	2	2	
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L	7	2	
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	2		
	1		
į	ĺ	5	

Form -990	T   E	kempt Organi						n.	OMB No 1545-0687
Form, OOO		diiu pi) Indar year 2017 or other ta:			der section			1406	୬ <b>⋒17</b>
Department of the Treatment	-	► Go to www irs go						·*—	
Internal Revenue Servi	· .	not enter SSN numbers						:)(3)	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box address ch		Name of organization (	Check b	ox if nai	me changed and se	e instruction	s)		yer identification number yees' trust, see instructions )
B Exempt under se	<b>I</b>	MOREHOUSE CO							
X 501( C 2	Print or	Number, street, and roor	n or suite no	lfaPO	box, see instruction	ns			66205
408(e)	<sup>220(e)</sup> Type	020 MECHATEM	DDTVE	C M					ited business activity codes structions)
408A	530(a)	830 WESTVIEW City or town, state or pro			7ID or foreign postal	code			
529(a)  C Book value of all	assets	ATLANTA, GA		y, and z	LIF of lovelight postal	code	_	52599	<b>9</b> 0
at end of year		oup exemption number		ions )	<b>&gt;</b>				
335,384,1		eck organization type	` , , , , , , ,			501(c	) trust	401(a) i	trust Other trust
H Describe the		orimary unrelated busine				INVEST	MENTS		
		corporation a subsidia							▶ Yes X No
		identifying number of t		rporati	on 🕨				
		HASKELL B. RUF			1	Telephon	e number ▶ 40	4-681 <i>-</i>	
		or Business Incom	ne .	1	(A) Inco	me	(B) Exper	ses	(C) Net
									,
<b>b</b> Less returns a			c Balance						<u> </u>
_	•	dule A, line 7)							<u>'</u>
•		2 from line 1c attach Schedule D)		4a					
		Part II, line 17) (attach Fo		<b></b>	-			····	
• ,	• •	trusts		-			· · · · · · · · · · · · · · · · · · ·		
· ·		ips and S corporations (atta			17	,983.	ATCH 1		17,983.
•	•			1					
7 Unrelated	debt-financed in	ncome (Schedule E) .		7					
8 Interest, annui	ies, royalties, and re	ents from controlled organization	ns (Schedule F)	8					
9 Investment inc	ome of a section 50	01(c)(7), (9), or (17) organizatio	on (Schedule G)	9					
		income (Schedule I) .							
		dule J)		11	21	,664.	ATCH 2		31,664.
		ctions, attach'schedule)		12		,647.	AICH 2		49,647.
		rough 12					leductions ) (	Except fo	
		t be directly connec						_xoopt it	or contributions,
		directors, and trustees (						14	
•			`					· ·	
	<del>-</del>								
17 Bad debts					<u></u>			17	
								18	
19 Taxes and	licenses	See instructions for limit	KECE	171	<del></del>			19	4,105.
					440 · · IQI - 7-	1	ENT5	20	
21 Depreciation	on (attach Form	4562)	· ·MAY.	), <u>)</u> , ,	العان العال	21		⊢	
		d on Schedule A and els				2a		22b	
<ul><li>23 Depletion .</li><li>24 Contribution</li></ul>	ns to deferred	compensation plans	OGO	EN	-				
		S		G				—	
		Schedule I)						I	<del></del>
		Schedule J)							
		schedule)							3,500.
29 Total dedu	ctions Add line	es 14 through 28						29	7,605.
30 Unrelated	business taxat	ole income before ne	t operating	loss	deduction Sub	tract line	29 from line		42,042.
31 Net operat	ng loss deduct	ion (limited to the amo	unt on line 30	0)	AT	TACHM	ENT.4	31	42,042.
32 Unrelated	ousiness taxabl	le income before specif	fic deduction	n Subi	tract line 31 from	line 30 .		· · -	
		rally \$1,000, but see lir							
		ible income Subtract				•			0.
		r line 32			· · · · · · · · · · · ·	<u>,</u>		34	Form <b>990-T</b> (2017)

Form	990-1 (20	(17) MOKEHOUSE COLLEGE	50 (	7500205		Page Z
Pai	rt III	Tax Computation				
35	Organi	zations Taxable as Corporations. See instructions for tax computation Controlled group				
	_	rs (sections 1561 and 1563) check here  See instructions and				
а		our share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)				
-	(1)[\$	(2) \$ (3) \$				
h		rganization's share of (1) Additional 5% tax (not more than \$11,750) \$				
D	(3) 444	tional 3% tax (not more than \$100,000)				
_	Incomo	tax on the amount on line 34	35c			
36	Trusts	Taxable at Trust Rates. See instructions for tax computation Income tax on				
-		bunt on line 34 from Tax rate schedule or Schedule D (Form 1041).	36			
27			37			
37		ax See instructions	38			
38 39		Non-Compliant Facility Income See instructions				
40		dd lines 37, 38 and 39 to line 35c or 36, whichever applies				
		Tax and Payments	40	<del></del>		
		tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a				
		redits (see instructions)				
C	Genera	business credit Attach Form 3800 (see instructions)				
		or prior year minimum tax (attach Form 8801 or 8827)	410			
		edits Add lines 41a through 41d	41e 42			
42 43		t line 41e from line 40	43			
			44			0.
44		x Add lines 42 and 43	77			
		its A 2016 overpayment credited to 2017				
		stimated tax payments				
C		organizations Tax paid or withheld at source (see instructions)				
		withholding (see instructions)				
_		or small employer health insurance premiums (Attach Form 8941)				
t ~						
9		redits and payments				
46	_	ayments Add lines 45a through 45g	46			
47		ed tax penalty (see instructions) Check if Form 2220 is attached	47			
48		. If line 46 is less than the total of lines 44 and 47, enter amount owed	48			
49		yment If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49			
50	•	e amount of line 49 you want    Credited to 2018 estimated tax   Refunded	50			
Par		Statements Regarding Certain Activities and Other Information (see instructions	_			
51	At any	time during the 2017 calendar year, did the organization have an interest in or a signature or		authority	Yes	No
	over a	financial account (bank, securities, or other) in a foreign country? If YES, the organization ma	y hav	e to file		
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the	foreign	country	_	
	here 🕨			j		X
52	During t	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	gn trust	2		Х
	_	ee instructions for other forms the organization may have to file				
53	Enter th	e amount of tax-exempt interest received or accrued during the tax year > \$				
	Ur	nder penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the b ie, correct, and complete Declaration of pleaser (other than taxpayer) is based on all information of which preparer has any knowledge	est of m	y knowledge a	ind bel	lief, it is
Sigi	n 📗 "		v the	IRS discuss	this	retum
Her	e 🕨	MILINUL 72. THE STATE OF THE WILL STATE OF THE WILL STATE OF THE WILL STATE OF THE	h the	preparer sh	own	
	Si		nstructi	ons)? X Ye	s	No
D-:-		Print/Type preparer's name  Preparer's signature  Check	, [] <sub>if</sub>	PTIN		
Paid			mployed			<u> 1</u> 7
	oarer Only	Firm's name ►KPMG LLP Firm's		13-55652		
	y	Firm's address ▶300 NORTH GREENE STREET, SUITE 400, GREENSBORO, NC 27401 Phone	no -	336-275		14
				- 00	. ~ -	

Form 990-T (2017)

Schedule A - Cost of G	oods Sold. Er	nter method	of invent	огу va	aluation	<b>&gt;</b>					
1 Inventory at beginning of y	1 1 "						ar	6			
2 Purchases	2						ld Subtract line				
3 Cost of labor	3			(	6 from	line 5 Er	iter here and in				
4a Additional section 263A c	osts			ı	Part I, lin	e 2		7			
(attach schedule)	4a						section 263A (w	ith re	espect to	Yes	No
<b>b</b> Other costs (attach schedu	ıle) . 4b			,	property	produced	or acquired for	resa	le) apply		
5 Total. Add lines 1 through				t	to the org	ganization?	<u> </u>		<u> </u>		Х
Schedule C - Rent Income	e (From Real P	roperty a	nd Perso	nal P	roperty	y Leased V	Vith Real Proper	ty)			
(see instructions)	·								<del></del>		
1 Description of property											
(1)		<del></del>				*					
(2)											
(3)											
(4)											
	2 Rent recei	ved or accrue	ed				_				
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)  (b) From real percentage of rei 50% or if the rei			age of rent fo	or perso	nal proper	perty exceeds in columns 2(a) and 2(b) (attach scheen				me	
(1)											
(2)											
(3)									·		
(4)											
Total		Total					(b) Takal dadaia				
(c) Total income Add totals of c	• • •						(b) Total deductio Enter here and on Part I, line 6, colur	page 1			
here and on page 1, Part I, line 6 Schedule E - Unrelated D			e instruct	ions)			Fait i, line 0, coldi	iii (D)			
Onioudio 2					o from or	3 1	Deductions directly cor			e to	
1 Description of de	bt-financed property			Gross income from or cable to debt-financed		(a) Straig	debt-financ	<del></del>		tions	
			p	property	′		ich schedule)	(b) Other deductions (attach schedule)			
(1)											
(2)											
(3)											
(4)											
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5 Average adjusted basis of or allocable to debt-financed property (attach schedule)		4	Colum divided column	d		: income renortable →		8 Allocable deductions column 6 x total of columns 3(a) and 3(b))			
(1)					%	6					
(2)					%	6					
(3)					%	6					
(4)					%	6					
							re and on page 1, ne 7, column (A)		r here and or t I, line 7, colu		
Totals					<b>&gt;</b>	·					

Schedule F - Interest, Anni	· ·			ntrolled Or			· · · · · · · · · · · · · · · · · ·			
Name of controlled organization	2 Employer identification numb	per j	Net unrela loss) (see ir		1	of specifie	d included			6 Deductions directly connected with income in column 5
(1)				<del></del>	<u> </u>					
(2)					<u> </u>					
(3)					ļ					
(4)					<u> </u>					
Nonexempt Controlled Organi	zations					<del>,</del>				
7 Taxable Income	8 Net unrelated in (loss) (see instruc	-		otal of specifi		ınclu	art of column ded in the co zation's gros	ntrolling		Deductions directly nected with income in column 10
(1)										
(2)										
(3)	·						·			
(4)										
Totals						Part	here and on I, line 8, colu	mn (A)		ler here and on page 1, rt I, line 8, column (B)
1 Description of income	2 Amount of	fincome		3 Dedu- directly co (attach sc	nnected			t-asides schedule)		5 Total deductions and set-asides (col 3 plus col 4)
(1)			<u> </u>							
(2)									$\rightarrow$	
(3)										
(4)	Enter here and									Enter here and on page 1
Totals ▶ Schedule I - Exploited Exc	Part I, line 9, c		other Th	an Advert	ising In	come	(see instru	ictions)		Part I, line 9, column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	, dire connec produc unre	from user the duction of duction		If a gain, compute		5 Gross income from activity that is not unrelated business income  6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
· (1)		·			′					
(2)										- '
(3)										
(4)								<del></del>		
	Enter here and on page 1, Part I, line 10, col (A)	Enter her page 1 line 10,	, Part I,					•		Enter here and on page 1, Part II, line 26
Schedule J - Advertising Ir  Part I Income From Per			Consoli	dated Ba	sis	<del></del>				
1 Name of periodical	2 Gross advertising income		ırect	4 Adver gain or (lo 2 minus c a gain, co cols 5 thr	tising ss) (col ol 3) If ompute		rculation come	6 Reade cost	-	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				<del></del>						1,
(2)	<del> </del>			1	,			<del> </del>		<b>-</b> ''
	<del>- </del>			{				<del></del>		$\dashv$
				l						
(3)										$\dashv$
(3)		<u> </u>					,			
(3)										_

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

Name of periodical	2. Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)		,		Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

Form 990-T (2017)

# Form 4626

Department of the Treasury

**Alternative Minimum Tax - Corporations** 

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

2017

Employer identification number 58-0566205 MOREHOUSE COLLEGE Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e) 42,042 1 Taxable income or (loss) before net operating loss deduction . . . . . . . . . 1 2 Adjustments and preferences: 2a b 2c С d 2e е 2f f 2g 2h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) . . . . . . . 2i Tax shelter farm activities (personal service corporations only)................. 2; Passive activities (closely held corporations and personal service corporations only) . . . . . . . i 2k Loss limitations 21 2m 2n 20 42,042 `3 3 Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 20 . . . . . . . Adjusted current earnings (ACE) adjustment: 42,042 4a ACE from line 10 of the ACE worksheet in the instructions. . . . . . . . . . Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference 4b Multiply line 4b by 75% (0 75) Enter the result as a positive amount . . . Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments See instructions Note: You must enter an 4d ACE adjustment If line 4b is zero or more, enter the amount from line 4c 4e • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount Combine lines 3 and 4e If zero or less, stop here, the corporation does not owe any AMT...... 5 42,042 5 6 37,838 6 7 Alternative minimum taxable income. Subtract line 6 from line 5 If the corporation held a residual 7 4,204 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c) Subtract \$150,000 from line 7 If completing this line for a member of a Exemption Subtract line 8b from \$40,000 If completing this line for a member of a controlled group, 40,000 8c NONE 9 9 10 10 11 Alternative minimum tax foreign tax credit (AMTFTC) See instructions . . . . . . . . . . 11 12 12 13 13 Alternative minimum tax. Subtract line 13 from line 12 If zero or less, enter -0- Enter here and on 14 Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return . . . . 14 NONE Form 4626 (2017) For Paperwork Reduction Act Notice, see separate instructions.

# Adjusted Current Earnings (ACE) Worksheet

See ACE Worksheet Instructions

1		Pre-adjustment AMTI Enter the amount from line 3 of Form 4626	1	42,042
2		ACE depreciation adjustment		•
_	а	AMT depreciation		
		ACE depreciation		
	_	(1) Post-1993 property		
		(2) Post-1989, pre-1994 property		
		1		
		(4) Pre-1990 original ACRS property 2b(4)		
		(5) Property described in sections 168(f)(1) through		
		(4)		
		(6) Other property		
		(7) Total ACE depreciation Add lines 2b(1) through 2b(6) [2b(7)]		
	С	ACE depreciation adjustment Subtract line 2b(7) from line 2a	2c	
3		Inclusion in ACE of items included in earnings and profits (E&P)		
		Tax-exempt interest income		
	b	Death benefits from life insurance contracts , , , , ,		
	С	All other distributions from life insurance contracts (including surrenders) 3c		
		Inside buildup of undistributed income in life insurance contracts		1
	е	Other items (see Regulations sections 1 56(g)-1(c)(6)(iii) through (ix) for a partial		
		list)		•
	f	Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e	3f	
4		Disallowance of items not deductible from E&P		
	а	Certain dividends received		
	b	Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as affected by P.L. 113-295, Div. A, section 221(a)(41)(A), Dec. 19, 2014,		
		128 Stat 4043)		
	С	Dividends paid to an ESOP that are deductible under section 404(k), 4c		
	d	Nonpatronage dividends that are paid and deductible under section 1382(c) 4d		•
	е	Other items (see Regulations sections 1 56(g)-1(d)(3)(i) and (ii) for a partial list) 4e		
	_		4.5	
	f	Total increase to ACE because of disallowance of items not deductible from E&P Add lines 4a through 4e	4f	
5		Other adjustments based on rules for figuring E&P		
		Intangible drilling costs		
	b	Circulation expenditures		
	С	Organizational expenditures , , , , , , , , , , , , , , , , , , ,		
	d	LIFO inventory adjustments		
	е	Installment sales		
		Total other E&P adjustments Combine lines 5a through 5e	5f	
6		Disallowance of loss on exchange of debt pools	6	
7		Acquisition expenses of life insurance companies for qualified foreign contracts	7	
8		Depletion , ,	8	
9		Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property	9	
10		Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9 Enter the result here and on line 4a of		
		Form 4626	10	42,042

ATTACHMENT	1	

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

FLOW THROUGH FROM PARTNERSHIPS

17,983.

INCOME (LOSS) FROM PARTNERSHIPS

17,983.

ATTACHMENT 2

PART I - LINE 12 - OTHER INCOME

UBTI FROM QUALIFIED TRANSPORTATION FRINGE BENEFITS

PART I - LINE 12 - OTHER INCOME

31,664.

31,664.

ATTACHMENT 3

## FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

PROFESSIONAL FEES

3,500.

PART II - LINE 28 - OTHER DEDUCTIONS

3,500.

MOREHOUSE COLLEGE EIN: 58-0566205

FORM 990-T, PART II, LINE 31 - NET OPERATING LOSS CARRYFORWARD

### NOL SCHEDULE

YEAR GENERATED	AMOUNT
GENERATED 6/30/2006	16,853
GENERATED 6/30/2007	1,937
GENERATED 6/30/2008	24,742
GENERATED 6/30/2009	58,111
GENERATED 6/30/2010	63,046
GENERATED 6/30/2011	177,684
GENERATED 6/30/2012	201,162
GENERATED 6/30/2013	103,621
GENERATED 6/30/2014	43,895
GENERATED 6/30/2015	45,481
GENERATED 6/30/2016	148,313
GENERATED 6/30/2017	55,352
UTILIZED 6/30/2018	(42,042)
CHARITABLE CONTRIBUTION CONVERTED TO NOL	282
NOL AVAILABLE IN 6/30/2019	898,437
	=======================================

FORM 4626, PART I, LINE 6 - AMT NET OPERATING LOSS

\_\_\_\_\_

#### AMT NOL SCHEDULE

1

YEAR GENERATED	AMOUNT
GENERATED 6/30/2006	16,853
GENERATED 6/30/2007	1,937
GENERATED 6/30/2008	24,742
GENERATED 6/30/2009	55,724
GENERATED 6/30/2010	61,228
GENERATED 6/30/2011	178,394
GENERATED 6/30/2012	201,344
GENERATED 6/30/2013	103,621
GENERATED 6/30/2014	43,895
GENERATED 6/30/2015	45,481
GENERATED 6/30/2016 .	148,313
GENERATED 6/30/2017	55,352
UTILIZED 6/30/2018	(37,838)
AMT NOL AVAILABLE IN 6/30/2019	899,046
i	

ATTACHMENT 4

### FORM 990-T, PART II, LINE 20 - CHARITABLE CONTRIBUTIONS

\_\_\_\_\_

#### CHARITABLE CONTRIBUTION CARRYFORWARD

YEAR GENERATED	AMOUNT
GENERATED 6/30/2013	183
GENERATED 6/30/2014	50
GENERATED 6/30/2015	14
GENERATED 6/30/2016 '	10
GENERATED 6/30/2017	17
GENERATED 6/30/2018	8
CHARITABLE DEDUCTION AVAILABLE 6/30/2018	282
AMOUNT UTILIZED	-
AMOUNT CONVERTED TO NOL	282
CHARITABLE DEDUCTION AVAILABLE 6/30/2019	NONE
===	