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

OMB No. 1545-0687

2016

	For calendar year 2016 or other tax year beginning July 1 , 2016, and ending Julie 30 , 20 17 .	
artment of the Treasury	► Information about Form 990-T and its instructions is available at www.irs.gov/form990t.	Open to Public Inspec
nal Revenue Service	► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)	E01(c)(2) Organization

		For cale	ndar year 2016 or other tax year beginning	y i , 2	vio, and ending	Julie	. 30 , 20 .						
•	ent of the Treasury		ormation about Form 990-T and its instruct				_		Ope	n to Publ	ic Inspect	ion fo	
	Revenue Service	▶ Do	not enter SSN numbers on this form as it may be				on is a 501		_		anization	_	
<u>A</u> a	ddress changed		Name of organization (Check box if name ch	angeo ar	na see instruction	5.)					cation nu see instruc		
	pt under section	Print	Concordia University, St Paul						٠,	11 0404	004		
	n(C)(3)	or	Number, street, and room or suite no. If a P O. box	, see inst	tructions		ŀ	F Unre		11-0696	s activity	codes	
_	8(e)	Туре	1282 Concordia Ave				+	(See instructions.)					
= -	8A 🗌 530(a)		City or town, state or province, country, and ZIP or	toreign p	oostai code			0.0	1000	. :			
52	9(a)	-	St Paul MN 55104					900002					
at end	value of all assets d of year		oup exemption number (See instructions		n [7 501	(a) +rus	· -	401(a		709	1 Other	+m.10:	
			neck organization type 501(c) corp			(c) trus	<u> </u>	401(8	y iru	St _	Other	เเนธ	
			n's primary unrelated business activity.				-trallad as	· · · · · · · ·			Van E	l Na	
			e corporation a subsidiary in an affiliated gro			ary cor	itrollea gr	oupr	٠.		res 🖭	INO	
			and identifying number of the parent corp	oration		nhon	e number			451 4	41-8811		
			Michael Dorner		(A) Income			penses			(C) Net		
Part			e or Business Income	-+	(A) Income	-	(6) 6.	pelises			(0) 1461		
1a	Gross receipts			1	123,780			1					
ь	Less returns and a			1c 2	123,780	-						_	
2	•	•	Schedule A, line 7)	3	123,780	-		-+			123,780		
3	•		t line 2 from line 1c	-	123,760						123,760		
4a			ne (attach Schedule D)	4a		1							
b	• • •	•	1797, Part II, line 17) (attach Form 4797)	4b									
_ C ○ 5	•		n for trusts	4c		-	-N /		- -				
7		•	erships and S corporations (attach statement)	5		المكتا	EIVE) 	╬				
, 6			le C)	7			, t						
, 7			ced income (Schedule E)	-	A 39	UG 2	9 2017	7 0					
8		-	and rents from controlled organizations (Schedule F)	8	- (4)		2011			-			
9			ction 501(c)(7), (9), or (17) organization (Schedule G)	9		=0 (90 15	= 0.0		4				
10	•	•	ivity income (Schedule I)	10		30	EM, U	T +	+-				
11	_		Schedule J)	11									
12			ructions; attach schedule)	12	100 700						100 700		
13 Post			3 through 12	13	123,780		a \ /Evac				123,780		
Part Part			Taken Elsewhere (See instructions fo be directly connected with the unrelated to the connected with the unrelated to the connected with the unrelated to the connected to the connected with the unrelated to the connected to th				is.) (Exce	pt ior	COI	ıınbuı	ons,		
14			cers, directors, and trustees (Schedule K)					$ \top$	14				
15	Salaries and w		cers, directors, and trustees (Scriedule N)			• •			15		12,569		
16	Repairs and m			• •		• •			16		12,309		
17	Rad dabte			• •					17				
18									18				
19) -	19				
20			ns (See instructions for limitation rules) .					_	20				
21			Form 4562)			• •	4,827	·					
22			imed on Schedule A and elsewhere on re			i		-	22b		4,827		
23									23		1,02,		
24	Contributions	to defe	rred compensation plans					·	24				
25			grams						25				
26	Excess exemp	t exper	ises (Schedule I)						26				
27			sts (Schedule J)						27			_	
28			ach schedule)						28		56,518		
29			ld lines 14 through 28						29		73,914	-	
30			xable income before net operating loss de						30		49,866		
31			duction (limited to the amount on line 30)						31				
			xable income before specific deduction.						32			_	
33	Specific deduc	tion (G	enerally \$1,000, but see line 33 instructio	ns for e	exceptions) .			.	33		1,000	_	
34	Unrelated bus	iness 1	taxable income. Subtract line 33 from lin	ne 32. I	f line 33 is gre	eater t	han line :	32, 🏳					
	enter the small	er of ze	ero or line 32					.].	34		AR RAA		

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11291J

48,866 Form **990-T** (2016)

Page	1

Part		ax Computation							
35	Organi	zations Taxable as Corporati	ons. See instructions f	or tax computation.	Controlled grou	1b			
	membe	ers (sections 1561 and 1563) ch	eck here 🕨 🔲 See ins	structions and:				1	
а	Enter v	our share of the \$50,000, \$25,0	00, and \$9,925,000 taxa	ible income brackets	(in that order):				
	(1) \$	(2) \$		3) \$					
b		rganization's share of: (1) Addit	ional 5% tax (not more t	han \$11,750) \$		İ		Í	
	(2) Add	litional 3% tax (not more than \$	100,000)	\$					
С	• •	e tax on the amount on line 34.	•			▶ 35c		7,330	
36	Trusts	Taxable at Trust Rates.	See instructions for	tax computation.	Income tax of	on 🗔			
	the am	ount on line 34 from: Tax rat	e schedule or Sched	dule D (Form 1041)	1	▶ 36			
37		tax. See instructions	· · · · · · · · · · · · · · · · · · ·			▶ 37			
38	-	tive minimum tax				38			
39		Non-Compliant Facility Incom				39	1		_
40		Add lines 37, 38 and 39 to line 3						7,330	
Part		ax and Payments	<u> </u>						
41a		tax credit (corporations attach Fo	rm 1118: trusts attach Fo	rm 1116) . 41a	a	1			
b	•	credits (see instructions)			b				
c		I business credit. Attach Form			c				
d		for prior year minimum tax (atta				_			
e		redits. Add lines 41a through 4				41e	1	1	
42		ct line 41e from line 40				42	 	7,330	
43		xes, Check if from. Form 4255				43	 		
44		ax, Add lines 42 and 43				44		7,330	
45a		nts: A 2015 overpayment credit		l l	a			,	
b		stimated tax payments							
C		posited with Form 8868							
d		n organizations: Tax paid or with		———		_		- 1	
u e	_	withholding (see instructions)				\dashv			
f	•	for small employer health insura			-				
-			E 0400		' 	-			
g	Forn	· · · · · · · · · · · · · · · · · · ·	Other			İ		Ì	
46		payments. Add lines 45a throug				46	-	0	
47		ted tax penalty (see instructions						800	
48		e. If line 46 is less than the total				► 48		8,130	
49		ayment. If line 46 is larger than				► 49	-	0,100	
50		e amount of line 49 you want Credi			Refunded		 		
Part		tatements Regarding Certa				- 00		1	
51		time during the 2016 calendar y				r other a	uthority	Yes	No
J		financial account (bank, securit							
		Form 114, Report of Foreign							
	here >	· · · · · · · · · · · · · · · · · · ·					,		
52	Durina t	he tax year, did the organization re	ceive a distribution from. o		or transferor to, a	foreign tr	ust?		
-	-	see instructions for other forms			o,	ioroigii ti	wo		
53		he amount of tax-exempt interes	•		· .			ŀ	i
	Under	penalties of perjury, I declare that I have ex	camined this return, including acc	companying schedules and	statements, and to the	e best of my	knowledge a	and beli	ef, it is
Sign	true, c	orrect, and complete Declaration of prepare	r (other than taxpayer) is based o	n all information of which pre	eparer has any knowle		the IRS discu	ee thie i	return
Here	11/	Willed & Dormer	- 18/22/IT	Vice President for	r Finance	with 1	he preparer	shown I	below
		rure of officer	Date	Title		(see ii	nstructions)? [_Yes [□No
Paid		Print/Type preparer's name	Preparer's signature		Date		 	N	
	250=					Check L self-emple	- 11		
Prepa		Firm's name ▶				Firm's EIN			
Use (וחכ	Firm's address ▶			··	Phone no.			

Schedule A-Cost of Goods	s Sold. En	ter method of	f invento	ory va	luation >					
1 Inventory at beginning of	year	1		6	Inventory a	at end of year	6			
2 Purchases		2		7	Cost of	goods sold. Subtract				_
3 Cost of labor	$ ag{7}$	3			line 6 from	line 5. Enter here and				
4a Additional section 263A	costs				ın Part I, lir	ne 2	7			
(attach schedule)	4	la l		8	Do the rul	les of section 263A (wi	th res	pect to	Yes	No
b Other costs (attach sched	dule) 4	lb			property p	roduced or acquired for	resale	e) apply		ì
5 Total. Add lines 1 through	_	5			to the orga	unization?				
Schedule C-Rent Income		al Property a	nd Pers	onal						
(see instructions)	•				, ,		•			
1. Description of property										
(1)										
(2)										
(3)										
(4)								_		
	2. Rent receive	ed or accrued								
(a) From personal property (if the percer for personal property is more than 10 more than 50%)		onal pro	perty (if the operty exceeds fit or income)	3(a) Deductions directly in columns 2(a) an				.e		
(1)		•					-			
(2)	_									
(3)										
(4)				_						
Total		Total				(b) Total deductions				
(c) Total income. Add totals of colu	ımns 2(a) and	2(b). Enter				(b) Total deductions. Enter here and on page	1.			
here and on page 1, Part I, line 6, co						Part I, line 6, column (B)				
Schedule E-Unrelated Deb	ot-Finance	ed Income (se	ee instrud	ctions)					
1. Description of debt-	financed prope	erty			come from or debt-financed	3. Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (b) Other deduction				
·		·		pro	perty	(a) Straight line depreciation (attach schedule)	duction: redule)	3		
(1)		- ,					†	<u> </u>		
(2)							1			
(3)							\top			
(4)		-					\top			
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property h schedule)		4 dr	olumn vided lumn 5	7. Gross income reportable (column 2 × column 6)		Allocable d Imn 6 × tota 3(a) and	l of colu	
(1)					%					
(2)					%					
(3)					%		T			
(4)					%					
	,		•			Enter here and on page 1, Part I, line 7, column (A).		r here and I, line 7, c		
Totals					. , .▶					
Total dividends-received deduction	ns included i	n column 8 .	<u></u> .	<u>.</u> .	<u> </u>		1	_		
								Form 9	90-T	(2016)

Schedule F-Interest, Ann	uities, Royaities,			Organizations	janizations (se	e instru	ctions)		
1. Name of controlled	2. Employer	3. Net unrela			5. Part of colum		connected with income		
organization	identification number		nstructions)	payments made	included in the organization's gr				
(1)							 		
(2)		<u> </u>				_	 		
(3)					 		\top		
(4)		-			 		 		
Nonexempt Controlled Organiz	zations	·							
					10. Part of colun	nn Q that is	11 [Deductions directly	
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	included in the organization's gr	controlling	conne	cted with income in column 10	
(1)	-								
(2)	<u> </u>		-						
(3)									
(4)						-			
					Add columns 6	and 10.	Add	columns 6 and 11.	
					Enter here and of Part I, line 8, co	on page 1,	Enter	here and on page 1, , line 8, column (B)	
Totals	<u> </u>	<u> </u>		<u> </u>	<u> </u>				
Schedule G-Investment	Income of a Sect	ion 501(c			zation (see ins	tructions			
1. Description of income	2. Amount o	f income	3. Deductions directly connected (attach schedule)		4. Set-aside (attach sched		and s	otal deductions set-asides (col. 3 plus col. 4)	
(1)						_			
(2)									
(3)						_			
(4)									
	Enter here and							ere and on page 1,	
	Part I, line 9, o	column (A).				-	Part I, II	ine 9, column (B).	
Totals	. <u>▶</u>								
Schedule I—Exploited Exe	empt Activity Inc	ome, Oth	er Than	Advertising Ir	come (see inst	ructions	<u>) </u>	· ·	
	2. Gross		xpenses	4. Net income (loss)				7. Excess exempt	
	unrelated	Conne	rectly ected with	from unrelated trade or business (column	5. Gross income from activity that			expenses (column 6 minus	
 Description of exploited activ 	rity business inco	me prod	luction of	2 minus column 3)	is not unrelated			column 5, but not	
	business	un	related	If a gain, compute	business income	COIL	iiiii 3	more than	
		Dusine	ess income	cols. 5 through 7	_			column 4).	
(1)									
(2)									
(3)									
(4)									
	Enter here and page 1, Part		ere and on					Enter here and on page 1,	
	line 10, col. (A). Ine 1	0, col. (B)					Part II, line 26.	
Totals	▶		_						
Schedule J-Advertising I								·	
Part I Income From P	eriodicals Repor	ted on a	Consoli	dated Basis					
			_	4. Advertising				7. Excess readership	
1. Name of periodical	Name of periodical advertising income		Direct ising costs	gain or (loss) (col. 2 minus col. 3), if a gain, compute cols. 5 through 7,	5. Circulation income		Enter here Part I, lin	costs (column 6 minus column 5, but not more than column 4)	
(1)			·						
(2)]				1	
(3)				1				1	
(4)]				1	
Totals (carry to Part II, line (5))	. ▶								

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

4. Advertising 7. Excess readership

1. Name of penodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) ▶						

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
3)		%	
4)		%	
Total. Enter here and on page 1, Part II, line 14			

Form **990-T** (2016)

Concordia University, St. Paul	41-0696906
FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS	
CONTRACTED SERVICES	32,999
MAINTENANCE	8,665
ACCOUNTING	4,951
UTILITIES	2,476
GENERAL AND MAINTENANCE	7,427
TOTAL OTHER DEDUCTIONS	56,518
	========

.

•

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

Attachment Sequence No. 179

Name(s) she	own on return		Busin	less or activity to w	nich this form reia	ites	laent	nying number
Concordi	la University, St. I	Paul	confe	erences			<u></u>	41-0696906
Part I	Election To Note: If you	Expense Cer have any liste	rtain Property U	nder Section olete Part V b	179 efore you co	mplete Part I.		
1 Max							1	
							2	
			•			ons)	3	
4 Rec	duction in limitat	ion. Subtract lir	ne 3 from line 2. If z	ero or less, en	ter -0		4	
5 Dol	lar limitation foi	tax year. Sul	otract line 4 from	line 1. If zero	or less, ente	r -0 If married filing		
sep	arately, see inst	ructions		<u>.</u>			5	
6	(a) De	scription of proper	ty	(b) Cost (bus	iness use only)	(c) Elected cost		
7 List	ed property. Ent	er the amount	from line 29		7			
8 Tota	al elected cost o	f section 179 p	roperty. Add amou	nts in column ((c), lines 6 and	7	8	
9 Ten	itative deduction	. Enter the sm a	aller of line 5 or line	8			9	
10 Car	ryover of disallo	wed deduction	from line 13 of you	r 2015 Form 4	562		10	
11 Bus	iness income limi	tation. Enter the	smaller of business i	ncome (not less	than zero) or li	ne 5 (see instructions)	11	
12 Sec	ction 179 expens	e deduction. A	dd lines 9 and 10, l	out don't enter	more than line	e <u>11</u>	12	
13 Car	ryover of disallo	wed deduction	to 2017. Add lines	9 and 10, less	line 12 ▶	13		
			for listed property.					
						ide listed property.) (S	ee in	structions.)
14 Spe	ecial depreciation	n allowance f	or qualified proper	ty (other than	listed prope	rty) placed in service		
dur	ing the tax year	(see instruction	ns)				14	
15 Pro	perty subject to	section 168(f)(1) election				15	
16 Oth	er depreciation	including ACR	S)			<u> </u>	16	4,827
Part III	MACRS De	oreciation (D	on't include listed		See instruction	ons.)		
				Section A	1 6 004		T 43	,
						6	17	<u> </u>
-	et accounts, che		•	_		one or more general	1	
a55			od in Sanjaa Duri			e General Depreciation	Syct	om
	Section B	(b) Month and year	(c) Basis for depreciation		ear Osing the	deneral Depreciation	Toysu	
	fication of property	placed in service	(business/investment use only—see instructions)		(e) Convention	(f) Method	(g) D	epreciation deduction
	-year property						ļ	
	-year property						 	
	-year property						├─	
	year property						<u> </u>	
	year property	-					├	
	year property	-		05		- C //	├	
	year property			25 yrs.	3.43.4	S/L	├	
	sidential rental			275 yrs	MM	5/L		· · · · · · · · · · · · · · · · · · ·
	perty			275 yrs	MM	5/L	├─	
	nresidential real			39 yrs	MM	5/L	├──	
pro	perty				MM	S/L	<u> </u>	·
60 - Oli		-Assets Place	d in Service During	2016 Tax Ye	ar Using the A	Alternative Depreciation	n Sys	stem
20a Cla		}		10		5/L	 	
b 12-		-		12 yrs		S/L	<u> </u>	
c 40-		Soo instruction	20)	40 yrs	ММ	S/L		
	Summary (S						 -	
	ed property. Ent			7 lines 10 sm -		(a) and line 04 5 :	21	· · · · · · · · · · · · · · · · · · ·
			ines 14 through 17 of your return. Partn			(g), and line 21. Enter -see instructions .	22	4,827
23 For	assets shown a	bove and place	ed in service during section 263A costs	the current ye	•			1,327

VIIII 4302 (2	.010/								_
Part V	Listed Property	(Include automobiles,	certain other	vehicles,	certain aircraft,	certain	computers,	and proper	ty
	used for entertain	ment, recreation, or a	musement.)						

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A. all of Section B. and Section C if applicable.

				(c) of Section												
	Section A	-Depreci	ation ar	nd Other Inf	formati	on (Ca	ution:	See the	e instru	ctions	for lım	its for p	asseng	er auto	mobiles.	
24	a Do you have ev	vidence to su	pport the	business/inves	stment u	se claime	ed?] Yes [No	24b	f "Yes,	" is the e	vidence	written	? 🗌 Yes	☐ No
	(a) e of property (list vehicles first)	(b) Date placed in service	(c) Busines investment percenta	tuse Costoro	d) other basi		(e) for depreness/inve use only	stment	(f) Recove period	- 1	(g) fethod/ nventio	1	(h) epreciation deduction		(i) Elected sec cos	
25	Special dep															
	the tax year							se (see	instruc	tions) .	2	5				
_26	Property use	ed more tha	an 50%		d busin	ess use) .									
				%												
				%		_								-		
				%												
_27	Property use	ed 50% or l	less in a		usiness	use:				S/L						
				<u>%</u>						5/L 5/L	_					
				%						5/L						
-00	Add amount	o in column	h) line		h 27 E	ntor bo	ro and	on line	21 02/			<u> </u>				
28 29	Add amount			-	•					_				29		
_25	Add amount	S III COIUIIII	<u> </u>						e of Ve			<u> </u>	·			
Com	plete this secti	ion for vehic	les used									r related	person.	If you p	orovided v	ehicles
	our employees,															
		 -			(a)		(b)		(c)		(d)		(e)		f)
30	Total business the year (don'	-		cle 1	Veh	icle 2	Veh	icle 3	\ \ \	ehicle 4	Ve	hicle 5				
31			_								1	_	-			
	Total other	personal	(nonc	•												
33	Total miles lines 30 thro							<u> </u>				· <u>-</u>				
34	Was the ve	hicle avail	able for	r personal	Yes	No	Yes	No	Yes	No	Ye	No	Yes	No	Yes	No
35	Was the veh	icle used p	rimarily	by a more					-							
36	Is another veh		•						+		+-	+	+	+		
	13 another ven			estions for	Emplo	vers W	ho Pro	vide V	ehicles	for Us	e hv	Their Fr	nplove	 PS		l
	wer these que e than 5% ow	stions to d	etermine	e if you mee	t an ex	ception					_				s who ar	en't
37	Do you mair your employ			•	•	rohibits	•	rsonal	use of	vehicle	s, incl	uding co	ommuti	ng, by	Yes	No
38	Do you mair employees?	ntain a writt	ten poli	cy statemen	t that p	orohibit	s perso									<u> </u>
39	Do you treat					-	•									
40	Do you provuse of the ve	ide more tl	han five	vehicles to	your e	mploye		taın ınfo	ormatio	n from	your	employe	es abo	ut the		
41	Do you meet						nobile d	demons	stration	use? (See in	structio	ns.)			
	Note: If you			_	•								•	- •	—	'
Pai	t VI Amori		<u>·</u>			,				-						
	(a Description			(b) Date amortiza begins	ition	Amor	(c) tizable ar	mount	С	(d) ode sect	ion	Amorti perio percer	zation d or	Amortiz	(f) zation for th	ıs year
42	Amortization	of costs th	at begin	ns during you	ur 2016	tax ye	ar (see	ınstruc	tions):							
							,		Τ΄		_					
	Amortization												43			
44	Total. Add a	mounts in	column	(f). See the	instruct	ions foi	where	to rep	ort	<u> </u>	<u> </u>	<u>.</u> .	44			