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Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Unrelated business taxable income. Subtract line 31 from line 30 Line leductions. Subtract line 31 from line 30 Excess readership costs (Schedule J) 22	Depreciation (attach		,			21	81.785.	20	
Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Unrelated business taxable income. Subtract line 31 from line 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Jurielated business taxable income. Subtract line 31 from line 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Jurielated business taxable income. Subtract line 31 from line 30	#32 Less depreciation cla		7				<u> </u>	22h	81.785.
Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 28 389,643. 29 686,041. 30 -201,003. 31 Unrelated business taxable income. Subtract line 31 from line 30	U23 Depletion	/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(===]			
Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 28 389,643. 29 686,041. 30 -201,003. 31 Unrelated business taxable income. Subtract line 31 from line 30	Contributions to defe	erregi co	mpensation plans					-	
Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 28 389,643. 29 686,041. 30 -201,003. 31 Unrelated business taxable income. Subtract line 31 from line 30	Employee benefit pro	,	•					25	38,976.
Other deductions (attach schedule) Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 28 389,643. 29 686,041. 30 -201,003. 31 Unrelated business taxable income. Subtract line 31 from line 30	Excess exempt expe		chedule I)						
Total deductions. Add lines 14 through 28 Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 78 686,041. 30 -201,003. 31 Unrelated business taxable income. Subtract line 31 from line 30								27	
Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 30 -201, 003. 31 -201, 003.						SEE STAT			
Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 31 32 31 32 -201, 003.	/						do		
32 Unrelated business taxable income. Subtract line 31 from line 30 31 32 -201, 003.	/							$\overline{}$	-201,003.
,	· /	_		tter Janua	ry 1, 20	18 (see instructions)	21		201 003
	,			one -			ال	25مر	

Form 990-7	#018) OAKWOOD UNIVERSITY	63-036	6652	Page 2
Part I				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	93	-201,003.
34	Amounts and for displayed friends	. 1.	34	
35	· · · · · · · · · · · · · · · · · · ·	TMT 3	35	0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	77	T	
30	lines 33 and 34	- 1	a	-201,003.
07		~\&\\\	37	1,000.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	0 24	-	2,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, lenter the smaller of zero or line 36	11 39		-201,003.
Don't P	/ Tax Computation	V	1 30	201,003.
			/89	0.
	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)		/03	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:	_	$[A_n]$	
	Tax rate schedule or Schedule D (Form 1041)	💍	1.	
41	Proxy tax. See instructions		1-11-	
42	Alternative minimum tax (trusts only)	•	148	
43	Tax on Honcompliant Facility Income. See instructions		43	
	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	· · · · · · · · · · · · · · · · · · ·	44	0.
Part \			, ,	-
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	 	4	
b	Other credits (see instructions)		4 1	
C	General business credit. Attach Form 3800		∤ '	
đ	Credit for prior year minimum tax (attach Form 8801 or 8827)		1	
е	Total credits. Add lines 45a through 45d		45e	
46	Subtract line 45e from fine 44		48	0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other	(attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)		48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	0.
	Payments: A 2017 overpayment credited to 2018			
	2018 estimated tax payments		1	
	Tax deposited with Form 8868		1	
	Foreign organizations: Tax paid or withheld at source (see instructions) 50d		1	
	Backup withholding (see instructions)		1	
	Credit for small employer health insurance premiums (attach Form 8941)	·	1	
			†	
9	Other credits, adjustments, and payments: Form 2439 Form 4136 Other Total 500			
√			1 .	
51	Total payments. Add lines 50a through 50g		52	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		53	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	•		17.170 to 10.00 at 17.170 page 10.00
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		54	
55		funded >	56	
	Statements Regarding Certain Activities and Other Information (see instru			
56 I	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authori			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here >			_ <u>X</u>
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	reign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.			
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$			
	Under panalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the correct, and complete Declaration of preparer (office than taxpoyer) is based on all information of which preparer has any knowledge.	best of my knowle	dgo and belief,	it ıs true,
Sign			av the IRS disc	uss this return with
Here	Harl Coldwell 7/15/20 CONTROLLER		e preparer sho	
	Signature of officer Date Title	In	structions)?	X Yes No
	Print/Type preparer's name Preparer's signature Date	Check	f PTIN	
Date:	MONTY S. WAITES, Mat & Water, CA	self- employed		
Paid	1 5 U 107/15/201		P00	438717
Prepa	DISTANCE INDOCES WINDERS CO. ILC	Firm's EIN		3731278
Use (P O BOX 530095		z	
	Firm s address ► BIRMINGHAM, AL 35253-0095	Phone no. (205)	871-9973
823711 01		1		m 990-T (2018)
043/11 01	THE			· (£010)

Schedule A - Cost of Goods	s Sold. Enter meth	nod of inventory v	aluation > COS	T		
1 Inventory at beginning of year		4 00 6	Inventory at end of year	ar		6 0.
2 Purchases	2 13	8,658. 7	Cost of goods sold. Si	ubtract I	ine 6	
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,	
4 a Additional section 263A costs			line 2			7 139,694.
(attach schedule)	4a	8	Do the rules of section	263A (v	with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to	
5 Total. Add lines 1 through 4b		9,694.	the organization?			X
Schedule C - Rent Income ((From Real Prop	perty and Per	sonal Property L	.ease	d With Real Prope	rty)
(see instructions)				-		
Description of property						
(1)						
(2)						
(3)						
_(4)	<u>. </u>				·	
	2. Rent received or a				3(a) Deductions directly c	onnected with the income in
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	of rent for personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ge	columns 2(a) and	2(b) (attach schedule)
(1)						
(2)			<u> </u>			
(3)						
(4)						
Total	O . Total	<u> </u>		0.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		•		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Deb	t-Financed Inc	ome (see instru	ctions)			
			. Gross income from		 Deductions directly conne to debt-financed 	
1. Description of debt-fir	nanced property	_	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)						
(2)						
(3)	<u> </u>					
(4)						
Amount of average acquisition debt on or allocable to debt-inanced property (attach schedule)	5. Average adjust of or allocab debt-financed p (attach sched	le to roperty	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%			
(2)			%			
(3)			%			
(4)			%			
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions	icluded in column 8		•		•	0.
						Form 990-T (2018)

4. Advertising gain or (loss) (col 2 minus 1. Name of periodical advertising advertising costs col 3) If a gain, compute ıncome costs column 5, but not more income cols 5 through 7 than column 4) (1) (2) (3) (4) Totals (carry to Part II, line (5)) 0. 0.

Form 990-T (2018)

Total. Enter here and on page 1, Part II, line 14

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) 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 2. Gross advertising income 5. Circulation 6. Readership 3. Direct 1. Name of periodical advertising costs (1) (2) (3) (4) ▶ 0. 0. 0. Totals from Part I Enter here and on page 1, Part II line 27 Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) 0 0. 0. Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business Compensation attributable to unrelated business 2 Title 1. Name % (1) % (2) % (3) (4) %

Form 990-T (2018)

0.

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

HEALTH FOODS, LITERATURE & FARM PRODUCTION

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
TRAVEL		1,969.
POSTAGE		25.
UTILITIES	•	25,991.
COMMISSIONS		213,690.
DUPLICATING & PRINTING		1,614.
OFFICE SUPPLIES		715.
MISCELLANEOUS		4,128.
ROYALTIES & FRANCHISE FEES		62,486.
BANK CHARGES		4,820.
INSURANCE .		12,725.
RENT		61,146.
ADVERTISING		334.
TOTAL TO FORM 990-T, PAGE 1, LIN	NE 28	389,643.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 3		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR		
06/30/02	13,368.	13,368.	0.	0.		
06/30/03	10,787.	10,787.	0.	0.		
06/30/04	172,060.	29,255.	142,805.	142,805.		
06/30/05	194,470.	0.	194,470.	194,470.		
06/30/06	78,194.	0.	78,194.	78,194.		
06/30/07	110,944.	0.	110,944.	110,944.		
06/30/08	89,126.	0.	89,126.	89,126.		
06/30/09	81,072.	0.	81,072.	81,072.		
06/30/10	105,297.	0.	105,297.	105,297.		
06/30/11	98,765.	0.	98,765.	98,765.		
06/30/12	151,347.	0.	151,347.	151,347.		
06/30/13	133,308.	0.	133,308.	133,308.		
06/30/14	140,691.	0.	140,691.	140,691.		
06/30/15	89,043.	0.	89,043.	89,043.		
06/30/16	157,075.	0.	157,075.	157,075.		
06/30/17	58,281.	0.	58,281.	58,281.		
NOL CARRYOV	ER AVAILABLE THIS	YEAR	1,630,418.	1,630,418.		