For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2018)

Unrelated business taxable income. Subtract line 31 from line 30.

Form	m 990-T (2018)				Page
Par	art III , Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or b	iusinesses (see			
	instructions)		33		
34	Amounts paid for disallowed fringes	. [34		
35	Deduction for net operating loss arising in tax years beginning before January	1, 2018 (see			
	instructions)		35		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35	from the sum			
	of lines 33 and 34		36		
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	<i>.</i> [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		38		0
Par	art IV Tax Computation				
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)		39		
40	Trusts Taxable at Trust Rates. See instructions for tax computation Incompared in the computation of the com	ome tax on			
	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		
43	Tax on Noncompliant Facility Income. See instructions	F	43		
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	[44		
Par	art V Tax and Payments				
45 a	a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a				
	b Other credits (see instructions)				
	c General business credit Attach Form 3800 (see instructions)				
	d Credit for prior year minimum tax (attach Form 8801 or 8827)				
	e 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		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		
	a Payments A 2017 overpayment credited to 2018				
	b 2018 estimated tax payments				
	c Tax deposited with Form 8868				
	d Foreign organizations Tax paid or withheld at source (see instructions) 50d				
	e Backup withholding (see instructions)				
	f Credit for small employer health insurance premiums (attach Form 8941)				
	g Other credits, adjustments, and payments Form 2439				
_	☐ Form 4136 ☐ Other ☐ Total ► 50g				
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	Refunded -	55		
Par	Statements Regarding Certain Activities and Other Information	(see instructions			
56	At any time during the 2018 calendar year, did the organization have an interest in or	•		Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the	organization ma	y have to file	,	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the	name of the	foreign country	,	
	here >				Х
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	insferor to, a foreig	an trust?	. [Х
	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 penalties of perjury I declare that I have examined this return, including accompanying schedules and state		est of my knowledg	e and bel	ief, it
Sign	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has a		15- 100 :		
Her		J Office May	y the IRS discus		
	Signature of officer Date Title	(see	instructions)? X	_	No
	Print/Type preparer's name Preparer's signature Date	Check	If PTIN		
Paid	DRIAN D TODD PARTY DAME (THE 2/6/2	self-er		42260	1
	eparer BKD, IJ.P	Firm's	44 27		
use	e Only Fundame ▶ 910 E ST LOUIS #200/PO BOX 1190, SPRINGFIELD, MO 658		417 865		

JSA

Form **990-T** (2018)

47-0950622

	0-T (2018)										F	age 3
Sched	iule A - Cost of Go	ods Sold. En	ter method	d of invent	ory v	valuation	>		,			
1 In	ventory at beginning of ye	ear . 1			6	Inventory	at end of yea	ar	6			
2 Pt	urchases	2			7	Cost of	goods so	ld. Subtract line				
3 C	ost of labor	3				6 from	line 5 En	ter here and in	•			
4a A	dditional section 263A co	sts				Part I, line	2		_ 7			
(a	ittach schedule)	. 4a			8	Do the	rules of	section 263A (w	ith r	espect to	Yes	No
b 0	ther costs (attach schedul	e) . 4b				property	produced	or acquired for	resa	ie) apply		
	otal Add lines 1 through					to the orga	anızatıon?	<u> </u>		<u> </u>		
Sched	lule C - Rent Income	(From Real P	roperty a	nd Perso	nal	Property	Leased V	Vith Real Proper	ty)			
(see	instructions)											
1 Desc	ription of property											
(1)												
(2)												
(3)												
(4)												
		2 Rent recei	ved or accrue	ed								
	om personal property (if the p personal property is more tha more than 50%)		percenta	age of rent fo	or pers	onal property sonal property ed on profit or	exceeds	3(a) Deductions di in columns 2(a				ome
(1)												
(2)		<u> </u>										
(3)												
(4)												
Total			Total			·			-			
	I income Add totals of co	., .	•					(b) Total deductio Enter here and on Part I, line 6, colun	page 1			
Sched	ule E - Unrelated De	ebt-Financed I	ncome (se	e instruct	ions))						
	1 Description of deb	t-financed property		1		me from or bt-financed		Deductions directly con debt-finance	ed prop	erty		
				P	roper	ty		nt line depreciation ich schedule)		(b) Other dedu attach sched)		
(1)							·			-		
(2)												
(3)												
(4)												
4 Amount of average adjusted basis acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule)			ble to property	4	Colui dividi coluin	ed	income reportable n 2 x column 6)		Allocable dec umn 6 x total o 3(a) and 3(of colum		
(1)						%						
(2)						%					-	
(3)						%						
(4)						%						
Totals								re and on page 1, ne 7, column (A)	Ente Par	er here and c t I, line 7, col	n page umn (E	e 1, 3)
	vidends-received deducti								_			

Form **990-T** (2018)

Schedule F-Interest, Annu	inies, royune			ntrolled Org			utions (se	oc motractic	31137		
1 Name of controlled organization	identification number 3 Net unrelated income 4 Total of specified incl		fied include	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)	-4									<u> </u>	
Nonexempt Controlled Organiz		<u> </u>					Part of colun	an G that is	44	Deductions directly	
7 Taxable Income	8 Net unrelated ii (loss) (see instruc			otal of specific		Inc	luded in the	controlling		nected with income in column 10	
(1)											
(2)											
(3)									<u> </u>		
(4)							dd columns 5		<u> </u>	id columns 6 and 11	
Totals	come of a Sec		:)(7),	(9), or (17				structions)	Pa	rt I, line 8, column (B)	
1 Description of income (1)	2 Amount of	f income	<u> </u>	directly cor (attach sch			4 Set-asides (attach schedule)			and set-asides (col 3 plus col 4)	
(2)			 -								
(3)		-	+				•				
(4)											
Totals ▶ Schedule I – Exploited Exe	Enter here and Part I, line 9, c	column (A)	er Tha	an Advert	sing Ir	com	e (see inst	ructions)	ţ	Enter here and on page ? Part I, line 9, column (B)	
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelate business ind	with n of d	4 Net incor from unrelat or business 2 minus col If a gain, co cols 5 thro	ed tradé (column umn 3) ompute	from	Gross income activity that lot unrelated liness 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)								 			
	Enter here and on page 1, Part I, line 10, col (A)	page 1, Part I, page 1, Part I,				l				Enter here and on page 1, Part II, line 26	
Totals ▶ Schedule J- Advertising In	como (sos insti	uctions\		L							
Part I Income From Peri			ncc!	dated De	ric						
Part Income From Peri	logicais Report	ted on a Co	onson	dated bas	SIS	1					
1 Name of periodical	2 Gross advertising income	ng advertising co		4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		5 Circulation income		6 Read cos	•	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)								-			
(2)				· ·							
(3)											
(4)											
Totals (carry to Part II, line (5))						L	 -			Form 990-T (2018	

(4)

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

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) Part II

1 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	1	Circulation ncome	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 (8)					Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	ļ						
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr	ructions	s)		
1 Name	2	time de	rcent of evoted to iness	ed to 4 Compensation attributable to			
(1)					%		
(2)					%		
(3)							

Form **990-T** (2018)

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.

ATTACHMENT 2

NAME AND FEIN OF PARENT CORPORATION

OZARK CENTER 43-0821959