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Form 990-T	l E	EXTEI Exempt Orgai	NDED TO NOVI				ax Ret	urr		OMB No 15	645-0687
? ?		(and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning and ending							2018		
♥	10,02	Go to www.irs.gov/Form990T for instructions and the latest information.							— L		
Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).								. Or	en to Public 1(c)(3) Organ	Inspection for izations Only
A Check box if address changed	Name of organization (er identification ees' trust, se ions)	
B Exempt under section	Print	Print METAFUND CORPORATION								-1575	885
X 501(c)(3())7	or	William Street, and room of Suite no. If a r.o. box, see instructions.								id business a	ctivity code
408(e) 220(e)	Туре	2545 S. KEL	LY AVENUE,	SUIT	E F				վ ՝	•	
408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code EDMOND, OK 73013									
Book value of all assets	value of all assets F Group everyation number (See instructions.)										
at end of year	C Book value of all assets at one of year 24, 981, 885. G Check organization type ► X 501(c) corporation 501(c) trust 401										ther trust
H Enter the number of the	•	<u> </u>		1			the only (or f				
	-	E STATEMENT	· 				complete Par	•		ian one,	
		ice at the end of the previou		rts I and	i II, com						
business, then complete											
I During the tax year, was			_	nt-subsi	diary cor	trolled group?			Yes	X N	lo
		tifying number of the paren	t corporation						1405)	-0.40	0001
J The books are in care of				ī		<u> </u>			405)		0001
		de or Business Inc	ome		(A) Income	(B) Ex	pense	s	(C)	Net
1a Gross receipts or sale			Data and I h				(Tank)	• • •	; <u>,</u>	' ;	
b Less returns and allow		A line 7\	c Balance '	10			F13		1 -		4 43
	old (Schedule A, line /)								• •	·	
•								•			
	Capital gain let income fattach conecute by							٠,			
c Capital loss deduction			,	4c				- 4			
·		ship or an S corporation (at	tach statement)	5			, 3-				
6 Rent income (Schedu	le C)			6							
7 Unrelated debt-finance	ed incor	ne (Schedule E)		7							
8 Interest, annuities, roy	/alties, a	nd rents from a controlled o	organization (Schedule F)	8							
9 Investment income of	a section	on 501(c)(7), (9), or (17) or	rganization (Schedule G)	9						 	
10 Exploited exempt activ	-	` '		10							
11 Advertising income (S		•		11			12 44		_		
12 Other income (See in:		•		12		0.	.,,		-		
Part II Deductio	ns No	ot Taken Elsewher	e /See instructions fo	13 I	tions or				J		
(Except for d	contribu	utions, deductions must	be directly connected	l with the	ne umrei	ated pusiness	income				
		rectors, and trustees (Sche				KECE			14		
15 Salaries and wages			,		ြစ		• • • • • •	18	15		
16 Repairs and mainten	ance				C246	NOV 🕊	8 2019	191	16		
17 Bad debts	es and wages rs and maintenance ebts							18	17		
18 Interest (attach sche	rest (attach schedule) (see instructions) OGDEN, UT							18			
19 Taxes and licenses	Taxes and licenses								19		
	•	e instructions for limitation	rules)						20		
21 Depreciation (attach		•				21					
•	preciation claimed on Schedule A and elsewhere on return								22b		
23 Depletion	Depletion Contributions to deferred compensation plans								23		
, ,	Excess exempt expenses (Schedule I)										
·											
·	,										0.
	·										0.
31 Deduction for net op	erating l	oss arısıng ın tax years beç	jinning on or after Januar	ry 1, 20	18 (see 11	nstructions)			31		
32 Unrelated business t	axable ır	ncome. Subtract line 31 fro	m line 30						32		0.
823701 01-09-19 LHA FO	r Paper	work Reduction Act Notice	, see instructions.							Form 99 6	0-T (2018)

Form 990-1	(2018) METAFUND CORPORATION 73-1575	5885		Page 2					
Part I									
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33		0.					
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									
•	lines 33 and 34	36							
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	38		0.					
Part I									
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		0.					
40	Trusts Taxable at Trust Rates. See instructions for tax computation, income 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	43							
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		<u>0.</u>					
Part \	Tax and Payments								
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a								
b	Other credits (see instructions) 45b								
C	General business credit. Attach Form 3800 45c								
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		<u>0.</u>					
47	Other taxes Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (ettach 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.					
50 a	Payments: A 2017 overpayment credited to 2018 50a 398.								
b	2018 estimated tax payments 50b								
C	Tax deposited with Form 8868								
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d								
е	Backup withholding (see instructions) 50e								
f	Credit for small employer health insurance premiums (attach Form 8941) 50f								
g	Other credits, adjustments, and payments: Form 2439								
	Form 4136 Other Total ▶ 50g	i							
51	Total payments. Add lines 50a through 50g	51	35	<u> 8.</u>					
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		8.					
55 Dord \	Enter the amount of line 54 you want; Credited to 2019 estimated tax	55	35	8.					
Part \									
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority	ļ-	Yes	No					
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			í					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		~ -	Ţ,					
	here >	 		$\frac{x}{x}$					
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	-		<u></u>					
50	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 \$\infty\$\$ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.	e and helief it is true	1						
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge CHIEF EXECUTIVE	e and beller it is tide							
Here	Lalla / Call A OPERIORD	the IRS discuss this re		th					
		reparer shown below ructions)? X Yes		No					
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		140					
	Print/Type preparer's name Preparer's signature W. Lyndd Lackey Date Check If self- employed	PTIN							
Paid	ti tramper ta overy ti tramper ta overy 11/13/10	P002342	QQ						
Prepa	TO THE THOUSAND AND THE	73-1413		7					
Use C	Trim's name ► HOGANTAYLOR LLP Firm's EIN ► 1225 N BROADWAY AVENUE, SUITE 200	12 1412	<u> </u>						
		5-848-20	20						
		J J 10	_ ~						

Schedule A - Cost of Goods Sold.	Enter method of inver	ntory valuation N/A	 -				
1 Inventory at beginning of year 1		6 Inventory at end of year	ar	6			
2 Purchases 2		7 Cost of goods sold. S	Cost of goods sold. Subtract line 6				
3 Cost of labor 3		from line 5. Enter here	and in Part I,				
4a Additional section 263A costs		line 2	7				
(attach schedule) 4a		8 Do the rules of section	Yes No				
b Other costs (attach schedule) 4b		property produced or a					
5 Total Add lines 1 through 4b 5		the organization?					
Schedule C - Rent Income (From F (see instructions)	Real Property and	d Personal Property L	eased With Real Pro	perty)			
1. Description of property							
(1)							
(2)							
(3)							
(4)							
2 Ren	t received or accrued						
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of rent for	and personal property (if the percenta personal property exceeds 50% or if int is based on profit or income)	ge 3(a) Deductions direct columns 2(a)	lly connected with the income in and 2(b) (attach schedule)			
(1)			· · · · · · · · · · · · · · · · · · ·				
(2)							
(3)							
(4)							
Total	O . Total		0.				
(c) Total income. Add totals of columns 2(a) and 2 here and on page 1, Part I, line 6, column (A)	•		(b) Total deductions. Enter here and on page 1 Part I, line 6, column (B)	> 0.			
Schedule E - Unrelated Debt-Finan	iced Income (see	instructions)					
		2. Gross income from	 Deductions directly co to debt-fina 	nnected with or allocable nced property			
Description of debt-financed proper	irty	or allocable to debt- financed property	(8) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)			
(1)	•	1					
(2)							
(3)							
(4)							
debt on or allocable to debt-financed	Average adjusted basis of or allocable to ebt-financed property (attach schedule)	6. 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)	· · · · · · · · · · · · · · · · · · ·	%					
			Enter 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.			
Total dividends-received deductions included in c	column 8			0.			

•			Exempt	Controlled O	rganızatı	ons					
Name of controlled organizet	ident	mployer incation imber	Net unrelated income (loss) (see instructions) 4. To pay		4. Tot payr	ments made include		irt of column 4 that is ded in the controlling zation's gross income		6 Deductions directly connected with income in column 5	
(1)	-		1								
(2)											
(3)											
(4)				•				•			
lonexempt Controlled Organi	zations		Ļ		1		! <u> </u>				
7. Taxable Income	8. Net unrelated inco	ome (loss)	Q Total	of specified pay	ments	10. Part of colum	ກກ 9 tha	t is included	11 De	ductions directly connected	
<i>γ. να</i>	(see instruction		3	made	-	in the controlli	ng organ income	nization's		n income in column 10	
(1)											
(2)											
(3)				=							
(4)				-							
		·				Add colum Enter here and line 8, c	on page	1, Part I		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)	
otals					▶			0.		0	
Schedule G - Investme		Section	501(c)(7	7), (9), or (17) Org	ganization					
(see insti				1		3 Deduction	าร	4 501	a auda a	5. Total deductions	
1. Desc	ription of income			2. Amount of	income	directly connectant (attach sched		4 Set-	chedule)	and set-asides (col 3 plus col 4)	
(1)											
(2)											
(3)	•										
(4)									-	<u> </u>	
. ,				Enter here and Part I, line 9, co			'		,	Enter here and on page Part I, line 9 column (B)	
otals			•	.]	0.			-		0	
Schedule I - Exploited (see instru	= '	y Incom	e, Other	Than Adv	ertisin/	g Income					
(266 112110	T	T		T 4				T			
Description of exploited activity	2. Gross unrelated business income from trade or business	directly with pr of un	openses connected oduction related ss income	4 Net incom from unrefated business (co minus colum gain, compute through	trade or dumn 2 n 3) If a a cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6. Exp attribute colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)									-	İ	
(2)		1									
(3)				† 				· · · · · · · · · · · · · · · · · · ·			
(4)		1		 	 			-			
(*)	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I, , col (B)			, E		Į.		Enter here and on page 1 Part II line 26	
otals	0.		0.							0	
Schedule J - Advertisir	ng Income (see	instruction	ns)					•			
Part I Income From F				solidated	Basis	-					
				. <u></u>		<u> </u>		·			
1. Name of periodical	2 Gross advertising income	adv	3. Direct rertising costs		ol 2 minus ain, computi	5. Circulati income	ion	6. Reade cost		Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)										•	
(2)										·, •	
(3)				_] · .						•	
(4)										·	
			-								
otals (carry to Part II, line (5))	>	0	0							0	
										5 000 T (004	

Form 990-T (2018) METAFUND CORPORATION 73-15758 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 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	•	0.	0.			. 32	0.
		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)	▶	0.	0.				0.

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)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

FOOTNOTES

STATEMENT 1

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