OMB No 1545-0687 .

For Paperwork Reduction Act Notice, see instructions.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

/ °.		-,				tux unuci					_			2018	}
		***	For cale	ndar year 2018 or othe								19	•		
		ent of the Treasury levenue Service	▶ Do :	Go to www.irs Go to www.irs not enter SSN number	_							1/6/(3)	Oper	to Public Inspec c)(3) Organization	tion for
	¬ C	heck box if	P 001	Name of organization							UII IS a 50		_	c)(8) Organization identification nu	
AL		ddress changed		_	_	CK DOX II Harric Ci	ianged a	na see me	oti de tioni	3 ,			(Employees' trust, see instructions)		
_	_ `	ot under section	Print '	CREIGHTON UNIVI		te no. If a P.O. bo	v 500 in	etructions							
		· ~	_ or			teno naro bo	x, 566 iii	structions				E Uni	47-0376583 Unrelated business activity code		
	408(e) 220(e) Type 2500 CALIFORNIA PLAZA 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code												(See instructions)		
ř	52			OMAHA, NE 68178	•	outiny, und 211 c	, loreign	postarco	-GO				541800		
C Book value of all assets at end of year F Group exemption number (See instructions.) ▶												<u> </u>			
		1,296,486,032	G Ch	neck organization t	уре ▶	√ 501(c) cor	poratio	n [501	(c) tru:	st 🗀	401(a) trus	t 🗌 Other	r trust
H	Ent			organization's unre	lated trad	des or busines	sses. 🕨	-	4		Describ	e the	only (d	or first) unrela	ted
		de or business													
			-	at the end of the p		sentence, coi	mplete	Parts I	and II,	comp	olete a S	Schedu	ıle M	for each add	itional
				omplete Parts III-\											
ı		-		e corporation a subs	-	-	•	•	subsidi	ary co	ntrolled g	roup?	. 1	► 🗌 Yes 🛂	☑ No
_				and identifying nur	nber of t	he parent cor	poratio	n ▶							
_				► Jan Madsen							e numbe			402-280-2131	1
	art			e or Business Ir	ncome		_	(A)	Income	· 	(B) E:	xpense	s	(C) Net	 i
		Gross receipts				D-1 N									
		Less returns and a			с	Balance >	1c						\rightarrow		
	2	•		Schedule A, line 7)	•	•	2								┼─-'
	3	•		t line 2 from line 10			3								\vdash
•	_			ne (attach Schedu	· ·	Form 4707)	4a 4b								+
	b		•	1797, Part II, line 17	-	(FOIII 4797)	4c								
	C	Capital loss de		n for trusts tnership or an S corp		tach statement	h	_		13) E	CFIV	775×1970			+
	5	Rent income (oration (at	itacii Statement,	6			P4 E	PELA		႑႘္တ		+-
-	6 7			ced income (Sched	· · · ·	•	7	/	63	MAA	/ 0 4 a		8	 	+-
				and rents from a contro	· ·	estion (Cohodulo E				MA		2020	83	·	+
o (•	ction 501(c)(7), (9), or (1	_	•	7		 - 	00	DEN.	1 1-0	 		+-
: د 1(ر				ivity income (Sche		tion (schedule d)	10				DEIA.	<u> </u>			┼
⊒'' ⊒1:	,	Advertising inc	•	•	uule I)		11								┼
		_		ructions; attach sch	adula) .	<i>/</i> .	12		78,050					78,050	
ב ¹² 111		Total. Combin			leddie,		13		76,030						1
	art			Taken Elsewher	e 45ee 11	netructions fo		ations o	n ded	uction	ns) (Exc	ent fo	or con	tributions	
_				be directly conne							10.) (EXO	opt io		,	
Ž14	1			cers, directors, and									14		
ر 1	5	Salaries and w											15	6,011	1
16		Repairs and m	-	ance /									16		
17		Bad debts .		/ .								.	17		
18			n sched	lule) (see instructio	ns) .							.	18		
19	•	Taxes and lice	nses .	<u>/</u>								ĺ	19		
20)	Charitable con	itributio	ns (See instruction	ns for lim	itation rules)							20		
2	ı	Depreciation (a	attach F	Form 4562) .	•				21						
22	2	Less deprecia	tion cla	ımed on Schedule	A and el	sewhere on re	eturn	. [22a				22b		
23	3	Depletion /							•		•		23		
24	1	Contributions	to defe	rred compensation	plans								24		
2		Employee ben											25		
26	6	Excess exemp	t exper	nses (Schedule I)									26		
27	7	Excess reader	ship co	sts (Schedule J)						•			27		<u> </u>
28	3	Other deduction	ons (atta	ach schedule) . ´								ا د م	28	47,345	5
29	•	∄otal deducti	ons. Ac	dd lines 14 through	28 .								29	53,356	ĵ
30) /	Unrelated busi	ness ta	xable income befo	re net op	erating loss d	eductio	n Subt	ract lin	e 29 fi	rom line	13	30	24,694	4
3	ا/ا	Deduction for n	et opera	ating loss arising in	tax years	beginning on o	or after	January	1, 2018	8 (see	instructio	ons) [31		
_32	<u> </u>	Unrelated bus	iness ta	xable income Sul	otract line	e 31 from line	30 .	<u> </u>				7.1	32	24,694	
Foi	Par	erwork Reduct	ion Act	Notice, see instruct	tions.			Cat	No 1129	 11J			,	Form 990- 7	「 (2018)

Part I	III To	otal Unrelated Business Taxable Income		
33	Total o	f unrelated business taxable income computed from all unrelated trades or businesses (see		
	instruct	·	33	24,694
34		ts paid for disallowed fringes	34	24,094
35		ion for net operating loss arising in tax years beginning before January 1, 2018 (see		
-	instruct	1 1 1	22.504	
36		ions) f unrelated business taxable income before specific deduction. Subtract line 35 from the sum	35	23,694
30		33 and 34	1 1 1	
			ر 36	1,000
37		deduction (Generally \$1,000, but see line 37 instructions for exceptions)	3 1	1,000
38		ted business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	1 1	
	<i></i>	ne smaller of zero or line 36 .	38	0
Part !		ax Computation		
39		zations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0
40		Taxable at Trust Rates. See instructions for tax computation Income tax on	+I	
	the am	ount on line 38 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	40	
41	Proxy 1	tax. See instructions	41	
42	Alterna	tive 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	0
Part	У [[]Т	ax and Payments		
45a´	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		
b	Other o	redits (see instructions)	7 1	
С	Genera	I business credit Attach Form 3800 (see instructions) 45c		
d	Credit 1	for prior year minimum tax (attach Form 8801 or 8827)	7	
е	Total c	45e	·	
46	Subtrac	et line 45e from line 44	46	
47	Other ta	xes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	46 47	
48		ax. Add lines 46 and 47 (see instructions)	48	
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2.	49	
50a		nts. A 2017 overpayment credited to 2018		
b	-	stimated tax payments	7 11	
С		posited with Form 8868	7 []	
d		organizations: Tax paid or withheld at source (see instructions) . 50d	- 	
e	_	withholding (see instructions)	- 	
f	•	for small employer health insurance premiums (attach Form 8941) 50f	- 	
g		eredits, adjustments, and payments Form 2439	┤ 	
9	Forn			1
51		ayments. Add lines 50a through 50g	5	o
52		ted tax penalty (see instructions) Check if Form 2220 is attached	52	
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	0
54		ayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	-	e amount of line 54 you want Credited to 2019 estimated tax Refunded	55	
Part		tatements Regarding Certain Activities and Other Information (see instructions)	<u> </u>	
56		time during the 2018 calendar year, did the organization have an interest in or a signature or	other author	ty Yes No
		financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m		
		I Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the f		
	here >		3	
57		he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reian trust?	
٥.	_	" see instructions for other forms the organization may have to file.		
58		ne 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 b	pest of my knowl	edge and belief, it is
Sign		orrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledg	е	discuss this return
Here	IN /	AVI VIII ANDUM 4/24/26 Executive Vice President		parer shown below
11616		upe of officer Date Title	(see instruction	ons)? Yes No
	1 3.3	Destalling account a come	, n	PTIN
Paid		1/2/1/2/1/2/1/2/1/2/1/2/1/2/1/2/1/2/1/2	Check if if self-employed	
Prepa				P00798244
Use 6	Only		irm's EIN ►	13-5565207
		Firm's address ► 1212 N 96th Street, Ste 300, Omaha, NE 68114		102) 348-1450 orm 990-T (2018)
			FC	/// J (2018)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Open to Public Inspection for

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning July 1 , 2018, and ending June 30 , 20 19 . ► Go to www.irs.gov/Form990T for instructions and the latest information.

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).

Name of the organization

Employer identif

tion is a 501(c)(3). 501(c)(3) Organizations Only Employer identification number

CREIG	SHTON UNIVERSITY	47-0376583				
Ur	nrelated business activity code (see instructions) ▶ 525990					
De	escribe the unrelated trade or business Investing					
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				
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3			11	
4a	Capital gain net income (attach Schedule D)	4a		1	1	
Ь	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
C	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach statement)	5	(1,188,551)	! 		(1,188,551)
6	Rent income (Schedule C)	6				
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	· <u>-</u> .			
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total. Combine lines 3 through 12	13	(1,188,551)			(1,188,551)
Part	deductions must be directly connected with the unrelate	ed bus		ns.) (Except fo	, -	ributions,
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts			• • •	17	·-
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20 21	Charitable contributions (See instructions for limitation rules) .				20	
22	Depreciation (attach Form 4562)				22b	
23	·				23	
24	Depletion				24	
25	Employee benefit programs				25	
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	- 0
30	Unrelated business taxable income before net operating loss de				30	(1,188,551)
31	Deduction for net operating loss arising in tax years beginning					11,100,001/
	instructions)	-	=		31	
32	Unrelated business taxable income. Subtract line 31 from line 3				32	(1,188,551)

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 July 1 , 2018, and ending June 30 , 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

Name o	f the organization	ification number				
	HTON UNIVERSITY		47-0376583			
	related business activity code (see instructions) ▶722320					
De	scribe the unrelated trade or business Catering					
Par	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				
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)					
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5		<u> </u>		
6	Rent income (Schedule C)	6		 		
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)				İ	
40	organization (Schedule G)	9			-	
10	Exploited exempt activity income (Schedule I)	10	17,483	11,474	-	6,009
11	Advertising income (Schedule J)	11				-
12 13	Other income (See instructions, attach schedule)	12 13		<u> </u>		
	Total. Combine lines of through 12	13	_ _			
Part	`			ons.) (Except fo	r contri	butions,
	deductions must be directly connected with the unrelate	ed bus	siness income.)			
14	Compensation of officers, directors, and trustees (Schedule K)	 .			14	· · · · · · · · · · · · · · · · · · ·
15	Salaries and wages			}	15	
16	Repairs and maintenance			,	16	
17	Bad debts			- -	17	
18	Interest (attach schedule) (see instructions)			P	18	
19	Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules)				20	
21	Depreciation (attach Form 4562)		. 21			
22	Less depreciation claimed on Schedule A and elsewhere on re-	turn .	22a		22b	
23	Depletion				23	
24	Contributions to deferred compensation plans				24	
25	Employee benefit programs			[25	
26	Excess exempt expenses (Schedule I)			<u>, </u>	26	6,009
27	Excess readership costs (Schedule J)			[27	
28	Other deductions (attach schedule)			[28	
29	Total deductions. Add lines 14 through 28			-	29	6,009
30	Unrelated business taxable income before net operating loss de	educti	on. Subtract line 29	from line 13	30	0
31	Deduction for net operating loss arising in tax years beginning	ng on	or after January	1, 2018 (see		
	ınstructions)				31	
32	Unrelated business taxable income. Subtract line 31 from line 3	<u> </u>	<u> </u>		32	<u>o</u>

i	i		CXEIII	л соппоне	u Organizations						
. 1. Name of controlled 2		Canalassas	Exempt Controlled Organizations								
organization		. Employer îcation number	3. Net unrelated income (loss) (see instructions)			i included in the 6	controlling	conn	eductions directly ected with income in column 5		
(1)					-						
(2)											
(3)									* 1 t · m		
(4)					-						
Nonexempt Controlled Organiz	zations	,									
7. Taxable Income	1	. Net unrelated incoss) (see instructi			otal of specified syments made	10. Part of column included in the corganization's great the corganization of the corganization of the corganization of the corporation of the cor	controlling	conne	deductions directly cted with income in column 10		
(1)					··						
(2)					······································						
(3)											
(4)								+			
Totals .						Add columns 5 Enter here and 6 Part I, line 8, co	on page 1,	. Enter h	columns 6 and 11 nere and on page 1, line 8, column (B)		
Schedule G-Investment I	ncom	e of a Sect	ion 50	1(c)(7) (9)	or (17) Organ	ization (see ins	tructions	<u> </u>			
1. Description of income		2. Amount of		dire	J. Deductions ectly connected tach schedule)	4. Set-aside (attach sched	es	5. Total deductions and set-asides (col 3 plus col 4)			
(1)					taon sonoacio,				p.u. 00. 1,		
(2)											
(3)		-									
(4)	-										
Totals Schedule I—Exploited Exe	•	Enter here and Part I, line 9, c	olumn (A)	Advortising l	ncomo (coo inci	truction	Part I, lı	re and on page 1, ne 9, column (B)		
Scriedule I—Exploited Exe	inpt i		1		1		Tuctions	5)	T		
1. Description of exploited activi	2. Gross unrelated business incor from trade o business	ne c	3. Expenses directly connected with croduction of unrelated siness 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		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)			
(1) Catering		17,	483	11,47	4 6,009	415,307		426,239	6,009		
(2)					·						
(3)											
(4)		Enter here and page 1, Part line 10, col (A	I, p	er here and on age 1, Part I, ae 10, col (B)				-	Enter here and on page 1, Part II, line 26		
Totals			483	11,47	4				6,009		
Schedule J-Advertising				- 0	ideted Desig						
Part I Income From P	erioai	icais Repor	tea or	a Consol			1		<u> </u>		
1. Name of periodical		2. Gross advertising income	ad	3. Direct vertising 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)									1		
(2)]		
(3)					7	-]		
(4)	-				7]		
Totals (carry to Part II, line (5))	>										

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 July 1 , 2018, and ending June 30 , 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 for 501(c)(3) Organizations Only

Name of the organization Employer identification number 47-0376583 **CREIGHTON UNIVERSITY** 561439 Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ▶ Printing (C) Net Part I Unrelated Trade or Business Income (A) Income (B) Expenses Gross receipts or sales **b** Less returns and allowances c Balance ▶ 1c 2 2 Cost of goods sold (Schedule A, line 7). 3 3 Gross profit. Subtract line 2 from line 1c 4a 4a Capital gain net income (attach Schedule D) . Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 4c Capital loss deduction for trusts . 5 Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 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 10 10 Exploited exempt activity income (Schedule I) 91.472 108,234 (16.762)11 Advertising income (Schedule J) 11 12 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 13 (16,762)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) . . 14 15 15 Salaries and wages 16 16 Repairs and maintenance Bad debts , . , 17 17 18 18 Interest (attach schedule) (see instructions) . . . 19 19 Taxes and licenses Charitable contributions (See instructions for limitation rules) . 20 20 21 21 Depreciation (attach Form 4562) 22b 22 Less depreciation claimed on Schedule A and elsewhere on return : 23 Depletion . . . 23 24 Contributions to deferred compensation plans 24 25 25 Employee benefit programs 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) . 27 28 28 Other deductions (attach schedule) 29 29 Total deductions. Add lines 14 through 28 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 (16,762)Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 31 31 instructions) . . . Unrelated business taxable income Subtract line 31 from line 30 32 (16,762)

Schedule F—Interest, Annu	ities	, Royalties,			Controlled Or Organizations	ganizations (se	ee instruc	tions)		
Name of controlled organization		Employer fication number		lated income instructions)			controlling	6. Deductions directly connected with income in column 5		
(1)				***************************************						
(2)										
(3)								1		
(4)							-			
Nonexempt Controlled Organiza	ations	3				1		*		
7. Taxable Income		. Net unrelated ind loss) (see instructi			otal of specified yments made	10. Part of colur included in the organization's gr	controlling	conne	Deductions directly ected with income in column 10	
(1)								1	1	
(2)										
(3)										
(4)										
Totals			,			Add columns : Enter here and o Part I, line 8, co	on page 1,	Enter	columns 6 and 11. here and on page 1, , line 8, column (B).	
Schedule G-Investment In	com	ne of a Secti				ization (see ins	tructions	3	····	
1. Description of income		2. Amount of		3. dire	Deductions ctly connected ach schedule)	4. Set-aside (attach sched	es	5. Total deductions and set-asides (col. 3 plus col. 4)		
(1)	Ì									
(2)								•		
(3)				1		1				
(4)				7						
Totals	•	Enter here and Part I, line 9, co	olumn (A).					Part I, II	ere and on page 1, ine 9, column (B)	
Schedule I - Exploited Exer	npt /	Activity inco					tructions)	1	
1 Description of exploited activity		2 Gross unrelated business incon from trade or business	ne conn proc	Expenses directly ected with duction of nrelated 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	6. Exp attribut colui	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1) Printing		91,4	172	108,234	(16,762)					
(2)					<u> </u>					
(3)					i					
(4)										
Totals	•	Enter here and page 1, Part I line 10, col. (A	page), line 1	nere and on 1, Part I, 0, col. (B), 108,234) L = 1 =		21611A 111		Enter here and on page 1, Part II, line 26.	
Schedule J-Advertising Inc	com			100,201				······································		
Part I Income From Per				Consoli	dated Basis					
			1		4 Advertising				7. Excess readership	
1 Name of periodical		2 Gross advertising income		Direct	gain or (loss) (col. 2 minus col 3) If a gain, compute cols, 5 through 7	5. Circulation income				
(1)										
(2)										
(3)		1			- T					
(4)					A contract					
Totals (carry to Part II, line (5))	. •									