	3 200 E
	Bank
	2
<u>.</u>	
C. PACEU	PUSTUARK DATE
	SZ.

Form (990-T						ļ	OM9 No 1545-0047		
		(and proxy tax under section 6033(e)) For calendar year 2019 or other tax year beginning							_ 2019	
Departm Internal F	Point of the Treasury Reverve Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).					. [Open to Public Inspection (c 501(c)(3) Organizations Only			
A	Check box if address changed					and see instructions.)		D Empl	oyor Identification number loyees' trust, see actions)	
B Exe	nipt under section	Print	M. J. MURDOCK CHARIT	TABLE TRUST					23-7456468	
	501(c()(3)	or	Number, street, and room or s	suite no. If a P.O. bo	x, see ir	rstructions.		E Unrelated business activity code (See instructions.)		
	108(é) 220(c)	Туре	655 W COLUMBIA WAY,	NO. 700] (0.0)	(
4	108A 530(a)		City or town, state or province	, country, and ZIP o	or foreig	n postal code				
	529(a)		VANCOUVER, WA 98660			· · · · · · · · · · · · · · · · · · ·		52599	90	
C Book	volue of all assets fol year	010	F Group exemption number (5		>	[7] correl	401/2	\ 4m. m4	Other terret	
U Coto	·····		G Check organization type tion's unrelated trades or busin		poration 1		e the only (or first) ur) trust	Other trust	
		-	STMENT IN PARTNERSHI	· · · · · · · · · · · · · · · · · · ·			e the only (or mist) in e, complete Parts I-V.			
			ce at the end of the previous se		arts I an					
	ess, then complete l									
			oration a subsidiary in an affilia	ted group or a pare	nt-sub s i	idiary controlled group?	., >	Ye	es X No	
			ifying number of the parent cor							
			. J. MURDOCK CHARITA			,	hone number 🕨 (·	
<u> </u>	· · · · · · · · · · · · · · · · · · ·		le or Business Incom	е	T	(A) Income	(B) Expense	Sarrana Sarrana	(C) Net	
	ross receipts or sale)atouas -						
	ess returns and allov ost of goods sold (S			Balance	1c 2		10 TO		No. 10 Control of the	
	ross profit. Subtract				3		\$25 P. S.		22-12 PORDA 17 \$25.00 COUNT	
	apital gain net incon		•••		4a	11,360,655	STATE OF THE STATE	Carrier .	11,360,655	
			art II, line 17) (attach Form 479	7)	4b		产于加州的	14,000		
			ts	,	4c		作。(2) 3(2)	3.6		
			hip or an S corporation (attach	statement) .	5	-367,620	STHT 16	经统计	-367,620	
6 R	ent income (Schedul	le C)			6					
7 Ui	nrelated debt-financi				7		ļ			
•			nd rents from a controlled organ							
9 in			n 501(c)(7), (9), or (17) organi 	zation (Schedule 6)						
•	xploited exempt activ dvertising income (S	-			10					
t	ther income (See ins			SENT 17	12	10,000	. 2005.100	STANK!	10,000	
13 T	otal. Combine lines	3 throu	oh 12		13	11,003,035			11,003,035	
Part	II Deduction	ns No	t Taken Elsewhere (See directly connected with the)			
14 (·····		ectors, and trustees (Schedule				······	14		
	Salaries and wages		, , , , , , , ,			VED .		15		
16 F	Repairs and mainten	ance .		-	***************************************	ان		16		
17 E	Bad debts _	٠.	e instructions)	-1881 MUN	12	2020 - 80		17		
				· · • • • • • • • • • • • • • • • • • •		(0)		18	. 10,000	
	faxes and licenses	 [aus 45	,	. homoorean	a someoner	more lab	337,320.	19	. 10,000	
20 C	ela norteiarnata ana.	imad on	62)			4, 6	307,000.	21b	337,320	
			, ,			<u>Elul</u>		22	207,335	
			mpensation plans					23		
	Employee benefit pro							24		
24 E	xcess exempt exper	ises (Sc	hedule I)	. , ,			1 111	25		
25 E	vees readership on	sts (Sch	nedulc J)					26	ļ 	
25 E	. Account for the country oc							27	I	
25 E 26 E 27 C	Other deductions (att		edule)			• •	•	_	564 755	
25 E 26 E 27 C 28 T	Other deductions (att F <mark>otal deductions</mark> . Ac	id lines	14 through 27				• • • •	28	554,655	
25 E 26 E 27 C 28 T 29 L	Other deductions (att Fotal deductions. Ac Unrelated business to	id lines axable in	14 through 27	deduction. Subtrac	 ct line 28	3 from line 13		_	554,655 10,448,380	
25 E 26 E 27 C 28 T 29 L 30 C	Other deductions (att Fotal deductions. Ac Unrelated business to Deduction for net ope	id lines axable in	14 through 27	 deduction. Subtrac ng on or after Janua	 at line 28 ary 1, 20		· · · · · · · · · · · · · · · · · · ·	28		

Form 990-	T(2019) M. J. MURDOCK CHARITABLE TRUST	23-	-/456468 Page 2
Part	III Total Unrelated Business Taxable Income		
	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	10,448,380.
	Amounts paid for disallowed fringes	33	
	Charitable contributions (see instructions for limitation rules) STMT 18 STMT 19	34	6,268,428.
	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of times 32 and 33	35	4,179,952.
	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	4,179,952.
	· · · · · · · · · · · · · · · · · · ·	38	1,000.
	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	130	2,000.
	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	4,178,952.
	IV: Tax Computation	1 99 1	4,110,552.
		140	
	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	
41 7	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	1	024 245
	Tax rate schedule or X Schedule D (Form 1041)	41	834,745.
	Proxy tax. See instructions	42	
	Alternative minimum lax (trusts only)	43	200.
	Tax on Noncompliant Facility Income. See instructions	44	
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	834,945.
Part		Terror and	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	13.5%	
ь (Other credits (see instructions)		
c (General business credit. Attach Form 3800	1200	
d (Credit for prior year minimum tax (attach Form 8801 or 8827)	[]	
e 1	Total credits. Add lines 46a through 46d	46e	
	Subtract line 46e from line 45	47	834,945.
48 (Other taxes. Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (etlach schodule)	48	
49 1	Total tax. Add lines 47 and 48 (see instructions)	49	834,945.
50 2	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51 a F	Payments: A 2018 overpayment credited to 2019 51a 232,884.	學等	
b 2	2019 estimated tax payments 51b 45,000.		
c 1	Fax deposited with Form 8868 51c 1,700,000.		•
đ F	Foreign organizations: Tax paid or withheld at source (see instructions)	3	
	Backup withholding (see instructions) 51e	AFFE.	
	Credit for small employer health insurance premiums (attach Form 8941) 51f		
	Other credits, adjustments, and payments: Form 2439		
	Form 4136 Other Total ▶ 51g		
52 T	Total payments. Add lines 51a through 51g	52	1,977,884.
	stimated tax penalty (see instructions). Check if Form 2220 is attached	53	11,571.
	Fax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
	Overgovment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	1,131,368.
	inter the amount of line 55 you want: Credited to 2020 estimated tax	56	750,000.
Part			
1.00111 (10)	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		12.24 <u>11.25</u>
	inCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	HIGH CAYMAN ISLANDS		श्रह देशी र की रियो
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		x
	f "Yes," see instructions for other forms the organization may have to file.		\$ 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12
	inter the amount of tax-exempt interest received or accrued during the tax year \(\bigs\) \\$		
59 E	Under panalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bost of my knowled	dos and he	dref it is brio
Sign	correct, and complete Declaration of properer (other than taxpayor) is based on all information of which properer has any knowledge	,go 2a 20	101, 1113 000,
Here		-	discuss this return with
11010			shown below (see
			X Yes No
	Priht/Type preparer's name Preparer's signature Date Check I	f PTIN	
Paid	HEATHER TOMSICK Heather a Bringly 11/10/2020 self-employed		265222
Prepa	PIERTHER TOMSICK PULSUA COLUMN CONTROLL		765398
Use C	Only Firm's name ► DELOITTE TAX, LLP Firm's EIN ►	8	6-1065772
	925 FOURTH AVENUE, SUITE 3300		
	Firm's address SEATTLE, WA 98104 Phone no. 2	06-716	
923/11 01	-27-20		Form 990-T (2019)