

Form **990**
Department of the Treasury
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.

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **07-01-2019**, and ending **06-30-2020**

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
Monmouth University Inc

% **MARY BYRNE**

Doing business as
Monmouth University

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
400 Cedar Avenue

City or town, state or province, country, and ZIP or foreign postal code
West Long Branch, NJ 077641898

D Employer identification number
21-0634584

E Telephone number
(732) 571-3407

G Gross receipts \$ 345,997,836

F Name and address of principal officer:
Patrick F Leahy
400 Cedar Avenue
West Long Branch, NJ 077641898

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.monmouth.edu

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1948

M State of legal domicile: NJ

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
MONMOUTH UNIVERSITY IS A COMPREHENSIVE INSTITUTION OF HIGHER EDUCATION COMMITTED TO EXCELLENCE AND INTEGRITY IN TEACHING, SCHOLARSHIP AND SERVICE.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	33
4 Number of independent voting members of the governing body (Part VI, line 1b)	31
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	3,560
6 Total number of volunteers (estimate if necessary)	778
7a Total unrelated business revenue from Part VIII, column (C), line 12	440,235
7b Net unrelated business taxable income from Form 990-T, line 39	115,375

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	9,826,236	13,531,426
9 Program service revenue (Part VIII, line 2g)	248,238,362	241,339,413
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,933,821	6,383,865
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	865,049	562,313
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	267,863,468	261,817,017
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	74,145,140	78,631,751
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	121,994,847	124,020,733
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,178,707		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	63,479,074	57,422,446
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	259,619,061	260,074,930
19 Revenue less expenses. Subtract line 18 from line 12	8,244,407	1,742,087
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	412,411,082	405,562,336
21 Total liabilities (Part X, line 26)	49,706,252	43,079,622
22 Net assets or fund balances. Subtract line 21 from line 20	362,704,830	362,482,714

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer
Date 2021-05-07

WILLIAM CRAIG VP FOR FINANCE
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2021-05-07 Check if self-employed PTIN P00504182

Firm's name ▶ GRANT THORNTON LLP Firm's EIN ▶

Firm's address ▶ 757 THIRD AVENUE 3RD FLOOR Phone no. (212) 599-0100
NEW YORK, NY 100172013

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

MONMOUTH UNIVERSITY IS A COMPREHENSIVE INSTITUTION OF HIGHER EDUCATION COMMITTED TO EXCELLENCE AND INTEGRITY IN TEACHING, SCHOLARSHIP AND SERVICE. THROUGH ITS OFFERINGS IN LIBERAL ARTS, SCIENCES, AND PROFESSIONAL PROGRAMS, MONMOUTH UNIVERSITY EDUCATES AND PREPARES STUDENTS TO REALIZE THEIR POTENTIAL AS LEADERS AND TO BECOME ENGAGED CITIZENS IN A DIVERSE AND INCREASINGLY INTERDEPENDENT WORLD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 218,934,501 including grants of \$ 78,631,751) (Revenue \$ 241,339,413)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 218,934,501

Part IV 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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	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		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? If "Yes," complete Schedule D, Part I		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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	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		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	Yes	
11	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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b	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	Yes	
c	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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	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		No
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	Yes	
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)		No
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	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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



Section A. Governing Body and Management

Table with 5 main rows and 3 sub-columns (1a, 1b, and Yes/No). Rows include: 1a (33), 1b (31), 2 (Yes), 3 (No), 4 (No), 5 (No), 6 (No), 7a (No), 7b (No), 8a (Yes), 8b (Yes), 9 (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 16 main rows and 3 sub-columns (10a, 10b, 11a, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b). Rows include: 10a (No), 10b, 11a (Yes), 12a (Yes), 12b (Yes), 12c (Yes), 13 (Yes), 14 (Yes), 15a (Yes), 15b (Yes), 16a (No), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
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.
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: MARY BYRNE 400 CEDAR AVENUE West Long Branch, NJ 077641898 (732) 571-3407

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 47,450			
	b Membership dues	1b			
	c Fundraising events	1c 329,692			
	d Related organizations	1d 200,583			
	e Government grants (contributions)	1e 8,362,207			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 4,591,494			
	g Noncash contributions included in lines 1a - 1f:\$	1g 620,566			
	h Total. Add lines 1a-1f		13,531,426		

Program Service Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
		Business Code				
2a TUITION AND FEES		900099	211,340,225	211,340,225	0	0
b AUXILIARY ENTERPRISES		721310	25,638,302	25,638,302	0	0
c GOVERNMENT CONTRACTS		541700	35,386	35,386	0	0
d OTHER		900099	4,325,500	4,304,671	0	20,829
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			241,339,413			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,484,811		66,176	3,418,635	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		58,016			58,016	
	6a Gross rents	6a	(i) Real	135,351	955		
			(ii) Personal				
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c	135,351	955		
	d Net rental income or (loss)			136,306		73,133	63,173
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	86,793,404	101,530		
			(ii) Other				
		b Less: cost or other basis and sales expenses	7b	83,909,456	86,424		
		c Gain or (loss)	7c	2,883,948	15,106		
	d Net gain or (loss)			2,899,054			2,899,054
	8a Gross income from fundraising events (not including \$ 329,692 of contributions reported on line 1c). See Part IV, line 18	8a		252,004			
			8b	184,939			
	c Net income or (loss) from fundraising events			67,065			67,065
	9a Gross income from gaming activities. See Part IV, line 19	9a		0			
			9b	0			
	c Net income or (loss) from gaming activities			0			0
	10a Gross sales of inventory, less returns and allowances	10a		0			
10b			0				
c Net income or (loss) from sales of inventory			0			0	
Miscellaneous Revenue		Business Code					
11a CONFERENCE AND PROGRAM SERVICES		722320	112,944	0	112,944	0	
b FITNESS CENTER		713940	40,555	0	40,555	0	
c SPONSOR ADVERTISING		541890	131,648	0	131,648	0	
d All other revenue			15,779	0	15,779	0	
e Total. Add lines 11a-11d			300,926				
12 Total revenue. See instructions			261,817,017	241,318,584	440,235	6,526,772	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	124,066	124,066		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	78,158,293	78,158,293		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	349,392	349,392		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	3,568,896	968,705	2,157,301	442,890
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	198,768		198,768	
7 Other salaries and wages	89,027,474	71,436,170	15,835,438	1,755,866
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	5,236,832	4,251,157	944,987	40,688
9 Other employee benefits	19,439,753	15,461,774	3,758,152	219,827
10 Payroll taxes	6,549,010	5,166,528	1,299,337	83,145
11 Fees for services (non-employees):				
a Management	0			
b Legal	57,807		57,807	
c Accounting	204,890		204,890	
d Lobbying	26,465		26,465	
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	1,052,445		1,052,445	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	11,842,848	9,540,439	2,186,790	115,619
12 Advertising and promotion	2,197,106	432,349	1,764,757	
13 Office expenses	3,792,867	2,959,058	768,845	64,964
14 Information technology	1,787,682	342,924	1,444,758	
15 Royalties	0			
16 Occupancy	10,082,990	7,550,351	2,406,991	125,648
17 Travel	2,792,379	2,468,530	283,908	39,941
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	500,445	493,811	6,634	
20 Interest	561,118	561,118		
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	14,011,608	12,844,367	936,916	230,325
23 Insurance	2,532,600	2,009,699	477,676	45,225
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 DUES AND MEMBERSHIPS	1,895,700	250,498	1,634,736	10,466
b BOOKSTORE MATERIALS	1,467,184	1,467,184	0	0
c LIBRARY MATERIALS	925,038	925,038	0	0
d RESIDENT ASST. ROOM & BOARD	798,803	798,803	0	0
e All other expenses	892,471	374,247	514,121	4,103
25 Total functional expenses. Add lines 1 through 24e	260,074,930	218,934,501	37,961,722	3,178,707
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	17,125	1	13,832
	2 Savings and temporary cash investments	14,487,548	2	17,456,266
	3 Pledges and grants receivable, net	10,189,651	3	10,407,394
	4 Accounts receivable, net	1,395,182	4	2,094,145
	5 Loans and other 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	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	737,220	8	796,162
	9 Prepaid expenses and deferred charges	2,262,037	9	2,425,674
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	411,241,281		
	b Less: accumulated depreciation	200,413,847		
	11 Investments—publicly traded securities	60,719,861	11	59,063,948
	12 Investments—other securities. See Part IV, line 11	97,459,574	12	98,091,147
	13 Investments—program-related. See Part IV, line 11	4,606,892	13	4,091,826
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	294,508
16 Total assets. Add lines 1 through 15 (must equal line 34)	412,411,082	16	405,562,336	
Liabilities	17 Accounts payable and accrued expenses	14,484,188	17	14,416,270
	18 Grants payable	0	18	0
	19 Deferred revenue	10,021,704	19	8,462,850
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other 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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	9,656,585	23	6,307,319
	24 Unsecured notes and loans payable to unrelated third parties	3,152,315	24	2,460,115
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	12,391,460	25	11,433,068
	26 Total liabilities. Add lines 17 through 25	49,706,252	26	43,079,622
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	284,982,254	27	285,360,746
	28 Net assets with donor restrictions	77,772,576	28	77,121,968
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	362,704,830	32	362,482,714	
33 Total liabilities and net assets/fund balances	412,411,082	33	405,562,336	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	261,817,017
2	Total expenses (must equal Part IX, column (A), line 25)	2	260,074,930
3	Revenue less expenses. Subtract line 2 from line 1	3	1,742,087
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	362,704,830
5	Net unrealized gains (losses) on investments	5	-1,965,271
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,068
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	362,482,714

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 21-0634584

Name: Monmouth University Inc

Form 990 (2019)

Form 990, Part III, Line 4a:

HIGHER EDUCATION, RESEARCH AND PUBLIC SERVICE: MONMOUTH UNIVERSITY'S 170.21-ACRE CAMPUS IS LOCATED IN WEST LONG BRANCH ALONG NEW JERSEY'S NORTHERN COASTLINE, AND APPROXIMATELY ONE HOUR FROM BOTH NEW YORK CITY AND PHILADELPHIA. MONMOUTH IS A PRIVATE UNIVERSITY THAT OFFERS INNOVATIVE ACADEMIC PROGRAMS INCLUDING 33 BACHELOR'S DEGREES, 23 MASTER'S DEGREES AND 2 DOCTORAL DEGREES THROUGH THE SIX ACADEMIC SCHOOLS OF LEON HESS BUSINESS SCHOOL, EDUCATION, HUMANITIES AND SOCIAL SCIENCES, NURSING AND HEALTH STUDIES, SCIENCE, AND SOCIAL WORK AND ALSO HAS AN HONORS SCHOOL. AT MONMOUTH UNIVERSITY, THERE ARE FIVE UNIQUE ORGANIZATIONS, KNOWN AS CENTERS OF DISTINCTION, WHICH WORK TO PROMOTE AWARENESS OF SPECIFIC ISSUES AND MEET THE NEEDS OF LOCAL AND GLOBAL COMMUNITIES. MONMOUTH'S CENTERS OF DISTINCTION- THE INSTITUTE OF HEALTH AND WELLNESS (IHW), THE POLLING INSTITUTE, THE URBAN COAST INSTITUTE, THE KISLAK REAL ESTATE INSTITUTE, AND THE CENTER OF THE ARTS- PROVIDE IMPORTANT SERVICES IN AREAS SUCH AS THE ENVIRONMENT, GLOBAL AFFAIRS, AND PUBLIC POLICY AS WELL AS HANDS-ON LEARNING OPPORTUNITIES FOR THE STUDENTS. MONMOUTH IS ACCREDITED BY THE MIDDLE STATES COMMISSION OF HIGHER EDUCATION AND HOLDS SPECIALIZED ACCREDITATIONS WITH THE ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS (AACSB), ENGINEERING ACCREDITATION COMMISSION OF ABET, COMMISSION ON COLLEGIATE NURSING EDUCATION (CCNE), COUNCIL ON SOCIAL WORK EDUCATION (CSWE), NATIONAL COUNCIL FOR ACCREDITATION OF TEACHER EDUCATION (NCATE), COUNCIL FOR ACCREDITATION OF COUNSELING AND RELATED EDUCATION PROGRAMS (CACREP) (MSED AND MS CLINICAL MENTAL HEALTH COUNSELING), NATIONAL ADDICTION STUDIES ACCREDITATION COMMISSION (NASAC) (MA ADDICTION STUDIES), COUNCIL ON ACADEMIC ACCREDITATION IN AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY (CAA) OF THE AMERICAN SPEECH AND-LANGUAGE HEARING ASSOCIATION (MSED SPEECH-LANGUAGE PATHOLOGY), Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) (fully accredited MS Physician Assistant program), ON THE APPROVED LIST OF THE AMERICAN CHEMICAL SOCIETY (ACS), AND THE CERTIFICATE IN APPLIED BEHAVIOR ANALYSIS IS APPROVED BY THE BEHAVIOR ANALYST CERTIFICATION BOARD. MONMOUTH'S FALL 2019 STUDENT ENROLLMENT WAS 4450 UNDERGRADUATE (97% FULL-TIME) AND 1503 GRADUATE STUDENTS (41% FULL-TIME) WHO REPRESENTED 36 STATES AND 34 COUNTRIES. MONMOUTH EMPLOYS 320 FULL-TIME FACULTY OF WHOM 75% HAVE EARNED THEIR TERMINAL DEGREE. MONMOUTH STUDENTS RECEIVE INDIVIDUALIZED FACULTY ATTENTION WITH A 12:1 STUDENT-TO-FACULTY RATIO AND AVERAGE CLASS SIZES OF 21 FOR UG OR 13 FOR GR. MONMOUTH'S RIGOROUS EDUCATION, WHICH HAS FOUNDATION IN THE LIBERAL ARTS AND AN EMPHASIS ON TRANSFORMATIVE LEARNING IN AND OUTSIDE OF THE CLASSROOM, INCLUDES AN EXPERIENTIAL EDUCATION DEGREE REQUIREMENT FOR ALL UNDERGRADUATE STUDENTS. THE MONMOUTH EXPERIENCE EMPHASIZES CULTURAL AND GLOBAL LITERACY IN THE CURRICULA AND THROUGH OUR STUDY ABROAD AND SERVICE LEARNING OPPORTUNITIES. MONMOUTH IS THE ONLY NEW JERSEY INSTITUTION TO OFFER THE PEACE CORPS VOLUNTARY PREPARATION PROGRAM. MONMOUTH'S FIRST-YEAR RETENTION IS 81.1% AND OUR SIX-YEAR GRADUATION RATE IS 73.3%. MONMOUTH'S BEAUTIFUL COASTAL RESIDENTIAL CAMPUS HOUSES AS MANY AS 1915 STUDENTS ON CAMPUS OR IN UNIVERSITY-OWNED OR SPONSORED OFF-CAMPUS BUILDINGS AND SITS AT THE HEART OF A VIBRANT CULTURE RICH IN HISTORY, THE ARTS, TECHNOLOGY AND ENTREPRENEURSHIP. OUR RENOWNED FACULTY ARE ACTIVELY INVOLVED IN ADVANCING ACADEMIC RESEARCH NATIONWIDE WHILE ENCOURAGING MEANINGFUL COMMUNITY INVOLVEMENT AND CRITICAL THINKING FOR SELF-FULFILLMENT. MONMOUTH HAS 23 DIVISION I NCAA ATHLETIC TEAMS, 14 CLUB SPORTS, AND 12 INTRAMURAL SPORTS. IN ADDITION TO ATHLETICS THERE ARE OVER 130 CLUBS, 31 ACADEMIC/LEADERSHIP HONOR SOCIETIES, GREEK LIFE, A RADIO STATION, A TELEVISION STATION, AND AN AWARD WINNING STUDENT NEWSPAPER. THE ACADEMIC NEEDS OF STUDENTS ARE SUPPORTED BY THE CENTER FOR STUDENT SUCCESS WITH SERVICES THAT INCLUDE ACADEMIC ADVISING, ACADEMIC TRANSITIONS, TUTORIAL AND WRITING SERVICES AND SUPPLEMENTAL INSTRUCTION. OUR PROGRESS HAS BEEN WIDELY RECOGNIZED IN ANNUAL RANKINGS OF HIGHER EDUCATION, INCLUDING THE PRINCETON REVIEW'S LIST OF "BEST COLLEGES," MONEY MAGAZINE'S "BEST COLLEGES, IS A CLIMBING UNIVERSITY IN THE U.S. NEWS & WORLD REPORT FOR THE LAST SIXTEEN YEARS. FOR ADDITIONAL INFORMATION, PLEASE VISIT OUR WEBSITE AT WWW.MONMOUTH.EDU.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GREY J DIMENNA PRESIDENT (THROUGH 7/31/19)	70.0 0.0	X		X				527,471	0	52,334
KING D RICE HEAD BASKETBALL COACH	40.0 0.0					X		512,909	0	61,899
WILLIAM CRAIG VP FOR FINANCE	55.0 0.0			X				314,901	0	53,493
DONALD MOLIVER DEAN - SCHOOL OF BUSINESS	40.0 0.0					X		291,134	0	50,189
PATRICK F LEAHY PRESIDENT (AS OF 8/1/19)	70.0 0.0	X		X				290,498	0	47,218
PATRICIA SWANNACK VP FOR ADMINISTRATIVE SERVICES	55.0 0.0			X				286,262	0	47,853
JONATHAN MEER VP FOR UNIVERSITY ADVANCEMENT	55.0 0.0			X				257,220	0	74,968
LAURA MORIARTY thru 73119 PROVOST & VP ACA.AFF.	55.0 0.0			X				286,255	0	33,932
ROBERT MCCAIG VP ENROLLMENT MGMT	55.0 0.0			X				263,114	0	52,766
EDWARD CHRISTENSEN VP/INFORMATION MANAGEMENT	55.0 0.0			X				226,533	0	87,171

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN CHRISTOPHER VP & GENERAL COUNSEL	55.0 0.0			X				259,250	0	51,557
MARILYN MCNEIL VP/DIRECTOR ATHLETICS	55.0 0.0			X				254,277	0	51,394
THOMAS S PEARSON PROFESSOR	40.0 0.0					X		236,500	0	48,028
KENNETH WOMACK DEAN-SCHOOL OF HUMANITIES	40.0 0.0					X		239,611	0	42,084
PATRICK MURRAY DIRECTOR/POLLING INSTITUTE	40.0 0.0					X		227,780	0	47,569
MARY ANNE NAGY VP FOR STUDENT SERVICES	55.0 0.0			X				250,497	0	21,358
REKHA DATTA as of 8/19 Interim Provost/Faculty	55.0 0.0			X				201,506	0	37,235
WILLIAM O GEORGE III TRUSTEE/ADJ. PROF.(THRU 5/20)	2.0 0.0	X						10,750	0	290
MICHAEL A PLODWICK TRUSTEE AND CHAIRMAN	7.0 0.0	X		X				0	0	0
JEANA M PISCATELLI TRUSTEE AND VICE CHAIRMAN	5.0 0.0	X		X				0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN A BROCKRIEDE JR TRUSTEE AND VICE CHAIRMAN	5.0 0.0	X		X				0	0	0
CHRISTOPHER D MAHER TRUSTEE AND TREASURER	5.0 0.0	X		X				0	0	0
CAROL A STILLWELL TRUSTEE AND SECRETARY	5.0 0.0	X		X				0	0	0
MICHAEL V BENEDETTO TRUSTEE (AS OF 7/1/2019)	1.0 0.0	X						0	0	0
FRANCIS V BONELLO TRUSTEE	2.0 0.0	X						0	0	0
THOMAS D BYER TRUSTEE	1.0 0.0	X						0	0	0
JOHN C CONOVER III TRUSTEE	2.0 0.0	X						0	0	0
KARYN F CUSANELLI TRUSTEE	2.0 0.0	X						0	0	0
MARY VADEN EISENSTADT TRUSTEE	1.0 0.0	X						0	0	0
DENIS J GALLAGHER TRUSTEE (AS OF 7/1/2019)	1.0 0.0	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEPHEN E GERARD TRUSTEE	1.0 0.0	X						0	0	0
MARIANNE HESSE TRUSTEE	2.0 0.0	X						0	0	0
LESLIE HITCHNER TRUSTEE	2.0 0.0	X						0	0	0
FREDERICK J KAEI JR TRUSTEE	1.0 0.0	X						0	0	0
RAYMOND KLOSE TRUSTEE	1.0 0.0	X						0	0	0
NANCY A LEIDERSDORFF TRUSTEE	1.0 0.0	X						0	0	0
DEAN Q LIN TRUSTEE	1.0 0.0	X						0	0	0
ERIK W MATSON TRUSTEE (THRU 10/3/19)	1.0 0.0	X						0	0	0
LISA MCKEAN TRUSTEE	1.0 0.0	X						0	0	0
HENRY D MERCER III TRUSTEE	1.0 0.0	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS J MICHELLI TRUSTEE	2.0 0.0	X						0	0	0
VALERIE MONTECALVO TRUSTEE	1.0 0.0	X						0	0	0
ANTOINETTE M MUSORRAFITI TRUSTEE	1.0 0.0	X						0	0	0
TAVIT O NAJARIAN TRUSTEE	2.0 0.0	X						0	0	0
ROBERT B RUMSBY TRUSTEE	1.0 0.0	X						0	0	0
CHRISTOPHER SHAW TRUSTEE	1.0 0.0	X						0	0	0
WEBSTER B TRAMMELL JR TRUSTEE	2.0 0.0	X						0	0	0
PAUL W CORLISS LIFE TRUSTEE	1.0 0.0	X						0	0	0
HAROLD L HODES LIFE TRUSTEE	1.0 0.0	X						0	0	0
ROBERT E MCALLAN LIFE TRUSTEE	1.0 0.0	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM B ROBERTS LIFE TRUSTEE	1.0 0.0	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (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 grant.") . . .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						
6	Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	
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 and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	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 box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
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 organization ▶ <input type="checkbox"/>		
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 supported organization ▶ <input type="checkbox"/>		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (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 under section 513						
4	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 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

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.						
c	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 (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section 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? <i>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.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
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? <i>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.</i>	Yes	No
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? <i>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.</i>		
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>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (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 Year (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	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
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	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 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	
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.			
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			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a 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.			
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.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 21-0634584

Name: Monmouth University Inc

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).

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶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.

OMB No. 1545-0047

2019
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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 Monmouth University Inc	Employer identification number 21-0634584
-----------------------------------------------------	----------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

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..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

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 committee (PAC). If additional space is needed, provide information 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				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

114,689	
114,689	
259,960,241	
260,074,930	
1,000,000	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

250,000	

Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	116,176	115,272	110,619	114,689	456,756
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

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

Name of the organization: Monmouth University Inc
Employer identification number: 21-0634584

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate 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? Yes No
- 6 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? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic 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	2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 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? Yes No
- 6 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 ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ 604,559
- (ii) Assets included in Form 990, Part X ▶ \$ 2,844,289
- 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:
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 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 receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	109,097,000	100,970,000	90,313,000	78,999,000	80,346,000
b Contributions	3,134,000	4,766,000	6,484,000	3,790,000	1,980,000
c Net investment earnings, gains, and losses	344,000	7,234,000	7,854,000	10,430,000	-622,000
d Grants or scholarships	1,273,000	1,264,000	1,130,000	1,031,000	894,000
e Other expenditures for facilities and programs	2,839,000	2,609,000	2,551,000	1,875,000	1,811,000
f Administrative expenses					
g End of year balance	108,463,000	109,097,000	100,970,000	90,313,000	78,999,000

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 37.000 %
- b** Permanent endowment ▶ 39.000 %
- c** Temporarily restricted endowment ▶ 24.000 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		17,726,527		17,726,527
b Buildings	270,000	242,698,113	90,977,958	151,990,155
c Leasehold improvements		2,351,268	1,185,294	1,165,974
d Equipment		32,727,234	23,957,708	8,769,526
e Other		115,468,139	84,292,887	31,175,252
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				210,827,434

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) EQUITY FUNDS	50,102,533	F
(B) FIXED INCOME FUNDS	19,406,656	F
(C) HEDGE EQUITY FUNDS	10,294,987	F
(D) NON-MARKETABLE FUNDS	18,184,035	F
(E) OTHER	102,936	F
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	98,091,147	

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) FUNDS HELD FOR OTHERS	155,646
(3) STUDENT LOAN GRANTS REFUNDABLE	4,069,134
(4) ASSET RETIREMENT OBLIGATION	7,202,288
(5) DUE TO AFFILIATE	6,000
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	11,433,068

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

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

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 21-0634584

Name: Monmouth University Inc

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 4	THE MONMOUTH UNIVERSITY PERMANENT ART COLLECTION SERVES AS A VITAL TEACHING TOOL AND IS AN INTEGRAL ASSET TO THE DEPARTMENT OF ART AND DESIGN, THE UNIVERSITY CAMPUS AS A WHOLE, AND THE VISITING PUBLIC. THROUGH COMPLIMENTING UNIVERSITY GALLERY EXHIBITIONS and LECTURES AND WORKSHOPS BY VISITING ARTISTS AND HISTORIANS, THE UNIVERSITY COLLECTION PROVIDES STUDENTS, FACULTY AND THE GENERAL PUBLIC AT LARGE WITH ACCESS TO IMPORTANT PIECES OF ART. THE PERMANENT COLLECTION IS FREQUENTLY ON DISPLAY, SHOWCASING WORKS OF ART. THE UNIVERSITY COLLECTION IS ALSO MADE AVAILABLE TEMPORARILY, PER REQUEST, TO OTHER EDUCATIONAL INSTITUTIONS FOR EXHIBITION AND SCHOLARLY RESEARCH. FOR EXAMPLE, THE COLLECTION CONTAINS SUBSTANTIAL WORKS BY LEWIS MUMFORD AND JACOB LANDAU. WITH PROPER APPROVALS, THESE WORKS ARE MADE AVAILABLE ON LOAN TO REQUESTING INSTITUTIONS.

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING SCHOLARSHIPS, FACULTY CHAIRS, INSTRUCTION, ACADEMIC SUPPORT, AND OPERATION AND MAINTENANCE OF THE PHYSICAL PLANT.

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	FIN 48 THE UNIVERSITY IS AN ORGANIZATION DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND, THEREFORE, IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE CODE ON INCOME GENERATED BY ACTIVITIES THAT ARE SUBSTANTIALLY RELATED TO ITS TAX-EXEMPT PURPOSE. THERE ARE CERTAIN TRANSACTIONS THAT COULD BE DEEMED UNRELATED BUSINESS INCOME AND COULD RESULT IN A TAX LIABILITY. MANAGEMENT REVIEWS TRANSACTIONS TO ESTIMATE POTENTIAL TAX LIABILITIES USING A MORE LIKELY THAN NOT THRESHOLD. IT IS MANAGEMENT'S ESTIMATION THAT THERE ARE NO MATERIAL TAX LIABILITIES THAT NEED TO BE RECORDED.

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **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.**
▶ **Go to www.irs.gov/Form990EZ for the latest information.**

Department of the Treasury
Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I

	YES	NO
1 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?	Yes	
2 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	
3 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," please explain. If you need more space use Part II.	Yes	
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	Yes	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	Yes	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	Yes	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	Yes	
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		No
b Admissions policies?		No
c Employment of faculty or administrative staff?		No
d Scholarships or other financial assistance?		No
e Educational policies?		No
f Use of facilities?		No
g Athletic programs?		No
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		No
6a Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.		No
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.	Yes	

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	MONMOUTH UNIVERSITY MAKES ITS RACIALLY NONDISCRIMINATORY POLICY PUBLIC THROUGH BY POSTING IT ON THE UNIVERSITYS HOMEPAGE ON ITS WEBSITE.
SCHEDULE E, PART I, LINE 6A	THE UNIVERSITY RECEIVES GRANTS FROM FEDERAL AND STATE GOVERNMENTAL AGENCIES FOR VARIOUS PURPOSES INCLUDING STUDENT FINANCIAL AID, RESEARCH AND TRAINING. GRANTING AGENCIES INCLUDE THE U.S. DEPARTMENT OF EDUCATION (INCLUDING FEDERAL DIRECT LOAN, PELL AND OTHER STUDENT FINANCIAL ASSISTANCE PROGRAMS), THE NJ HIGHER EDUCATION ASSISTANCE AUTHORITY AND THE NJ COMMISSION ON HIGHER EDUCATION (INCLUDING TUITION AID GRANT, EQUAL OPPORTUNITY FUND AND OTHER STUDENT FINANCIAL ASSISTANCE PROGRAMS), THE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION, U.S. ENVIRONMENTAL PROTECTION AGENCY, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, CORPORATION FOR NATIONAL AND COMMUNITY SERVICE, NJ DEPARTMENT OF TRANSPORTATION, NJ STATE COUNCIL OF THE ARTS, NJ DEPARTMENT OF ENVIRONMENTAL PROTECTION AND OTHER FEDERAL AND STATE AGENCIES.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete 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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is 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 listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total		22			1,224,246
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)		22			1,224,246

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part 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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; 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 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	MONMOUTH UNIVERSITY GRANTS, INCLUDING THOSE GRANTS RELATED TO STUDENTS PARTICIPATING IN OUR STUDY ABROAD PROGRAM, TAKE THE FORM OF SCHOLARSHIPS AWARDED BY OUR FINANCIAL AID OFFICE FOR TUITION, ROOM, BOARD AND BOOKS. THE SCHOLARSHIPS ARE AWARDED IN ACCORDANCE WITH THE GUIDELINES ESTABLISHED FOR EACH SCHOLARSHIP AND ARE ADMINISTERED BY THE FINANCIAL AID OFFICE. CREDITING OF SCHOLARSHIPS TO STUDENT ACCOUNTS IS ADMINISTERED BY THE BURSAR'S OFFICE. THE SCHOLARSHIPS REPORTED HERE WERE GRANTED TO MONMOUTH UNIVERSITY STUDENTS WHILE THEY WERE STUDYING ABROAD AND REPORTED IN ACCORDANCE WITH THE SCHEDULE F INSTRUCTIONS AND THE IRS'S FILING TIPS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3	MONMOUTH UNIVERSITY MADE NO DIRECT INVESTMENTS IN FOREIGN CORPORATIONS DURING THE FISCAL YEAR ENDED JUNE 30, 2020.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART IV	MONMOUTH UNIVERSITY INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE UNIVERSITY'S ACTIVITIES MAY NOT REACH THRESHOLDS REQUIRED FOR FILING FORMS 926, 5471 OR 8621. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Additional Data

Software ID:

Software Version:

EIN: 21-0634584

Name: Monmouth University Inc

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	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmaking	Study Abroad Program	302,472
East Asia and the Pacific			Grantmaking	Study Abroad Program	46,920

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	(f) Total expenditures for region
South Asia		4	Program Services	Student Recruitment	10,945
Central America and the Caribbean		4	Program Services	Student Research Trips	75,499

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	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		1	Program Services	Research Consulting	17,100
Europe (Including Iceland and Greenland)		2	Program Services	Academic Support	546

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	(f) Total expenditures for region
East Asia and the Pacific		1	Program Services	Academic Support	300
South Asia		1	Program Services	Student Research Trips	500

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	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		1	Program Services	Student Recruitment	2,500
South Asia		1	Program Services	Study Abroad Program	38,463

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	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		4	Program Services	Study Abroad Program	633,572
East Asia and the Pacific		2	Program Services	Study Abroad Program	89,079

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	(f) Total expenditures for region
Central America and the Caribbean		1	Program Services	Study Abroad Program	6,350

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding 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.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 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
- b** 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 or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

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.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Holiday Ball (event type)	BUS LDERS (event type)	4 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	254,801	245,840	81,055	581,696
	2 Less: Contributions	94,697	201,255	33,740	329,692
	3 Gross income (line 1 minus line 2)	160,104	44,585	47,315	252,004
Direct Expenses	4 Cash prizes			535	535
	5 Noncash prizes				
	6 Rent/facility costs	4,601	2,930	9,700	17,231
	7 Food and beverages	61,130	32,841	36,706	130,677
	8 Entertainment	7,566	2,195	500	10,261
	9 Other direct expenses	20,217	5,643	375	26,235
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				184,939
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				67,065	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶ 400 Cedar Avenue West Long Branch, NJ 077641898

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Monmouth University Inc

Employer identification number 21-0634584

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization, (b) EIN, (c) IRC section, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Tuition Discount	5511	71,551,452	0		
(2) Auxiliary Enterprise Discount	187	4,172,736	0		
(3) CARES Act Emergency Grants	3034	2,430,055	0		
(4) President's Relief Fund Grants	10	4,050			
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	<p>MONMOUTH UNIVERSITY GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS ARE MODEST AND ARE APPROVED BY OUR OFFICE OF PUBLIC AFFAIRS AND MONITORED BY THE PRESIDENT'S CABINET. GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS TAKE THE FORM OF SCHOLARSHIPS TO OUR STUDENTS. THE SOURCE OF FUNDING OF THESE SCHOLARSHIPS MAY BE UNIVERSITY INSTITUTIONAL FUNDS, GOVERNMENT FUNDS OR DONOR FUNDS. UNIVERSITY FUNDED SCHOLARSHIPS ARE ADMINISTERED BY THE UNIVERSITY'S ADMISSIONS OFFICE, BOTH GRADUATE AND UNDERGRADUATE, AND AWARDED USING A CALCULATION DRIVEN BY PRIOR ACADEMIC PERFORMANCE STATISTICS. GOVERNMENT FUNDED SCHOLARSHIPS ARE AWARDED BY THE UNIVERSITY'S FINANCIAL AID OFFICE WITH STRICT ADHERENCE TO GOVERNMENT REGULATIONS AND AWARD CRITERIA. DONOR FUNDED SCHOLARSHIPS, WHETHER SPONSORED OR ENDOWED, ARE AWARDED BY THE UNIVERSITY'S FINANCIAL AID OFFICE WITH STRICT ADHERENCE TO THE DONOR'S WRITTEN AWARD CRITERIA. THE UNIVERSITY'S DEVELOPMENT OFFICE WORKS WITH THE DONOR AT THE TIME OF THE GIFT TO ESTABLISH THE WRITTEN AWARD CRITERIA AND THESE CRITERIA ARE MAINTAINED FOR REFERENCE IN BOTH THE UNIVERSITY'S DEVELOPMENT AND FINANCIAL AID OFFICES. DURING FISCAL YEAR 2020, THE UNIVERSITY DISTRIBUTED EMERGENCY FINANCIAL AID GRANTS AND PRESIDENT RELIEF FUND HARDSHIP GRANTS TO STUDENTS UNDER SECTION 18004(A)(1) OF THE CORONAVIRUS AID, RELIEF AND ECONOMIC SECURITY (CARES) ACT. THE DEPARTMENT OF EDUCATION (DOE) PROVIDED INSTITUTIONS WITH SIGNIFICANT DISCRETION FOR THE DISTRIBUTION OF THESE GRANTS. HOWEVER, THE DOE DID STIPULATE THAT THE GRANTS BE DIRECTED TO STUDENTS WITH THE MOST SIGNIFICANT FINANCIAL NEEDS ARISING FROM THE CORONAVIRUS PANDEMIC. EMERGENCY FINANCIAL AID GRANTS WERE AWARDED BY THE FINANCIAL AID OFFICE USING A SYSTEM AND PROCESS TAKING INTO CONSIDERATION BOTH STUDENTS TITLE IV ELIGIBILITY AND FINANCIAL NEED. PRESIDENT RELIEF FUND HARDSHIP GRANTS WERE ADMINISTERED BY AN INTERNAL COMMITTEE WHO REVIEWED STUDENT APPLICATIONS AND AWARDED HARDSHIP GRANTS TO SUPPORT STUDENT HARDSHIPS ARISING FROM THE PANDEMIC, INCLUDING BUT NOT LIMITED TO, TECHNOLOGY ACCESS, FOOD INSECURITIES, AND NECESSITIES FOR DAILY LIVING.</p>

Additional Data

Software ID:
Software Version:
EIN: 21-0634584
Name: Monmouth University Inc

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
Borough of West Long Branch 967 Broadway West Long Branch, NJ 07764	21-6001351	GOVERNMENT	36,241	0			GENERAL SUPPORT
The City of Long Branch 344 Broadway Long Branch, NJ 07764	21-6000806	GOVERNMENT	75,825	0			GENERAL SUPPORT

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
Six Flags Charitable Foundation Inc PO Box 120 Jackson, NJ 08527	91-2153042	501(C)3	12,000	0			SCHOLARSHIP FUND

Schedule J
(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input checked="" type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input checked="" type="checkbox"/> Tax idemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input checked="" type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee		
<input checked="" type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
LINE 1A	FIRST-CLASS OR CHARTER TRAVEL THE PRESIDENT'S CONTRACT PROVIDES THAT THE PRESIDENT MAY UTILIZE FIRST CLASS TRAVEL FOR FLIGHTS LONGER THAN TWO HOURS WHEN THE PRESIDENT IS TRAVELING ON UNIVERSITY BUSINESS.
LINE 1A	HOUSING ALLOWANCE OR RESIDENCE FOR THE BENEFIT AND CONVENIENCE OF THE UNIVERSITY IN HAVING THE FUNCTIONS OF THE OFFICE OF THE PRESIDENT EFFICIENTLY DISCHARGED AND AS A CONDITION OF EMPLOYMENT, THE PRESIDENT IS REQUIRED BY THE BOARD OF TRUSTEES TO RESIDE IN A HOME LOCATED ON CAMPUS AND PROVIDED BY THE UNIVERSITY AT ITS EXPENSE. THE VALUE OF THE PRESIDENT'S RESIDENCE FOR PERSONAL USE OF \$49,800 IS REPORTED AS NON-TAXABLE COMPENSATION ON FORM 990.
LINE 1A	TAX INDEMNIFICATION AND GROSS-UP PAYMENTS THE BOARD OF TRUSTEES HAS INCLUDED IN THE PRESIDENT'S COMPENSATION PACKAGE REIMBURSEMENT FOR FINANCIAL PLANNING COSTS. THIS REIMBURSEMENT IS GROSSED UP TO COVER THE APPLICABLE TAXES AND REPORTED AS COMPENSATION ON THE PRESIDENT'S W-2 AND ON FORM 990.
LINE 1A	HEALTH OR SOCIAL CLUB DUES THE BOARD OF TRUSTEES REQUIRES THE UNIVERSITY TO MAINTAIN A MEMBERSHIP WITH A LOCAL GOLF CLUB SOLELY TO BE USED FOR UNIVERSITY FUNDRAISING, FRIEND RAISING AND OTHER UNIVERSITY BUSINESS. THE PRESIDENT HAS APPOINTED THE VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT TO HOLD THIS MEMBERSHIP. THE VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT MAY NOT USE THIS MEMBERSHIP FOR PERSONAL USE. THIS MEMBERSHIP IS INCLUDED AS NON-TAXABLE COMPENSATION ON FORM 990 (\$24,031). THE PRESIDENT HAS A SOCIAL MEMBERSHIP AT THE LOCAL GOLF CLUB FOR WHICH NO DUES ARE PAID.
LINE 1A	PERSONAL SERVICES THE PRESIDENT'S RESIDENCE MANAGER SPENDS A MAXIMUM OF ONE DAY PER WEEK ON PERSONAL MATTERS OF THE PRESIDENT FOR HIS APARTMENT WITHIN THE RESIDENCE. THE VALUE OF THIS SERVICE IS INCLUDED AS COMPENSATION ON THE PRESIDENT'S W-2 AND ON FORM 990.
Line 7	THE PRESIDENT RECEIVED A BONUS UNDER THE TERMS OF HIS EMPLOYMENT CONTRACT WHICH IS MADE AT THE DISCRETION OF THE BOARD OF TRUSTEES.

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization Monmouth University Inc

Employer identification number

21-0634584

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Diane Fitzgerald	Family member of Officer	54,314	Employee Compensation		No
(2) James Gaul	Family member of Officer	104,961	Employee Compensation		No
(3) Angela Michelli	Family member of Trustee	39,493	Employee Compensation		No
(4) Willam E Fitzgerald PE	Family member of Officer	131,296	Employee Compensation		No
(5) OceanFirst Bank	Substantial Contributor	1,551,710	Mortgage Payments		No
(6) MPA Inc	Substantial Contributor	1,284,463	Facilities Rental		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation
SUPPLEMENTAL INFORMATION	ALL TRANSACTIONS DISCLOSED ON SCHEDULE L ARE MADE AT ARMS-LENGTH TERMS AND NONE ARE INFLUENCED BY THE RELATIONSHIPS THAT EXIST WITH THE INTERESTED PERSONS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

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 Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	2	604,559	Expert opinion
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	3	16,007	fmv on date of sale
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29	
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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 purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a	Yes	

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II 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
SCH M, PART I, LINE 32B	THE UNIVERSITY USES A STOCKBROKER TO SELL GIFTS OF SECURITIES.
SCH M, PART I, LINE 33	THE UNIVERSITY ONLY RECORDS REVENUE FOR NON-CASH CONTRIBUTIONS MEETING THE FOLLOWING CRITERIA: 1) ITEMS ADDED TO OUR EQUIPMENT, LAND,BUILDING, LAND IMPROVEMENT AND SUPPLY INVENTORY WITH A VALUE OF \$1,000 OR MORE,A USEFUL LIFE OF ONE YEAR OR MORE, AND 2) WORKS OF ART OR HISTORICAL TREASURES ADDED TO OUR COLLECTION, AND 3) SECURITIES.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

- ▶ Attach to Form 990 or 990-EZ.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Monmouth University Inc

Employer identification number
21-0634584

990 Schedule O, Supplemental Information

Return Reference	Explanation
General Statement Regarding Covid-19 Pandemic	<p>As a result of the coronavirus pandemic, the University provided credits to students of \$5,204,363 for room and board, commuter meal plans and commuter parking fees for services the University could no longer provide for the remainder of the spring 2020 semester. In addition, the University received an allocation from the Higher Education Emergency Relief Fund (HEERF) established under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) of \$4,935,299, which included \$2,467,650 to provide emergency aid to eligible students and \$2,467,649 to mitigate the financial losses associated with COVID-19 disruptions to the University. As of June 30, 2020, \$2,430,055 was distributed to students. Federal grant revenue was recognized totaling \$4,860,110 for the year ending June 30, 2020. There continues to be significant uncertainty around the breadth and duration of business disruptions related to COVID-19 as well as its impact on the U.S. and international economies. As such, the University is unable to determine if it will have a material impact to its financial statements in the future.</p> <p>Form 990, Part VI, Section A, Line 1A THERE ARE THREE CLASSES OF TRUSTEES WHO SERVE ON THE BOARD OF TRUSTEES: REGULAR TRUSTEES, LIFE TRUSTEES AND TRUSTEES EMERITI. THE CURRENT LIFE TRUSTEES WERE ELIGIBLE TO BE ELECTED TO A FIVE YEAR TERM AFTER DISTINCTIVE SERVICE ON THE BOARD FOR TWO FULL TERMS AS A REGULAR TRUSTEE; NO NEW LIFE TRUSTEES MAY BE APPOINTED. AT THE END OF THE FIVE YEAR TERM, THE LIFE TRUSTEE AUTOMATICALLY BECOMES A TRUSTEE EMERITIS. TRUSTEES EMERITI ARE ELIGIBLE TO BE ELECTED AFTER DISTINCTIVE SERVICE FOR AT LEAST TWO CONSECUTIVE TERMS WITHOUT INTERRUPTION AS A REGULAR TRUSTEE UPON RECOMMENDATION BY THE COMMITTEE ON TRUSTEES, A MAJORITY VOTE OF THE FULL MEMBERSHIP OF THE EXECUTIVE COMMITTEE AND TWO-THIRDS VOTE OF THE FULL BOARD OF TRUSTEES. TRUSTEE EMERITI MAY VOTE ON NON-FINAL MATTERS AT COMMITTEE MEETINGS BUT NOT AT FULL BOARD MEETINGS. THERE ARE TWELVE MEMBERS OF THE BOARD OF TRUSTEES WHO ARE TRUSTEE EMERITI. THE BOARD OF TRUSTEES HAS AN EXECUTIVE COMMITTEE THAT IS AUTHORIZED TO ACT ON BEHALF OF THE FULL BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE IS COMPOSED OF THE FOUR OFFICERS OF THE BOARD (CHAIR, VICE CHAIR, TREASURER AND SECRETARY), THE CHAIRS OF ALL STANDING COMMITTEES, TWO AT-LARGE MEMBERS OF THE BOARD APPOINTED BY THE CHAIR OF THE BOARD, THE IMMEDIATE PAST CHAIR OF THE BOARD AND THE PRESIDENT OF THE UNIVERSITY. ALL MEMBERS OF THE EXECUTIVE COMMITTEE ARE MEMBERS OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE MAY TAKE ANY ACTION THAT THE FULL BOARD OF TRUSTEES IS AUTHORIZED TO TAKE WITH CERTAIN EXCEPTIONS. THE EXECUTIVE COMMITTEE MAY NOT: TAKE ANY ACTION INCONSISTENT WITH A PRIOR ACT OF THE FULL BOARD OF TRUSTEES, AWARD DEGREES (OTHER THAN HONORARY DEGREES), SELECT OR APPOINT TRUSTEES OR OFFICERS, CHANGE THE UNIVERSITY'S MISSION OR PURPOSE, SELL THE UNIVERSITY'S ASSETS, ADOPT THE ANNUAL BUDGET, ALTER BYLAWS, REMOVE OR APPOINT THE PRESIDENT.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
General Statement Regarding Covid-19 Pandemic	DENT OR TAKE ANY ACTION SPECIFICALLY RESERVED TO THE FULL BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE ALSO HAS AUTHORITY TO PURCHASE, MANAGE AND SELL LAND, BUILDINGS AND CAPITAL EQUIPMENT, THE CONSTRUCTION OF NEW BUILDINGS AND THE RENOVATIONS OF EXISTING BUILDINGS COSTING BETWEEN \$500,000 AND \$1,000,000. THE EXECUTIVE COMMITTEE MAY ALSO TAKE ANY ACTION DELEGATED TO IT BY THE FULL BOARD OF TRUSTEES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BOARD MEMBERS CHRISTOPHER MAHER AND JEANA PISCATELLI HAVE A BUSINESS RELATIONSHIP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD OF TRUSTEES HAS DESIGNATED THE AUDIT COMMITTEE TO BE RESPONSIBLE FOR THE REVIEW OF FORM 990 PRIOR TO SUBMISSION TO THE INTERNAL REVENUE SERVICE. THIS RESPONSIBILITY IS INCLUDED IN THE AUDIT COMMITTEE'S CHARTER. A FINAL DRAFT OF THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE AT A REGULAR MEETING FOR THEIR REVIEW AND COMMENT. MODIFICATIONS RESULTING FROM THE REVIEW, IF ANY, ARE MADE BEFORE FILING THE FORM. IN ADDITION, AN EMAIL IS SENT OUT TO EACH MEMBER OF THE BOARD LETTING THEM KNOW THE DRAFT IS AVAILABLE FOR REVIEW AND TO ALLOW THEM AN OPPORTUNITY TO COMMENT ON IT. ALL BOARD MEMBERS RECEIVE A COPY OF THE FINAL VERSION OF THE FORM 990 PRIOR TO FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF TRUSTEES HAS A CODE OF ETHICS, AS WELL AS A PROVISION IN ITS BYLAWS, WHICH DEALS WITH CONFLICTS OF INTEREST. ALSO, MEMBERS OF THE BOARD AND THE PRESIDENT'S CABINET OFFICERS COMPLETE AN ANNUAL DISCLOSURE STATEMENT SETTING FORTH THEIR BUSINESS AND OTHER INTERESTS. REVIEW OF SITUATIONS TO DETERMINE A CONFLICT ARE CARRIED OUT BY THE UNIVERSITY'S VICE PRESIDENT AND GENERAL COUNSEL AND IF NECESSARY THE BOARD'S EXECUTIVE COMMITTEE. BOARD MEMBERS FOUND TO HAVE A CONFLICT ON A PARTICULAR ITEM RECUSE THEMSELVES FROM PARTICIPATING AND VOTING IN CONNECTION WITH THAT ITEM. SUCH RECUSALS ARE PLACED ON THE RECORD.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	THE PROCESS FOR DETERMINING COMPENSATION FOR THE PRESIDENT OF THE UNIVERSITY IS SET FORTH IN THE UNIVERSITY'S EXECUTIVE COMPENSATION POLICY AND THE MONMOUTH UNIVERSITY COMPENSATION COMMITTEE DOCUMENT ENTITLED "RESPONSIBILITIES OF THE COMMITTEE AND MEMBERS OF THE COMMITTEE". PURSUANT TO THAT POLICY, THE BOARD'S COMPENSATION COMMITTEE (ALL OF WHOM ARE INDEPENDENT) AND THE VICE PRESIDENT AND GENERAL COUNSEL REVIEW COMPARABLE COMPENSATION DATA PROVIDED BY AN INDEPENDENT OUTSIDE CONSULTANT AND MAKE COMPENSATION RECOMMENDATIONS TO THE FULL BOARD OF TRUSTEES AS TO THE COMPENSATION FOR THE PRESIDENT OF THE UNIVERSITY. MINUTES OF BOTH THE COMPENSATION COMMITTEE AND THE BOARD OF TRUSTEES MEETINGS CONCERNING SUCH ACTIONS ARE REVIEWED AND APPROVED BY BOTH BODIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	MONMOUTH UNIVERSITY DOES NOT CURRENTLY MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE GENERAL PUBLIC. THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON THE UNIVERSITY'S WEBSITE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, LINE 1A	REPORTABLE COMPENSATION FOR WILLIAM O. GEORGE III WAS NOT RECEIVED IN HIS CAPACITY AS TRUSTEE, RATHER AS AN ADJUNCT FACULTY MEMBER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	ADJUSTMENT OF \$(1,068) TO CONTRIBUTIONS RECEIVED DURING THE FISCAL YEAR ENDED JUNE 30, 2019 INCLUDED IN THE 2018 FORM 990, PART VIII, LINE 1F THAT WERE RECORDED IN THE AUDITED FINANCIAL STATEMENTS DURING THE FISCAL YEAR ENDED JUNE 30, 2020.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Monmouth University Inc

Employer identification number

21-0634584

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(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

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) Bruce Springsteen Archives & Center 400 Cedar Avenue West Long Branch, NJ 07764 82-5325604	Education	NJ	501(c)(3)	12A TYPE I	NA	Yes	

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 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		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Bruce Springsteen Archives & Center	c	200,583	vendor invoice
(2) Bruce Springsteen Archives & Center	o	104,608	time and effort
(3) Bruce Springsteen Archives & Center	q	91,519	vendor invoice

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation