Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection ► Go to www.irs.gov/Form990EZ for instructions and the latest information

2017

			-01100	<u> </u>				
	_			alendar year, or tax year beginning	7/01	, 2017, and ending	6/30	, 2018
	В		if applicable ss change	C.			D Em	iployer identification number
	ᄶ		change	Oxford School Distric	t Foundation		6	4-0729952
	H	Initial	-	P O 765			E Tei	lephone number
	H		urn/terminated	OXFORD, MS 38655			6	62-234-2935
	=		ded return				E Gr	oup Exemption
	౼		ation pending					imber •
	G	Acco	unting Met	ethod 🗓 Cash 🔲 Accrual Oth	er (specify) ►		H Check ► X	if the organization is not
	1	Webs	site: 🕨 o	oxfordsd.org				attach Schedule B
	J	Tax-ex			Ol(c)() ∢(insert no) 4947(a)(1) or 527	(Form 990,	990-EZ, or 990-PF)
	ĸ	Form	of organiza	ration Corporation Trus	t X Association	Other		
		asset	ts (Part II,	6c, and 7b to line 9 to determine gr , column (B) below) are \$500,000 c	r more, file Form 990	instead of Form 990-EZ		►\$ 46,937.
Sh	Pa	rtd		ue, Expenses, and Changes			the instructi	ons for Part I)
				the organization used Schedule O		estion in this Part I		<u> </u>
11		1	Contribut	tions, gifts, grants, and similar amo	unts received			1 44,602.
11		2	Program	service revenue including government	ent fees and contract	S		2
		3	Members	ship dues and assessments		·		3
		4	Investme	ent income.		RECE	AFD V	4 2,335.
		5 a	Gross am	mount from sale of assets other tha	n inventory	-5a	78	
		Į.		st or other basis and sales expense		15 5 1N 0 4	2019	27
		۔ ا	Gain or (Ins	ss) from sale of assets other than inventory (Subtract line 5b from line 5	1% JUII V	182	5 c
				and fundraising events	Cubitact inic ob from inic o	171		
	R	-	9	come from gaming (attach Schedul	e G if greater than \$1:	5,000) 60 GDE	N, UI	J 📜
	R E V	l		come from fundraising events (not		of contribu	tions	`
	E N U	"		draising events reported on line 1)			1,0,1,0	1 = 2
	Ü		of such g	gross income and contributions exc	eeds \$15,000)	6b		
	-	c	-	ect expenses from gaming and fun		6 c		
		<u>ہ</u> ا	Net incon	me or (loss) from gaming and fund	raising events (add lin	es 6a and	·	اخت
		"	6b and su	subtract line 6c)	alsing events (add in	ics od and		6 d
a	9	7 a	Gross sal	iles of inventory, less returns and a	llowances	7 a		
35€	Š	b	Less cos	st of goods sold		7 b		
2 3 2 13	J	c	Gross pro	ofit or (loss) from sales of inventor	(Subtract line 7b fro	m line 7a)	· .	7 c
~> ~	•	8	Other rev	venue (describe in Schedule O)				8
હ રૂ⊂	-	9	Total reve	venue. Add lines 1, 2, 3, 4, 5c, 6d,	7c, and 8		▶	9 46,937.
<u> </u>	5	10		nd şimilar amounts paid (list in Sch		See Schedu	ile O	10 40,474.
=3<	ζ	11		pâid to or for members	,		ļ	11
~ (2 E	12		other compensation, and employe	e benefits		ļ	12
်သ ပြု	ŒΫ́	13		onal fees and other payments to inc				13 402.
in 3	Z E	14		icy, rent, utilities, and maintenance		•	-	14
9	S	15	· ·	publications, postage, and shippin				15
~~i (Şs	16	•	penses (describe in Schedule O)	y	See Schedu	ıle O	16 545.
_	D	i		penses. Add lines 10 through 16			▶	17 41,421.
₹.		_		or (deficit) for the year (Subtract lin	a 17 from line 9)			18 5,516.
47	Ā	18						ξ'
7	NS EE TT	19	Net asset	ets or fund balances at beginning of	year (from line 27, co	olumn (A)) (must agree w	ith end-of-year	<u>。</u> 19 197.327.
رب		22		ported on prior year's return)	as (avalain in Sabadiil	see Schedu	ıle O	
	S	20		anges in net assets or fund balance			▶	
	_	21		ets or fund balances at end of year				21 213,688. Form 990-EZ (2017)
	· A	A FO	r raperwo	ork Reduction Act Notice, see the s	eparate instructions.			romi 330-64 (2017)

	1990-EZ (2017) Oxford School D		l	64	-072	29952 Page 2
Pai	Balance Sheets (see the inst Check if the organization used Sche	tructions for Part II)	oction in this Part II			Γ
	Check if the organization used Sche	studie O to respond to any qu		(A) Beginning of ye	ar	(B) End of year
22	Cash, savings, and investments			197,327	. 22	
23	Land and buildings		_		23	· · · · · · · · · · · · · · · · · · ·
24 25	Other assets (describe in Schedule O)			107 227	24	
26	Total assets Total liabilities (describe in Schedule O))		<u>197,327</u>		
	Net assets or fund balances (line 27 of		line 21)	197,327		· · · · · · · · · · · · · · · · · · ·
	t III S Statement of Program Service Ad	complishments (see the inst	tructions for Part III)	(3.5)	<u> </u>	Expenses
	Check if the organization used Sc		question in this Part II	ı X	ı incu	uired for section 501
What	s the organization's primary exempt purpose? See	e Schedule 0	its three largest progr	am services as) and 501(c)(4) nizations, optional
mea	ribe the organization's program service a sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi	ces provided, the nun	ber of persons		thers)
28	The Oxford School Distric					
20	school district thru requ				1	
	enhance the education of	students in severa	al different a]	
	(Grants \$ 40,474.) If th	is amount includes foreign g	rants, check here	•	28 a	947.
29				 -	-	
					-	
	(Grants \$) If th	is amount includes foreign g	rants, check here		29 a	
30	(drains \$) ii di	io difficulty intoledes for origin g	ranto, on our note			
					1	
]	
		is amount includes foreign g	rants, check here	•	30 a	
31	Other program services (describe in Sch			. □	21.	
22	(Grants \$) If th Total program service expenses (add lii	is amount includes foreign g	rants, check here		31 a	947.
	t IV# List of Officers, Directors,		Novees (list each one ex	en if not compensated		I
(r ai	Check if the organization used Sc				500 1110	
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W 2/1099 MISC) (if not paid, enter -0-)	(d) Health basel	loyee	(e) Estimated amount of other compensation
	YSON BEST		0		0.	0.
	NNON FERGUSON			•	<u> </u>	<u> </u>
	e President	2	0		0.	0.
	NA STRUM					_
	SIDENT ELECT	1	.0		0.	0.
	A LANGLEY	1	0		0.	0.
	E STILL	_		-	<u> </u>	<u> </u>
	BERSHIP CHAI	1	0		0.	0.
					_	
	·					
		·				
	· 					
					ļ	
-				 		
		·				
BAA		TEEA0812L 0	<u> </u> 8/22/17	 		Form 990-EZ (2017)

Page 2

Forn	990-EZ (2017) Oxford School District Foundation	64-072995	:2	Р	age 3
Par	t.V Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Part V) Check if the organization used Schedule O to respond to any	urements inSee Sched			
33	Did the organization engage in any significant activity not previously reported to the IRS?	'		Yes	No
	If 'Yes,' provide a detailed description of each activity in Schedule O		33		X
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the area change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	nended documents if they reflect	34		х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from bu	siness activities			
	(such as those reported on lines 2, 6a, and 7a, among others)?		35 a		Х
	off 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an ex		35 b		
(Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	n 6033(e) notice,	35 c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 3	7a 0.	7-5-3	<u>, , , , , , , , , , , , , , , , , , , </u>	<u></u>
	Did the organization file Form 1120-POL for this year?		37 b		X
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key er any such loans made in a prior year and still outstanding at the end of the tax year covered by If 'Yes,' complete Schedule L, Part II and enter the total	mployee or were this return?	38 a		X
٠		8b N/A	1	4	٠۵,
	Section 501(c)(7) organizations Enter		7:	,	"
		9a N/A	ᆔᆫ		. ,
		9b N/A	<u>\</u> !""	11	· ' &· .
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the y section 4911 • 0 section 4912 • 0 section 4955				14
h	section 4911 ► 0 , section 4912 ► 0 , section 4955 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any		*	7	
_	benefit transaction during the year, or did it engage in an excess benefit transaction in a prior	year that has not been			
,	reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations.		40 b		X
`	managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ 0.	197 9	, ,	• · ·
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimburses by the organization] .	~ 4	.
	All organizations At any time during the tax year, was the organization a party to a prohibited	• <u>0.</u>	- <u> </u>		,-`.
	shelter transaction? If 'Yes,' complete Form 8886-T	lax	40 e		Х
41	List the states with which a copy of this return is filed None				
12 a	The organization's				
72 0	books are in care of Dulie Field	Telephone no ► 662-8	01-1	796	
	Located at ► P. O. Box 765 OXFORD MS	ZIP + 4 - 38655			
b	At any time during the calendar year, did the organization have an interest in or a signature or other a	uthority over a	$\overline{}$	Yes	
	financial account in a foreign country (such as a bank account, securities account, or other final following the foreign country in a f	anciai account)?	42 b		X
	The state the hame of the foreign country		100	' -	1
			1	*,	
			1	41	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According	unts (FBAR)	1		أمشت
C	At any time during the calendar year, did the organization maintain an office outside the United	d States?	42 c		X
	If 'Yes,' enter the name of the foreign country >				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Cher	ck here		▶ □	N/A
. 💆	and enter the amount of tax-exempt interest received or accrued during the tax year	► 43			N/A
		<u> </u>		Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be colof Form 990-EZ	mpleted instead	44.		المؤند
L	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be	a completed	44 a		X
u	instead of Form 990-EZ	e completed	44 b	£	X
C	Did the organization receive any payments for indoor tanning services during the year?		44 c		X
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		44 d	2/2-	1
	p onpunation in concease c		 -u	1	i

45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45 a

45 b

Form 990-E	EZ (2017) Oxford School Distr	ict Foundation	1		64-072	9952		age 4
46 Did th	he organization engage, directly or indirectly or indirectly or indirectly or indirectly office? If 'Yes,' complete	ctly, in political campai Schedule C. Part I	ign activities o	on behalf o	f or in opposition to	46	Yes	No X
	Section 501(c)(3) organizations	only				<u> </u>		
	All section 501(c)(3) organization for lines 50 and 51.	ns must answer q	uestions 47	7-49b and	d 52, and complete	the table	es .	
	Check if the organization used Schedul	e O to respond to any	question in th	nis Part VI				
		501/5		f1 -1 1	h- 4 16 IV 1		Yes	No
	ne organization engage in lobbying activities blete Schedule C, Part II	or have a section 501(n)) election in en	rect during t	ne tax year it fes,	47		Х
•	e organization a school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' comp	plete Sche	dule E	48		X
49 a Did th	he organization make any transfers to an	exempt non-charitable	e related orga	nızatıon?		49 a		_X_
	es,' was the related organization a section	-		.,		49 b		
50 Comp emplo	plete this table for the organization's five high oyees) who each received more than \$100,00	nest compensated emplo 30 of compensation from	oyees (other than In the organizati	an officers, ion If there	directors, trustees and kins none, enter 'None.'	еу		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable o (Forms W-2/1	compensation 099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
None								
				•				
51 Comp	I number of other employees paid over \$1 plete this table for the organization's five high pensation from the organization. If there i	nest compensated indep	endent contrac	ctors who ea	ach received more than \$	100,000 of		
	(a) Name and business address of each independent or			(b) Туре	of service	(c) Com	ensatio	n
None			<u> </u>					
			1					
			1100.000					
52 Did t	I number of other independent contractors he organization complete Schedule A? No pleted Schedule A	•		ons must a	ttach a	► X Yes		No.
	es of perjury, I declare that I have examined this return, and complete Declaration of preparer (other than office	including accompanying sche	edules and statement	ents, and to the	e best of my knowledge and be			
ilde, correct, a	Mu Hund		or whiter property	nas any mon	5/14/1	#		
Sign Here	Signature of officer Julie Field				Date Treasurer			
	Type or print name and title	I December 1		Data		OTINI		
	Print/Type preparer's name	Preparer's signature		Date	Check 🛆 if	PTIN	,	
Paid	Laura M. Kinney, CPA	Laura M. Kinno	ey, CPA		self-employed]	20022675) /	
Preparer Use Only	Firm's name Firm's address Firm's Associ				Firm's EIN	64-0890	1656	
July Only	Oxford, MS 3865		•			52) 281-		
May the IF	RS discuss this return with the preparer si		ructions			► X Ye		No
						Form 99		(2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Employer identification number

Oxf		d School District E					64-072995	
Par		Reason for Public Cha						ions.
The o	orgai	nization is not a private found	dation because it is (For lines 1 through 12,	check o	nly one	box)	
1		A church, convention of church	ies, or association of ch	nurches described in sec	tion 170(b)(1)(A)(i).	
2		A school described in section 1						
3		A hospital or a cooperative h						
4		A medical research organiza name, city, and state		inction with a hospital	describe	d in sec	ction 170(b)(1)(A)(iii) E	nter the hospital's
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle		or opera	ated by	a governmental unit de	scribed in
6		A federal, state, or local gove	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(v).	
7		An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II)	art of its support from a	governm	ental un	it or from the general pub	olic described
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part	1)			
9		An agricultural research organi or university or a non-land-graiuniversity	zation described in sec nt college of agriculture	tion 170(b)(1)(A)(ix) oper (see instructions) Enter	ated in cother the nam	onjunctionie, city, a	on with a land-grant colle and state of the college o	ge r
10	_	An organization that normally r from activities related to its investment income and unre June 30, 1975 See section 9	exempt functions—sub lated business taxable	e income (less section	ons, and	(2) no i	more than 33-1/3% of it	s support from gross
11		An organization organized ar	nd operated exclusive	ly to test for public safe	ety See	section	1 509(a)(4).	
12	_	An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	d in section 509(a)(1) d	r sectio	n 509(a)(2). See section 509(a)	it the purposes of one (3). Check the box in
а		Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervised gularly appoint or elect					the supported on You must
b		Type II. A supporting organize management of the supporting must complete Part IV, Sections A.	ation supervised or coorganization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by l the supported organizati	naving control or on(s) You
С		Type III functionally integrated organization(s) (see instruction)	. A supporting organizat	ion operated in connection	n with, ar A, D, an e	nd function	onally integrated with, its	supported
d	_	Type III non-functionally integrated The constructions) You must com	organization generally	must satisfy a distribu	nection t tion requ	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
е		Check this box if the organiz	ization received a written determination from the IRS that it is a Type I, Type II, Type III functionally functionally integrated supporting organization					
f		ter the number of supported		3 . 3				1
g	Pro	ovide the following information	n about the supported	d organization(s)				
((ı) Nar	me of supported organization	(II) EIN	(III) Type of organization (described on lines 1 10 above (see instructions))	(IV) is organizat in your go docun	on listed	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
	0x	ford Public School	District	-				
(A)			64-6009582	2			40,474.	0.
(B)								
(5)								
(C)								
(D)								
(E)						<u> </u>		
Total							40.474.	0.

Schedule A (Form 990 or 990-EZ) 2017 Oxford School District Foundation 64-0729952 Page 2 Rartill Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) ► (f) Total (d) 2016 **(e)** 2017 (a) 2013 **(b)** 2014 (c) 2015 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total beginning in) Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from

	similar sources		_		
9	Net income from unrelated business activities, whether or not the business is regularly carried on				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)				
11	Total support. Add lines 7	(A)(S)(C)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)			

EXHIBITATION TO THE The second second second is a second Gross receipts from related activities, etc. (see instructions)

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)

organization, check this box and stop here	
ection C. Computation of Public Support Percentage	

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)).	14				
15	Public support percentage from 2016 Schedule A, Part II, line 14	15				

16a 33-1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

33-1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box	_
and stop here. The organization qualifies as a publicly supported organization	Ľ

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here**. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

b	10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10%
	or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the
	organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization
	Birth for the second and deather the second and the second and the second and an entered and

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

12

Rartill Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	ction A. Public Support						
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	•				,	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	,				•	
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					• _ 1	
5	The value of services or facilities furnished by a governmental unit to the organization without charge				•		
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						,
· b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	,	·		٠		
С	Add lines 7a and 7b					•	
	Public support. (Subtract line 7c from line 6)						
Sec	tion B. Total Support					,	
	dar year (or fiscal year beginning in) 🟲	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	•					
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			,		•	· · · · · · · · · · · · · · · · · · ·
•	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		A .		•		
11°	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		-	·			•
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			-			
	Total support. (Add lines 9, 10c, 11, and 12)			1			
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	→
	tion C. Computation of Pul			,			
	Public support percentage for 20		``	ne 13, column (f)).		15	
	Public support percentage from			 		16	
	tion D. Computation of Inv		<u>_</u>				
17	Investment income percentage f			=	mn (f))	17	
	Investment income percentage fi					18	<u> </u>
	33-1/3% support tests—2017. If t is not more than 33-1/3%, check	this box and stor	here. The organ	ization qualifies a	s a publicly suppo	orted organization	▶ []
	33-1/3% support tests—2016. If the line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	e organization qua	alifies as a publicl	y supported orgar	1/3%, and nization ► ☐
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, cl	neck this box and	see instructions	<u> </u>

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section . 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7° If 'Yes, complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
	****		10.00
	1	Х	A-Colombia
	<u> </u>	l	
	33.3		
	2		Х
	620205	er er	
	350 00		-
	3a		Х
	\$(P48)	September 1	
		**********	The second
	3b		
	44.5		
	3c	Carrier Marie	THE PARTY AND ADDRESS OF
		1.615	1.000 11.00
	4a		X
		W. St. Section	
		22.2	****
	4b		
-	- P. 254	CARRENTS:	******
,			
		1282	
	4c		
	W.F.		3
			33.4
		3,73	32.1
	1000		
		2 - OS	X
	5a		
	5b		
	טט		
	5c		
	2025-000	137226 E	1977.9
		3.00	
	**********	ALEXANDE.	
	6		X
	FR99		
		* * *	
	226552		2253259
	7		. X
,			
	8		Х
		365/1985	
	9a		X
	93.4X		200
1		1,000	
	9b		X
	9c		X
	2000 P	Mesession.	
, '			
	10a		_ X_
		W.	
	10b		
	. 00		

Pa	Supporting Organizations (continued)			
		- Industrial	Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		Х
	b A family member of a person described in (a) above?	11b		X
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Sec	ction B. Type I Supporting Organizations			
		Cane	Yes	No
, 1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
-		536° 540.	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	X	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		X
3	'By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		X
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
•	The organization satisfied the Activities Test Complete line 2 below			
	The organization is the parent of each of its supported organizations. Complete line 3 below			
•	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstruc	tions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	7.7	F
ĺ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	, 2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
_	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	2000	X
I	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		

	edule A (Form 990 or 990-EZ) 2017 Oxford School District Foundat:			29952	Page (
Pá	Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Type III Non-Functionally Integrated 509(a)(3)	aniza	ations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on I	Nov 20, 1970 (explain in ust complete Sections A	Part VI) See through E	В
Section A — Adjusted Net Income			(A) Prior Year	(B) Curre (optio	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3	61,028	,	46,937.
4	Add lines 1 through 3	4	61,028.		46,937.
5	Depreciation and depletion	5	, ,		
,6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7	1,298.		947.
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	59,730.		45,990.
Section B — Minimum Asset Amount			(A) Prior Year	(B) Curre (optio	
, 1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)				
	Average monthly value of securities	, 1a	171,896.	1	92,320.
t	Average monthly cash balances	1b	37,649.		24,708.
(Fair market value of other non-exempt-use assets	1c			
	i Total (add lines 1a, 1b, and 1c)	1d	209,545.	2	17,028.
	Discount claimed for blockage or other factors (explain in detail in Part VI)				
2	Acquisition indebtedness applicable to non-exempt-use assets .	2	•	-	
3	Subtract line 2 from line 1d	3	209,545.	2.	17,028.
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		-	_
<u> 5 </u>	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	209,545.	2	17,028.
6	Multiply line 5 by 035	6	7,334.		7,596.
7 ,	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8	7,334.		7,596.
Section C — Distributable Amount		٠.		Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		!	59,730.
• 2	Enter 85% of line 1	2			50,771.
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	·3			7,334.
4	Enter greater of line 2 or line 3	4			50,771.
5	Income tax imposed in prior year	5	**************************************		0.
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		!	50,771.

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions) BAA

Schedule A (Form 990 or 990-EZ) 2017

	riving Type III Non-Functionally Integrated 509(a)(3) Su			29952 rage /
4. 7	tion D — Distributions	apporting Organiza	tions (continued)	Current Year
1		40,474.		
	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	19,111		
	Administrative expenses paid to accomplish exempt purposes of si	upported organizations		947.
4				
5				
6				
7	Total annual distributions. Add lines 1 through 6	41,421.		
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions			
9	Distributable amount for 2017 from Section C, line 6	50,771.		
10	Line 8 amount divided by line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			50 <u>,</u> 771.
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI) See instructions	The second of th	,	magananda pagapanga kar
	Excess distributions carryover, if any, to 2017			
á				
L	From 2013			
	From 2014			
	From 2015			
	From 2016 10, 956.			
	f Total of lines 3a through e	10,956.	3.3	
Ć	Applied to underdistributions of prior years			10 (12)
H	Applied to 2017 distributable amount		4.2	10,956.
	i Carryover from 2012 not applied (see instructions)		200	
	j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D, line 7 \$ 41,421.			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			39,815.
	Remainder Subtract lines 4a and 4b from 4	1,606.		
5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions	And the second s		
6	Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2018. Add lines 3j and 4c	1,606.		
8			77	
	Excess from 2013			
	Excess from 2014			Visit in the second
	Excess from 2015			
	Excess from 2016			AL SERVICE SERVICE
	Excess from 2017 1,606.			77 X X X X
	· · · · · · · · · · · · · · · · · · ·			

BAA

Schedule A (Form 990 or 990-EZ) 2017

٠.

64-0729952

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part IV, Section D, Line 2 - Organization Maintained A Relationship with Supported Orgs.

The Oxford School District Foundation works closely with the leadership and teachers in the school district, receiving grant applications from teachers for items needed in the classroom to enhance the education of the students.

Part V, Section D, Line 6 - Other Distributions

Unrealized gains and losses of \$10,956.00 and Investment expenses of \$111.49

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2017

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Oxford School District Foundation

Employer identification number

64-0729952

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid In Excess of \$5,000

Donee's Name:
Donee's Address:

Oxford Public School District

Bramlett Blvd

Oxford MS 38655 40,474.

Book Value:

Fair Market Value:

\$ 40,474.

Form 990-EZ, Part I, Line 16 Other Expenses

Supplies

\$ 545. Total \$ 545.

Form 990-EZ, Part I, Line 20 Other Changes In Net Assets Or Fund Balances

Investment Expenses Net Unrealized Gains and Losses on Investments

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

The Oxford School District Foundation Inc., established in June 1986, is an organization of individuals, families and businesses in the community dedicated to assisting and enhancing education in the Oxford School District. OSDF is led by a board of directors elected by the membership.

It was formed in order to supplement, aid and improve education in the schools.

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No