DLN: 93493134049701

OMB No. 1545-0047

2019

Department of the Internal Revenue Service **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

 \blacktriangleright Go to $\underline{\textit{www.irs.gov/Form990}}$ for instructions and the latest information.

Open to Public Inspection

A F	or the	e 2019 c	alendar year, or tax year beginning 07-01-2019 $$, and ending 06-3	30-2020					
B Che	ck if ar	pplicable:	C Name of organization	D Employe	er iden	tification number			
		change	YESHIVA UNIVERSITY		13-1624	1225			
	me cha	-	% JACOB HARMAN Doing business as						
	tial ret	:urn n/terminated	Doing business us						
		return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Telephon	e numb	er		
		on pending	500 WEST 185TH STREET		(646) 5	92-400)5		
			City or town, state or province, country, and ZIP or foreign postal code						
			NEW YORK, NY 10033		G Gross re	ceipts \$	712,269,864		
			F Name and address of principal officer:	H(a) Is	this a group rel	turn fo			
			ALAN KLUGER 500 WEST 185TH STREET		ubordinates?		□Yes ☑ No		
			NEW YORK, NY 10033		re all subordinat	es	☐ Yes ☐No		
[Tax	k-exen	npt status:	☑ 501(c)(3) ☐ 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527		icluded? [:] "No," attach a l	ist (se			
1 W	oheit	a: b \\\\\	/W.YU.EDU		roup exemption	•	•		
•	CDSIC	e. P WW	W.10.EB0	' '					
K Forn	n of or	rganization:	: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of	formation: 1897	M Stat	te of legal domicile: NY		
1 0111	11 01 01	garnzacioni	. La corporation La masc La Association La outer p						
Pa	ırt I	Sum	mary	<u>'</u>					
			scribe the organization's mission or most significant activities:						
a,			ERSITY IS COMPOSED OF SEVERAL COLLEGES AND SCHOOLS PROVIDING S. SEE SCHEDULE O.	EDUCATION	ON, TRAINING, F	RESEAF	RCH AND CLINICAL		
ဋ	-	ROOKAN	3. 3EE 36HE96EE 6.						
1 3	-								
Ş	-		_						
Governance			is box \blacktriangleright if the organization discontinued its operations or disposed of		25% of its net a		.		
	l		of voting members of the governing body (Part VI, line 1a)		•	3			
Se S	l		of independent voting members of the governing body (Part VI, line 1b)			4			
ቜ	l		nber of individuals employed in calendar year 2019 (Part V, line 2a) .			5			
Activities &	l		nber of volunteers (estimate if necessary)			6			
•	l		elated business revenue from Part VIII, column (C), line 12		•	7			
	b	Net unrel	ated business taxable income from Form 990-T, line 39			7	b 0		
					Prior Year		Current Year		
<u>a</u> i	8	Contribut	cions and grants (Part VIII, line 1h)		57,837,5	531	44,108,613		
Ravenue	9	Program	service revenue (Part VIII, line 2g)	224,081,5	570	236,818,213			
λċ	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		51,158,8	387	26,495,165		
_	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,731,0	50	6,552,106		
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		338,809,0	38	313,974,097		
	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		99,470,0	014	102,254,331		
	14	Benefits	paid to or for members (Part IX, column (A), line 4)			0			
\$6	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		125,359,0	50			
าร์	16a	Professio	onal fundraising fees (Part IX, column (A), line 11e)		597,7	750	448,896		
Expenses	ь	Total fundr	raising expenses (Part IX, column (D), line 25) ▶7,648,411						
ಮ	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		108,544,8	318	111,433,927		
	18	Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		333,971,6	532	347,188,571		
	19	Revenue	less expenses. Subtract line 18 from line 12		4,837,4	106	-33,214,474		
× o			'	Begin	ning of Current Y		End of Year		
Net Assets or Fund Balances									
Bate	20	Total ass	ets (Part X, line 16)		917,053,7	743	875,469,518		
₹ <u>₽</u>	21	Total liab	ilities (Part X, line 26)		392,527,0)59	384,101,775		
žī	22	Net asset	s or fund balances. Subtract line 21 from line 20		524,526,6	584	491,367,743		
Pa	rt II	Sign	ature Block						
			erjury, I declare that I have examined this return, including accompanying						
	eage nowle		f, it is true, correct, and complete. Declaration of preparer (other than off	icer) is bas	ed on all informa	ation o	r which preparer has		
<u>-</u>		1.							
					2021-05-13				
Sign		Signati	ure of officer		Date				
Here	:		CLUGER DIRECTOR OF TAX						
		Type o	r print name and title						
		P		Date 2021-05- 1 3		PTIN P004602	262		
Paid	t			-021-03-13	self-employed	504002			
Pre	oare	er 📙	irm's name ► PricewaterhouseCoopers LLP		Firm's EIN ►				
Use	On	ly 🎏	irm's address ▶ 300 Madison Avenue		Phone no. (646)	471-300	00		
		- '	New York, NY 10017						
					I	Г.	D		
May t	he IR	S discuss	this return with the preparer shown above? (see instructions) $\ \ . \ \ \ .$			\checkmark	Yes 🗆 No		

Form	n 990 (2019)					Page 2
Pa	art III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to	any line in this Part III		🗸
1		rganization's mission:		,		
	UNIVERSITY IS COMPO TORAL EDUCATION AN				DERGRADUATE, GRADUATE, PRO E SCH O)	PESSIONAL AND POST-
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on So	hedule O.			
3	services?			changes in how it cond	ucts, any program • • • • • • • • •	☐ Yes ☑ No
	If "Yes," describe the	se changes on Sched	ule O.			
4	Section $501(c)(3)$ an		ions are required	to report the amount of	largest program services, as me of grants and allocations to other	
4a	(Code:) (Expenses \$	126,730,942	including grants of \$	102,254,331) (Revenue \$	214,091,128)
	See Additional Data					
4b	(Code:) (Expenses \$	87,186,899	including grants of \$	0) (Revenue \$	16,456,401)
	See Additional Data					
4c	(Code:) (Expenses \$	91,585,074	including grants of \$	0) (Revenue \$	6,270,684)
	See Additional Data					
4d	Other program service	ces (Describe in Sched	dule O.)			•
	(Expenses \$	inc	cluding grants of	\$) (Revenue \$)
4e	Total program serv	/ice expenses ►	305,502,9	15		

Par	Checklist of Required Schedules			Page 3
rai	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 2	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part Schedule D,Part Schedule D,Part	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 3	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
a	in Part X, line 16? If "Yes," complete Schedule D, Part IX 💆	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

orm	990 (2019)			Page 4		
Par	Checklist of Required Schedules (continued)					
			Yes	No		
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No		
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No		
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes			
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes			
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No		
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No		
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes			
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes			
86	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No		
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes			
Par						
	Check if Schedule O contains a response or note to any line in this Part V					
	Financha number negative Pay 2 of Farm 1000 Financia Colonia C		Yes	No		
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 544					
D	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0					

1c

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return)		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
D	If "Yes," enter the name of the foreign country: ►IS, CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand]		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

orm	990 (2019)			Page 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to l	ines
Se	ction A. Governing Body and Management			
		\blacksquare	Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 1a 35			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).]		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes	
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: >JACOB HARMAN 500 WEST 185TH STREET NEW YORK, NY 10033 (646) 592-4005			
			orm 994	7 (2010)

Name and title

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII .

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

 \checkmark

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

	for rolated			, .		,		(14/ 2/1000	(1)/ 2/1000	organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

DV GLOBAL CONSTRUCTION,

62578 COLLECTIONS CENTER DRIVE

MILLENIUM CENTURY CONTRACTING,

PRICEWATERHOUSECOOPERS LLP,

compensation from the organization ▶ 67

439 West 126th Street NEW YORK, NY 10027 ELLUCIAN COMPANY LLP,

CHICAGO, IL 60693

26-40 14TH STREET ASTORIA, NY 11102

3109 W DR MLK JR BLVD TAMPA, FL 33607

Part VII

1,305,125

9,118,304

1,337,545

1,278,288

Form 990 (2019)

	(A) Name and title	Average hours per week (list any hours	Average hours per than one box, unless person week (list is both an officer and a any hours for rolated any hours described is both an officer and a director/trustee) organization (W-2/1009- (W-2/1009-								Reportable compensation from related organizations	5	Estima amount o compen from	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		1099- SC)	(W-2/1099- MISC)		organizat relat organiza	ed
See	Additional Data Table													
c T	Sub-Total	art VII, Section	Α.				*		6.5	50,777		0		723,631
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos					rece				<u> </u>		, 15,601
3	Did the organization list any former line 1a? If "Yes," complete Schedule .										employee on		Yes	No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repo s greater than \$	ortable (comp 0? <i>If</i>	ensa	ation	n and c	ther	r compens	ation from	the	3	Yes	
5	Did any person listed on line 1a recei services rendered to the organization	ve or accrue cor	npensat	tion fi								5	Yes	No
Se	ection B. Independent Contract	ors											ı	
1	Complete this table for your five high from the organization. Report compe											mpens	sation	
	<u> </u>	(A) and business addre		,							(B) iption of services		(C Comper	
1412	RITAS SECURITY SERVICES, BROADWAY YORK, NY 10018	Jack day							(SECURITY S				,406,227
	OBAL CONSTRUCTION									CONSTRUCT	TON		1	305 125

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)

(D)

CONSTRUCTION

CONSTRUCTION

ACCOUNTING SERVICES

IT SERVICES

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

		(2019)								Page 9
Part	VII						1:			
		Check If Sched	lule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(4)	1	a Federated campa	igns		1a			revenue		312 314
Grants mounts		b Membership dues	· .	. [1 b					
Gra mo		c Fundraising even	ts .	. [1c	5,632,844				
fs, r A		d Related organizat	tions	. <u> </u>	1d	1,296,131				
Gi		e Government grants	(con	tributions)	1e	4,412,641				
ons, Sin		f All other contributio and similar amounts	ns, g	ifts, grants,	ĺ					
utic ner		above		L	1f	32,766,997				
를		g Noncash contributio lines 1a - 1f:\$	ns in	cluded in	1g	138,182				
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines :	la-1			•				
	┸					Business Code	44,108,613			
	2	STUDENT TUITION				900099	214,091,128	214,091,128		
не						300033	16,456,401	16,456,401		
even	Ŀ	STUDENT & FACULTY	AUX	ILIARY SERVIC	ES	900099	10,430,401	10,430,401		
⊕ 25	c	OTHER EDUCATION R	RELAT	TED REVENUE		900099	2,470,684	2,470,684		
Program Service Revenue		AFFILIATE SERVICES					3,800,000	3,800,000		
× ×	C	ATTEMATE SERVICES				900099	, ,	, ,		
grar	e	-								
Ě										
	f	All other program	serv	ice revenue.						
	_	Total. Add lines 2				236,818,213	1	1		Т
		Investment income similar amounts) .			nds, i	nterest, and other	6,473,55	3	-544,092	7,017,645
	4	Income from invest	mer	t of tax-exen	npt bo	ond proceeds	·	0		
	5	Royalties			•	•	48,86	9		48,869
				(i) Real		(ii) Personal	+			
		Gross rents	6a	7,1	19,908	3				
	b	Less: rental expenses	6b	2,8.	30,179	,				
	С	Rental income		4.0						
		or (loss) Net rental income	6c		89,729	1	<u>0</u> 4,289,72	9		4,289,729
		- Het rental meome		(i) Securit		(ii) Other	1	_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	78	Gross amount from sales of assets other than inventory	7a	414,9	18,028	3				
	b	Less: cost or other basis and sales expenses	7b	394,8	96,416	5				
	С	Gain or (loss)	7с	20,0	21,612	2				
		d Net gain or (loss)				· · · •	20,021,61	2		20,021,612
Other Revenue	82	a Gross income from fu (not including \$ contributions reported See Part IV, line 18	5 d on	,632,844 of line 1c).	8a	76,600				
, Re	ı	Less: direct expen	ses		8b	569,172				
the	•	Net income or (los	s) fr	om fundraisii	ng ev	ents	-492,57	2		-492,572
		Gross income from See Part IV, line 19	•		9a	0	_			
		Less: direct expen			9b ictiviti	_		0		
						<u> </u>				
	10	a Gross sales of inve returns and allowa			10a	0	,			
	ı	Less: cost of good	s so	ld	10b	0	_			
	•	Net income or (los	s) fr	om sales of i	nvent	ory		0		
		Miscellaneo				Business Code	2.706.00			2 705 000
		Larevenue for CA	PITA	AL RENOVATI	ON	90009	9 2,706,08	U		2,706,080
		• 								
		All other revenue								
		Total. Add lines 1				•	2,706,08	0		
	12	2 Total revenue. S	ee ir	nstructions .	•	* * * *	313,974,09	7 236,818,213	-544,092	
										Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c		_		ımn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	263,458	263,458		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	98,651,795	98,651,795		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	3,339,078	3,339,078		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	4,082,708	3,271,125	363,458	448,125
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	99,693,628	87,850,218	7,975,490	3,867,920
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	4,167,510	3,584,058	333,401	250,051
9 Other employee benefits	17,436,923	14,995,754	1,394,954	1,046,215
10 Payroll taxes	7,670,648	6,596,757	613,652	460,239
11 Fees for services (non-employees):				
a Management	0			
b Legal	717,892		717,892	
c Accounting	1,226,859		1,226,859	
d Lobbying	115,276		115,276	
e Professional fundraising services. See Part IV, line 17	448,896			448,896
f Investment management fees	1,914,366		1,914,366	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,448,899	5,448,899		
12 Advertising and promotion	2,372,105	1,759,296	450,700	162,109
13 Office expenses	5,781,138	4,426,143	1,098,416	256,579
14 Information technology	12,485,665	9,988,532	2,372,276	124,857
15 Royalties	643	643		
16 Occupancy	8,034,847	6,508,026	1,526,621	200
17 Travel	2,497,168	1,961,911	474,462	60,795
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	506,078	395,842	96,155	14,081
20 Interest	13,481,923	10,920,358	2,561,565	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	12,429,732	10,068,083	2,361,649	
23 Insurance	2,722,049	2,204,860	517,189	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SECURITY SERVICES	8,651,891	6,997,585	1,643,859	10,447
b TUITION	13,136,586	10,640,635	2,495,951	
c PLEDGE WRITEOFF-BAD DEBT	13,434,006	10,881,545	2,552,461	

2,655,197

3,821,607

347,188,571

2,055,673

2,692,641

305,502,915

504,487

726,106

34,037,245

d FOOD

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).

Form **990** (2019)

95,037

402,860

7,648,411

Form 990 (2019)

2 3

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30

(B) End of year

Page **11**

1,219,756

25,482,551

55.730.447

951,460

37,574,571

181,313,144

107,384,480

359,040,390

38,018,303

68,754,416

875,469,518

31,078,907

5,074,115

140.380.000

138,773,004

68,795,749

384.101.775

-45,982,031

537,349,774

491,367,743

875,469,518

Form 990 (2019)

0

0

Check if Schedule O contains a response or note to	o any line in this Part IX
	Bea

Notes and loans receivable, net . . .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Deferred revenue . . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow FASB ASC 958, check here <a> \square and

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Less: accumulated depreciation

Intangible assets .

Grants payable .

Inventories for sale or use . . Prepaid expenses and deferred charges .

Cash-non-interest-bearing	
Savings and temporary cash investments	
Pledges and grants receivable, net	
Accounts receivable, net	

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

10a

10b

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1), and persons described in section 4958(c)(3)(B).

444.063.859

262,750,715

Beginning of year

186,040,627

144,406,649

362.628.984

36,255,513

77,384,282

917,053,743

30,675,121

3,010,420

145.565.000

140,055,379

73,221,139

392.527.059

-56,209,252

580,735,936

524,526,684

917,053,743

1,475,441

13,022,171

63.661.974

1

2

3

4

5

6

7

8

9

10c

11

12

13

15

16

17

19

20

22

23

25

26

27

28

29

30

31

32

33

0 14

0 18

0 21

0 24

3a

3b

Yes

Yes (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software Version:

EIN: 13-1624225 Name: YESHIVA UNIVERSITY

Form 990 (2019)

Form 990, Part III, Line 4a: STUDENT INSTRUCTION, SEE SCHEDULE O.

Software ID:

Form 990, Part III, Line 4b: ACADEMIC SUPPORT & STUDENT SERVICES, SEE SCHEDULE O.

Form 990, Part III, Line 4c: INSTITUTIONAL SUPPORT, AUXILIARY SERVICES, RESEARCH & TRAINING. SEE SCHEDULE O.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ANDREW J LAUER VP/SECTY/GENERAL COUNSEL	35.0			х				806,746	0	67,435
RABBI DR ARI D BERMAN TRUSTEE - PRESIDENT	35.0 1.0	Х		х				593,051	0	152,632
RABBI JOSHUA JOSEPH SENIOR VP	35.0			х				633,136	0	73,444
JACOB HARMAN VP BUSINESS AFFAIRS - CFO	35.0 1.0			х				532,201	0	17,085
MELANIE LESLIE	35.0									

......

0.0 35.0

> 0.0 35.0

> 0.0

0.0 35.0

0.0 35.0

0.0

.

450,350

391,299

393,082

403,048

345,975

384,527

Χ

Х

Χ

Χ

Х

0

0

0

0

0

0

47,603

36,984

26,680

12,068

62,080

15,492

JACOB HARMAN	
VP BUSINESS AFFAIRS - CFO	
MELANIE LESLIE	
DEAN - CARDOZO LAW SCHOOL	
RICHARD JOEL	

FORMER PRESIDENT/PROFESSOR

......

PROVOST - VP ACADEMIC AFFAIRS

VP MKTNG/COMMUNICATIONS

CHIEF INVESTMENT OFFICER

AHRON HERRING

SELMA BOTMAN

DORON STERN

PROFESSOR

DAVID RUDENSTINE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

4	I famouslakad							J (W 2/4000 I	(14/ 3/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ADAM GERDTS VP INST. ADVANCEMENT (4/2019)	35.0				х			343,626	0	38,038
MOSES PAVA PROFESSOR/DIRECTOR	35.0					х		328,141	0	51,761
EDWARD D STEIN PROFESSOR/DIRECTOR	35.0					х		324,667	0	41,947
STEWART STERK PROFESSOR/DIRECTOR	35.0					х		325,182	0	41,397
HERBERT DOBRINSKY	35.0				х			295,746	0	38,985

0.0 10.0

> 1.0 1.0

> 0.0 1.0

> 0.0 1.0

> 0.0 1.0

Χ

Х

Χ

Χ

Χ

0

0

0

0

0

0

.

......

STEWART STERK
PROFESSOR/DIRECTOR
HERBERT DOBRINSKY
VP UNIVERSITY AFFAIRS

......

MOSHAEL J STRAUS

ROBERT M BEREN

HENRY KRESSEL

MORRY J WEISS

BOARD CHAIRMAN/TRUSTEE

CHAIR EMERITUS/TRUSTEE

CHAIR EMERITUS/TRUSTEE

CHAIR EMERITUS/TRUSTEE

CHAIR EMERITUS/TRUSTEE

DAVID S GOTTESMAN

......

and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

and Independent Contractors

MICHAEL JESSELSON

NAOMI AZRIELI

JULIUS BERMAN

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

SENDER Z COHEN

TREASURER - TRUSTEE

MARVIN S BIENENFELD

MARJORIE DIENER BLENDEN

......

	any hours	and	. a dir	ecto	r/tr/د	rustee)) !	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
LUDWIG BRAVMANN VICE CHAIRMAN/TRUSTEE	0.0	Х						0	0	0
PHILIP FRIEDMAN VICE CHAIRMAN/TRUSTEE	0.0	Х						0	0	0
MORDECAI D KATZ VICE CHAIRMAN/TRUSTEE	0.0	Х						0	0	0
TO A MANAGEMENT	1.0					1	\Box	,		

0

0

0

0

0

0

0

PHILIP FRIEDMAN	1.0	~				_	
VICE CHAIRMAN/TRUSTEE	0.0	^				0	
MORDECAI D KATZ	1.0	v				0	
VICE CHAIRMAN/TRUSTEE	0.0	^				J	
IRA M MITZNER	1.0	_				0	
VICE CHAIRMAN/TRUSTEE	0.0	0					
MICHAEL JESSELSON	1.0						

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

......

Χ

Χ

Х

Χ

Χ

Χ

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours	and	a dir	recto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
IRA DIZENGOFF TRUSTEE	1.0	Х						0	0	0
MICHAEL GAMSON TRUSTEE	0.0	Х						0	0	0
ELLIOT GIBBER TRUSTEE	0.0	Х						0	0	0
DR FELIX L GLAUBACH	1.0	Х						0	0	0

0

0

0

0

0

0

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

......

Χ

Χ

Х

Χ

Χ

Χ

IRUSTEE	
ELLIOT GIBBER	
TRUSTEE	
DR FELIX L GLAUBACH	
TRUSTEE	
ALAN E GOLDBERG	

......

ANDREW HERENSTEIN

.......

MICHAEL D KATZ

JOSHUA L MUSS

J PHILIP ROSEN

MATTHEW J MARYLES

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from related from the compensation

and Independent Contractors

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

LANCE HIRT

MARK WILF

ZYGMUNT WILF

SHIRA YOSHOR

	any hours	and	a dir	recto	r/tr	ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DR LEWIS RUBIN TRUSTEE	0.0	Х						0	0	0
JAY SCHOTTENSTEIN TRUSTEE	0.0	Х						0	0	0
DANIEL A SCHWARTZ	1.0									

JAY SCHOTTENSTEIN	1.0	¥			0	
TRUSTEE	0.0	^			Ŭ	
DANIEL A SCHWARTZ	1.0	.,				
TRUSTEE	0.0	X			0	
IRWIN SHAPIRO	1.0	.,				
TOLICITE		X			l ol	

......

................

0.0 1.0

0.0 1.0

0.0 1.0

0.0 1.0

0.0

TRUSTEE	0.0	X			0	U	
DANIEL A SCHWARTZ	1.0	×			0	0	
TRUSTEE	0.0	^			9	ŭ	
IRWIN SHAPIRO	1.0	v			0	0	
TRUSTEE	0.0	^			0	Ü	
MARK SILBER	1.0						

Х

Χ

Χ

Χ

Χ

0

0

0

0

0

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493134049701
SC	HED	ULE A	- Dublic 4	Charity Statu	e and Dul	nlic Sunn	ort	OMB No. 1545-0047
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 10-EZ.	· a section	2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	nie Service ne organiza VERSITY	tion				Employer identific	ation number
							13-1624225	
	rt I		for Public Charity State a private foundation because					
1 1	rganiz		onvention of churches, or as	•	•		(A)(i)	
2		•	ŕ					
	✓		scribed in section 170(b)(,			
3		·	or a cooperative hospital serv	_			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7			ation that normally receives (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. S					ege or university or a
10		from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to ceres taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated integrated. The organization (s). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e			box if the organization receiver or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	the number	of supported organizations				<u> </u>	
g			ing information about the su	· · · · · · · · · · · · · · · · · · ·	т'			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota		l. P. '	tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9	00 000 57\ 0015

the organization without charge...

(or fiscal year beginning in) ▶

securities loans, rents, royalties

and income from similar sources

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 7 through

Net income from unrelated

10

Amounts from line 4. . Gross income from interest.

Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly

253,876,164

253,876,164

253,876,164

81,320,977

15,837,627

351,034,768

72.322 %

81.390 %

1,083,817,881

(f) Total

Page 2

Section A. Public Support Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 72,001,712 44,108,613 membership fees received. (Do not 41,991,830 37,936,478 57,837,531 253,876,164 include any "unusual grant.") . . 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

41,991,830

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

If the organization failed to qualify under the tests listed below, please complete Part III.)

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 vear (a) 2015

Section C. Computation of Public Support Percentage

72,001,712 dividends, payments received on 25,996,040 business activities, whether or not

2.715.601

Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))

15 Public support percentage for 2018 Schedule A, Part II, line 14

72,001,712

(b) 2016 41,991,830 12,461,941

5.161.927

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,

16a 33 1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test—2019. 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

b 10%-facts-and-circumstances test-2018. 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

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

h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

(c) 2017 37,936,478 14,119,966

2.601.000

37,936,478

57,837,531

(d) 2018

57,837,531

15,100,700

2.653.019

44,108,613

(e) 2019

44,108,613

13,642,330

2.706,080

Schedule A (Form 990 or 990-EZ) 2019

12

14

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
4	under section 513 Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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. 1 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). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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. 3b 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. 3с

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. 4a 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

4b supervised by or in connection with its supported organizations. 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. 4c 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 5a amendment to the organizing document).

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? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

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. 6 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) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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. 9a

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
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.
```

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,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	A family member of a person described in (a) above?	11b		
	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		
S	ection B. Type I Supporting Organizations			
			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	-		
2	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	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			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?			
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		
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		
S	ection 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 instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	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		
ı	b 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		
	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.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
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		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	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		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

7 Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions if any for years prior to 2019			

7 Total annual distributions. Add lines 1 through 6.				
Distributions to attentive supported organizations to who details in Part VI). See instructions				
9 Distributable amount for 2019 from Section C, line 6	9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019	
1 Distributable amount for 2019 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.				
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
 Carryover from 2014 not applied (see instructions) 			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	The state of the s	·	

c From 2016		
d From 2017		
e From 2018		
Total of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016		
c Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019.

Additional Data

Software ID: Software Version:

EIN: 13-1624225

Name: YESHIVA UNIVERSITY

Part VI
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).

instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

DLN: 93493134049701

Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

> ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** YESHIVA UNIVERSITY 13-1624225 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes ☐ No Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

fund or a political action committe	ee (PAC). If additional space is needed, p	provide informatio	on in Part IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE C, PART II-B, LINE 1B AND

1G

Pa	art II-B Complete if the organization is exempt under section 501(c)(3) and here is 5768 (election under section 501(h)).	has NOT file	d				
or e	r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobb	hvina	(a)		(b)		
	ivity.	, ,	Yes	No	/	Amour	nt
L	During the year, did the filing organization attempt to influence foreign, national, state or local leg including any attempt to influence public opinion on a legislative matter or referendum, through the						
а	a Volunteers?			No			
b	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Yes		1		
С	c Media advertisements?			No	1		
d	d Mailings to members, legislators, or the public?			No			
е	Publications, or published or broadcast statements?			No			
f	f Grants to other organizations for lobbying purposes?			No			
g	g Direct contact with legislators, their staffs, government officials, or a legislative body?		Yes			15	51,276
h	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			No			
i	i Other activities?			No			
j	Total. Add lines 1c through 1i					15	51,276
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			No			
b					1		
С	c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
	art III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).					Yes	No
1					1		
2	- · · · · · · · · · · · · · · · · · · ·				2		
3					3		
?aı 1	art III-B Complete if the organization is exempt under section 501(c)(4), sect and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes." Dues, assessments and similar amounts from members	R (b) Part I				501(c)(6)
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).	olitical					
а	a Current year		2a				
b	b Carryover from last year		2b				
C	c Total		2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	; .	3				
4	the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polit	tical					
_	expenditure next year?	<u> </u>	4				
5			5				
P	Part IV Supplemental Information						
	rovide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated estructions), and Part Il-B, line 1. Also, complete this part for any additional information.	d group list); Pa	art II	A, lines	1 an	d 2 (se	e
	Return Reference Explanation						

MIRRAM GROUP LCC, PAUL MARCONE & ASSOCIATES and CONVERGENT GOVERNMENT AFFAIRS WERE

UNIVERSITY'S RELATED INTERNAL COMPENSATION AND BENEFIT COSTS.

AUTHORIZED TO ENGAGE IN LOBBYING ACTIVITIES WITH RESPECT TO LEGISLATIVE, REGULATORY AND BUDGETARY ISSUES ON BEHALF OF YESHIVA UNIVERSITY. THE TOTAL SHOWN ALSO INCLUDES THE

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493134049701

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public

2019

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

		ne organization IVERSITY		Employer identification number				
				13-1624225				
Pa	rt I	Organizations Maintaining Donor Advi		or Accounts.				
		Complete if the organization answered "Ye		(b) Finds and athen accounts				
	Total n	umber at and of year	(a) Donor advised funds	(b) Funds and other accounts				
		umber at end of year						
<u>.</u>		ate value of contributions to (during year)						
		ate value of grants from (during year)						
ŀ		ate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?							
5	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?							
Par	t II	Conservation Easements.						
		Complete if the organization answered "Ye	es" on Form 990, Part IV, line 7.					
L	Purpos	se(s) of conservation easements held by the orga	nization (check all that apply).					
	□ P	Preservation of land for public use (e.g., recreation	n or education) \square Preservation of an	historically important land area				
	☐ P	Protection of natural habitat	\square Preservation of a	certified historic structure				
	□ P	reservation of open space						
2	Compl easem	ete lines 2a through 2d if the organization held a ent on the last day of the tax year.	qualified conservation contribution in the for	rm of a conservation Held at the End of the Year				
а		umber of conservation easements		2a				
b	Total a	creage restricted by conservation easements		2b				
С	Numbe	er of conservation easements on a certified histor	ic structure included in (a)	2c				
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register							
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year >							
ı	Number of states where property subject to conservation easement is located >							
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?							
5	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year							
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$ \Delta\$							
3	Does e	each conservation easement reported on line 2(d)	above satisfy the requirements of section 1	70(h)(4)(B)(i)				
		ection 170(h)(4)(B)(ii)?		☐ Yes ☐ No				
•	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.							
ar	t III	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, or Oth	er Similar Assets.				
La	art, his	organization elected, as permitted under SFAS 1: storical treasures, or other similar assets held for e, in Part XIII, the text of the footnote to its finar	16 (ASC 958), not to report in its revenue started to the control of the control					
b								
((i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:							
а	Revenue included on Form 990, Part VIII, line 1							
b	Assets	included in Form 990, Part X		> \$				
~ × F	32222	ork Peduction Act Notice see the Instruction	no for Form 000 Cat No.	E2202D Schodula D (Form 000) 2010				

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ \boldsymbol{d} Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

	dule D (Form 990) 2019							Page 2
	Organizations Maintaining Coll							
3	Using the organization's acquisition, accession items (check all that apply):	, and other records, c		of the f	ollowing that a	ire a significant ι	use of its co	llection
а	✓ Public exhibition		d [Loar	n or exchange	programs		
b	Scholarly research		е [☐ Oth	er			
С	Preservation for future generations							
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to						☐ Yes	☑ No
Pai	rt IV Escrow and Custodial Arranger Complete if the organization answ X, line 21.		1 990, F	art IV,	line 9, or rep	orted an amou	ınt on Fori	m 990, Part
1 a	Is the organization an agent, trustee, custodia							
	included on Form 990, Part X?						☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XIII	and complete the folk	owing ta	ble:		А	mount	
c	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	m 990, Part X, line 2:	1, for esc	row or c	ustodial accou	nt liability?	☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	lanation	has beei	n provided in F	Part XIII		
	rt V Endowment Funds.	<u> </u>						
	Complete if the organization answ							
_		(a) Current year	(b) Prior		(c) Two years b			Four years back
	Beginning of year balance	471,645,736		,708,396	473,543		,422,370	859,128,606
	Contributions	4,741,205		,455,337	4,686	· '	,577,747	3,353,243
	Net investment earnings, gains, and losses	22,310,543		,764,843	28,674	<u> </u>	,232,032	14,444,526
	Grants or scholarships	12,459,404	12	,480,697	12,579	9,153 11,	.314,389	13,139,676
е	Other expenditures for facilities and programs	44,072,742	11	,802,143	12,615	5,677 8,	,374,621	418,364,329
f	Administrative expenses							
g	End of year balance	442,165,338	471	,645,736	481,708	3,396 473,	,543,139	445,422,370
2 a	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment > 5.570 %							
b	Permanent endowment ► 76.640 %							
С	Temporarily restricted endowment ► 17.7	90 %						
	The percentages on lines 2a, 2b, and 2c shoul	d equal 100%.						
3 a	Are there endowment funds not in the possess organization by:	ion of the organizatio	n that a	re held a	nd administere	ed for the		Yes No
	(i) unrelated organizations						3a(i)) No
	(ii) related organizations						3a(ii)) No
b	If "Yes" on 3a(ii), are the related organization	•					3b	
4	Describe in Part XIII the intended uses of the		nent fun	ds.				
Pai	rt VI Land, Buildings, and Equipmen Complete if the organization answ		, מפת ד	art TV	ling 11a Coo	Form 990 Pa	rt V line '	10
	Description of property (a) Cost or oth (investment)	er basis (b) Cost or				ted depreciation		Book value
1.2	Land		1	.3,552,086	5			13,552,086
	Buildings			98,703,972		239,089,295		159,614,677
	Dallania I	1	J.	-1.001012	- 1			107/011,077

31,807,801

8,146,381

23,661,420

Part VII	Investments—Other Securities.	Tawa 000 Dawt IV line	. 11h Can Farm 000 D	aut V lina 12
	Complete if the organization answered "Yes" on F (a) Description of security or category	orm 990, Part IV, line (b) Book value	(c) Method	of valuation:
	(including name of security)			year market value
	I derivatives			
(3) Other	ATIVE/OTHER INVESTMENTS	359,040,390		
(B)	TIVE OTTEN INVESTMENTS	333,040,330		<u> </u>
(C)				
(D)				
(E)				
F)				
(G)				
H)				
intal (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	359,040,390		
Part VIII	Investments—Program Related.	<u> </u>		
	Complete if the organization answered 'Yes' on F	Form 990, Part IV, line		-
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
1)				value
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
otal. (Columi	n (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX	Other Assets. Complete if the organization answered 'Yes' on Fe	orm 000 Bart IV line	11d See Form 000 Bard	V line 15
	(a) Description	orm 990, Part IV, line	11d. See Form 990, Pan	(b) Book value
1)457B PLA	AN ASSETS LENTS HELD FOR AECOM INC			13,585,561 35,971,674
	RELATED ASSETS			11,240,625
4) OTHER A				7,956,556
5)				
6)				
7)				
8)				
9)				
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			68,754,416
	Other Liabilities.		P	
	Complete if the organization answered 'Yes' on Formula (1) 2		11e or 11f.See Form S	990, Part X, line 25. (b) Book
	(a) Description of li	iability		value
-	income taxes ABLE ADVANCES FROM US GO			0 4,597,575
,	ETIREMENT OBLIGATION			9,121,816
	OME AND OTHER LIABILITIES			488,955
5) DUE TO				1,245,900
	AN DFD COMPENSATION LIA			11,764,622
7) ASSETS 8)	HELD FOR AECOM, INC.			41,576,881
(9)				
10)				
	n (b) must equal Form 990, Part X, col.(B) line 25.)			68,795,749
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text o		nization's financial stater	nents that reports the organiza

2

а

C

Part XII

5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

-93,423,215

310,362,951

3,611,146

313,974,097

250,155,072

24,052

250,131,020

97,057,551

347.188.571

Schedule D (Form 990) 2019

Donated services and use of facilities b d Other (Describe in Part XIII.)

Total expenses and losses per audited financial statements

Subtract line **2e** from line **1** Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Subtract line 2e from line 1

Supplemental Information

Add lines **4a** and **4b**

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments

е 3 4

Investment expenses not included on Form 990, Part VIII, line 7b . b

Add lines **4a** and **4b**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

4a 4b

2a

2b

2c

2d

2a 2b

2c

2d

4a

4b

Explanation

1,914,366 1,696,780

24,052

1,914,366

95.143.185

74.922

-93,498,137

4c 5

2e

3

4c

5

2e

3

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 13-1624225

Name: YESHIVA UNIVERSITY

ARE COLLECTIONS. ALSO, A COLLECTION OF OVER ONE THOUSAND RABBINIC AND HISTORICAL MANUSCRIP TS IS HOUSED IN THE RARE BOOK ROOM. THE ARCHIVES HOLD ORGANIZATIONAL AND INSTITUTIONAL REC ORDS AND PRIVATE PAPERS RELATING TO THE MODERN JEWISH HISTORY AND CULTURE IN THE US AND AB

Supplemental Information

ROAD.

Return Reference	Explanation
SCHEDULE D, PART III, LINE 1A & 4 - COLLECTIONS RARE BOOKS AND MANUSCRIPTS	YESHIVA UNIVERSITY'S MUSEUM'S COLLECTION INCLUDES MORE THAN 10,000 ARTIFACTS REFLECTING 5, 000 YEARS OF JEWISH CULTURE, ART, AND HISTORY FROM AROUND THE WORLD. THE COLLECTIONS FEATU RE FINE ARTS, ETHNOGRAPHIC AND ARCHEOLOGICAL ARTIFACTS, CLOTHING AND TEXTILES, CEREMONIAL AND RITUAL OBJECTS, MANUSCRIPTS, BOOKS, AND OTHER DOCUMENTS. THE RARE AND UNIQUE TREASURES HELD BY YU CONSTITUTE THE LIBRARY'S SPECIAL COLLECTIONS. THE RARE BOOKS, MANUSCRIPTS AND ARCHIVAL RECORDS DOCUMENT THE JEWISH, RELIGIOUS, LITERARY AND CULTURAL HERITAGE. SCHOLARS AND VISITORS ARE WELCOME TO CONSULT THE SPECIAL COLLECTIONS. THE RARE BOOK ROOM, A GLASS-E NCLOSED ROOM ON THE FOURTH FLOOR OF THE YESHIVA UNIVERSITY MENDEL GOTTESMAN LIBRARY WITH A CONTROLLED ENVIRONMENT, HOUSES THE UNIVERSITY'S RARE BOOKS AND MANUSCRIPTS COLLECTIONS. A PPROXIMATELY EIGHT THOUSAND PRINTED VOLUMES, MOST OF THEM IN HEBREW, ARE INCLUDED IN THE R

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART III, LINE 1A & 4 - EXHIBITIONS & PROGRAMS - EDUCATION	THE YESHIVA UNIVERSITY MUSEUM SHARES SPACE IN THE CENTER FOR JEWISH HISTORY, A STATE-OF-TH E-ART FACILITY WITH FOUR INSTITUTIONS, THREE OF WHOM ARE RENOWNED RESEARCH AND ARCHIVAL IN STITUTIONS FOCUSING ON SPECIFIC ASPECTS OF JEWISH HISTORY AND CULTURE: THE YIVO INSTITUTE FOR JEWISH RESEARCH, THE AMERICAN JEWISH HISTORICAL SOCIETY, AMERICAN SEPHARDI FEDERATION, AND THE LEO BAECK INSTITUTE. THE MUSEUM HAS FOUR GALLERIES, AN EXHIBITION ARCADE, AN OUTD OOR SCULPTURE GARDEN, A DISCOVERY CENTER AND A CHILDREN'S WORKSHOP ROOM. THE MUSEUM HAS AC CESS TO A 250 SEAT, HANDICAPPED-ACCESSIBLE AUDITORIUM WITH A STATE-OF-THE-ART AV PROJECTIO N ROOM. THE YESHIVA UNIVERSITY MUSEUM PRESENTS EXHIBITIONS WITH AN INTERDISCIPLINARY FOCUS THAT REFLECT THE DIVERSITY OF THE MUSEUM'S COLLECTION. AS A RESOURCE FOR SCHOLARLY RESEAR CH, YESHIVA UNIVERSITY MUSEUM'S EXHIBITIONS PROVIDE UNIQUE OPPORTUNITIES FOR ARTISTS, HIST ORIANS, COLLECTORS, AND ETHNOGRAPHERS TO EXAMINE, COMPARE, AND RESEARCH OBJECTS, IDEAS, AN D TECHNIQUES. ITS CONTEMPORARY ART SHOWS OFFER THE PUBLIC THE OPPORTUNITY TO SURVEY ART BE ING CREATED BY LIVING JEWISH ARTISTS THROUGHOUT THE WORLD. YESHIVA UNIVERSITY MUSEUM'S PRO GRAMS ARE DESIGNED TO EXPAND THE INTELLECTUAL AND CREATIVE IMAGINATION OF ITS DIVERSE AUDI ENCES. THEY INCLUDE FAMILY CRAFT WORKSHOPS, LECTURES, FILMS, CONCERTS, AND MULTILINGUAL EX HIBITION TOURS IN ENGLISH, HEBREW, SPANISH, RUSSIAN, AND YIDDISH.

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4 - ENDOWMENTS	YESHIVA UNIVERSITY'S ENDOWMENT FUNDS ARE INTENDED FOR A VARIETY OF PURPOSES, INCLUDING STU DENT SCHOLARSHIPS AND LOANS, ACADEMIC CHAIRS, INSTRUCTION AND TRAINING, EDUCATIONAL PROGRA MS AND PROJECTS, RESEARCH, AND FELLOWSHIPS.

Constituted To Constitute

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART XI, LINE 2D	OTHER REVENUE INCLUDED ON AUDITED FINANCIAL STATEMENTS BUT NOT ON FORM 990: RECLASS OF SCH OLARSHIPS \$-95,143,185 REVENUE FROM RELATED ENTITIES INCLUDED IN CONSOLIDATED FINANCIAL ST ATEMENTS 1 645 048

Supplemental Information Return Reference Explanation SCHEDULE D, PART XI, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT ON AUDITED FINANCIAL STATEMENTS: RECLASS OF REN TAL EXPENSES \$-2.830,179 RECLASS OF FUNDRAISING EVENT EXPENSES -569,172 RECLASS OF DISTRIB UTION FROM YESHIVA ENDOWMENT FDN 1,296,131 RECLASS OF AFFILIATE SERVICE ALLOCATION 3,800,0

\$ 1.696.780

Supplemental Information	
Return Reference	Explanation
	OTHER EXPENSES INCLUDED ON AUDITED FINANCIAL STATEMENTS BUT NOT FORM 990: RECLASS OF RENTA L EXPENSES \$2,830,179 RECLASS OF FUNDRAISING EVENT EXPENSES 569,172 EXPENSES FROM RELATED ENTITIES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 424 701 RECLASS OF AFFILIATE SERVIC

\$ 24,052

E ALLOCATION -3,800,000

Supplemental Information							
Return Reference	Explanation						
, ,	OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT ON AUDITED FINANCIAL STATEMENT: RECLASS OF SCHOLARSHIPS: \$95,143,185						

Supplemental Information	
Return Reference	Explanation
FIN 48 POSITION	EFFECTIVE JULY 1, 2007, THE UNIVERSITY ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD (F ASB) INTERPRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, AN INTERPRETATION OF FASB STATEMENT NO. 109 (FIN 48). FIN 48 CLARIFIED THE ACCOUNTING FOR UNCERTAIN INCOME T AXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TA X POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. FIN 48 ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE, AND TRANSITION. THERE WAS NO MATERIAL IMPACT TO THE UNIVERSITY'S CONSOLIDATED FINANCIAL STATEMENTS AS A RESULT OF THE ADOPTION OF FIN 48 IN THE YEAR OF ADOPTION OR IN THIS REPORTING YEAR. TEXT OF JUNE 3 0, 2020 FIN 48 (ASC 740) FOOTNOTE: MANAGEMENT ASSESSES ITS INCOME TAX POSITION EACH YEAR TO DETERMINE WHETHER IT IS MORE LIKELY THAN NOT TO BE SUSTAINED BY AN APPLICABLE TAXING AUT HORITY. THIS REVIEW FOR FISCAL YEAR 2020 HAD NO MATERIAL IMPACT ON THE CONSOLIDATED FINANC IAL STATEMENTS.

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, ENDOWMENT FUNDS, LINE 1E	IN FY 2016, OTHER EXPENDITURES FOR FACILITIES AND PROGRAMS INCLUDES THE TRANSFER BY YESHIV A UNIVERSITY OF APPROXIMATELY \$371 MILLION OF EINSTEIN RELATED ENDOWMENT ASSETS TO THE ALB ERT EINSTEIN COLLEGE OF MEDICINE, INC., THE NEWLY FORMED NONPROFIT TAX-EXEMPT ENTITY FORME D AS PART OF THE JOINT COLLABORATION AGREEMENT WITH MONTEFIORE MEDICINE ACADEMIC HEALTH SY STEM. MONTEFIORE MEDICINE ACADEMIC HEALTH SYSTEM AND YESHIVA UNIVERSITY ARE THE SOLE MEMBE

RS OF THE ALBERT EINSTEIN COLLEGE OF MEDICINE.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493134049701 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** YESHIVA UNIVERSITY 13-1624225 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No 5g Νo 5h No If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019) MOSTLY THROUGH THE TUITION ASSISTANCE PROGRAM TO PROVIDE ELIGIBLE STUDENTS.

Schedule E (Form 990 or 990EZ) (2019)

FINANCIAL AID ASSISTANCE TO QUALIFYING STUDENTS AND RECEIVED BUNDY AID BASED ON DEGREES CONFERRED, FROM THE U.S. FEDERAL GOVERNMENT. YESHIVA RECEIVES AID THROUGH TITLE IV AND TITLE VII. INCLUDING PELL GRANTS, STAFFORD AND PLUS LOANS, SEOG. WORK STUDY, AND PERKINS AND HEALTH PROFESSION STUDENT LOAN PROGRAMS, FUNDS ARE USED 100% FOR FINANCIAL ASSISTANCE BY THE

SCHEDULE F	State	ement of A	Activities (Outside the Un	ited Stat	es	OMB No. 1545-0047
Department of the Treasury	olete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.					2019 Open to Public Inspection	
Internal Revenue Service Name of the organization					Em	ployer iden	ntification number
ESHIVA UNIVERSITY					13-	1624225	
General Info Form 990, Pai			Outside the U	Jnited States. Comple	ete if the org	anization a	nswered "Yes" on
=	grantees'	eligibility for th	e grants or assis	substantiate the amount stance, and the selection	_		☐ Yes ☐ No
2 For grantmakers. D outside the United Sta		Part V the orga	anization's proce	dures for monitoring the	use of its gr	ants and otl	her assistance
3 Activites per Region. (T	he followin	ng Part I, line 3 t	able can be dupli	cated if additional space is	s needed.)		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity li program serv specific service(s) in	ice, describe type of	(f) Total expenditures for and investments in the region
See Add'l Data							
3a Sub-total	sheets to	2	14				149,137,203
c Totals (add lines 3a and 3b)			14				149,137,203

Schedule F (Form 990)	2019							Page 2
				es Outside the Unit 000. Part II can be				on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	EDUCATION	3,083,994	WIRE			
		North America	EDUCATION	255,084	WIRE			
				nized as charities by t ection 501(c)(3) equiv			•	2
3 Enter total number	er of other org	anizations or entities	5				•	

Schedule F (Form 990) 2019

Type of grant or assistance	uplicated if addit (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash	(g) Description of noncash	(h) Method of valuation
		recipients	Cash grant	aispui sement	assistance	assistance	(book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☑ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	· ·	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	☑ No

Schedule F (Form 99	0) 2019 Page 5		
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting me amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.				
990 S ched	dule F,	Supplemental Information		
Return Ref	ference	Explanation		

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	YESHIVA UNIVERSITY MONITORS THE USE OF GRANT FUNDS OUTSIDE OF THE UNITED STATES BY A GRANTEE THROUGH REVIEW OF THE GRANTEE'S AUDITED FINANCIAL STATEMENTS, PERSONAL SITE VISITS AND DISCUSSIONS WITH THE GRANTEE'S SENIOR MANAGEMENT.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3	1. UNDERGRADUATE AND GRADUATE SHORT AND LONG TERM STUDY ABROAD PROGRAMS AND INTERNATIONAL INTERNSHIPS, INCLUDING STUDENT EXCHANGE, PARTICIPATION IN STUDENT COMPETITIONS, SEMESTER ABROAD, INDEPENDENT STUDY, AND SUMMER STUDY PROGRAMS IN EUROPE, THE MIDDLE EAST, ASIA, AND THE PACIFIC. THE BENJAMIN CARDOZO SCHOOL OF LAW OFFERS EXCHANGE PROGRAMS IN THE NETHERLANDS, GERMANY, HUNGARY, HONG KONG, SPAIN, CHINA, ISRAEL, FRANCE, ITALY, AUSTRALIA, AND ENGLAND; AND A COMBINED JD/LLM INTERNATIONAL DUAL DEGREE PROGRAM AT A LAW SCHOOL IN FRANCE. THE CARDOZO FLOERSHEIMER CENTER FOR CONSTITUTION DEMOCRACY IN PARTNERSHIP WITH THE YU CENTER FOR JEWISH LAW OVERSEES THE ISRAEL SUPREME COURT PROJECT WHICH PROVIDES ENGLISH TRANSLATIONS OF IMPORTANT ISRAELI SUPREME COURT DECISIONS. THE WURZWEILER SCHOOL OF SOCIAL WORK BLOCK PROGRAM COMBINES THREE SUMMERS OF FORMAL CLASSROOM EDUCATION IN NEW YORK WITH TWO YEARS OF SUPERVISED FIELD EXPERIENCE IN ISRAEL. 2. ASSISTANCE TO STUDENT PARTICIPANTS IN THE S. DANIEL ABRAHAM ISRAEL PROGRAM, INCLUDING GUIDANCE, STRUCTURE AND SUPPORT. IN ADDITION, THE PROGRAM SPONSORS LECTURES AND ACTIVITIES WHERE THE STUDENTS CAN GATHER UNDER THE AUSPICES OF YESHIVA UNIVERSITY AND A GUIDANCE CENTER TO PROVIDE SUPPORT TO HELP EASE THE OCCASIONALLY CHALLENGING ADJUSTMENT TO A YEAR'S STUDY IN ISRAEL. 3. ISRAEL. 3. STUDENTS EXPERIENCE THE SOCIAL, CULTURAL, POLITICAL, AND SPIRITUAL MANIFESTATIONS OF ISRAELI SOCIETY. 5. HUMANITARIAN, TORAH AND LEARNING MISSIONS - STUDENTS TRAVEL TO INTERNATIONAL COUNTRIES LEARNING THE HISTORY, CULTURE, FOLKLORE AND TRADITIONS OF A COMMUNITY WHILE CONDUCTING AN ASSIGNED WORK PROJECT TO BENEFIT THAT COMMUNITY. STUDENTS ALSO TRAVELED TO ISRAEL TO PARTICIPATE IN EXPERIENCE THE SOCIAL, VESSIONS - STEVENED TO ISRAEL TO PARTICIPATE IN EXPERIENCE AND TRADITIONS OF BREEFIT THAT COMMUNITY. STUDENTS ALSO TRAVELED TO ISRAEL TO PARTICIPATE IN EXPERIENCE AND TRADITIONS OF BREEFIT THAT COMMUNITY. STUDENTS ALSO TRAVELED TO ISRAEL TO PARTICIPATE IN EXPERIENCE AND TRADITIONS OF STALL TO STATE TO STUDENTS

990 Schedule F, Supplemental Information

Return

Reference

SCHEDULE F,	INVESTMENTS IN FOREIGN REGIONS - THE FORM 990 REQUIRES ORGANIZATIONS TO INCLUDE IN COLUMN (F) THE BOOK VALUE OF
PART I, LINE	ITS PASSIVE INVESTMENTS IN FOREIGN REGIONS AS OF THE END OF THE YEAR. ACCORDINGLY, YESHIVA UNIVERSITY HAS INCLUDED.
3	THESE AMOUNTS IN THE REGIONS WHERE THE INVESTMENT VEHICLES ARE DOMICILED. YESHIVA UNIVERSITY'S GENERAL LEDGER
	AND FINANCE SYSTEM FUNCTIONALITY DOES NOT SPECIFICALLY TRACK TRAVEL EXPENSES BY COUNTRY OR REGION. HOWEVER,
	THE UNIVERSITY HAS, TO THE EXTENT POSSIBLE, ALLOCATED CERTAIN FOREIGN ACTIVITY EXPENSES TO THE APPROPRIATE REGION

IN COLUMN (F). THE UNIVERSITY HAS PROVIDED DETAILED NARRATIVE DESCRIPTIONS OF ITS FOREIGN ACTIVITIES ABOVE.

Explanation

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F,	TO THE BEST OF ITS KNOWLEDGE, YESHIVA UNIVERSITY DOES NOT HAVE ANY OPERATIONS IN THE FORM OF BUSINESS AND
PART IV, LINE 6 -	COMMERCIAL ACTIVITIES OR TRANSACTIONS IN OR RELATED TO ANY OF THE "BOYCOTT COUNTRIES". HOWEVER, THE
FORM 5713	UNIVERSITY HAS HAD FOREIGN NATIONAL STUDENTS ENROLLED IN UNIVERSITY COURSES IN THE UNITED STATES WHO WERE
	CITIZENS AND/OR RESIDENTS OF KUWAIT, LEBANON, SYRIA AND THE UNITED ARAB EMIRATES. THE UNIVERSITY DOES NOT
	BELIEVE THAT THE ENROLLMENT OF THESE STUDENTS IN U.SBASED COURSES WOULD REQUIRE THE FILING OF FORM 5713.

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

(1) 21 1 6 (2) 21 1 6 (1) 2 1 1 1

EIN: 13-1624225

Name: YESHIVA UNIVERSITY

N/A

7,718,676

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(†) Total expenditures for region
Central America and the Caribbean			Investments	N/A	137,097,462

Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe (Including Iceland and Program Services Education 41,221 Greenland) Middle East and North Africa 805.433 Program Services Education

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 10 Grantmaking N/A 3.083.994 North America 4 Grantmaking N/A 255,084

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) North America Education 48,806 IProgram Services South Asia Program Services Education 9,750

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Sub-Saharan Africa Research & Education 6,000 IProgram Services East Asia and the Pacific Program Services Education 70,777

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493134049701 OMB No. 1545-0047 **Supplemental Information Regarding** SCHEDULE G (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. **Open to Public** Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization YESHIVA UNIVERSITY 13-1624225 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations Special fundraising events ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (iii) Did (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? No Yes CONSULTANT GRENZEBACHE GLIER ASSOC No 109,192 CONSULTANT FAIRCOM NEW YORK No 42,544 CONSULTING SRP CONSULTING No 16,177 CONSULTANT EAS ADV SERVICES 160,983 CONSULTANT 120,000 CHARIDY No 448,896 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. . AZ, AR, CA, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH, OK, PA, RI, SC, TN, UT, VA, WV, WI For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

	rt II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$5		gross income on Form	1 990-EZ, lines 1 and	6b. List events with
	3 1 3	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		HANUKKAH DINNER (event type)	CSL EVENTS (event type)	(total number)	col. (c))
Reverkie		(crailed, pe)	(Crain Gypa)	(cota manusar)	
	1 Construction	F 671 402	27.061		F 700 444
	1 Gross receipts	5,671,483	37,961		5,709,444
	2 Less: Contributions3 Gross income (line 1 minus	5,603,483	29,361		5,632,844
\dashv	line 2)	68,000	8,600		76,600
	4 Cash prizes	0.746			0.746
ses	6 Rent/facility costs	8,746			8,746
ben.	7 Food and beverages	252,633 150,900			252,633 150,900
∑	8 Entertainment	10,580			10,580
		10,500	25 412		·
lreg	9 Other direct expenses	120.900			
Direct	9 Other direct expenses10 Direct expense summary. Add lines 4 t	120,900 hrough 9 in column (d)	25,413		
Direct Expenses	10 Direct expense summary. Add lines 4 t	hrough 9 in column (d)			146,313 569,172
	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 till Gaming. Complete if the organization.	hrough 9 in column (d) from line 3, column (d)			569,172 -492,572
Par	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10	hrough 9 in column (d) from line 3, column (d)		▶ V, line 19, or reported (c) Other gaming	569,172 -492,572
Par	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 11 Gaming. Complete if the organism on Form 990-EZ, line 6a.	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 till Gaming. Complete if the orga on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
s Revenue	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 till Gaming. Complete if the orga on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
s Revenue	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 till Gaming. Complete if the orgation form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
s Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
Par	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 till Gaming. Complete if the orgation form 990-EZ, line 6a. 1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye (a) Bingo	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	569,172 -492,572 d more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) anization answered "Ye	s" on Form 990, Part I		569,172 -492,572 d more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	569,172 -492,572 d more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d)	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	569,172 -492,572 d more than \$15,000 (d) Total gaming (add
Ulrect Expenses Reversile	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	through 9 in column (d) from line 3, column (d) from line 3, column (d) from line 3, column (d) from line 4, column (d) from line 7 from line 1, column	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	569,172 -492,572 d more than \$15,000 (d) Total gaming (add
s Keverkie e	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organism on Form 990-EZ, line 6a. 1 Gross revenue	hrough 9 in column (d) from line 3, column (d) anization answered "Ye (a) Bingo Yes	(b) Pull tabs/Instant bingo/progressive bingo Yes	(c) Other gaming Yes % No	569,172 -492,572 If more than \$15,000 (d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ning activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ▶						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3		
		pt activities during the tax year					
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I (Form 990)

Department of the

Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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

OMB No. 1545-0047

DLN: 93493134049701

Open to Public Inspection

Internal Revenue Service							
Name of the organization YESHIVA UNIVERSITY						Employer identific	cation number
Part I General Inform	ation on Grants	and Assistance				13-1624225	
1 Does the organization mai			the grants or assistance.	the grantees' eligibility	for the grants or assistance	 .e. and	
the selection criteria used	to award the grants	or assistance?				-,	☑ Yes 🗌 No
2 Describe in Part IV the org					I 1107 - 11	L	21 6
Part II Grants and Other that received more	than \$5,000. Part II	can be duplicated if ad	ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sect3 Enter total number of other		-					6
For Paperwork Reduction Act Notice				Cat. No. 5005			hedule I (Form 990) 2019

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2019

Part III

(2) (3) (4) (5)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(6) (7) Return Reference Explanation

SCHEDULE I, PART I, LINE 2 YESHIVA UNIVERSITY CONDUCTS SITE VISITS AND FOLLOW-UP DISCUSSIONS WITH THE MANAGEMENT OF GRANTEES TO ASSURE THAT GRANT FUNDS ARE USED FOR THE INTENDED TAX-EXEMPT PURPOSES. THE ACTIVITIES OF FELLOWSHIP RECIPIENTS ARE MONITORED TO ENSURE COMPLIANCE WITH THE INTENTIONS AND IGUIDELINES OF THE FELLOWSHIP GRANT.

SCHEDULE I. PART III THE \$98,651,795 IN GRANTS AND ASSISTANCE REPRESENT STUDENT FINANCIAL AID, SCHOLARSHIPS AND FELLOWSHIPS, INCLUDING EMERGENCY STUDENT

ASSISTANCE GRANTS, FINANCIAL AID IS AWARDED BASED UPON FINANCIAL NEED AND ACADEMIC ACHIEVEMENT, NEED BASED AID IS AWARDED BASED ON ELIGIBILITY DETERMINED BY THE US DEPARTMENT OF EDUCATION'S FREE APPLICATION FOR FEDERAL AID (FAFSA), ACADEMIC BASED AID IS AWARDED BY THE

DISTINGUISHED SCHOLARS COMMITTEE. BOTH FACULTY AND ENROLLMENT SERVICES ADMINISTRATORS COMPRISE THE COMMITTEE.

Page **2**

Additional Data

NEW YORK, NY 10013

CENTER FOR INITIATIVES IN

JEWISH EDUCATION 45 BROADWAY NEW YORK, NY 10006

Software ID:
Software Version:
EIN:

77-0698155

EIN: 13-1624225

501(C)(3)

Name: YESHIVA UNIVERSITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INNOCENCE PROJECT 40 WORTH STREET	32-0077563	501(C)(3)	160,076				PUBLIC POLICY			

10,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-6002140 115 13.500 IEDUCATION NEWARK PUBLIC SCHOOLS 765 BROAD STREET

NEW YORK, NY 07102 NEW ALTERNATIVES FOR 13-3149298 501(C)(3) 29.882

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION CHILDREN. 37 WEST 26TH STREET NEW YORK, NY 10010

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government THE JEWISH EDUCATION 13-1632519 501(0)(3) 25 nonl IFDUCATION

1112 02111011 2200111011	10 1001010	1 30-(0)(0)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
PROJECT					ĺ
PO BOX 394					
MAHWAH,NJ 07430					1

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

THE CHILDRENS LAW CENTER 11-3392591 501(C)(3) 25.000l IEDUCATION 44 COURT STREET BROOKLYN, NY 11201

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	1931 3	34049	701	
Schedule J (Form 990)		Co	ompensat	ion Information	10	1B No.	1545-0	0047	
		For certain Office							
		► Complete if the org		ated Employees vered "Yes" on Form 990, Part IV,	line 23.	2019			
Danar	tment of the Treasury	▶ Go to www.irs.ac		to Form 990. instructions and the latest inform			to Pul		
-	al Revenue Service	T do to <u>mmmsigo</u>				Insp	ectio	n	
	ne of the organiza HIVA UNIVERSITY	ation			Employer identificat	tion nu	ımber		
					13-1624225				
Pa	rt I Questi	ons Regarding Compensa	tion				I		
1 a				the following to or for a person listed y relevant information regarding thes			Yes	No	
	☐ First-class	s or charter travel	✓	Housing allowance or residence for p	personal use				
	✓ Travel for	companions		Payments for business use of person	nal residence				
	Tax idemi	nification and gross-up payment		Health or social club dues or initiation					
	☐ Discretion	nary spending account	\checkmark	Personal services (e.g., maid, chauff	eur, chef)				
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1 b	Yes		
2				or allowing expenses incurred by all	- 4-3	2	Yes		
	directors, truste	es, officers, including the CEO/E	executive Directo	r, regarding the items checked on Lin	ela?				
3	organization's C	EO/Executive Director. Check a	ll that apply. Do r	ed to establish the compensation of th not check any boxes for methods CEO/Executive Director, but explain ir					
		-			T T GIT III.				
		ation committee	⊻	Written employment contract					
		ent compensation consultant of other organizations		Compensation survey or study Approval by the board or compensat	ion committee				
	10IIII 330	or other organizations		Approval by the board of compensati	don committee				
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fil	ling organization or a				
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a		No	
b	•	r receive payment from, a supp	•	· ·		4b	Yes		
С			,	nsation arrangement? Dicable amounts for each item in Part		4c		No	
	Only 501(c)(3), 501(c)(4), and 501(c)(29)) organizations	must complete lines 5-9.					
5	For persons liste		on A, line 1a, did	the organization pay or accrue any					
а	The organization	1?				5a		No	
b		anization?				5b		No	
6	For persons liste	•		the organization pay or accrue any					
а	The organization	n?				6a		No	
b	-					6b		No	
	•	6a or 6b, describe in Part III.							
7				the organization provide any nonfixed rt III		7		No	
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 				N.c.	
9	If "Yes" on line	8, did the organization also follo	ow the rebuttable	presumption procedure described in I	Regulations section	9		No	
For F	Panerwork Redu	ction Act Notice, see the Ins	structions for Fo	orm 990. Cat. No. 5	0053T Schedule J		1 990)	2019	

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.									
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	tal amou	ınt of Fo	rm 990, Part VII, Se	ection A, line 1a, ap					
(A) Name and Title	((B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	(F) Compensation in	
		Base ensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table									
	_								
	+-								

BERMAN IS PROVIDED WITH THE USE OF A HOME AS A PARSONAGE AND TO PROPERLY DISCHARGE HIS REQUIRED DUTIES. THE PARSONAGE ALLOWANCE FOR

Page 3

Schedule 1 (Form 990) 2019

RABBI BERMAN IS INCLUDED IN SCHEDULE J, PART II, COLUMN D. PERSONAL SERVICE AND COMPANION TRAVEL: THE UNIVERSITY BELIEVES IT IS PRUDENT AND NECESSARY TO PROVIDE A MEASURE OF SECURITY TO THE PRESIDENT AND UNIVERSITY RELATED INDIVIDUALS WHO TRAVEL WITH THEM. ACCORDINGLY. THE UNIVERSITY PROVIDES THE PRESIDENT WITH A SECURITY GUARD DRIVER WHEN TRAVELING ON UNIVERSITY BUSINESS. THE UNIVERSITY REIMBURSES COMPANION TRAVEL FOR THE PRESIDENT WHEN THE COMPANION IS EXPECTED TO ATTEND AND ACTIVELY PARTICIPATE IN FUNCTIONS RELATED TO THE UNIVERSITY'S MISSION AND IS FOR A BONA FIDE BUSINESS PURPOSE. SCHEDULE J. PART I. LINE 4 LINE 4B - IN CALENDAR YEAR 2019. THE FIVE-YEAR DEFERRED COMPENSATION AGREEMENTS OF ANDREW LAUER, UNIVERSITY VP & GENERAL COUNSEL AND

Schedule J (Form 990) 2019

RABBI JOSHUA JOSEPH, SENIOR VP, VESTED AND WERE PAID OUT. DURING THE PREVIOUS 5 YEARS, THE ANNUAL ACCRUALS OF THIS DEFERRED COMPENSATION WERE REPORTED AS COMPENSATION IN YESHIVA UNIVERSITY'S FORMS 990. IN THIS 990, THE VESTED BALANCES AND RELATED PAYOUTS ARE REPORTED AGAIN AS TAXABLE COMPENSATION INCOME AND REPORTED IN SCHEDULE J, PART II, COLUMN B(III). THE PRIOR YEAR ANNUAL ACCRUALS OF THE DEFERRED COMPENSATION WHICH WERE PREVIOUSLY REPORTED IN PRIOR YEARS FORM 990 IN SCHEDULE J, PART II, COLUMN C ARE NOW CUMULATIVELY REPORTED IN THIS YEARS FORM 990, SCHEDULE J, COLUMN F. CONSEQUENTLY, OF ANDREW LAUER'S AND RABBI JOSHUA JOSEPH'S TOTAL CALENDAR YEAR 2019 COMPENSATION AND BENEFITS REPORTED IN THIS FORM 990, \$250,000 WAS PREVIOUSLY REPORTED FOR EACH OF THEM IN PRIOR YEARS FORMS 990.

IN ACCORDANCE WITH IRS GUIDELINES AND FORM 990 INSTRUCTIONS, THE COMPENSATION AND BENEFITS REPORTED IN THIS FORM 990 SCHEDULE J AND PART VII REPRESENT AMOUNTS EARNED DURING THE 2019 CALENDAR TAX YEAR, PRESIDENT RABBI DR, ARI D, BERMAN - COLUMN B(III) INCLUDES TAXABLE LIFE INSURANCE AND TRANSPORTATION BENEFITS. COLUMN D INCLUDES NONTAXABLE PARSONAGE HOUSING, MEDICAL BENEFITS AND THE USE OF A UNIVERSITY PROVIDED CELLULAR PHONE FOR BUSINESS PURPOSES. FORMER PRESIDENT RICHARD JOEL - COLUMN B(III) INCLUDES TAXABLE LIFE INSURANCE AND HEALTH RELATED BENEFITS, AND THE TAXABLE RENTAL VALUE OF HIS POST-PRESIDENCY USE OF THE HOME OWNED BY YESHIVA UNIVERSITY. THE POST-PRESDIENCY USE OF THE HOME WAS PROVIDED FOR IN HIS CONTRACT AS PRESIDENT. COLUMN C INCLUDES THE UNIVERSITY'S CONTRIBUTIONS TO A SECTION

SCHEDULE J, PART II - DETAILS OF COMPENSATION & BENEFITS

403(B) RETIREMENT PLAN. COLUMN D INCLUDES THE FOLLOWING NON-TAXABLE BENEFITS; MEDICAL AND THE USE OF A UNIVERSITY PROVIDED CELLULAR PHONE. FOR THE REMAINING CURRENT AND FORMER OFFICERS, KEY EMPLOYEES, AND HIGHEST PAID EMPLOYEES LISTED IN PART VII/SCHEDULE J - COLUMN B (III) MAY INCLUDE THE FOLLOWING TAXABLE BENEFITS: TUITION, TRANSPORTATION, HOUSING AND/OR LIFE INSURANCE, COLUMN C GENERALLY INCLUDES

Software ID:

Software Version:

EIN: 13-1624225

Name: YESHIVA UNIVERSITY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule .	·, ·	art II - Officers, Dir	ectors, musices, ke	cy Employees, and i	ingricat compensate	a Employees		
(A) Name and Title		(B) Breakdown (i) Base Compensation	of W-2 and/or 1099-MIS	C compensation (iii)	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
			Bonus & incentive compensation	Other reportable compensation	compensation			reported as deferred on prior Form 990
TRUSTEE - PRESIDENT (i)		590,665	0	2,386	0	152,632	745,683	0
	(ii)	0	0	0	0	0	0	0
1SELMA BOTMAN PROVOST - VP ACADEMIC AFFAIRS	(i)	400,000	0	3,048	11,200	868	415,116	0
	(ii)	0	0	0	0	0	0	0
2HERBERT DOBRINSKY VP UNIVERSITY AFFAIRS	(i)	281,596	0	14,150	11,200	27,785	334,731	0
	(ii)	0	0	0	0	0	0	0
3 JACOB HARMAN VP BUSINESS AFFAIRS - CFO	(i)	521,570	0	10,631	11,200	5,885	549,286	0
	(ii)	0	0	0	0	0	0	0
4 AHRON HERRING CHIEF INVESTMENT OFFICER	(i)	392,026	0	1,056	11,200	15,480	419,762	0
	(ii)	0	0	0	0	0	0	0
5 RABBI JOSHUA JOSEPH SENIOR VP	(i)	375,723	0	257,413	11,200	62,244	706,580	250,000
	(ii)	0	0	0	0	0	0	0
6 ANDREW J LAUER VP/SECTY/GENERAL	(i)	522,593	0	284,153	11,200	56,235	874,181	250,000
COUNSEL	(ii)	0	0	0	0	0	0	0
7 MELANIE LESLIE DEAN - CARDOZO LAW SCHOOL	(i)	448,502	0	1,848	11,200	36,403	497,953	0
SCHOOL	(ii)	0	0	0	0	0	0	0
8RICHARD JOEL FORMER	(i)	288,363	0	102,936	11,200	25,784	428,283	0
PRESIDENT/PROFESSOR	(ii)	0	0	0	0	0	0	0
9DORON STERN VP	(i)	338,502	0	7,473	11,200	50,880	408,055	0
MIZTRIC/COMMUNICATIONS	(ii)	0	0	0	0	0	0	0
10DAVID RUDENSTINE PROFESSOR	(i)	381,322	0	3,205	11,200	4,292	400,019	0
	(ii)	0	0	0	0	0	0	0
11EDWARD D STEIN PROFESSOR/DIRECTOR	(i)	323,764	0	903	11,200	30,747	366,614	0
,	(ii)	0	0	0	0	0	0	0
12STEWART STERK PROFESSOR/DIRECTOR	(i)	323,016	0	2,166	11,200	30,197	366,579	0
	(ii)	0	0	0	0	0	0	0
13MOSES PAVA PROFESSOR/DIRECTOR	(i)	327,349	0	792	11,200	40,561	379,902	0
	(ii)	0	0	0	0	0	0	0
VP INST. ADVANCEMENT I	(i)	321,758	0	21,868	11,200	26,838	381,664	0
(4/2040)	(ii)	0	0	0	0	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury

OMB No. 1545-0047

DLN: 93493134049701

Open to Public

Inspection **Employer identification number**

▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization YESHIVA UNIVERSITY

13-1624225 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No DORMITORY AUTHORITY OF THE Х Х 14-6000293 649906KS2 07-23-2009 142,206,373 REFUNDING OF 1998 AND CAP Χ STATE OF NEW YORK **EXPENDIT** DORMITORY AUTHORITY OF THE 14-6000293 649906KS2 08-28-2011 93,390,365 REFUNDING 2001 AND CAP Χ Χ

STATE OF NEW YORK **EXPENDITURE** Part ${f II}$ **Proceeds** В C D 12,820,000 6,545,000

2

3 5 6

7 8

9

10 11

12 13

14 15

16

Does the organization maintain adequate books and records to support the final allocation of Part III

Are there any lease arrangements that may result in private business use of bond-financed 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Private Business Use

Were the bonds issued as part of a current refunding issue of tax-exempt

Were the bonds issued as part of an advance refunding issue of taxable

Has the final allocation of proceeds been made?

Was the organization a partner in a partnership, or a member of an LLC, which owned property

Yes Χ bonds (or, if issued prior to 2018, a current refunding issue)?

Χ

Yes

2011 No

29,325,000

1,495,130

123,937,547

16,773,696

No

Χ

Х

142,206,373

Χ

Χ Χ

Х

Yes

Yes

Χ

No

Χ

Χ

32,485,000

93,390,365

1,568,989

46,793,860

45,027,516

No

2014

Yes

C Yes

No

No

D Yes

Schedule K (Form 990) 2019

Yes

No

No

Cat. No. 50193E

bond-financed property?

Enter the percentage of financed property used in a private business use by entities other than

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

hedge with respect to the bond issue?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Term of hedge Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . .

If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Schedule K (Form 990) 2019

За

6

8a

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2019

No

Yes

Χ

Х

Χ

Χ

Νo

Χ

Χ

Χ

Χ

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

0 %

0 %

0 %

Χ

Х

Χ

Yes

C

No

0 %

0 %

0 %

Х

2.740 %

В

Yes

Χ

	bond initiation property.				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X	×		
С	Are there any research agreements that may result in private business use of bond-financed property?	X	X		

Α

Yes

Χ

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

Χ

Yes

Χ

No

Explanation THE UNIVERSITY HISTORICALLY DOES NOT INCUR ANY PRIVATE BUSINESS USE IN ITS BOND-FINANCED PROPERTIES BECAUSE THE UNIVERSITY'S POLICY IS TO

USE ITS OWN EQUITY TO FUND ANY POTENTIAL PRIVATE USE AND CONTINUES TO MONITOR THE USE OF ITS BOND-FINANCED PROPERTY TO AVOID FUTURE

Χ

Yes

Nο

Yes

Nο

Page 3

D

Nο

Yes

Were gross proceeds invested in a guaranteed investment contract

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Term of GIC

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

IPRIVATE USE.

requirements of section 148? . . .

Return Reference

SCHEDULE K PART III - PRIVATE

Schedule K (Form 990) 2019

(GIC)?

period?

Part V

Part VI

BUSINESS USE

DLN: 93493134049701 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** YESHIVA UNIVERSITY 13-1624225 Part I **Types of Property** (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Χ Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 11 138,182 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 5 0 18 Collectibles Χ 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (___ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	P	Page 2				
Part III Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
	DURING FY 2020, THE YESHIVA UNIVERSITY MUSEUM RECEIVED A NUMBER OF DONATIONS OF COLLECTIBLES, WORKS OF ART AND BOOKS RELATED TO EXHIBITIONS.					
	Schedule M (Form 990) (2	2019)				

efile GRAPHIC	DLN: 93493134049701				
SCHEDULE (Form 990 or 9 EZ)	Complete to provide information for responses to specific q Form 990 or 990-EZ or to provide any additional inform • Attach to Form 990 or 990-EZ.	upplemental 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. Go to www.irs.gov/Form990 for the latest information.			
Name Setherofgan YESHIVA UNIVERSITY 990 Schedule	identification number 5				
Return Reference	Explanation				
CORE FORM 990, PART I, LINE 6 - VOLUNTEERS	IN ADDITION TO THE BOARD MEMBERS WHO SERVE WITHOUT COMPENSATION, THE UNIVERSITY UTILIZES MANY VOLUNTEERS IN THE CONDUCT OF ITS ACTIVITIES. HOWEVER, IT DOES NOT TRACK THE NUMBER OF THESE ADDITIONAL VOLUNTEERS.				

Return Reference	Explanation
CORE FORM 990, PART III, LINE 1 AND LINE 3	LINE 1 - ORGANIZATION VISION AND VALUES VISION YESHIVA UNIVERSITY IS A UNIQUE ECOSYSTEM OF EDUCATIONAL INSTITUTIONS AND RESOURCES THAT PREPARES THE NEXT GENERATION OF LEADERS WITH JEWISH VALUES AND MARKET-READY SKILLS TO ACHIEVE GREAT SUCCESS IN THEIR PERSONAL AND PROFE SSIONAL LIVES, ENDOWING THEM WITH BOTH THE WILL AND WHEREWITHAL TO TRANSFORM THE JEWISH WO RLD AND BROADER SOCIETY FOR THE BETTER. VALUES - THE FIVE TOROT TORAT EMET WE BELIEVE IN T RUTH, AND HUMANITY'S ABILITY TO DISCOVER IT. THE PURSUIT OF TRUTH HAS ALWAYS BEEN THE DRIV ING FORCE BEHIND ADVANCES IN HUMAN UNDERSTANDING, FROM SOCRATES' WANDERINGS THROUGH THE ST REETS OF ATHENS TO THE INNOVATIONS OF THE INDUSTRIAL REVOLUTION. PEOPLE OF FAITH, WHO BELI EVE IN A DIVINE AUTHOR OF CREATION, BELIEVE THAT THE ACT OF DISCOVERY IS SACRED, WHETHER IN THE REALM OF PHILLOSOPHY, PHYSICS, ECONOMICS, OR THE STUDY OF THE HUMAN MIND. THE JEWISH PEOPLE IN PARTICULAR AFFIRM THAT, BEGINNING WITH THE REVELATION OF THE TORAH AT MOUNT SINA. I, GOD BATRUSTED ETERNAL TEACHINGS AND VALUES TO US THAT WE MUST CHERISH AND STUDY DILIGEN TLY ABOVE ALL ELSE FOR THEY REPRESENT THE TERMS OF THE SPECIAL COVENANT THAT GOD MADE WITH U.S. ALL PEOPLE, REGARDLESS OF THEIR FAITH OR BACKGROUND, SHOULD VALUE THE ACCUMILATION OF KNOWLEDGE BECAUSE IT IS THE WAY TO TRUTH, AND A PREREQUISITE TO HUMAN GROWTH. TORAT CHAIM WE BELIEVE IN APPLYING OUR KNOWLEDGE TO IMPACT THE WORLD AROUND US, JEWISH THOUGHT ASSERTS THAT TRUTH IS MADE AVAILABLE TO HUMAN BEINGS NOT SIMPLY SO THEY CAN MARVEL AT IT, BUT SO THAT THEY CAN USE IT. STUDYING LITERATURE, COMPUTER SCIENCE, LAW, PSYCHOLOGY, OR ANYTHING ELSE, ARE EXPECTED TO TAKE WHAT THEY LEARN AND IMPLEMENT IT WITHIN THEIR OWN LIVE S, AND APPLY IT TO THE REAL WORLD AROUND THEM. WHEN PEOPLE SEE A PROBLEM THAT THEY CAN SARRY WE STUDY IT IN THE CLASSROOM. TORAT ADAM WE BELIEVE IN THE INFINITE WORTH OF THE ROULD, NOT SIMPLY STUDY IT IN THE CLASSROOM. TORAT ADAM WE BELIEVE IN THE RESPONSIBILITY IS TO DRAW UPON THE TRUTH STHEY UNGOVERED DURING THEIR STUDIES IN FIN

Return

Reference	·
CORE FORM 990, PART III, LINE 1 AND LINE 3	D COMMUNITY. TORAT ZION WE BELIEVE THAT HUMANITY'S PURPOSE IS TO TRANSFORM OUR WORLD FOR T HE BETTER AND MOVE HISTORY FORWARD. IN JEWISH THOUGHT, THE CONCEPT OF REDEMPTION REPRESENT S THE CONVICTION THAT WHILE WE LIVE IN AN IMPERFECT WORLD, WE HAVE A RESPONSIBILITY TO STR IVE TOWARDS ITS PERFECTION. REGARDLESS OF A PERSON'S PERSONAL CONVICTIONS ABOUT WHETHER SO CIAL PERFECTION IS ATTAINABLE OR EVEN DEFINABLE, IT IS THE ACT OF WORKING TOWARDS IT WHICH GIVES OUR LIFE MEANING AND PURPOSE. THIS COMMON STRIVING IS AN ENDEAVOR THAT BRINGS ALL OF HUMANITY TOGETHER. THE JEWISH PEOPLE'S TASK TO BUILD UP THE LAND OF ISRAEL INTO AN INSPI RING, MODEL SOCIETY REPRESENTS THIS EFFORT IN MICROCOSM. BUT IT IS PART OF A LARGER PROJEC T THAT INCLUDES ALL OF HUMANKIND. IF THE ARC OF THE MORAL UNIVERSE BENDS TOWARDS JUSTICE, THEN REDEMPTION REPRESENTS OUR RESPONSIBILITY TO WORK TOGETHER IN THE SERVICE OF GOD TO MO VE HISTORY FORWARD. YESHIVA UNIVERSITY IS THE WORLD'S PREMIER JEWISH INSTITUTION FOR HIGHER EDUCATION. ROOTED IN JEWISH THOUGHT AND TRADITION, IT SITS AT THE EDUCATIONAL, SPIRITUAL AND INTELLECTUAL EPICENTER OF A ROBUST GLOBAL MOVEMENT THAT IS DEDICATED TO ADVANCING THE MORAL AND MATERIAL BETTERMENT OF THE JEWISH COMMUNITY AND BROADER SOCIETY, IN THE SERVICE OF GOD.

990	Schedule	0,	Supplemental	Information

_	
Return Reference	Explanation
CORE FORM 990, PART III, LINE 4 - PROGRAM SERVICES	FOUNDED IN THE LATE 19TH CENTURY, YESHIVA UNIVERSITY (YU) IS THE COUNTRY'S OLDEST AND MOST COMPREHENSIVE INSTITUTION COMBINING JEWISH SCHOLARSHIP WITH ACADEMIC EXCELLENCE AND ACHIE VEMENT IN THE LIBERAL ARTS AND SCIENCES, MEDICINE, LAW, BUSINESS, SOCIAL WORK, PSYCHOLOGY, JEWISH STUDIES, EDUCATION AND RESEARCH, YU REFLECTS A CENTURIES-OLD COMMITMENT TO THE ADV ANCEMENT OF HUMAN KNOWLEDGE AND ETHICS. YU BRINGS TOGETHER THE HERITAGE OF WESTERN CIVILIZ ATION AND THE ANCIENT TRADITIONS OF JEWISH LAW AND LIFE. SINCE ITS INCEPTION, YU HAS BEEN DEDICATED TO MELDING THE ANCIENT TRADITIONS OF JEWISH LAW AND LIFE WITH THE HERITAGE OF WE STERN CIVILIZATION, AND EACH YEAR WE CELEBRATE AS FUTURE LEADERS MAKE YU THEIR HOME. MORE THAN 6,300 UNDERGRADUATE AND GRADUATE ENDENTS STUDY AT YU'S FOUR NEW YORK CITY CAMPUSES: THE WILF CAMPUS; ISRAEL HENRY BEREN CAMPUS; BROOKDALE CENTER; THE JACK AND PEARL RESNICK C AMPUS; AND IN ISRAEL. YU CURRENTLY ENROLLS APPROXIMATELY 3.000 UNDERGRADUATES AT YESHIVA C OLLEGE, STERN COLLEGE FOR WOMEN, THE SY SYMS SCHOOL OF BUSINESS, AND IN THE S. DANIEL ABRA HAM PROGRAM IN ISRAEL. THESE SCHOOLS COMBINE RIGOROUS ACADEMICS, UNPARALLELED JEWISH STUDIES AND A NURTURING JEWISH ENVIRONMENT. HONORS AND LEADERSHIP PROGRAMS STRESS THE INTELLECT UAL DEVELOPMENT AND CULTURAL ENVIRONMENT. HONORS AND LEADERSHIP PROGRAMS STRESS THE INTELLECT UAL DEVELOPMENT AND CULTURAL ENRICHMENT OF OUTSTANDING STUDENTS, AND THERE ARE MANY OPPORT UNITIES FOR INTERNSHIPS AND RESEARCH. JOINT AND COMBINED PROGRAMS OFFER ADVANCED DEGREES I IS NEIGHBERING, OCCUPATIONAL AND PHYSICAL THERAPY, JEWISH EDUCATION, JEWISH STUDIES, OPTOME TRY, NURSING, AND MATH AND SCIENCE AND EDUCATION. ABOUT 95 PERCENT OF FULL-TIME UNDERGRADU ATE FACULTY HOLD DOCTORATES OR THE HIGHEST DEGREE WITHIN THEIR FIELDS. SMALL CLASSES ENCOU RAGE INTELLECTUAL INTIMACY AND CREATIVITY. DISTINGUISHED SCHOLARS, AUTHORS, ARTISTS, PUBLI C OFFICIALS AND BUSINESS LEADERS INTERACT WITH STUDENTS IN A VARIETY OF VENUES. DEVOTED T EACHERS, LEADING SCHOLARS AND SPIRITUAL MENTORS

Return Reference	Explanation
CORE FORM 990, PART III, LINE 4 - PROGRAM SERVICES	A VALUABLE AND ENRICHING EXPERIENCE, WHERE LIVING AND LEARNING IN THE JEWISH HOMELAND, BE ING IMMERSED IN THE WORLD OF YESHIVA AND SEMINARY, AND ENGAGING IN INTENSE JEWISH STUDIES ARE INTEGRAL PARTS OF DAILY LIFE. A FORMAL ARRANGEMENT BETWEEN YESHIVA UNIVERSITY AND MORE THAN 40 INSTUTIONS IN ISRAEL FOR MEN AND WOMEN, THE PROGRAM PROVIDES STRUCTURE, GUIDANCE AND ASSISTANCE FOR MORE THAN 600 YOUNG MEN AND WOMEN, ENABLING THEM TO INCORPORATE THEIR S TUDIES IN ISRAEL INTO THEIR COLLEGE YEARS. ISRAEL'S LEADING EDUCATORS TEACH AN INTENSE PRO GRAM OF JEWISH SUBJECTS AND THE EXPERIENCE INCREASES PROFICIENCY IN HEBREW AND ENABLES STU DENTS TO LEARN FIRST HAND ABOUT ISRAEL'S LAND, PEOPLE, HISTORY AND CULTURE, YESHIVA UNIVER SITY IN ISRAEL REPRESENTATIVES OFFER ACADEMIC GUIDANCE AND CAREER PLANNING ADVICE AND STUD ENTS HAVE THE OPPORTUNITY TO MEET YU ROSHEI YESHIVA (PROFESSORS OF TALMUD AND TORAH), ADMI NISTRATORS AND FACULTY. YESHIVA UNIVERSITY IS ALSO AFFILIATED WITH ONE OF THE NATION'S TOP MEDICAL SCHOOLS AND IS HOME TO A TOP-RANKED LAW SCHOOL, AS WELL AS HIGHLY REGARDED GRADUA TE SCHOOLS OF SOCIAL WORK, PSYCHOLOGY, JEWISH STUDIES, JEWISH EDUCATION AND ADMINISTRATION, BUSINESS AND PROFESSIONAL STUDIES, INCLUDING GRADUATE PROGRAMS IN ACCOUNTING, TAXATION, REAL ESTATE, BUSINESS MBA, BIOTECHNOLOGY, DATA AND PRIVACY LAW, PHYSICS, CYBERSECURITY, ARTIFICIAL INTELL IGENCE, ENTERPRISE RISK MANAGEMENT, DATA AND PRIVACY LAW, PHYSICS, QUANTITATIVE ECONOMICS AND FINANCE, MARKETING, MATH, MATHEMATICAL SCIENCES, OCCUPATIONAL THERAPY, SPEECH LANGUAGE PATHOLOGY AND PHYSICIAN ASSISTANT STUDIES. THE UNEQUALED RESOURCES OF NEW YORK CITY ENABLE YESHIVA TO MAKE PIONEERING ADVANCES AND PARTNERSHIPS IN CONJUNCTION WITH LEADING EDUCATION AND ADMINISTRATION, BEGENEROR OF ANTE PROGRAMS IN ARTS AND SCIENCES, THE MASTERS OF ARTS PROGRAM IN BIBLICAL AND TALMUDIC INTERPRETATION AT STERR COLLEGE FOR WOMEN AND THE KATZ SCHOOL OF SOCIAL WORK, FERKAUF GRADUATE SCHOOL OF PSYCHOLOGY, AZRIELI GRADUATE SCHOOL OF JEWISH EDUCATION AND ADMINISTRATION, BERNARD

Return Reference	Explanation
CORE FORM 990, PART III, LINE 4 - PROGRAM SERVICES	DEVELOPMENT OF ETHICAL AND COMPASSIONATE PHYSICIANS AND SCIENTISTS. INSPIRED BY THE WORDS OF ITS NAMESAKE, EINSTEIN, FROM ITS INCEPTION, WELCOMED STUDENTS, FACULTY AND STAFF FROM DIVERSE BACKGROUNDS WHO STRIVE TO ENHANCE HUMAN HEALTH IN THE COMMUNITY AND BEYOND. AT THE CORE OF EINSTEIN'S MISSION IS THE PURSUIT OF SOCIAL JUSTICE IN MEETING THE HEALTHCARE NEE DS OF ALL INDIVIDUALS, INCLUDING THOSE FROM UNDERSERVED COMMUNITIES. LOCATED IN A RESIDENT IAL COMMUNITY IN THE NORTHEAST BRONX, EINSTEIN IS THE AFFILIATED MEDICAL SCHOOL FOR SEVERA L OF THE LEADING HOSPITALS IN NEW YORK, INCLUDING MONTEFIORE MEDICAL CENTER. THROUGH ITS A FILIATION WITH THE ALBERT EINSTEIN COLLEGE OF MEDICINE, YESHIVA AWARDS THE DOCTOR OF MEDI CINE DEGREE AS WELL AS THE PHD, COMBINED MD/PHD AND MS DEGREES. EINSTEIN ALSO SPONSORS ONE OF THE LARGEST POSTGRADUATE CLINICAL TRAINING PROGRAMS IN THE UNITED STATES. DURING THE 2 019-2020 ACADEMIC YEAR, EINSTEIN IS HOME TO 721 M.D. STUDENTS, 178 PH.D STUDENTS (INCLUDIN G 109 STUDENTS IN THE COMBINED MD/PHD PROGRAM) AND 265 POST-DOCTORAL RESEARCH FELLOWS, MOR E THAN 9,000 EINSTEIN ALUMNI ARE AMONG THE NATION'S FOREMOST CLINICIANS, BIOMEDICAL SCIENT ISTS AND MEDICAL EDUCATORS. A FULL TIME FACULTY OF MORE THAN 1,900 TEACHES AND DELIVERS HE ALTHCARE AND CONDUCTS STUDIES IN EVERY MAJOR MEDICAL SPECIALTY AND AREA OF BIOMEDICAL RESEARCH. YESHIVA UNIVERSITY'S BENJAMIN N. CARDOZO SCHOOL OF LAW, AWARDS THE JURIS DOCTOR DEGR EE AND LLM DEGREES WITH CONCENTRATIONS IN INTELLECTUAL PROPERTY, GENERAL STUDIES, COMPARAT IVE LEGAL THOUGHT AND DISPUTE RESOLUTION AND ADVOCACY, THE JSD DEGREE AND DUAL JD AND MAST ERS IN BIOETHOCS (MBE) DEGREE. CARDOZO FACULTY ARE CONSISTENTLY RANKED IN THE TOP 30 IN THE COUNTRY FOR SCHOLARLY IMPACT AND THE SCHOOL OFFERS MORE THAN 15 INITIATIVES UNDER THE CE NTER FOR RIGHTS AND JUSTICE AND SPONSORS DOZENS OF OTHER CLINICS, INCLUDING THE INDIE FILM CLINIC, THE TECH STRATUP CLINIC, THE CIVIL RIGHTS CLINIC, THE KATHRYN O. GREENBERG IMMIGR ATION JUSTICE CLINIC AND THE BET TZEDEK LEGAL SERVICE

990	Schedule	ο,	Supplemental	Information

(

Return Reference	Explanation
PROGRAM SERVICES (CONT'D)	THE AZRIELI GRADUATE SCHOOL OF JEWISH EDUCATION AND ADMINISTRATION IS THE PREMIER CENTER F OR ASPIRING JEWISH EDUCATORS AS EITHER TEACHERS, CURRICULUM DEVELOPERS OR EDUCATIONAL LEAD ERS, AND OFFERS AN INTERNATIONALLY RECOGNIZED FACULTY, INNOVATIVE COURSEWORK, COLLABORATIVE RESEARCH, INTENSIVE FIELD EXPERIENCE AND PROFESSIONAL MENTORING. THE SCHOOL AWARDS TWO M ASTERS OF SCIENCE DEGREES IN JEWISH EDUCATION IN EITHER TEACHING OR CURRICULUM DEVELOPMENT AND OFFERS SUBSTANTIAL FLEXIBILITY TO ALLOW ALL JEWISH EDUCATORS TO ADVANCE THEIR LEARNING EITHER AT THE NEW YORK CAMPUS OR IN A FULLY ONLINE PROGRAM. STUDENTS MAY ALSO PURSUE A D UAL MASTERS DEGREE FROM AZRIELI AND THE BERNARD REVEL GRADUATE SCHOOL OF JEWISH STUDIES OR A MASTERS COMBINED WITH SEMICHA (RABBINICAL ORDINATION), THROUGH ITS FANYA GOTTESFELD HELL LER DIVISION OF DOCTORAL STUDIES, AZRIELI ALLOM SERVE AT THE EXECUTIVE DOCTORATE OF JEWISH ED UCATIONAL INNOVATION AND LEADERSHIP. AZRIELI ALLOMNI SERVE AT THE HELD OF SCHOOLS, EDUCATIO NAL AGENCIES, UNIVERSITIES AND COMMUNAL INSTITUTIONS ALL OVER THE WORLD. THE BERNARD REVEL GRADUATE SCHOOL OF JEWISH STUDIES, NAMED AFTER THE FIRST PRESIDENT OF YU, EDUCATES TEACHER S, RESEARCHERS AND SCHOLARS IN JEWISH STUDIES AS WELL AS RABBIS, COMMUNAL PROFESSIONALS A ND ANYONE WILLING TO ENRICH HIS OR HER KNOWLEDGE OF JUDAISM. IT OFFERS MASTERS AND DOCTORA L PROGRAMS WITH CONCENTRATIONS IN BIBLE, TALMUDIC STUDIES, ANCIENT JEWISH HISTORY, AND JEWISH HISTORY, MODERN JEWISH HISTORY, AND JEWISH PHILOSOPHY AND MYSTICISM. THE FIRST PRESIDENT OF YU, EDUCATES TEACHORY, MODERN JEWISH HISTORY, AND JEWISH PHILOSOPHY AND MYSTICISM. THE FERKAUF GRADUATE SCHOOL OF PSYCHOLOGY TRAINS HIGHLY QUALIFIED PSYCHOLOGISTS AND RESEARCHERS IN THE FIELDS OF CLINICAL PROGRAMS WITH CONCENTRATIONS IN BIBLE, TALMUDIC STUDIES, ANCIENT JEWISH PHILOSOPHY AND MYSTICISM. THE FERKAUF GRADUATE SCHOOL OF PSYCHOLOGY TRAINS HIGHLY QUALIFIED PSYCHOLOGY, CLINICAL HEALTH PSYCHOLOGY OF AND MENTAL HEALTH COUNSELING. COLLABORATIONS WITH SCHOOLS, CLINICAL HEALTH PSYCHOLOG

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
PROGRAM SERVICES (CONT'D)	A PRACTICE AND PALLIATIVE CARE AND GERONTOLOGY, IT OFFERS CONCENTRATIONS IN CLINICAL PRACT ICE WITH INDIVIDUALS AND FAMILIES, SOCIAL GROUP WORK, AND COMMUNITY PRACTICE. WURZWEILER G RADUATES COMPRISE A NETWORK OF MORE THAN 7,000 LOCAL, NATIONAL AND INTERNATIONAL SERVICE P ROVIDERS, LEADERS AND EDUCATIORS. FIELDWORK IS AN INTEGRAL PART TO A WURZWEILER EDUCATION. AFFILIATED AGENCIES AND EDUCATORS, FIELDWORK IS AN INTEGRAL PART TO A WURZWEILER EDUCATION. AFFILIATED AGENCIES ARE SELECTED FOR THEIR EXPERTISE, DIVERSITY, SERVICE TO THE COMMUNITY AND OPPORTUNITIES FOR LEARNING. TOPICS SUCH AS EVIDENCE-BASED PRACTICE, HEALTHY AGING, TRA UMA AND INTERPERSONAL VIOLENCE, WORKING WITH VETERANS, COPING WITH LOSS, CHILD WELFARE, GE RIATRIC AND PALLIATIVE CARE, CREATIVE ARTS AND HEALING, SCHOLD SOCIAL WORK AND SUBSTANCE A BUSE INFORM WURZWEILER'S NATIONALLY ACCREDITED CURRICULUM. WURZWEILER'S INTERNATIONALLY RE COGNIZED FACULTY IS COMMITTED TO EXCELLENCE IN TEACHING AND CONTRIBUTING TO THE BODY OF KN OWLEDGE IN PRACTICE RESEARCH. STERN COLLEGE FOR WOMEN OFFERS A MASTER OF ARTS PROGRAM IN B IBLICAL AND TALMUDIC INTERPRETATION, WHICH IS OPEN TO STUDENTS WITH EXTENSIVE BACKGROUNDS IN ADVANCED JEWISH STUDIES. ADVANCED STUDENTS MAY CHOOSE TO STUDY IN THE FULL DAY TRADITIO NAL BEIT MIDRASH ENVIRONMENT AS MEMBERS OF THE STERN COLLEGE GRADUATE PROGRAM IN ADVANCED TALMUDIC STUDIES. THE GRADUATE PROGRAM IN ARTS AND SCIENCES INCLUDES THE MASTER OF SCIENCE IN QUANTITATIVE ECONOMICS(MOE), WHICH TRAINS STUDENTS FOR ANALYTICAL OR RESEARCH BASED CA REERS IN ECONOMICS AND FINANCE, AS WELL AS AN MA'I MATHEMATICA AND A PHD IN MATHEMATICAL SCIENCE DESIGNED TO PRODUCE SPECIALISTS FOR ACADEMIA AND INDUSTRY AND TO SUPPORT STRONG UN DERGRADUATE PROGRAMS. THE SY SYMS SCHOOL OF BUSINESS OFFERS MASTERS OF SCIENCE PROGRAMS IN ACCOUNTING AND TAXATION AS WELL AS AN EXECUTIVE MBA PROGRAM THAT PROVIDES STUDENTS WITH S TATE OF THE ART BUSINESS KNOWLEDGE IN THE CONTEXT OF THE HIGHEST ETHICAL IDEALS. THE KATZ SCHOOL OF SCIENCE AND HEALTH AT YESHIVAL UNIVERSITY

Return

Reference	·
PROGRAM SERVICES (CONT'D)	ORMED BY INDUSTRY TO PROVIDE OUR GRADUATES WITH TOOLS THAT WILL SERVE THEM WELL IN THEIR C AREERS. UNDERGRADUATE STUDENTS AT THE KATZ SCHOOL OF SCIENCE AND HEALTH, WHETHER PART OF A N ASSOCIATE'S DEGREE, SUMMER SESSION, OR COLLEGENOW, SHARE IN THE SAME FORWARD-LOOKING COL LEGE EXPERIENCE AS OUR GRADUATE STUDENTS. THEY ALSO JOIN STUDENTS AT YESHIVA COLLEGE, STER N COLLEGE, AND THE SY SYMS SCHOOL OF BUSINESS IN THE CAMPUS LIFE THAT DEFINES YESHIVA UNIVERSITY. YU'S NETWORK OF LIBRARIES OCCUPY A CENTRAL ROLE IN THE ACADEMIC ENTERPRISE BY NURT URING DISCOVERY, CRITICAL THINKING AND THE INTERDISCIPLINARY EXCHANGE OF INFORMATION TO HE LP STUDENTS AND FACULTY COLLABORATE, GROW INTELLECTUALLY AND ACQUIRE SKILLS FOR LIFE LONG LEARNING. THE LIBRARIES PROVIDE ACCESS TO ACADEMIC AND CULTURAL RESOURCES IN PRINT, DIGITA L AND OTHER FORMATS, WHICH SPAN THE DISCIPLINES FROM BIOMEDICAL SCIENCES, SOCIAL SCIENCES, BUSINESS, AND LAW TO LITERATURE, LANGUAGES AND THE ARTS. SPECIAL COLLECTIONS INCLUDE JUDA IC RARE BOOKS AND MANUSCRIPTS, SEPHARDIC PUBLICATIONS AND EXTENSIVE ARCHIVAL RECORDS DOCUM ENTING THE JEWISH EXPERIENCE OF THE PAST CENTURY. BASED AT THE CENTER FOR JEWISH HISTORY, THE YESHIVA UNIVERSITY MUSEUM IS A CREATIVE AND VITAL PRESENCE IN THE INTELLECTUAL AND EDU CATIONAL LIFE OF YU AND THE GENERAL COMMUNITY. THE MUSEUM PRESENTS INNOVATIVE EXHIBITIONS AND PROGRAMS ON THE JEWISH ART AND CULTURE IN A HISTORICAL AND CONTEMPORARY CONTEXT. SEE S CHEDULE D, SUPPLEMENTAL INFORMATION FOR A MORE DETAILED DISCUSSION OF THE YESHIVA UNIVERSITY LIBRARY AND MUSEUM'S COLLECTIONS.

Return	Explanation
Reference	·
PROGRAM SERVICES (CONT'D)	THE MUSEUM'S COLLECTION OF MORE THAN 10,000 ARTIFACTS, EXHIBITIONS, INSTALLATIONS AND PROGRAMS PROVIDE A WINDOW INTO JEWISH CULTURE AROUND THE WORLD AND THROUGHOUT HISTORY. SCHOOL GROUPS FROM ACROSS THE NEW YORK METROPOLITAN AREA VISIT THE MUSEUM TO TOUR THE EXHIBITIONS AND PARTICIPATE IN WORKSHOPS AND EDUCATIONAL PROGRAMS. THE MUSEUM SERVES AS A RESOURCE FOR EDUCATORS NATIONWIDE. AS A RESOURCE FOR SCHOLARLY RESEARCH, THE MUSEUM'S EXHIBITIONS EXAMINE JEWISH COMMUNITIES, CULTURE, AND HISTORY, AND PRESENT THE WORKS OF EMERGING AND ESTABLISHED ARTISTS. THE MUSEUM PARTNERS WITH YU FACULTY TO PROVIDE A WIDE RANGE OF PROGRAMS OPEN TO THE PUBLIC, INCLUDING CONFERENCES, WORKSHOPS AND LECTURES. AS A TEACHING MUSEUM, IT IS COMMITTED TO PROVIDING CREATIVE LEARNING OPPORTUNITIES. IN ORDER TO FOSTER INTELLECTUAL EXCHANGE BOTH WITHIN YU, THE BROADER ACADEMIC COMMUNITY AND WITH THE GENERAL COMMUNITY, YU CREATED THE FOLLOWING CENTERS/INSTITUTES: THE CENTER FOR THE JEWISH FUTURE; THE RABBI ARTHUR SCHNEIER CENTER FOR INTERNATIONAL AFFAIRS; THE CENTER FOR ISRAEL STUDIES; THE CENTER FOR JEWISH LAW AND CONTEMPORARY CIVILIZATION; AND THE ZAHAVA AND MOSHAEL STRAUSS CENTER FOR TORAH AND WESTERN THOUGHT. THE CENTER FOR THE JEWISH FUTURE'S (CJF) MISSION IS TO SHAPE, ENRICH AND INSPIRE THE CONTEMPORARY JEWISH COMMUNITY BY CONVENING THE RESOURCES OF YESHIVA UNIVERSITY AND; INFUSING STUDENTS WITH A SPIRIT OF LEADERSHIP AND RESPONSIBILITY TO THE JEWISH PEOPLE AND SOCIETY IN GENERAL, BUILDING, CULTIVATING, AND SUPPORTING, COMMUNITIES AND THEIR LAY AND RABBINIC LEADERS, AND CREATING A GLOBAL MOVEMENT THAT PROMOTES THE VALUES OF YESHIVA UNIVERSITY. THE CENTER FOR ISRAEL STUDIES IS AN EXPRESSION OF THE LONGSTANDING RELATIONSHIP BETWEEN YESHIVA UNIVERSITY AND THE LAND AND THE STATE OF ISRAEL. THE CENTER FOR TORAH AND WESTERN THOUGHT THROUGH FELLOWSHIPS, PUBLIC EVENTS, SEMINARS AND TRAVEL ABROAD OPTIONS, OFFERS STUDENTS THE OPPORTUNITY TO ENGAGE WITH LEADING OF ISRAEL THROUGHOUT HISTORY AND ACROSS DISCIPLINES WITH A KEEP FOR ISRAEL SHOULD HE ALD

Return

Reference	·
CORE	IN ACCORDANCE WITH ARTICLE I-3 OF THE YESHIVA UNIVERSITY BY-LAWS OF THE BOARD OF THE BOARD OF
FORM 990,	TRUSTEES, THE RESPECTIVE CHAIRS OF THE BOARDS OF THE RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY
PART VI,	("RIETS") AND THE BENJAMIN N. CARDOZO SCHOOL OF LAW ("CARDOZO") SERVE AS EX OFFICIO VOTING MEMBERS
SECTION A,	OF THE YESHIVA UNIVERSITY BOARD OF TRUSTEES. RIETS IS A SEPARATELY INCORPORATED SECTION 501(C)(3)
LINE 7A -	TAX-EXEMPT ORGANIZATION. CARDOZO IS A CONSTITUENT SCHOOL THAT OPERATES AS PART OF YESHIVA
MEMBERS	UNIVERSITY. SUCH INDIVIDUALS REMAIN ON THE YESHIVA UNIVERSITY BOARD OF TRUSTEES AS LONG AS THEY
	REMAIN AS CHAIR OF HIS OR HER RESPECTIVE BOARD.

CORE YESHIVA UNIVERSITY'S FORM 990 WAS REVIEWED AND SIGNED BY AN INDEPENDENT ACCOUNTING FIRM BASED O	
FORM 990, PART VI, PART VI, SECTION A, LINE 11B - FORM 990 REVIEW	

990	Schedule	O, Supp	lemental	Information

Return Reference	Explanation
CORE FORM 990, PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY	THE UNIVERSITY'S CONFLICT OF INTEREST POLICY - WHICH WAS APPROVED BY THE BOARD OF TRUSTEES - APPLIES TO ALL MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES, ALL MEMBERS OF THE BOARDS OF OVERSEERS OF THE UNIVERSITY'S CONSTITUENT SCHOOLS, ALL PERSONS WHO SERVE ON A UNIVERSITY BOARD COMMITTEE OF A COMMITTEE OF A CONSTITUENT SCHOOLS BOARD, AND TO OFFICERS AND SELECT EMPLOYEES OF THE UNIVERSITY, AS DESIGNATED BY THE GENERAL COUNSEL (COLLECTIVELY, THE "COVERED PERSONS"). THE POLICY PROVIDES THAT COVERED PERSONS ARE TO ACT AT ALL TIMES IN A MANNER CONSISTENT WITH THEIR RESPONSIBILITIES TO THE UNIVERSITY AND AVOID CIRCUMSTANCES IN WHICH THEIR FINANCIAL OR OTHER TIES TO OUTSIDE ENTITIES COLUD PRESENT AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST OR IMPAIR THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVE RED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVE RED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVE RED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVE RED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVERED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVERED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVERED PERSONS ON SERVINE SEST INTERESTS, APPROVE SUCH EXCEPTIONS. CONFLICT WAIVER REQUESTS CO NSIDERED BY THE COMMITTEE, WHETHER OR NOT APPROVED, ARE REPORTED TO THE BOARD OF TRUSTEES. QUESTIONS AS TO WHETHER A TRANSACTION CONSTITUTES A RELATED PARTY TRANSACTION WITH RESPECT TO COVERED PERSONS ARE RESOLVED BY THE UNIVERSITY'S GOVERNANCE COMMITTEE, IN CONSULTATION WITH THE GENERAL COUNSEL. COVERED PERSONS ARE REQUIRED TO COMPLETE, SIG N AND SUBMIT TO THE GENERAL COUNSEL AN ANNOLA DISCLOSURE STATEMENT; TO PROMPTLY NOTIFY THE GENERAL COUNSEL. OF ANY CHANGE IN THE INFORMATION AND/OR CONFIRM THE CONTINUED AC CURRED PERSON OR OTHER PROVISION OF THE CONFIRM THE CONFIRM THE E

Return Reference	Explanation
CORE FORM 990, PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY	ED PERSON'S ANNUAL DISCLOSURE STATEMENT AND ANY PERIODIC UPDATES SUBMITTED PURSUANT TO THE POLICY. IN ADDITION TO THE CONFLICT OF INTEREST POLICY ABOVE FOR COVERED PERSONS, UNIVERS ITY EMPLOYEES ARE ALSO SUBJECT TO ADDITIONAL CONFLICT OF INTEREST REPORTING REQUIREMENTS A S SET FORTH IN THE UNIVERSITY EMPLOYEE HANDBOOK.

Return

Reference

CORE FORM	THE COMPENSATION OF ALL EMPLOYEES EARNING IN EXCESS OF A SPECIFIED THRESHOLD SALARY LEVEL, AS
990, PART VI,	WELL AS ALL OF YESHIVA UNIVERSITY'S OFFICERS AND KEY EMPLOYEES, IS REVIEWED BY THE UNIVERSITY'S
SECTION B, LINE	COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES. THE INDEPENDENT MEMBERS OF THE COMMITTEE
15 -	CONDUCT A DETAILED REVIEW AND APPROVAL OF SUCH COMPENSATION UTILIZING COMPARABILITY DATA
COMPENSATION	FROM THIRD PARTY SALARY SURVEYS, FORM 990 SALARY DISCLOSURES FROM OTHER ORGANIZATIONS,
DETERMINATION	AND/OR COMPENSATION STUDIES PREPARED BY AN INDEPENDENT THIRD PARTY CONSULTING FIRM.
	CONTEMPORANEOUS DOCUMENTATION OF THE COMMITTEE'S DELIBERATIONS AND DECISIONS ARE MADE
	PART OF THE COMMITTEE'S WRITTEN MINUTES. IN ACCORDANCE WITH IRS RULES AND REGULATIONS, THE
	UNIVERSITY HAS ALSO RECEIVED OPINIONS FROM INDEPENDENT THIRD PARTY COMPENSATION CONSULTANTS

THAT THE COMPENSATION AND BENEFITS OF ITS OFFICERS AND KEY EMPLOYEES ARE REASONABLE.

Return

Reference		١
CORE FORM	YESHIVA UNIVERSITY DOES NOT CURRENTLY MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST	ı
990, PART VI,	POLICY AVAILABLE TO THE PUBLIC. IT'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE	ı
SECTION C,	UNIVERSITY'S WEBSITE AT WWW.YU.EDU. THE UNIVERSITY MAKES IT'S FORM 990 AND 990-T AVAILABLE TO THE	ı
LINE 19 -	PUBLIC IN ACCORDANCE WITH INTERNAL REVENUE SERVICE RULES AND REGULATIONS.	ı
PUBLIC	l l	ı
DISCLOSURE	<u> </u>	ı

Return Explanation
Reference

CORE FORM 990, PART VI, SECTION A, LINE 2 - BOARD MEMBER RELATIONSHIPS

Return Reference Explanation

990 Schedule O, Supplemental Information

FORM 990, PART | ELIMINATION OF EXPENSES OF SEPARATELY INCORPORATED REAL ESTATE ENTITIES \$-19,389

XI, LINE 9 RECONCILIATION
OF NET ASSETS

Return Reference	Explanation
	THE AVERAGE HOURS PER WEEK LISTED FOR THE OFFICERS, KEY EMPLOYEES AND HIGHEST PAID EMPLOYEES REPRESENTS YESHIVA UNIVERSITY'S OFFICIAL WORK WEEK. HOWEVER, IN PRACTICE, SUCH INDIVIDUALS WORK SIGNIFICANTLY MORE HOURS PER WEEK AND ARE EXPECTED TO BE AVAILABLE FOR UNIVERSITY BUSINESS.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - SCHEDULE R | Related

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

OMB No. 1545-0047

Schedule R (Form 990) 2019

Employer identification number

DLN: 93493134049701

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
YESHIVA UNIVERSITY

(Form 990)

► Attach to Form 990.► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

13-1624225 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I See Additional Data Table (b) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (f) (g) (e) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No (1)YESHIVA ENDOWMENT FOUNDATION INC FOUNDATION NY 501(C)(3) 12A lγu Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-1790758 (2)YESHIVA UNIVERSITY IN ISRAEL IS FOREIGN **FOREIGN** EDUCATION ΥU Yes 40 DUVDEVANI STREET JERUSALEM 96428 99-999999 (3) CAROLINE JOSEPH GRUSS INST YU IN ISRAEL IS EDUCATION FOREIGN FOREIGN lγu Yes 40 DUVDEVANI STREET JERUSALEM 96428 99-999999 (4) CANADIAN FRIENDS OF YESHIVA UNIVERSITY FUNDRAISING CA FOREIGN FOREIGN Yυ Yes 3101 BATHURST STREET TORONTO, ONTARIO M6A2A6 99-9999999 (5)YESHIVA UNIVERSITY WOMEN'S ORGANIZATION NY FUNDRAISING 501(C)(3) 12A lnα No 500 WEST 185TH STREET NEW YORK, NY 10033 13-1837437

Cat. No. 50135Y

I General or ox managing partner?	ng owr	eral or naging	manag	00X I	(i) Code V-UBI mount in box 20 of schedule K-1 Form 1065)	s? a	(h) oprtiona cations?	Disprop	(g) Share of end-of-year assets	of	(f) Share of total incor	nant elated, ed, from der 512-	(e) Predominincome(reunrelateexcluded tax undesections	(d) irect trolling ntity	e co	(c) Legal domicile (state or foreign country	(b) Primary activity			(a) Iress, and EIN of organization	(a Name, addres related org
Yes No	10	No	Yes	$-\Gamma$		0	No	Yes				<u> </u>	311)		-	-					
	_	+		+																	
+	+	+	\rightarrow	\dashv												-					
		+		\dagger												1					
V line 24	24	24	lino		O Dowt IV	2.00	Form	o" on	warad "Vac	2001	-ation ar		if the or	malata	<u> </u>	0 T T		rable as a C	tions T	ated Oversion	Identification of Relate
v, iiie 34	· +	= 34	e	. v ,	J, Pail IV	11 95	FUIIII	S UII	vereu res	alisw	zation ai										because it had one or mo
(h) centage s nership (Section (13) co	S:	tage	(h) centa		-	(g) ire of en year assets		(f) hare of total income	y SI	(e) e of entity rp, S corp, trust)	Type (C corp	(d) controlling entity	Direct		(c) egal nicile or foreign	Lo doi (state o	(b) ary activity	Pi		nal Data Table (a) Name, address, and EIN of related organization
<u>_</u>	Yes	\dashv		—	+											intry)	cou				
				_																	
	_																				
	+	+			+			+													

o Sharing of paid employees with related organization(s)

(a)
Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses .

(1)CAROLINE JOSEPH GRUSS INST YU IN ISRAEL

(4)CANADIAN FRIENDS OF YESHIVA UNIVERSITY

(3)215 LEXINGTON AVENUE CONDOMINIUM

(2)YESHIVA UNIVERSITY ENDOWMENT FOUNDATION

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.								No
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							+-	+
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity						1a		No
${f b}$ Gift, grant, or capital contribution to related organization(s)						1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)						1c	Yes	1
d Loans or loan guarantees to or for related organization(s)						1d		No
e Loans or loan guarantees by related organization(s)			•			1e	lacksquare	No
f Dividends from related organization(s)						1f		No
g Sale of assets to related organization(s)						1 g		No
h Purchase of assets from related organization(s)						1h	1	No
i Exchange of assets with related organization(s)						11	1	No
j Lease of facilities, equipment, or other assets to related organization(s)						1j	Yes	1

d Loans or loan guarantees to or for related organization(s)	1.4	I'	140
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j \	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n \	Yes	

(b) Transaction

type (a-s)

1B

1C

1J

Amount involved

3,083,994

1,296,131

815,803

255,084

FMV

FMV

FMV

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

10 Yes

1r Yes

1s

Schedule R (Form 990) 2019

(d)

Method of determining amount involved

No No

No

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
	1		1			ı				Schedul	e R (Form	990	0) 2019

Schedule R (Form 990) 2019										
Part VII	Supplemental Information									
	Provide additional information for responses to questions on Schedule R. (see instructions).									
Return Reference		Explanation								

Software ID: Software Version:

EIN: 13-1624225

Name: YESHIVA UNIVERSITY

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
2479 AMSTERDAM AVENUE LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8424066	REAL ESTATE	NY	482,879	7,869,405	YU
2498 AMSTERDAM AVENUE LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8424135	REAL ESTATE	NY	59,219	973,402	YU
251 LEXINGTON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218298	REAL ESTATE	NY	376,781	2,355,755	YU
556 WEST 185TH I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218444	INACTIVE	NY	0	0	YU
551 REALTY I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218503	INACTIVE	NY	0	0	YU
501 WEST 184TH I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218560	INACTIVE	NY	0	0	YU
COLONY MANAGEMENT I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218641	INACTIVE	NY	0	0	YU
BRIDGEVIEW PROPERTIES I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218703	INACTIVE	NY	0	0	YU
407 AUDUBON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218835	INACTIVE	NY	0	0	YU
403 AUDUBON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218928	INACTIVE	NY	0	0	YU
2461 AMSTERDAM AVENUE I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218987	REAL ESTATE	NY	0	350,839	YU
480 WEST 187 I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 26-1607906	INACTIVE	NY	0	0	YU
LAUREL HILL VENTURES LLC- sole member of 90 LAUREL HILL ASSOC-500 W 185 ST NEW YORK, NY 10033 13-4074163	INACTIVE	NY	0	0	YU
90 LAUREL HILL ASSOCIATES LLC 500 WEST 185TH STREET NEW YORK, NY 10033 11-3490957	INACTIVE	NY	0	0	YU
LAUREL HILL ESTATES I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218366	INACTIVE	NY	0	0	YU
24 36 LAUREL HILL I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218753	REAL ESTATE	NY	648,715	4,606,203	YU
Y PROPERTIES HOLDINGS LLC 50 WEST 185TH STREET NEW YORK, NY 10033 82-0914288	R.E. HOLDINGS	DE	10,219,754	47,914,678	YU

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (a) (b) (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-year Percentage Section 512 (C corp, S corp, related organization domicile entity income assets ownership (b)(13)(state or foreign or trust) controlled country) entity? Yes No REAL ESTATE NY lc 0 82.113 CFIP CORPORATION YEF 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3227195 DEEGAN VIEW DEVELOPMENT REAL ESTATE NY YEF 0 100.000 % Yes CORPORATION 500 WEST 185TH STREET NEW YORK, NY 10033 13-3372640 EASTCHESTER PROPERTIES INC REAL ESTATE NY lγu 0 256,171 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 06-1142985 YEF HIGH BRIDGE PROPERTIES INC REAL ESTATE NY 0 35,106 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3247382 Yυ 0 LAUREL HILL DEVELOPMENT CORPORATION REAL ESTATE NY 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 06-1158243 OBC CORP REAL ESTATE NY YU 0 368.321 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 06-1142986 YEF 0 100.000 % TREC PROPERTIES INC REAL ESTATE NY Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3244142 557 WEST 185TH ST CORP REAL ESTATE NY ΥU 0 58,450 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3375637 BRIDGE PROPERTY INC REAL ESTATE NY YEF 0 47,368 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3262638 FACILITIES 2000 INC SAFETY SVCS NY YU 0 0 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3955072 REAL ESTATE 0 VAN NEST CORP NY Yυ 0 100.000 % Yes 500 WEST 185TH STREET NEW YORK, NY 10033 13-3421890 REAL ESTATE YU 0 55 FIFTH AVENUE CONDOMINIUM NY 60.000 % No 500 WEST 185TH STREET

NY

NY

Yυ

NΑ

lc

1,275,000

1,777,424

63.000 %

Yes

No

NEW YORK, NY 10033

500 WEST 185TH STREET NEW YORK, NY 10033 13-4130536

215 LEXINGTON AVENUE CONDOMINIUM

CHARITABLE REMAINDER TRUSTS -14

REAL ESTATE

FUNDRAISING

99-9999999