 . 2 . 2 . 2 . 2	a y a 5 M Na m ² n L n	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		and equipment' basis Less accumulated depreciation		The state of the s	**************************************	
		(attach schedule)				
			ans			
	14	Land buildings and	h schedule)	Santana 11 may benefit was a santana 170 may be	with the mill rate with deep the .	a training to they have bettering
		equipment basis Less accumulated depreciation	on -	المناشك المتعلقة المتعلقة المتعلقة المتعلقة	william the time to the	
		(attach schedule)				
		Other assets (describe			·	<u> </u>
			completed by all filers - see the	0.	E 170	5 130
_		instructions. Also, see pag	ge 1, item I)	0.	5,170	5,138
	1	• •	crued expenses	•		-
	18	Grants payable		,		Branch a Richard State Class
ë	19	Deferred revenue	• • • • • • • • • • • • • • • • • • • •			-
Ĕ	20		, trustees, and other disqualified persons			-
iat			es payable (attach schedule)		•	↓ , }
_	22	Other liabilities (describe I)			1
						.]
_			17 through 22)	0.	0	4
w			SFAS 117, check here			j
ë		and complete lines 24 th	rough 26, and lines 30 and 31.			1
a						<u> </u>
3a	25	Temporarily restricted				1
<u> </u>	26	Permanently restricted				_
5			follow SFAS 117, check here ► X			
F		and complete lines 27 th	rough 31.			1
S	27	Capital stock, trust princip	pal, or current funds			
ë	28	Paid-in or capital surplus, or la	and, bldg , and equipment fund			
188	29	Retained earnings, accumula	ited income, endowment, or other funds		5,170	
it /	30		palances (see instructions)	0.	5,170	
Ň	31	Total liabilities and	net assets/fund balances (see			
				0.	5,170	. ` .
Р	art III	Analysis of Chang	ges in Net Assets or Fund Bala	nces		
1	Tota	I net assets or fund ba	lances at beginning of year - Part	II, column (a), line 30 (i	must agree with	
	end-	of-year figure reported	on prior year's return)	· • • • • • • • • • • • • • • • • • • •	1	0.
2			ne 27a			5,170.
		er increases not include	A (aminos O (daminos) &			
4	Add	lines 1, 2, and 3				5,170.
		reases not included in I			5	
6	Tota	I net assets or fund bal	ances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	5,170.

MURPHY FAMILY FOUNDATION

ra	(a) List and de	scribe the kind(s) of property sold (for e	example, real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	ann nann ill aalla	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)
1 a		DULE				_
b		.=.				
<u>c</u>				-		
<u>d</u>				-		-
e		(5 Depresenting allowed	(g) Cost or other basis	+	(h) Corp or (los	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (los ((e) plus (f) minu	
a						
<u>b</u>						<u>-</u>
<u>c</u>			-			
<u>u</u>						
		howing gain in column (h) and owned	by the foundation on 12/31/69	 	0 (0.1.41)	
		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) ga (k), but not less th	
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from col	
a			-			
b				·		
C						
d						
е				ĺ		
_	Contal can set income	or (not posted loss) [If ga	ain, also enter in Part I, line 7			
2	Capital gain net income	If (let capital loss)	oss), enter -0- ın Part I, line 7	2		92.
3		ain or (loss) as defined in sections				
		Part I, line 8, column (c) See ins		.		
				3		0.
Рa	t V Qualification U	Jnder Section 4940(e) for Re	duced Tax on Net Investment	Income		
Was		the section 4942 tax on the distrib			_	Yes No
1		mount in each column for each year		''''	trios	
<u> </u>	(a)			Ing any er	(d)	
Cal	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution rat	
Cai	2016				(col (b) divided by	coi (c))
	2015					
	2014					
	2013					
	2012					
2	Total of line 1, column (d)		2		
3		o for the 5-year base period - divid			<u> </u>	
	the number of years the	foundation has been in existence	ıf less than 5 years	3		
4	Enter the net value of no	oncharitable-use assets for 2017 f	rom Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
	Enter 1% of net investm			6		
6		ent income (1% of Part I, line 27b)				
6 7	Add lines 5 and 6	ent income (1% of Part I, line 27b)		7		

Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ıction	<u>s) </u>				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			翻號				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		14.5					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			3.				
	here ▶ ☐ and enter 1% of Part I, line 27b	經濟	建设等	医				
^	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of							
·	Part I, line 12, col (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)							
3	Add lines 1 and 2			3.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			3.				
6	Credits/Payments Credits/Payments							
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a							
b	Exempt foreign organizations - tax withheld at source							
С	Tax paid with application for extension of time to file (Form 8868) 6c		1					
d	Backup withholding erroneously withheld							
7	Total credits and payments Add lines 6a through 6d			0.				
8	Enter any penalty for underpayment of estimated tax. Check here							
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			3.				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,						
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11							
Pa	rt VII-A Statements Regarding Activities							
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	能能	Yes	No				
	participate or intervene in any political campaign?	1a		X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the							
-	instructions for the definition	1b	,	Х				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	東京	1					
	published or distributed by the foundation in connection with the activities		3.3					
С	Did the foundation file Form 1120-POL for this year?	1c		X				
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	建建	推進	SEE SEE				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	E	新					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		AND 19					
	on foundation managers > \$		AND					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
	If "Yes," attach a detailed description of the activities	雙號	增建於	经能				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	遊遊		题透				
	incorporation, or 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?	4a		X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	electric er a tra	X				
	If "Yes," attach the statement required by General Instruction T		認能					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
•	By language in the governing instrument, or							
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	遊遊						
	conflict with the state law remain in the governing instrument?	6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	Park Truster				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions							
	OR,							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			是這些				
-	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	d8	X	philippe.				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		鑑鑑					
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			v				
	complete Part XIV	9	_	<u> </u>				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	_		х				
	names and addresses	10	O DE					

Pai	t VII-A Statements Regarding Activities (continued)			
		亚洲	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			v
40	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A		1,.	
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-175	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1	377		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	$\cdot \bigsqcup$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authorit	у	Yes	
	over a bank, securities, or other financial account in a foreign country?	16	- 10140- 301E	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Pal	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	No. of the last	V	N.
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	2. A. S. A. S.	Yes	No Service
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? Yes X No			
	(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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		经数	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after		極數	
	termination of government service, if terminating within 90 days) Yes X No		1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here		**	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		翻逐	
	were not corrected before the first day of the tax year beginning in 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		纖纖	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?		3	
	If "Yes," list the years			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect 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)	2b	THE WASTER	Lattier in N
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
٥-	Did the foundation held are a thorough the second s			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
_	at any time during the year?			
D	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		經鑑	
	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.)	2 h	THE SERVICE	455
An	foundation had excess business holdings in 2017)	3b 4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	40	建建	
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	THE STATE	X

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Red	uired (con	tinued)			
5a	During ti	ne year, did the foundation pay or incur any amo	ount to				٠.	Yes	No
,	(1) Carr	y on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	. Yes	X No		-1. ·	* [
	(2) Influ	ence the outcome of any specific public ele	ection (see section 4	4955), or to carry or	n.		^		
		atly or indirectly, any voter registration drive?	•	· -		X No			
		ide a grant to an individual for travel, study, or o				X No	İ	ł	
		ide a grant to an organization other than a	• •			···			{
		on 4945(d)(4)(A)? See instructions				X No			}
		ide for any purpose other than religious, ch					l	١.,	
		oses, or for the prevention of cruelty to children		-		X No			
b		inswer is "Yes" to 5a(1)-(5), did any of the			• —		.		1
U	-	ons section 53 4945 or in a current notice regar		•	•		5b		لــــــــــــــــــــــــــــــــــــ
		ations relying on a current notice regarding disas					7 30		-
_	_	• • •	•					_ <	}
С		nswer is "Yes" to question 5a(4), does the		•		X No	}	1	}
		it maintained expenditure responsibility for the				140		١.	}
		attach the statement required by Regulations si	· ·						
6a		foundation, during the year, receive any fur				X No	',	-	{
		sonal benefit contract?				_			
þ		oundation, during the year, pay premiums, dire	ctly or indirectly, on a	i personai benefit contra	act'	• • • • •	6b	-	
_		to 6b, file Form 8870 me during the tax year, was the foundation a p		114 4		\square	1	١.	, }
7a b		me during the tax year, was the foundation a plant of the foundation receive any proceeds or have				_			!
	t VIII	Information About Officers, Directo					7b	1	
		and Contractors		_		-	Jyccs,		
1	List all c	officers, directors, trustees, foundation in							
		(a) Name and address	(b) Title, and average hours per week	(If not paid,	(d) Contribu employee ben	efit plans	(e) Expen		
			devoted to position	enter -0-)	and deferred co	mpensation			
ATC	1 2			0.		0.			0.
11101				· · · · · · · · · · · · · · · · · · ·					٠.
				 -		-			
									
2	Compen	sation of five highest-paid employees	(other than thos	se included on lin	1 . see	instruction	s) If n	one	enter
	"NONE."		(other than thos	oc moradou on mir			,	0110,	
			(b) Title, and average		(d) Contribu	rtions to	(e) Expen	se acco	unt
(a)	Name and	address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and d	leferred	other al		
					compens	ation			
	NONE								
						-			
									
			_						
	_								
		-				+		_	
		of other amplement and area 650,000		<u> </u>	L				
iotal	number	of other employees paid over \$50,000	· · · · · · · · · · · ·	<u> </u>	<u> </u>	▶	Form 99	n_DE	(2017)

MURPHY FAMILY FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Foundation Information Informat	Managers, Highly Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services. See	instructions. If none, enter "NONE	11
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	-	
NONE	-	
	-	
	-	
	-	
otal number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statis organizations and other beneficianes served, conferences convened, research papers produced, etc.	tical information such as the number of	Expenses
1 N/A		
2		
3		
4		
art IX-B Summary of Program-Related Investments (see instructions))	
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1 NONE		
2	· · ·	
All other many related many forms		
All other program-related investments. See instructions 3 NONE		
J		
otal. Add lines 1 through 3		

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundation	ns,
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	3,747 <u>.</u>
b	Average of monthly cash balances		
С			
d		1d	3,747.
е		1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,747.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)		56.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,691.
6	Minimum investment return. Enter 5% of line 5	6	113.
Pai	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	113.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 3.		
b] _	
С		2c	3.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	110.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	110.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	110.
	rt XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	
	3	1b	
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	ا میا	
a		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		-
_	Enter 1% of Part I, line 27b See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when call qualifies for the section 4940(e) reduction of tax in those years	ilculating whet	her the foundation

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Page 9

P	Undistributed income (see inst	ructions)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				110.
2	Undistributed income, if any, as of the end of 2017				-
	a Enter amount for 2016 only				
ı	o Total for pnor years 20 15 ,20 14 ,20 13				
3	Excess distributions carryover, if any, to 2017	the state of the state of	and the property	6 41 45 45 4 5 40 40 4 40 4 10 41	- 4 April 1 1 1 3/1 2 2 4
•	a From 2012		T I P M WIT D	** * * * * * * *	
ı	From 2013		1 11 11 11 11	The transfer	1 444 4 1 3/ 7
•	: From 2014	واجها واحياه	e de vient o 7		
•	f From 2015			,	. '.' . '
•	From 2016	maner on manual transition the			
1	Total of lines 3a through e			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4	Qualifying distributions for 2017 from Part XII,				,
	line 4 ▶ \$	a care of the North American	and the transfer of	* * * * * * * * * * * * * * * * * * *	
	Applied to 2016, but not more than line 2a				
	Applied to undistributed income of prior years (Election required - see instructions)				
	Treated as distributions out of corpus (Election				
	required - see instructions)		,, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	,
•	Applied to 2017 distributable amount				
•	Romaining amount distributed out of curpus		<u> </u>	, J J 8 8 9 9	Para Sarakas
5	Excess distributions carryover applied to 2017	الوائد والمراجع والمراجع المراجع المرا		4	
	(If 3n amount appears in column (d), the same amount must be shown in column (a).)	30.3		** ** *** *** *** *** *** *** *** ***	
6	Enter the net total of each column as				
	indicated below.				
•	Corpus Add lines 3f, 4c, and 4c Subtract line 5		, * , , , , , , , , , , , , , , , , , ,	5 300	unadas du tilo
ı	Prior years' undistributed income Subtract				
	line 4b from line 2b				
•	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
	•			<u> </u>	
•	Subtract line 6c from line 6b Taxable amount - see instructions				
•	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount - see instructions				
Î	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2018				110.
7	Amounts treated as distributions out of corpus		The grade of the	40 6 7 10 7	و ي ماد يو هو
	to satisfy requirements imposed by section				•
	170(h)(1)(F) or 4942(g)(3) (Election may be		At he put what was a time will	al call (i	
	required - see instructions)		*	ersea eer to a	<u>.</u>
8	Excess distributions carryover from 2012 not				-, -, -, -, -, -, -, -, -, -, -, -, -, -
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018.	Ü.		The factor of the factor	15 mg at 12 mg at 1
	Subtract lines 7 and 8 from line 6a	Ų.	• • •		
	Analysis of line 9	الواليون و يو يو يو چي نه نه دي	MAN SALES IN THE SALES OF THE S	Parameter of the company of	# 16 th th t
	Excess from 2013		* 1	S. P.B. T. And go v. as	
	Excess from 2014		-	× •	
	Excess from 2015	M. W. Na.	1 til til 1 11 til	•	SA PL C
	Excess from 2016	1 PP 3 34P C	-	4 1 39 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*
<u> </u>	Excess from 2017		•		

factors

Supplementary Information (continued)

Part XV

Page **11**

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution]
a Paid during the year				_
		İ		
1				
]
				İ
1				
!				
				:
Total			— 20	
	<u></u>		▶ 3a	
b Approved for future payment				
		1		
		į		
	Į			
Total	<u> </u>	<u></u>	<u> ▶</u> 3b	

Form **990-PF** (2017)

Part XVI-A	Analysis of Income-Prod	ucing Act	ivities			
Enter gross amo	unts unless otherwise indicated	(a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program serv	ice revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
_					-	(accoming to the control of the con
						· · · · · · · · · · · · · · · · · · ·
_						
f						-
g Fees and c	ontracts from government agencies					-
2 Membership	dues and assessments					
3 Interest on sav	ings and temporary cash investments -					
	d interest from securities			14	78.	
5 Net rental inc	ome or (loss) from real estate	•	4 6 6 7 1			• • • •
a Debt-finar	nced property	_				
b Not debt-f	inanced property					
6 Net rental inco	me or (loss) from personal property					
	nent income					
8 Gain or (loss) f	rom sales of assets other than inventory		<u> </u>	18	92.	
9 Net income o	r (loss) from special events		<u> </u>			
10 Gross profit o	r (loss) from sales of inventory					
11 Other revenue	e a					
d						
е						
12 Subtotal Add	columns (b), (d), and (e)				170.	
13 Total Add lin	e 12, columns (b), (d), and (e)		• • • • • • • • • • •		13	170.
	n line 13 instructions to verify calc			<u> </u>		
Part XVI-B	Relationship of Activitie					
	plain below how each activit					
▼ ac	complishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purposes	s) (See instructions)
			<u> </u>			
-					<u> </u>	
			 -			
	· ·		 			
						
						
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	· -					
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		_ .			 .	
						<u> </u>
	···					
				_		
		_				

Part XVI		MURPHY FAMILY FOUNDATION egarding Transfers to and Transact nizations	tions and Relationships With None			ge 13
ın se orgar	ne organization direct ection 501(c) (other nizations?	ly or indirectly engage in any of the following than section 501(c)(3) organizations) or groundation to a noncharitable exempt organization.	r in section 527, relating to political		Yes	No
(1) C (2) O b Other	ashther assets			1a(1) 1a(2)		X
(2) P (3) R	urchases of assets fro ental of facilities, equi	ncharitable exempt organization		1b(2) 1b(3)		X X X
(5) Lo (6) Po c Shari	pans or loan guarantee erformance of service ng of facilities, equipm	ements	oyees	1b(5) 1b(6) 1c		X X X
value value	of the goods, other in any transaction or	e above is "Yes," complete the following sassets, or services given by the reporting for sharing arrangement, show in column (d)	oundation. If the foundation received less the value of the goods, other assets, or s	than ervice	fair m s rec	narke eived
(a) Line no	(b) Amount involved N/A	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arra	ingeme	nts
						·····

"Yes," complete the following schedul	<u> </u>	
(a) Name of organization	(b) Type of organization	(c) Description of relationship
· · · · · ·		
<u></u>		
		

Sign Here

May	the	IRŞ	disc	uss	this	ret	um
with	the	prep	arer	sh	own	belo	w?
See II	nstruc	tions		X)	Yes		No
				_			_

		-			For	QQ0-PF (201	Ī
	LAKE SUCCESS,	NY 1	11042	Phone no	800-83	39-1754	
Use Only	Firm's address ► ONE HOLLOW LN,	STE 212					
Preparer	Firm's name FOUNDATION SOU	RCE		Firm's EIN	51039	98347	
	JEFFREY D HASKELL	JEFFREY D HASKELL	11/06/2	019 self-em	ployed]	P01345770	
Paid	Print/Type preparer's name	Preparer's signature	Date	Check	ıf F	PTIN	

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

Name of the organization **Employer identification number** MURPHY FAMILY FOUNDATION 82-1704692 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 provate foundation 527 political organization Form 990-PF 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 Complete Parts I and II See instructions for determining a or more (in money or property) from any one contributor 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 deserbed 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, duping 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 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Go to www.irs.gov/Form990 for the latest information.

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2017

Name of the organization Employer identification number MURPHY FAMILY FOUNDATION 82-1704692 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 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 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

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

Employer identification number 82-1704692

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	STEPHEN MURPHY 1118 SEQUOIA STREET KLAMATH FALLS, OR 97601	\$\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

82-1704692 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization MURPHY FAMILY FOUNDATION

Employer identification number 82-1704692

Use	tributions of \$1,000 or less for the duplicate copies of Part III if addit		n once. See instructions) ►\$
lo. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _			
_		(2) 7	
	Transferee's name, address, a	(e) Transfer of gift nd ZiP + 4	Relationship of transferor to transferee
-			
lo. n t i	(b) Purpose of gift	(c) Use of grft	(d) Description of how gift is held
_ -			
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
lo. n t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
lo. n	(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

FORM 990PF, PART II - CORPORATE STOCK

AMERICAN FUNDS CAP INCOME BUIL AMERICAN FUNDS INCOME FD OF A

DESCRIPTION

ENDING BOOK VALUE

ENDING

1,804. 3,366.

1,781. 3,357. 5,138.

TOTALS

5,170.

ATTACHMENT 1

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of P	roperty	INS AND LO	Desc	ription		br	Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV	Adı basıs	Excess of FMV over	D	acquired Gain or	
expenses of sale	allowable	basis	as of 12/31/69	as of 12/31/69	adı basıs	\vdash	or (loss)	
		PUBLICLY-TR	ADED SECURI	ries				
92.							92.	
OTAL GAIN(LO	SS)						92.	
·								
							I	
ļi.								
		:						
1						ı		

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 2
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STEPHEN MURPHY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	EXEC DIR, PRES, DIR, TREAS 1.00			
VALERIE MURPHY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR, SEC 1.00			
	GRAND TOTALS	0	0	0