• •	,,		•				29	8 8 8	112114504
. `	000 T	Ex	cempt Organization	Bus	siness Inc	come [*]	Tax Rețui	'n_	OMB No 1545-0687
Form	m 990-1 (and proxy tax under section 6033(e))								0040
		For cale	ndar year 2018 or other tax year begin	ning _	10/01,201	8, and endir	ng 09/30 .2	<u>1 9</u> .	2018
	Triment of the Treasury Go to www.irs.gov/Form990T for instructions and the latest information.								Open to Public Inspection for 3
Interna	Do not enter SSN numbers on this form as it may be made public if your organization is a 50 Check box if Name of organization (Check box if name changed and see instructions)								र 501(c)(3) Organizations Only असे ver identification number
^ ∟	address changed		UNIVERSITY OF ALABAI		-		9)		ees' trust, see instructions)
B Exe	B Exempt under section FOUNDATION PC								
								63-06	49108
H	or or								ted business activity code
П	408A 530(a)	1,700	PO BOX 55407					(See ins	tructions)
П	529(a) City or town, state or province, country, and ZIP or foreign postal code								
	k value of all assets		BIRMINGHAM, AL 3525	5				52	
	end of year		up exemption number (See instruct					т	
			ck organization type X 501			501(c	· · · · · · · · · · · · · · · · · ·	401(a) 1	
H _i Er	nter the number of	the orga	nization's unrelated trades or busine	sses				-	(or first) unrelated
			THERSHIP INVESTMENTS				•		than one, describe the
	st in the blank spa ade or business, th		end of the previous sentence, cor	npiete	Parts I and II, Co	ompiete a S	criedule ivi for eac	n addition	ai
			corporation a subsidiary in an affili	ated a	roup or a parent-	subsidiary c	controlled group?		▶ Yes X No
			identifying number of the parent co				oma omoo group.		
			CHAEL F HECKMAN	1	-	Telephon	e number > 20	5-731-	9600
Par	ti Unrelated	Trade o	or Business Income		(A) Inco	me	(B) Expen		(C) Net
1,a	Gross receipts or	sales					では、神経	September 1	
/ b	Less returns and allows		c Balance	-			如此。到了大学的图0	Call Sale	The state of the s
2	=	-	ule A, line 7)	2			1. 基等字 2. 1986年		Single Street St
3	•		2 from line 1c	3			AND THE STATE OF		
4a			ttach Schedule D)	4a			企业和通过的企业 市场。1999年间		
b c	•		Part II, line 17) (attach Form 4797) rusts	4b 4c			THAT WAS AND		
5			r an S corporation (attach statement)	5	-11	4,208.	ATCH %1		-114,208.
6			· · · · · · · · · · · · · · · · · · ·	6				181.77	
7			come (Schedule E)	7					
8	Interest, annuities, roy	alties, and re	nts from a controlled organization (Schedule F)	8					
9	Investment income of	a section 50	1(c)(7), (9), or (17) organization (Schedule G)	9					
10	Exploited exempt	activity ii	ncome (Schedule I)	10					
11	-		lule J)	11			.a. a To b Walden / Mil.	190 MB# 1	
12			tions, attach schedule)	12	-2/1		でも海安静は城	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	-114,208.
13	Total. Combine li	nes 3 thr	ough 12	13	ne for imitat	une on d	leductions) (Evcent fo	
Far			be directly connected with t					-xcept it	or contributions,
14/			directors, and trustees (Schedule K)					. 14	<u> </u>
15	Salaries and wage	es		1				15	
16	Repairs and main	tenance	RECEIVE	Š LA	OH-200		• • • • • • • •	16	
17	Bad debts		.					[17	
18	Interest (attach s	chedule)	(see instructions)	9.4	2020 · · · ·			18	
19	raxes and license	S						<u> 19 </u>	
20	Charitable contrib	outions (S	See instructions for limitation rules	AS (CITY: MO:	,	ATCH	2. 20	-
21	Depreciation (att	ach Fonn	4502)			21			
22			on Schedule A and elsewhere on re					22b	
23			compensation plans						
24 25			S						
26			Schedule I)						
27			chedule J)						
28			chedule)						
29			s 14 through 28						
30			le income before net operating						-114,208.
31/	Deduction for net	operatin	g loss arising in tax years beginning	ng on d	or after January 1	1, 2018 (see	e instructions) .		記述は、FATCHで3个学生
/32			e income Subtract line 31 from line	30 .	<u> , </u>		<u> </u>	1/ 32	-114,208.
For P	aperwork Reduct	ion Act N	lotice, see instructions.					`	Form 990-T (2018)

Form	990-7 (2018)			Page Z
Par	Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	_		
	instructions).	33	-114	,208.
	·	34		•
34	Amounts paid for disallowed fringes	34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see	11		
	instructions)	35		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sym			
	of lines 33 and 34	36	-114	,208.
	u i			,
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		
38	Unrelated business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36			
	enter the smaller of zero or line 36	3/8	-114	,208.
Par	IV Tax Computation	7		
		39	-	
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)	33		
40	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on	1		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40		
41	Proxy tax. See instructions	41		
42	Alternative minimum tax (trusts only)	42		
	Tax on Noncompliant Facility Income. See instructions			
43				
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		
Par	V Tax and Payments			
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	, T		-
	Other credits (see instructions)			
		.		
	General business credit Attach Form 3800 (see instructions)	.		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 45a through 45d	45e		
46	Subtract line 45e from line 44	46		
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47		-
				0.
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		
50 a	Payments A 2017 overpayment credited to 2018			
	2018 estimated tax payments			
	Tax deposited with Form 8868			
	Foreign organizations Tax paid or withheld at source (see instructions)			
	Backup withholding (see instructions)	.		
f	Credit for small employer health insurance premiums (attach Form 8941) 50f			
	Other credits, adjustments, and payments Form 2439			
9				
		امعا		
51	Total payments. Add lines 50a through 50g	51		
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54		
55	Enter the amount of line 54 you want Credited to 2019 estimated tax			
Par				
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or	other au	thority Ye	s No
	over a financial account (bank, secunties, or other) in a foreign country? If "Yes," the organization ma	y have	o file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreian c	ountry	ļ
		J	' ·	x
	here		— ⊢	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	gn 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 ▶ \$		1	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bit	est of my k	nowledge and	belief, it is
Cia-	true correct and complete. Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge			
Sigr		y the IRS	discuss this	s return
Her			parer shown	below
	Signature of officer Date Title (see	nstructions)	? X Yes	No
	Print/Type preparer's name Preparer's synature Date Check	, I I I	PTIN	
Paid	TRAVIS L PATTON 8/11/2020 Self-el	mployed	P00369	623
Prep	arer paragrammayong and the		3-400832	
	Pilm's name PIRICEWATERIOUSECOULERS LEI			
	Firm's address ▶ 600 13TH STREET NW, SUITE 1000, WASHINGTON, DC 20005	no 202-	-414-100	
	· · · · · · · · · · · · · · · · · · ·		Form 990-	T (2018)

Form 990-T (2018)							Page 3	
Schedule A - Cost of Go	ods Sold	. Enter method	of inventory	valuation 1	>			
1 Inventory at beginning of ye	ar . 1		6	Inventory a	at end of yea	ar	6	
2 Purchases	2		7			ld. Subtract line	T	
3 Cost of labor	3			6 from I	ine 5 En	ter here and in	<u> </u>	
4a Additional section 263A cos	sts			Part I, line	2		7	
(attach schedule)	4a		8	Do the	rules of	section 263A (w	rith respect to Yes No	
b Other costs (attach schedule	e) . 4b			property	produced	or acquired for	resale) apply	
5 Total. Add lines 1 through 4				to the orga	inization?.	<u></u>	x	
Schedule C - Rent Income	(From Re	al Property a	nd Persona	Property	Leased V	Vith Real Proper	rty)	
(see instructions)								
Description of property								
(1)								
(2)								
(3)								
(4)								
	2. Rent i	eceived or accru	ed					
for personal property is more than 10% but not percentage of			age of rent for pe	and personal property (if the in columns 2(a) and 2(b) (attach schedule in sbased on profit or income)				
(1)								
(2)			-					
(3)								
(4)								
Total		Total						
(c) Total income. Add totals of co	lumns 2(a) a	nd 2(b) Enter			•	(b) Total deductio Enter here and on		
here and on page 1, Part I, line 6,						Part I, line 6, colur		
Schedule E - Unrelated De			e instructions	s)				
		<u> </u>	2. Gross inc		3 [Deductions directly cor debt-financ	nnected with or allocable to	
1. Description of debt	-financed prop	erty	allocable to d	ebt-financed	(a) Straigh	nt line depreciation	(b) Other deductions	
			prop	property		ch schedule)	(attach schedule)	
(1)								
(2)								
(3)								
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property in schedule)	6. Col 4 divi by colu	ded		income reportable n 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						re and on page 1, ne 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)	
Totals	ons included	ın column 8		⊳ l				

Schedule F-Interest, Annu	ities, Royalties	, and	Rent	s Fro	m Contro	lled Or	ganiz	atio	ons (see	instruction	ons)	
	, ,				ntrolled Or		_					
Name of controlled organization	2. Employer identification numb	er	3 Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5 Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5			
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organiz	zations											
7. Taxable Income	8. Net unrelated in (loss) (see instruc				Total of specific ayments made		inc	lude	of column d in the col ition's gross	ntrolling		Deductions directly nnected with income in column 10
(1)												
(2)												
(3)												
(4)							ļ <u>.</u>				ļ <u>.</u>	
Totals	come of a Sec	tion:	501(c	 \(7\	(9) or (17	▶ } Orga	En Pa	ter h irt 1,	olumns 5 al ere and on line 8, colur	page 1, nn (A)	En	dd columns 6 and 11 ter here and on page 1, _ art I, line 8, column (B)
1. Description of income	2. Amount of			.,,	3. Deduction directly cortain school (attach school)	tions nected		<u> </u>	4. Se	t-asides schedule)		5. Total deductions and set-asides (col 3 plus col 4)
(1)												
(2)												
(3)												
(4)												Enter here and on page 1,
Totals ▶ Schedule I – Exploited Exe	Enter here and Part I, line 9, c	olumn (/	A)	er Th		sing In	come	e (s	ee instru	ctions)		Part I, line 9, column (B)
1. Description of exploited activity	2 Gross unrelated business income from trade or business	con pro	Expense directly nected of duction in related ness inc	with of	4. Net incor from unrelat or business 2 minus co if a gain, c cols 5 thm	ed tradé (column umn 3) ompute	rade Jmn from activity that is not unrelated ute business income attributable column		able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)												
(2)												
(3)												
(4)												
	Enter here and on page 1, Part I, line 10, col (A)	pag	r here an ge 1, Pai 10, col	rt I,	. * ,				•	* . 	r -	Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J-Advertising In	ICOME (see instr	uction	s)		I		-					
				nsol	idated Bad	sis						
2 Gross 3.1		3. Direct		4. Advertising gain or (loss) (col 2 minus col 3) If		5. Circulation		6 Readership costs		7. Excess readership costs (column 6 minus column 5, but		
	ıncome				a gain, co cols 5 thr	•						not more than column 4)
(1)					٠ ،		<u> </u>					_
(2)					٠.		<u> </u>					⊣ '
(3)					ļ , · · ,,		ļ			-		-
(4)					 • • • • • • • • • • • • • • • • • • •					ļ <u></u>		
Totals (carry to Part II, line (5))												Form 990-T (2018

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.)

1. Name of penodical	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 ▶			1 20 1	r · · · · · · · · · · · · · · · · · · ·		
Table Badlidera (5)	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			The state of the s	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	Compensation attributable to unrelated business
1)		%	
2)		%	
3)		%	
4)		%	
otal. Enter here and on page 1, Part II, line 14			

Form 990-T (2018)

63-0649108

ATTACHMENT 1

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

UNRELATED BUSINESS TAXABLE INCOME FROM PASS-THROUGH INVESTMENT PARTNERSHIPS -114,208.

INCOME (LOSS) FROM PARTNERSHIPS

-114,208.

FORM 990-T: PART II, LINE 20 - CHARITABLE CONTRIBUTION CARRYFORWARD SCHEDULE

				CONVERTED	
		AMOUNT	AMOUNT	TO NOL	CARRYOVER TO
FY	Ending	AVAILABLE	UTILIZED	CARRYOVER	NEXT YEAR
	09/30/2019	30	-	_	30
	NOL	Carryforward	Available as of	5 09/30/2020	30

FORM 990-T: PART II, LINE 31 - NOL CARRYFORWARD SCHEDULE

Taxable

	Income	NOL	NOL	LOSS
FY Ending	before NOL	Incurred	Utilized	CARRYFORWARD
09/30/2019	-	(114,208)	_	(114,208)
N	OL Carryforward	Available as of	E 09/30/2020	(114,208)