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٠,
G T.
2020

	000 T		Exempt Organization Busin	ness	Income Tax	Retur	n.	OME	3 No 1545-06	687
Form	990-T		(and proxy tax under			190		_		
		ļ				1 1	ا قر	2	2018	}
		For cale	ndar year 2018 or other tax year beginning Jun					_		
	nent of the Treasury Revenue Service		► Go to www.irs.gov/Form990T for instr				4/=\/0\	Open to	Public Inspec Organization	tion for
		► D0	not enter SSN numbers on this form as it may b			ation is a 50				
$A \square$	Check box if address changed]	Name of organization (hanged	and see instructions)				ntification nu	
	pt under section	Print	Bradley University				(Empi	oyees ar	ıst, see ınstruc	cuons)
<u>√</u> 5	01(C <u>)</u>	or	Number, street, and room or suite no. If a P.O. bo	x, see ir	structions.				661494	
<u></u>		Туре	1501 W Bradley Avenue					ated busi nstruction	ness activity	code
□ 40	08A 🔲 530(a)		City or town, state or province, country, and ZIP of	or foreigi	n postal code		, 550,	i i su u cuo	13)	
	29(a)		Peoria, IL 61625				<u></u>	722	2310	
C Book at en	yalue of all assets		oup exemption number (See instructions							
			neck organization type 🕨 🔽 501(c) cor			ust _] 401(a)	trust	Other	trust
H Er	iter the number	of the o	organization's unrelated trades or busines	sses.	44	_ Describ	e the on	ly (or fi	rst) unrelat	ted
			Limited Partnership Income							
fire	st in the blank s	space a	at the end of the previous sentence, con	mplete	Parts I and II, con	nplete a S	chedule	M for	each add	itional
tra	ide or business,	, then c	omplete Parts III-V.							
l Du	iring the tax year,	was th	e corporation a subsidiary in an affiliated gro	oup or	a parent-subsidiary c	ontrolled g	roup? .	. ▶ [] Yes [✓	No
lf '	"Yes," enter the	name	and identifying number of the parent cor	poratio	on. Þ					
J Th	e books are in o	care of	Pratima Gandhi, CFO		Telepho	ne numbe	r ▶	(30	9)677-3117	7
			e or Business Income		(A) Income	(B) Ex	penses		(C) Net	
1a	Gross receipts	or sale	es 183410			-: ,			6 6	
b	Less returns and a	allowance		10	183410	13.5				. ,
2	Cost of goods	sold (S	Schedule A, line 7)	2	213094			. 104	-	. 1
3	-		t line 2 from line 1c	3	-29684	,			-29684	ļ
4a	•		ne (attach Schedule D)	4a	149108	21 3 10	- 1	-	149108	t
b	· -		1797, Part II, line 17) (attach Form 4797)	4b	140100	1. 000 1		• + -	143100	
c	Capital loss de			4c		3.5				
5			tnership or an S corporation (attach statement)		37454		10 10		37454	
6	Rent income (-	· · · · · · · · · · · · · · · · · · ·	6	62212	* **	1	-	62212	
7	•		ced income (Schedule E)	7	02212	 		 	02212	\vdash
8			and rents from a controlled organization (Schedule F	<u> </u>		 		+-		
9			ction 501(c)(7), (9), or (17) organization (Schedule G	<u> </u>						<u> </u>
				10		+		+		
10		•	ivity income (Schedule I)							_
11 12			Schedule J)	11	40040	, , ,	- 1, -	· Ł		<u> </u>
	•		·	13	12012	1 1.		-	12012	-
13 Part	Total. Combin				231102	no \ /Evo	nnt for s	- L	231102	<u> </u>
rait			Taken Elsewhere (See instructions for			ns.) (Exce	ept for c	ontribi	Juons,	
			be directly connected with the unrelat				T4	4		
14 15	Compensation	OI OIII	cers, directors, and trustees (Schedule K	, EIVE	D IN CORRES		. 1			
	Salaries and w	ages	ince	irs -	O\$C- 09			_	30992	
16							. 1	-		
17	Bad debts .		ule) (see instructions)	JULC.	1.9 2019		. 1			
18							. 1	-		
19	raxes and lice	nses.					. 1		8867	
ट ं 20	Charitable con	tributio	ns (See instructions for limitation rules)	OGDi	EN, UTAH . · ·	\cdots	. 2	ــــــــــــــــــــــــــــــــــــــ		
≥ 21 >			Form 4562)			-			1	
S 22			med on Schedule A and elsewhere on re				22	_		
23								_		
24			red compensation plans							
չ 25			grams					_	7995	
`26	•		ses (Schedule I)				. 20			
27			sts (Schedule J)				. 2			
28			ach schedule)				20 2	3		
29	Total deduction	ons. Ad					28 3		47854	
30	Unrelated busin	ness tax	kable income before net operating loss de	eductio	on. Subtract line 29	from line 1	3 3		183248	
31	Deduction for ne	et opera	iting loss arising in tax years beginning on c	or after	January 1, 2018 (see	instruction	15)XC 3		14° 11' 11'	** _ 1
32	Unrelated busin	ness ta	xable income. Subtract line 31 from line	30 .	<u> </u>	<u> </u>	<u>.</u> 3 () 3 .		183248	
For Par	perwork Reducti	on Act	Notice, see instructions.		Cat. No. 11291J			Fo	om 990-T	(2018)

Part	Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	e	
•	Instructions)	33	183248
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the su		
30		i .	
	of lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	58 37	1000
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3 enter the smaller of zero or line 36	ا ا ام	
	enter the smaller of zero or line 36	31 38	182248
Part	V Tax Computation		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	38272
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax of		
	the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041)	40	
41		► 41	
	Proxy tax. See instructions	7-	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	JC 43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	13 44	38272
Part			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 45a		
b	Other credits (see instructions)		
С	General business credit. Attach Form 3800 (see instructions)		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	2.	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	38272
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	302/2
	Other taxes. Check in room: Porm 4235 Form 8011 Form 8097 Form 8000 Other (attach schedule).	.4	
48		•	38272
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
50a	Payments. A 2017 overpayment credited to 2018		j
Ь	2018 estimated tax payments	_	1
С	Tax deposited with Form 8868		
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 50d		
е	Backup withholding (see instructions)		
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		
51	Total payments. Add lines 50a through 50g	51	67248
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		
53		53	
	Tax data in into 6 16 1600 that the total of into 10, 70, and 62, often amount of the	النتا ه	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid.	,	28976
<u> 10.55</u>	Enter the amount of line 54 you want Credited to 2019 estimated tax 28976 Refunded I	<u>► 55 </u>	
Part			
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of		
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization is		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	foreign co	ountry
	here ▶		/
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a	oreign trus	st?. ✓
	If "Yes," see instructions for other forms the organization may have to file.		نظر مي
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 statements, and to the	best of my k	nowledge and belief, it is
	in the contract of the property of the contract of the contrac		
Sign	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	ge.	IRS discuss this return
Sign	$(A \cap A) \cap A \cap A \cap A$	May the	IRS discuss this return preparer shown below
Sign Here	Pui Janua 12-9-4 CFO/Controller	May the	
Here	Signature of officer Date CFO/Controller Title	with the (see inst	preparer shown below tructions)? Yes No
_	Signature of officer Print/Type preparer's name 12 - 9 - 47 CFO/Controller Title	May the with the (see inst	preparer shown below tructions)? Yes No
Here	Print/Type preparer's name 12 - 9 - 47 CFO/Controller Title	May the with the (see inst	preparer shown below tructions)?
Here Paid	Signature of officer Date Print/Type preparer's name Preparer's signature Date Date	May the with the (see inst	preparer shown below tructions)?

Schedule A-Cost of Goods Sold.	Inter metho	d of inve	ntory va	luation 🕨		
1 Inventory at beginning of year	1		6		at end of year	6
2 Purchases	2	188504	7	Cost of	goods sold. Subtract	
3 Cost of labor	3	20621			line 5. Enter here and	
4a Additional section 263A costs				in Part I, lir	ne 2	7 213093
(attach schedule)	4a		8		les of section 263A (wi	
b Other costs (attach schedule)	4b	3968			roduced or acquired for	
5 Total. Add lines 1 through 4b	5	213093	<u> </u>	to the orga	inization?	/
Schedule C—Rent Income (From R (see instructions)	eal Propert	ty and Po	ersonal	Property	Leased With Real Pro	operty)
Description of property						
(1) Markin Center Rentals					· · · · · · · · · · · · · · · · · · ·	
(2) Coliseum Rentals			-			
(3)						
(4)						
	eived or accrued					
(a) From personal property (if the percentage of ren for personal property is more than 10% but not more than 50%)	percentage		ersonal pro	perty (if the operty exceeds ifit or income)		y connected with the income d 2(b) (attach schedule)
(1)				720	63	
(2)				5494	49	
(3)						
(4)						
Total	Total			622	(b) Total deductions.	
(c) Total income. Add totals of columns 2(a) a					Enter here and on page	
here and on page 1, Part I, line 6, column (A)				622	12 Part I, line 6, column (B)	1▶
Schedule E—Unrelated Debt-Finan	ced Incom	e (see ins	tructions)	2 Dadustions directly on	prosted with or allocable to
Description of debt-financed pr	operty		llocable to d	ome from or debt-financed	debt-finan (a) Straight line depreciation	nnected with or allocable to aced property (b) Other deductions
10			prop	perty	(attach schedule)	(attach schedule)
(1)						
(2)						
(3)						
4. Amount of average 5. Aver	age adjusted bas	SIS				C. Allocable deductions
acquisition debt on or of allocable to debt-financed debt-	or allocable to financed property tach schedule)	Į.	4 div	olumn vided lumn 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 × 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				>		-
Total dividends-received deductions include	a in column 8	· · · ·		<u> </u>	<u> </u>	Form 990-T (2018)

Schedule F-Interest, Ann	uities, Royalties,			Controlled Org	ganizations (se	e instruct	tions)	
Name of controlled organization	2. Employer identification number		lated income instructions)	4. Total of specifie payments made		controlling		eductions directly ected with income in column 5
(1)								
(2)								
(3)								
(4)				L			L	
Nonexempt Controlled Organiz	zations						Γ	
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of colur included in the organization's gr	controlling		Deductions directly cted with income in column 10
(1)								-
(2)								
(3)								
(4)								
					Add columns : Enter here and o Part I, line 8, co	on page 1,	Enter i	columns 6 and 11. here and on page 1, , line 8, column (B).
Schedule G-Investment I	Income of a Sect	ion 5016	· · · ·	or (17) Organi	ization (see us	tructions)	L.,	······································
1. Description of income	2. Amount of		3. direc	Deductions ctly connected ach schedule)	4. Set-aside (attach sched	es	and s	otal deductions et-asides (col. 3 plus col. 4)
(1)			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				_	p ,
(2)			-		·			
(3)				· · · · · · · · · · · · · · · · · · ·				
(4)								
Totals	Enter here and Part I, line 9, c	column (A).		,	74			re and on page 1, ne 9, column (B).
Schedule I-Exploited Exe	empt Activity Inco	ome, Oti	ner Inan	Advertising in	icome (see inst	tructions)		
1. Description of exploited activi	2. Gross unrelated business inco from trade o business	me conn prod r ur	Expenses directly sected with duction of hrelated ess income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expe attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals	Enter here and page 1, Part line 10, col. (A	I, page	here and on e 1, Part I, I0, col (B).	14		•		Enter here and on page 1, Part II, line 26.
Schedule J-Advertising I	ncome (see instruc	ctions)		7 44 7				1
	eriodicals Repor		Consoli	dated Basis				
1. Name of periodical	2. Gross advertising income		. Direct tising costs	4. Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Reade cost		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)) .	. ▶							orm 990-T (2018)
							F	orm 330-1 (2018)

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.) 4. Advertising gain or (loss) (col. 2 minus col 3) If 7. Excess readership costs (column 6 2. Gross 3. Direct 5. Circulation 6. Readership minus column 5, but 1. Name of periodical advertising advertising costs ıncome costs income a gain, compute not more than cols. 5 through 7 column 4). (1) (2) (3) (4) Totals from Part I Enter here and on Enter here and on Enter here and 9, on page 1, Part II, line 27. page 1, Part I, page 1, Part I, line 11, col. (A). line 11, col. (B). Totals, Part II (lines 1-5) Schedule K-Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to 1. Name 2. Title unrelated business (1) % % (2) % (3) % (4)

Form 990-T (2018)

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SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service For calendar year 2018 or other tax year beginning June 01 , 2018, and ending May 31 , 20 19

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

► Go to www.irs.gov/Form990T for instructions and the latest information,

Open to Public Inspection fo 501(c)(3) Organizations Only

Name of the organization Employer identification number **Bradley Unversity** 37-0661494 Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ► Art Sales program (A) Income (C) Net Part I Unrelated Trade or Business Income (B) Expenses 1a Gross receipts or sales **b** Less returns and allowances c Balance ▶ 1c 2870 2 Cost of goods sold (Schedule A, line 7) 2 2129 Gross profit. Subtract line 2 from line 1c. . . 3 741 4a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 5 6 Rent income (Schedule C) 6 7 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 12 12 Other income (See instructions, attach schedule) 13 **Total.** Combine lines 3 through 12 13 741 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) . . . 15 15 16 16 Repairs and maintenance 17 17 18 Interest (attach schedule) (see instructions) 18 19 19 20 20 Charitable contributions (See instructions for limitation rules) 21 21 22b 22 Less depreciation claimed on Schedule A and elsewhere on return . . . 23 23 24 24 Contributions to deferred compensation plans 25 25 26 26 27 Excess readership costs (Schedule J) 27 28 28 29 29 O 741 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 31

Unrelated business taxable income. Subtract line 31 from line 30

741

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SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning June 01 , 2018, and ending May 31 , 20 19

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Name o	f the organization		<u> </u>	Employer (dent	ufication	number
Bradle	y University			}	37-066	1494
	nrelated business activity code (see instructions) > 900099					
De	escribe the unrelated trade or business > Limited Partnership In	come (less than 2% owner	ship)		
Par			(A) Income	(B) Expens	es	(C) Net
1a	Gross receipts or sales			-	T	
b	Less returns and allowances	1c		•	1 .	l'
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a	149108			149108
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach				1 . [
	statement)	5	37454	,	<u> </u>	37454
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled	1 1		1	1 1	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9			1	
10	Exploited exempt activity income (Schedule I)	10			1	
11	Advertising income (Schedule J)	11			$\perp \perp \downarrow$	
12	Other income (See instructions; attach schedule)	12	33	,	'	33
13	Total. Combine lines 3 through 12	13	186595	<u> </u>		186595
Part	Deductions Not Taken Elsewhere (See instructions for	r limita	tions on deductio	ns.) (Except fo	or cont	ributions,
	deductions must be directly connected with the unrelate			., .		
14	Componentian of officers directors and trustees (Schodule IV)				14	
15	Compensation of officers, directors, and trustees (Schedule K) Salaries and wages				15	11200
16	Salaries and wages				16	11360
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	8867
20	Charitable contributions (See instructions for limitation rules) .				20	- 0007
21	Depreciation (attach Form 4562)			· · · i	1-0	
22	Less depreciation claimed on Schedule A and elsewhere on ref				22b	
23	Depletion				23	
24	Contributions to deferred compensation plans				24	
25	Employee benefit programs				25	2839
26	Excess exempt expenses (Schedule I)				26	
27	Excess readership costs (Schedule J)				27	
28	Other deductions (attach schedule)				28	
29	Total deductions. Add lines 14 through 28				29	23066
30	Unrelated business taxable income before net operating loss de				30	163529
31	Deduction for net operating loss arising in tax years beginn				1	
٠,	instructions)				31	• • • • • • • • • • • • • • • • • • • •
32	Unrelated business taxable income. Subtract line 31 from line 3				32	163529

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning June 01 , 2018, and ending May 31 , 20 19 ▶ Go to www.irs.gov/Form990T for instructions and the latest information.

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Name of	the organization			Employer ident	ification	number
Bradle	y University				37-066	61494
Un	related business activity code (see instructions) ▶ 488490					
De	scribe the unrelated trade or business Parking UBTI			_		
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	es .	(C) Net
1a	Gross receipts or sales					. ' '
b	Less returns and allowances c Balance ▶	1c			<u> </u>	·
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach			- 4	,	
	statement)	5				
6	Rent income (Schedule C)	6		1		
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)				\Box	
	organization (Schedule G)	9				J
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions; attach schedule)	12	11979			11979
13	Total. Combine lines 3 through 12	13	. ,,,,,,,			
Part	deductions must be directly connected with the unrelate	ed bus	siness income.)			
	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts				17	
	Interest (attach schedule) (see instructions)				18	
	Taxes and licenses				19	
	Charitable contributions (See instructions for limitation rules) .		, ,		20	
21	Depreciation (attach Form 4562)					
	Less depreciation claimed on Schedule A and elsewhere on re-				22b	
	Depletion				23	
	Contributions to deferred compensation plans				24	
25	Employee benefit programs				25	
	Excess exempt expenses (Schedule I)				26	
	Excess readership costs (Schedule J)				27	
	Other deductions (attach schedule)				28	
	Total deductions. Add lines 14 through 28				29	0
	Unrelated business taxable income before net operating loss de				30	11979
	Deduction for net operating loss arising in tax years beginning	_	-			
	instructions)				31	
32	Unrelated business taxable income. Subtract line 31 from line 3	30.			32	11979

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning June 01 , 2018, and ending May 31 , 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

Bradle	ey University				37-06	61494	
Uı	nrelated business activity code (see instructions) ▶						
De	escribe the unrelated trade or business Fixternal event catering	g and re	ntals				
Par	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net	
1a	Gross receipts or sales 180540					- 1	
b	Less returns and allowances	1c	180540			•	
2	Cost of goods sold (Schedule A, line 7)	2	210965	<u>.</u>			
3	Gross profit. Subtract line 2 from line 1c	3	-30425	ļ	<u> </u>	-30425	
4a	Capital gain net income (attach Schedule D)	4a			<u> </u>		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			<u> </u>		
C	Capital loss deduction for trusts	4c		-	<u> </u>		
5	Income (loss) from a partnership or an S corporation (attach statement)	5		· ;			
6	Rent income (Schedule C)	6	62212			62212	
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9					
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11			İ		
12	Other income (See instructions; attach schedule)	12					
13	Total. Combine lines 3 through 12	13	31787			31787	
	deductions must be directly connected with the unrelate Compensation of officers, directors, and trustees (Schedule K)				14		
14					15	19632	
15 16	Salaries and wages				16	19032	
16 17	Repairs and maintenance				17		
18	Bad debts				18		
19	Taxes and licenses				19		
20	Charitable contributions (See instructions for limitation rules)				20		
21	Depreciation (attach Form 4562)			· · · i			
22	Less depreciation claimed on Schedule A and elsewhere on re				22b		
23	Depletion				23		
24	Contributions to deferred compensation plans				24		
25	Employee benefit programs				25	5156	
26	Excess exempt expenses (Schedule I)				26		
27	Excess readership costs (Schedule J)				27		
28	Other deductions (attach schedule)				28		
29	Total deductions. Add lines 14 through 28				29	24788	
30	Unrelated business taxable income before net operating loss d				30	6999	
31	Deduction for net operating loss arising in tax years beginn						
	instructions)				31		•
32	Unrelated business taxable income. Subtract line 31 from line	30 .			32	6999	

BRADLEY UNIVERSITY 37-0661494 FY Ending 5-31-19

Form 990T-Schedule A

Line 4b Other Costs

Contracted Services

Beverage Service	-
Other Materials	-
Administrative/	
Institutional	3,968
	3,968

Bradley University
FEIN 37-0661494
Tax Year Ending 5/31/19
UBIT from Limited Partnerships

Part I, Lines 5,4a,4b

Da da cashin	Vana and	Line 5 UBIT
Partnership	Year-end	UBIT
Aberdeen Emergin Mrkts Smaller Companies Fund	12/31/2018	-
Aeon Global Choice Fund, LLC	12/31/2018	-
Kayne Anderson Energy Fund VII, LP	12/31/2018	356,100
Private Advisors Small Co Buyout Fund	12/31/2018	29,928
Private Advisors Small Co Buyout Fund V	12/31/2018	113,924
Siguler Guff Distressed Opportunities Fund IV	12/31/2018	(264
Abbott Capital Private Equity Fund VI	12/31/2018	5,305
Abbott Capital Private Equity Fund V	12/31/2018	71,039
Arch Development Fund I, L P	12/31/2018	-
Intrinsic Edge Plus LP	12/31/2018	-
Epoch Global Absolute Return Fund, LLC	12/31/2018	-
Brandes Non-US Equity Portfolio	12/31/2018	-
II Hedge Investments, LLC	12/31/2018	(1,398
Hexavest World Equity Fund	12/31/2018	-
NGP Natural Rsources XI, LP	12/31/2018	(108,000
NGP Natural Rsources XII, LP	12/31/2018	(290,443
CVI Credit Value fund B III LP	12/31/2018	-
The Northern Trust Company	12/31/2018	-
OGR Offshore EIF AIV I, L P	12/31/2018	-
OGR Atlas (Offshore SFC) AIV I, LP	12/31/2018	-
OGR Petroleum AIV I, LP	12/31/2018	-
OGR Offshore SFC AIV I, LP	12/31/2018	-
IL Hedge Restricted Portfolio, LLC	12/31/2018	-
Loomis Sayles Credit Asset Trust	12/31/2018	_
Wellington Trust Co/CTF Emerging Markets Portfolio	12/31/2018	
Wellington Trust Co/CTF Opportunistic Emerging Markets F	12/31/2018	-
Wellington Trust Co/CTF Emerging Local Debt Portfolio	12/31/2018	-
Lexington Capital Partners VII	12/31/2018	13,777
Wellington Trust Co/CTF Diversified Inflation Hedges	12/31/2018	-
Encore Consumer Capital Fund II, LP	12/31/2018	_
Encore Consumer Capital Fund III, LP	12/31/2018	
W Capital Partners III, LP	12/31/2018	(3,210
Thomburg International Equity Fund	12/31/2018	(3,210
Abbott Capital Private Equity III	12/31/2018	(196
Total UBIT	12/3/1/2010	\$ 186,562

Part I. Line 12

Other Income	
States Tax Refund	33
Art Sales Program	\$ 2,870
WCBU Travel Tour	
Total	\$ 2,903

Bradley University Form 990T Schedule of Capital Gains/Losses of Partnerships YE 5/31/19

Ordinary Inc/Loss UBIT Less

Partnership	Sec 1231	ST Cap Gn	ST Cap Gn ST Cap Loss LT Cap Gain LT Cap Loss	LT Cap Gain	LT Cap Loss	Total UBIT	Capital Gs/Losses
Private Advisors Small Co Buyout Fund	(215)	•		19,779		29,928	10,364
Kayne Anderson Energy Fund VII, LP	•	•	•	•		356,100	356,100
Private Advisors Small Co Buyout Fund V	35,713	ı		78,109	•	113,924	102
IL Hedge Investments LLC	•	•	(10)	•	(1,758)	(1,398)	370
Lexington Capital Partners VII	845	4		12,537	•	13,777	391
NGP Natural Resources XI, LP	99	•		•		(108,000)	(108,066)
NGP Natural Resources XII, LP	2,541		(14)	398		(290,443)	(293,368)
W Capital Partners III	(105)			•	•	(3,210)	(3,105)
Siguler Guff Distressed Oppor Fund IV	•	•	•	•	•	(264)	(264)
Abbott Capital Private Equity Fund VI	(1,555)	•	(165)	5,804	•	5,305	
Abbott Capital Private Equity Fund III LP	•	•	•	•	•	(196)	(196)
Abbott Capital Private Equity Fund V LP	609'2	18	•	•	(10,493)	71,039	73,905
	44,899	22	(189)	116,627	(12,251)	186,562	37,454
Total Capital Gain Total 1231 Gain (Loss)	44,899				104,209		

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2018

Employer identification number

Brac	fley University					37-0661494
Pa	rt I Short-Term Capital Gains and Losses (See instructions	.)			
	See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) (e) Proceeds Cost (sales price) (or other basis)		(g) Adjustments or loss from Forr 8949, Part I, line column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
16	a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b	,	*.	are recommended in the second of the second		
1k	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				·	(167
4	Short-term capital gain from installment sales from For	m 6252, line 26 or 3	37		4	
5	Short-term capital gain or (loss) from like-kind exchang	es from Form 8824			5_	
6	Unused capital loss carryover (attach computation)				6_	()
_	Net short-term capital gain or (loss). Combine lines 1a			· · · · · ·	7	(167)
Fal	t II Long-Term Capital Gains and Losses (S	see instructions.	 	1		
	See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments t or loss from Form 8949, Part II, line column (g)	1(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					g/
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					104376
11	Enter gain from Form 4797, line 7 or 9				11	44899
12	Long-term capital gain from installment sales from Form	n 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchange	es from Form 8824			13	
14	Capital gain distributions (see instructions)		14			
	Net long-term capital gain or (loss). Combine lines 8a th	nrough 14 in columi	nh	<u> </u>	15	149275
16	Enter excess of net short-term capital gain (line 7) over	net long-term capit	tal loss (line 15)		16	
17	Net capital gain. Enter excess of net long-term capital g				17	149108
18	Add lines 16 and 17. Enter here and on Form 1120, pag		roper line on other	r returns	18	149108

8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2018 Attachment Sequence No 12A

Internal Revenue Service Name(s) shown on return **Bradley University**

Department of the Treasury

Social security number or taxpayer identification number

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

	, ,	9				(555	
You must check Box A, B, or C I complete a separate Form 8949, por one or more of the boxes, com	page 1, for ea	ach applicab	le box. If you ha	ve more short-te	rm transac	short-term transactions than will fit	on this page
(A) Short-term transactions	reported on	Form(s) 109	9-B showing bas	sis was reported	to the IRS	(see Note above	e)
☐ (B) Short-term transactions	•	, ,	•	•		•	-7
✓ (C) Short-term transactions				•			
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, If you enter an enter a c See the se	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co.)	(Mo , day, yr.)	disposed of (Mo , day, yr)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
rom Limited Partnerships (see schedule)	Various	Various					(167)
				_			
		_					

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2018)

(167)

Form 8949 (2018)					Attack	nment Sequence No.	12A Page 2
Name(s) shown oh return. Name and	SSN or taxpayer identific	ation no not requi	red if shown on other	side Social sec	unty number	or taxpayer identific	ation number
Bradley University				<u></u>		37-0661494	
Before you check Box D, E, or statement will have the same broker and may even tell you	information as Form						
	Transactions inv			eld more than	1 year are	generally long	-term (see
Note: You m to the IRS an	ay aggregate all d for which no a t required to repo	long-term tr djustments (ansactions rep or codes are re	quired. Enter t	he totals o	directly on Sche	
You must check Box D, E a separate Form 8949, pag more of the boxes, comple	je 2, for each appli	cable box. If y	you have more lo	ong-term transac			
☐ (D) Long-term transa☐ (E) Long-term transa☑ (F) Long-term transa	actions reported or	Form(s) 109	9-B showing bas			•	e)
1 (a) Description of prope	(b)	(c) Date sold or	(d)	(e) Cost or other basis See the Note below	If you enter ar enter a c See the se	of any, to gain or loss. n amount in column (g), code in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ		(Mo day vr.) disposed of (sales price) and see Column	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
From Limited Partnerships (schedule)	see Various	Various					104376
						_	
						_	
				-			
		 					

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►

104376

Form 4562

Department of the Treasury

Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

➤ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2018

Attachment Sequence No 179

Name(s) sh	nown on return		Busine	ess or activity to v	which this form rela	ates	Identifying number
Bradley L	University			ated Business			37-0661494
Part I			rtain Property Un				
	Note: If you	have any list	ed property, comp	lete Part V b	efore you co	mplete Part I.	
							1
			placed in service (se				2
		•	perty before reduction		-	•	3
	duction in limitat	4					
		-				r -0 If married filing	
	parately, see inst		· · · · · ·				_ 5
	(a) De	escription of proper	rty	(b) Cost (bus	iness use only)	(c) Elected cost	· '
							
					<u></u>		
			from line 29				
		-	property. Add amour				8
							9
	-		•				10
						ne 5. See instructions .	11
						e 11	12
			to 2019. Add lines			13	
			for listed property. I			de listed average. Cos	· inchmistions \
						de listed property. See	instructions.)
			or qualified propert			rty) placed in service	14
			1) election				15
			S)				16
			on't include listed				
- GIVIII	MACTIC DO	d) nontanon (B	OTT E ITIOIDAGO IISTOCA	Section A	oc indiraction		
17 MA	CRS deductions	for assets plan	ced in service in tax		ng before 201	8	17
						o one or more general	No. 1 7 2
						🕨 🗆	
	Section B	-Assets Plac	ed in Service Durin	g 2018 Tax Y	ear Using the	General Depreciation	System
(a) Classi	ification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-	-year property						
b 5-	-year property						
c 7-	-year property	•					
<u>d</u> 10-	year property			<u> </u>			
<u>e</u> 15-	year property			<u> </u>			
	year property	•					
	year property			25 yrs		5/L	
h Res	sidential rental			275 yrs	MM	S/L	·
	perty			27.5 yrs	MM	5/L	
	nresidential real			39 yrs.	MM	S/L S/L	
pro	perty			L	L		
			d in Service During	2018 Tax Ye	ar Using the A	Alternative Depreciation	n System
20a Cla		4 4 5 4 5 5		10		5/L	
b 12-				12 yrs	1.11.1	5/L	
<u>c 30-</u>				30 yrs	MM	5/L	
d 40-		- نند. سعودا	70.)	40 yrs	MM	5/L	
	Summary (S						04
21 Liste	ed property. Ente	er amount from	1 IIII 28	lines 10 and	20 in column	(g), and line 21. Enter	21
AZ 10ta	an Auu amount	o iroiri ime 12, ropriate lines c	ines 14 through 17, of your return. Partne	rshins and S	corporations—	see instructions	22
11616							
22			ed in service during t				

Ра			ty (Inclu				ertain	other	vehicle	s, cei	tain a	aircraf	t, and	prop	erty us	ed for
	2		recreation,			•										
			hicle for wh									lease	expens	se, com	plete o	nly 24a,
			through (c)									.			- h:l X	
24:			ation and C											written?		
240	a Do you have e		pport the bus	iness/inv	esuner	T use cia	(e)	_ Yes ∟		7		S trie ev	***	wniteria		∐ No
	(a) e of property (list vehicles first)	(b) Date placed in service	Business/ investment use percentage	Cost or o	d) other ba		s for depre siness/inve use only	stment	(f) Recovery period	Me	(g) thod/ vention		(h) preciatio eduction		(I) ected sec cos	
25	25 Special depreciation allowance for qualifies the tax year and used more than 50% in a										25					[,`
26	Property used more than 50% in a qualified business use:															
			%													
			%													
		<u> </u>	%									l				
27	Property use	ed 50% or I		dified bu	ısines	s use:				Ic /I						
_]	% %							5/L -						
			% %					-		5/L -						
28	Add amount	ts in column		5 throug	h 27	Enter h	ere and	on line	21 page		28	_			2	. 1
	Add amount												. 1	29		
			· (/)				rmation				· · · · · ·					
	plete this sect															vehicles
o yo	our employees	, first answer	r the question	ns in Sec	ction C	to see i	f you me	et an ex	ception	to comp	oleting t	this sec	tion for	those v	ehicles.	
	_					(a)		(b) (c) (d)						(e)	(1)	
30		Total business/investment miles driven during the year (don't include commuting miles) .			Ve	hicle 1	Ven	Vehicle 2 Vehicle 3 Vehicle 3			veni	hicle 4 Vehicle 5 Vehicle 6			CIE 6	
	Total commut															
32	Total other miles driven	Total other personal (noncommuting) miles driven		nuting)												
33	Total miles lines 30 thro			r. Add		<u>-</u> -										
34	Was the veh	icle availab	le for perso	nai	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during o															
35	Was the veh															
	than 5% ow		-			 -	-		├					ļ		
36	Is another veh						<u> </u>				-	- in F	_1	<u> </u>	<u></u>	
Anev	wer these que		C-Questi												who ar	an ¹ t
	e than 5% ow						i to con	pieting	Section	יטוטו	e ilcie	o useu	Dy Citi	Jioyees	Will al	SII (
	Do you mair						ts all ne	rsonal	use of v	ehicles	includ	dina co	mmuti	na by	Yes	No
	your employ	ees?														
	Do you mair employees?	See the in:	structions fo	or vehicl	es use	ed by co	orporate		s, directo	ors, or	1% or	more o		y your		
39	•		•			-							• •			
40	use of the ve	ehicles, and	retain the ii	nformati	on red	eived?								ut the		
41	Do you meet															
	Note: If you		37, 38, 39,	40, or 4	<u>1 ıs "`</u>	es," do	n't com	plete S	ection B	for the	cover	ed vehi	cles.		<u> </u>	
Par	rt VI Amor	tization								·	· · ·					
	(a) (b) Description of costs (b) Date amortize begins			ition	Amo	(c) ortizable ar	nount	Co	(d) de sectio	n	(e) Amortiza period percent	or	(f) Amortization for this year			
42	Amortization	of costs th	at begins di	uring yo	ur 201	8 tax y	ear (see	instruct	tions):							
	Amortization												43			45144
44_	Total. Add a	amounts in	column (f). S	see the	instru	ctions to	or where	to repo	orτ	• •	• • •	•	44		om 456	45144≯ 2 (2018)