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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.

DLN: 93493124023551 OMB No. 1545-0047

Open to Public

Form 99(
Department of th Treasury

Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020 C Name of organization D Employer identification number B Check if applicable: Seton Hall University □ Address change 22-1500645 % STEPHEN A GRAHAM ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite ☐ Application pending (973) 761-9318 City or town, state or province, country, and ZIP or foreign postal code South Orange, NJ $\,$ 07079 $\,$ G Gross receipts \$ 572,874,000 Name and address of principal officer: H(a) Is this a group return for Joseph E Nyre PhD □Yes ☑No subordinates? 400 South Orange Avenue H(b) Are all subordinates South Orange, NJ 07079 ☐ Yes ☐No included? **✓** 501(c)(3) ☐ 501(c)() **(** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► www.shu.edu L Year of formation: 1856 **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: SETON HALL UNIVERSITY IS A CATHOLIC INSTITUTION OF HIGHER EDUCATION Activities & Governance 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) . 42 29 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 4,384 **6** Total number of volunteers (estimate if necessary) 6 1,151 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a 171,000 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 43,567,000 45,513,000 Ravenue 385,469,000 391,164,000 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,813,000 5,802,000 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 14,972,000 14,015,000 446,821,000 456,494,000 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 153,515,000 158,732,000 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 180,529,000 189,888,000 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶8,025,000 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 141,044,000 120,077,000 475,088,000 468,697,000 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . -28,267,000 -12,203,000 Net Assets or Fund Balances Beginning of Current Year End of Year 701,436,000 814,560,000 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 260,783,000 376,532,000 440,653,000 438,028,000 22 Net assets or fund balances. Subtract line 21 from line 20 . 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 Signature of officer Sign Here STEPHEN A GRAHAM VP For Finance/CFO Type or print name and title Print/Type preparer's name Preparer's signature Check | if 2021-04-29 P00504182 Paid self-employed Firm's name FRANT THORNTON LLP Firm's EIN ▶ Preparer Use Only Firm's address ► 757 THIRD AVENUE Phone no. (212) 542-9609

☑ Yes ☐ No

NEW YORK, NY 10017

May the IRS discuss this return with the preparer shown above? (see instructions)

Check if Scheo Briefly describe the o	of Program Servi dule O contains a resp rganization's mission:	onse or note to									
Briefly describe the o	<u>.</u>		any line in this Part III		🗸						
Briefly describe the o	<u>.</u>										
old the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on							
the prior Form 990 or 990-EZ?											
f "Yes," describe the	se new services on So	hedule O.									
oid the organization	cease conducting, or i	make significant	changes in how it cond	ucts, any program							
services?					🗌 Yes 🗹 No						
f "Yes," describe the	se changes on Schedu	ıle O.									
Section $501(c)(3)$ and	d 501(c)(4) organizat	ions are required	to report the amount of								
Code:) (Expenses \$	301,705,000	including grants of \$	145,948,000) (Revenue \$	394,857,000)						
See Additional Data					_						
Code:) (Expenses \$	97,370,000	including grants of \$	12,141,000) (Revenue \$	8,178,000)						
See Additional Data											
Code:) (Expenses \$	7,764,000	including grants of \$	643,000) (Revenue \$)						
See Additional Data											
Other program service	tes (Describe in Sched	lule O.)									
Expenses \$	ind	cluding grants of	\$) (Revenue \$)						
Total program serv	rice expenses ▶	406,839,0	00								
	he prior Form 990 of "Yes," describe the Did the organization of ervices?	the prior Form 990 or 990-EZ?	the prior Form 990 or 990-EZ?	the prior Form 990 or 990-EZ?	f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program ervices?						

Par	tIV 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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No 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	5		
_	Schedule D,Part I 📆	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 2	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	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 🕏	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	(2010)

orm	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 2	26	Yes	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	Yes	
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
80	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
4 ~	Enter the number reported in Pay 2 of Form 1006. Fatar 0, if ask smallester.	\square	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 372 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
٠	(gambling) winnings to prize winners?	1c	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	4,384						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
3a	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3b	Yes					
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)?		Yes					
b	If "Yes," enter the name of the foreign country: ►LU See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (F	RAR)						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organiz solicit any contributions that were not tax deductible as charitable contributions?	ation 6a	Yes					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift not tax deductible?	ts were 6b	Yes					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and provided to the payor?	d services 7a	Yes					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b	Yes					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required form 8282?	d to file 7c		No				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		No				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required?	as 7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 1098-C?	Form 7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b								
11	Section 501(c)(12) organizations. Enter:							
a L	Gross income from members or shareholders							
U	against amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	250			N _a				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0							
	parachute payment(s) during the year?	15	Yes					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No				

20

	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			✓					
Se	ction A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 42								
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	b Enter the number of voting members included in line 1a, above, who are independent 1b 29								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	ı	No					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6		No					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)						
			Yes	No					
.0a	Did the organization have local chapters, branches, or affiliates?	10a		No					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
		10b 11a	Yes						
l1a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		Yes						
l1a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes						
.1a b .2a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a							
L1a b L2a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	11a 12a	Yes						
.1a b .2a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b	Yes Yes						
b 12a b c	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy?	11a 12a 12b	Yes Yes Yes						
b 12a b c	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b 12c 13	Yes Yes						
b 12a b c	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	11a 12a 12b 12c 13	Yes Yes Yes						
b 12a b c 13 14	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes						
b 12a b c 13 14	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes						
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes						
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No					
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt	11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes						
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes						
L1a b L2a b c L3 L4 L5 a b	And branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? **Cetion C. Disclosure** List the states with which a copy of this Form 990 is required to be filed** 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.	11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes						
L1a b L2a c L3 L4 L5 a b L6a b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? **Cetion C. Disclosure** List the states with which a copy of this Form 990 is required to be filed** Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s	11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes						

State the name, address, and telephone number of the person who possesses the organization's books and records: STEPHEN A GRAHAM 400 SOUTH ORANGE AVENUE South Orange, NJ 07079 (973) 761-9003 (A)

Name and title

Part VII

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

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

✓

(F)

Estimated

amount of other

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

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

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

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

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

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations.

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

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(E)

Reportable

compensation

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(B)

Average

hours per

week (list is both an officer and a from the from related compensation director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Highest compensatemployee Former organizations MISC) MISC) related Institutional Trustee below dotted organizations employee line) Ē See Additional Data Table

Part VII

JR Prisco Inc,

44 Middle Avenue SUMMIT, NJ 07901 Aspire Technology Partners, 25 James Way

EATONTOWN, NJ 07724

compensation from the organization ▶ 109

(A) Name and title	(B) Average hours per week (list any hours	than o	one b	ox, ι n of	t che unle: ficer	eck moss pers and a	son	Repo compo froi orgai	(D) ortable ensation m the nization	(E) Reportable compensation from related organizations	5	(F) Estima amount o compens from	ated of other sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		!/1099- ISC)	(W-2/1099- MISC)		organizati relat organiza	ed
See Additional Data Table													
											\top		
											+		
											+		
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											+		
											+		
											+		
											+		
											+		
1b Sub-Total				٠.		<u> </u>					\top		
c Total from continuation sheets to P						•		11.	321,121		0		1,404,804
d Total (add lines 1b and 1c) Total number of individuals (including of reportable compensation from the	but not limited	to thos			bove	► e) who	rece				<u>~I</u>		1,404,004
												Yes	No
3 Did the organization list any former								ghest cor	mpensated	employee on			
line 1a? If "Yes," complete Schedule. 4 For any individual listed on line 1a, is										 n tha	3	Yes	
organization and related organization										ii tile			
individual		• •	•	•	•			• •			4	Yes	
5 Did any person listed on line 1a recei services rendered to the organization									tion or ind	ividual for	5		No
Section B. Independent Contract	ors												
Complete this table for your five high from the organization. Report compe											npens	sation	
	(A) and business addre		,	0110	9	**********				(B)		(C Comper	
Gourmet Dining LLC, 400 South Orange Avenue	and business addre	:55							Food Service	•			,931,839
SOUTH ORANGE, NJ 07079									C		\rightarrow	4	212 225
Sordoni Construction Co, 1 Pluckemin Way 2nd Floor BEDMINSTER, NJ 07921									General Co	iu acung		4	,313,335
Atalian Global Services, 417 Fifth Avenue 9th Floor									Housekeepi	ng	\dashv	4	,268,161
NEW YORK, NY 10016									Conoral Co	a de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania de la compania de la compania del compania	\rightarrow	2	252.064

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

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

3,353,964

1,832,255

General Construction

Business Consultant

orm 9 Part		(2019) Statement	of F	Revenue						Page 9
		Check if Scheo	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campa	aigns	s	1a			revenue		512 - 514
unts	Ŀ	b Membership due:	s.	. [1 b					
6r2		c Fundraising even	nts .	[1c	357,000				
ffs, ¤rA	(d Related organiza	tions	s [1 d					
<u>"</u> 6	•	e Government grants	(con	tributions)	1e	31,369,000				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution and similar amounts			1f	13,787,000				
buti the	١,	above Noncash contribution	ons in	L ncluded in		13,767,000				
	•	lines 1a - 1f:\$,,,,,		1 g	2,385,000				
G E	ı	h Total. Add lines	1a-1	.f			45,513,000			
						Business Code				
	2a	TUITION & FEES				900099	362,637,000	362,637,000		
Program Service Revenue	b	ROOM AND BOARD				900099	28,293,000	28,293,000		
æ K						900099	234,000	234,000		
ice	С	MEDICAL RESIDENCY	/ PRC	OGRAM		900004	234,000	234,000		
Serv	d									
an										
Togi	е									
<u>-</u>	f	All other program	serv	ice revenue.						
	g	Total. Add lines 2	2a-2	2f	>	391,164,000				
		Investment income			nds, i	nterest, and other	2.036.000		-286,000	2 222 000
		imilar amounts) .				•	34.000		-286,000	2,322,000
		Income from invest Royalties				ond proceeds	202.000		25,000	<u> </u>
		,	Ė	(i) Real		(ii) Personal				
	6-	Gross rents	6a	2.0	01 000		1			
		Less: rental	Oa	21	81,000	, 	-			
	_	expenses	6b	;	27,000					
		Rental income or (loss)	6c	2!	54,000		0			
	d Net rental income or (loss)				254,000			254,000		
				(i) Securit	ies	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a	119,89	97,000	6,00	0			
	b	Less: cost or other basis and sales expenses	7b	115,94	42,000	229,00	0			
	С	Gain or (loss)	7с	3,9!	55,000	-223,00	О			
		Net gain or (loss)				· · · •	3,732,000)		3,732,000
Other Revenue		Gross income from fu (not including \$ contributions reporte See Part IV, line 18	d on	357,000 of	8a	136,000				
Re	b	Less: direct expen	ses		8b	182,000				
her	c	Net income or (los	ss) fr	rom fundraisii	ng ev	ents	-46,000			-46,000
	0-	Gross income from	aam	ing activities						
	<i>3</i> a	See Part IV, line 19			9a	0				
	b	Less: direct expen	ses		9b	0				
	С	Net income or (los	ss) fr	rom gaming a	ctivit	ies				
	10a	Gross sales of inve	ento	ry, less						
		returns and allowa			10a	0				
	b	Less: cost of good	s so	ld	10b	0				
ŀ	С	Net income or (los	_		nvent		T)		
	11	Miscellaneo aNCAA/CONFEREN			NS	Business Code 90009	9 4,523,000	4,523,000		
					-					
	b	ATHLETICS TICKE	T S	ALES		90009	9 3,655,000	3,655,000		
				-						
	c	PARKING				81293	0 1,004,000			1,004,000
	d	All other revenue					4,423,000	3,693,000	432,000	298,000
	е	Total. Add lines 1	1a-:	11d		•	13,605,000			
	12	Total revenue. S	ee ir	nstructions .					171.000	7 775 000
						-	456,494,000	403,035,000	171,000	7,775,000

Р	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns.	All other organization	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to a	ny line in this Part IX			<u> </u>
	not include amounts reported on lines 6b, 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	782,000	782,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	157,950,000	157,950,000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	8,143,000	3,070,000	3,643,000	1,430,000
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	671,000	671,000		
7	Other salaries and wages	133,495,000	112,710,000	17,235,000	3,550,000
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	7,968,000	6,723,000	1,033,000	212,000
9	Other employee benefits	30,359,000	24,444,000	5,018,000	897,000
10	Payroll taxes	9,252,000	7,816,000	1,191,000	245,000
11	Fees for services (non-employees):				
ā	Management	218,000	201,000	17,000	
Ŀ	Legal	1,953,000	916,000	1,037,000	
(: Accounting	283,000		283,000	
c	Lobbying	219,000		219,000	
6	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	5,729,000		5,729,000	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	24,875,000	21,623,000	2,709,000	543,000
12	Advertising and promotion	2,305,000	1,986,000	288,000	31,000
13	Office expenses	7,048,000	5,698,000	945,000	405,000
14	Information technology	7,851,000	924,000	6,926,000	1,000
15	Royalties	0			
16	Occupancy	11,371,000	11,371,000		
17	Travel	7,042,000	6,288,000	526,000	228,000
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	2,747,000	2,260,000	340,000	147,000
20	Interest	7,848,000	7,746,000	102,000	
21	Payments to affiliates	0			_
22	Depreciation, depletion, and amortization	19,648,000	18,665,000	905,000	78,000
23	Insurance	2,627,000	270,000	2,357,000	
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 REPAIRS AND MAINTENANCE	6,903,000	5,184,000	1,576,000	143,000
	b BOOKS AND SUBSCRIPTIONS	3,400,000	3,354,000	31,000	15,000
	c OTHER EXPENSES	8,010,000	6,187,000	1,723,000	100,000
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	468,697,000	406,839,000	53,833,000	8,025,000
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				_
	Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

2

3

Assets

11

12

13

14

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16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

٥ 29

Assets 30 21,725,000

27,653,000

11,095,000

6,141,000

2,894,000

6.966.000

18,406,000

327,979,000

92,145,000

191,414,000

108,142,000

814,560,000

45,605,000

11,862,000

279.329.000

0

0

0

0

0

39,736,000

376.532.000

234,337,000

203,691,000

438,028,000

814,560,000

Form 990 (2019)

(B) End of year

Beginning of year

12,940,000

26,892,000

10,930,000

9.306.000

8.861.000

23,036,000

328,222,000

94,058,000

186.769.000

0 5

0 6

0 8

0

0 18

0 21

0 22

0 23

0 24

31,686,000

260.783.000

240,341,000

200,312,000

440,653,000

701,436,000

422,000

701,436,000

41,962,000

10,996,000

176.139.000

1

2

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4

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9

10c

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Page **11**

Check if Schedule O contains a response or note to any line in this Part IX		
		2 :-

Cash-non-interest-bearing .

Notes and loans receivable, net . . .

Inventories for sale or use Prepaid expenses and deferred charges .

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

Investments—publicly traded securities .

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

Tax-exempt bond liabilities . . .

Accounts payable and accrued expenses .

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

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

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

Secured mortgages and notes payable to unrelated third parties . . .

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

Unsecured notes and loans payable to unrelated third parties .

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

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

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

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

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

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

Retained earnings, endowment, accumulated income, or other funds

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

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Savings and temporary cash investments	
Pledges and grants receivable, net	
Accounts receivable, net	

10a

10b

628,650,000

300,671,000

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

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3b

Yes

Yes (2019)

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

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 22-1500645

Name: Seton Hall University

Form 990 (2019)

Form 990, Part III, Line 4a:

Educational - Seton Hall University operates to provide baccalaureate, masters, and doctoral degrees. Day and evening sessions accommodate both commuter and residential students on a part-time and full time basis.

Form 990, Part III, Line 4b: Academic Support and Student Services - Academic Support provides support services, such as libraries, academic technology, faculty curriculum development, for its primary missions of instruction, research and public service. Student services provide various services to students, such as counseling, career guidance, financial aid, student

records, health services and transportation, which contribute to the students' emotional and physical well-being and to their intellectual, cultural and social development

outside the context of the University's formal instructional programs.

Form 990, Part III, Line 4c:

federal, state and private grants.

Research, Training & Public Services - Enables faculty to explore new areas of education, learning and knowledge and provides non-instructional services to individuals and

groups external to the University. The University also offers financial support to students through academic scholarships and work-study programs, which are funded by

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

	any nours	anu	a un	ecto) / LI	ustee,)	Organization	organizations	irom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Kevin Willard	60.0					Х		2,234,915	0	71,258
Head Coach Men's Basketball	0.0									
Catherine A Kiernan JD	45.0			x				2,008,897	0	98,582
V.P.& Gen. Counsel Thru 12/19	0.0									,
Joseph E Nyre PhD	60.0									
		X	I	Ιx	I	1	ı	923 332	l n	36.860

	0.0					
Catherine A Kiernan JD	45.0		х		2,008,897	
V.P.& Gen. Counsel Thru 12/19	0.0				2,000,037	
Joseph E Nyre PhD	60.0	>	_		923,332	
President/CEO/Regent/Trustee	0.0	^	^		923,332	
Patrick G Lyons MBA	60.0					
Tuerren o Eyono Fibri			X		669,969	

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and Independent Contractors

Interim Pres./Regent/Trustee

Head Coach Women's Basketball

Interim Provost Thru 6/2020

V.P. Enrollment Management

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Anthony J Bozzella

Karen E Boroff PhD

Alyssa McCloud PhD

Matthew Borowick MBA

Interim V.P. Advancement

Kathleen Boozang JD LLM

Dean, School of Law

Joseph E Nyre PhD	60.0	×	х		923,332	0	
President/CEO/Regent/Trustee	0.0	^	^		323,332)	
Patrick G Lyons MBA	60.0		X		669,969	0	
EVP Operations/Chief of Staff	0.0		^		009,909	0	
Mary J Meehan PhD	45.0						

Joseph E Nyre PhD	60.0	~	v			923,332	0	36.860
President/CEO/Regent/Trustee	0.0	^	^			923,332	0	50,000
Patrick G Lyons MBA	60.0		x			669,969	0	47,135
EVP Operations/Chief of Staff	0.0		^			003,303	0	47,133
Mary J Meehan PhD	45.0	X	x			652.973	C	22.780

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411,930

394,096

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and Independent Contractors

Tracy H Gottlieb PhD

Brian B Shulman PhD

Steven J Lorenzet PhD

Anthony O Skinn

Former V.P. Student Services

Dean, School Health & Medical

Associate Dean, Stillman Schl

Asst. Coach Men's Basketball

Dean College of Arts & Science

Int.VP Student Serv thru 10/19

Peter W Shoemaker PhD

Robin L Cunningham EdS

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Dennis J Garbini MBA	45.0									
Former V.P. Administration	0.0						Х	365,809	0	47,765
Stephen A Graham MBA	45.0									
V.P. Finance & CFO	0.0			X				333,757	0	41,004
Stephen J Lubben JD LLM	45.0									
Law School Professor	0.0					X		297,138	0	57,077

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281,585

286,778

251,355

242,588

189,154

159,223

54,441

41,248

34,393

51,451

29,419

56,055

24,379

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Stephen A Granam MDA				l _x l			333,757	
V.P. Finance & CFO	0.0			^			333,737	
Stephen J Lubben JD LLM	45.0					_	297,138	
Law School Professor	0.0					^	297,138	
Joyce A Strawser PhD	45.0				~		279,253	
Dean, Stillman School Business	0.0				^		2/9,233	
Tracy H Cottligh PhD	45.0							

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

<u> </u>	formulated	unu	u un	in eccor, crastee,				(14/ 2/1000	(14/ 2/1000	overnientien and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Monsignor C Anthony Ziccardi V.P. for Mission & Ministry	45.0 0.0			х				71,557	0	70,048	
Monsignor Robert Coleman Regent / Trustee	0.0	Х						51,242	0	86,448	
Monsignor Joseph R Reilly Trustee	0.0	Х						37,739	0	94,798	
Monsignor Robert J Wister	1.0	Х						60,593	0	70,048	

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Monsignor Joseph R Reilly
Trustee
Monsignor Robert J Wister
Trustee
Monsignor Gerald J Buonopane

Regent

Regent / Trustee

Regent / Trustee

Regent / Trustee

Trustee

Monsignor Thomas P Nydegger

Shawna Cooper-Gibson EdD

Most Rev Arthur J Serratelli

Monsignor Peter Smutelovic

Cardinal Joseph W Tobin

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V.P. Student Services

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and Independent Contractors

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

and Independent Contractors

Monsignor Robert E Harahan

Sr Margaret Stallmeyer CDP

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Trustee

Regent / Trustee

Kevin H Marino JD

Regent / Trustee

Patrick M Murray

Regent / Trustee

Regent/Trustee

Mark E Ganton

Robert J Sloan

Regent / Trustee

Regent / Trustee

Mary Ann Christopher

	any hours	and	a dir	ecto	r/tr	ustee)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Most Reverend Kurt R Burnette Regent	0.0	Х						0	0	0	
Most Rev James F Checchio Regent	0.0	Х						0	0	0	
Most Rev Dennis J Sullivan Regent	1.0	Х						0	0	0	

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and Independent Contractors

Mark D Benjamin

Edward C Cerny

Robert B Budelman Esa

Eun-Sook Lucy Cho-Lee MD

Regent

Regent

Regent

Regent

Regent

Regent

David L Flood

Robert C Garrett

	any hours	and	a dir	ecto	r/tr	ustee))	organization	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustée		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Pamela M Swartzberg Esq Trustee	0.0	Х						0	0	0
James E Collins Regent	0.0	Х						0	0	0
Henry F D'Alessandro	1.0	Х						0	0	0

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James E Collins	1.0	x			0	
Regent	0.0					
Henry F D'Alessandro	1.0	v			0	
Regent	0.0	^			J	
Robert S Basso	1.0	v			0	
Regent		^				

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	any hours	and	a dir	ecto	organizations	from the				
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Richard A Giuditta Jr	1.0	Х						0	0	0
Regent	0.0	^						U	U	0
Francis J Hager	1.0	Х						0	0	0
Regent	0.0	<						5	J	,
Helen Lerner	1.0	Х						0	0	0
Regent	0.0									
Anthony Masherelli Regent	1.0	Х						0	0	0
- regent	0.0									
Richard C McMahon	1.0									

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Regent
Anthony Masherelli
Regent
Richard C McMahon

Regent

Regent

Regent

Regent

Regent

Regent

John D Hayes

James T Boyle Jr

John F Swift

Stephen G Waldis

Matthew W Wright

and Independent Contractors

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

and a director/trustee)

organization

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Regent/General Counsel

Leo J Zatta

Regent / Trustee

Katia PasseriniPhD

Provost and E.V.P.

	1 6 1						'	(1) (1)	(14) 2/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Gerard H Hanson Esq Regent	0.0	Х						0	0	0
Kevin P Flood Regent	0.0	Х						0	0	0
Kimberly A Capadona Esq	45.0									

any hours

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			3493124023551					
SC	HED	ULE A	Dublic (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
/TE 000			Complete if the or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form 9	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019
		f the Treasury	► Go to <u>www.irs.</u>	<i>gov/Form990</i> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	he organiza niversity	tion				Employer identific	ation number
		liversity					22-1500645	
	rt I		for Public Charity Statu				See instructions.	
1 ne c	organiz		a private foundation because onvention of churches, or as:	•			(A)(:)	
		,	•				. , . ,	
2	✓		scribed in section 170(b)(1		,	, ,		
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	d in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated for the benefit (iv). (Complete Part II.)	of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7			ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. Se					ege or university or a
10		from activit investment	ation that normally receives: ties related to its exempt fund income and unrelated busing See section 509(a)(2). (Col	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations d through 12d that describes	escribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or c	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization supents of the supporting organiza organiza plete Part IV, Sections A a	tion vested in the sar				
С		Type III f	unctionally integrated. A s organization(s) (see instruction	upporting organizatio				ted with, its
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			box if the organization receiv or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	r the number	of supported organizations				<u> </u>	
g			ing information about the su		т'			T
	(i) N	Name of supported organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))	in your governing document? mo nes lee (se		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota			tion Act Notice, see the In		Cat. No. 11285			 90 or 990-EZ) 2019

Page 2

	If the organization failed	d to qualify under	the tests listed	below, please c	omplete Part II	I.)	
	Section A. Public Support						
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not	44,070,000	42,295,000	59,790,000	43,567,000	45,513,000	235,235,000
2	include any "unusual grant.") . 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	44,070,000	42,295,000	59,790,000	43,567,000	45,513,000	235,235,000
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						(
6	(f) Public support. Subtract line 5						
U	from line 4.						235,235,000
	Section B. Total Support						
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	(or fiscal year beginning in) ► Amounts from line 4	44,070,000	42,295,000	59,790,000	43,567,000	45,513,000	235,235,000
8	Gross income from interest,	,	,,	227.227.22	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	dividends, payments received on securities loans, rents, royalties and income from similar sources	5,543,000	5,602,000	4,968,000	4,029,000	2,787,000	22,929,000
9	Net income from unrelated business activities, whether or not the business is regularly carried on	518,000	534,000	804,000	499,000	171,000	2,526,000
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	2,732,000	2,746,000	2,883,000	2,255,000	1,438,000	12,054,000
11	Total support. Add lines 7 through 10						272,744,000
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	1,865,237,00
13	First five years. If the Form 990 is f	or the organization'	s first, second, thir	d. fourth, or fifth	tax vear as a sect	ion 501(c)(3) oraș	
	check this box and stop here	-			•	· / · / <u>-</u>	· ·
	Section C. Computation of Publi						-
	Public support percentage for 2019 (li			olumn (f))		14	86.247 %
	Public support percentage for 2018 So					15	84.692 %
	33 1/3% support test—2019. If the						
100	and stop here. The organization qua	lifies as a publicly s	upported organizat	ion	2.1.000 2,070 0.		▶ 🗸
Ŀ	33 1/3% support test—2018. If the box and stop here. The organization	ne organization did	not check a box or	i line 13 or 16a, a	nd line 15 is 33 1/	3% or more, chec	k this
17a	is 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the org	anization did not c and-circumstance	heck a box on lines" test, check this	e 13, 16a, or 16b, box and stop he i	and line 14 r e. Explain	• 🗖
b	organization	st—2018. If the or zation meets the "f	ganization did not acts-and-circumsta	check a box on lir inces" test, check	e 13, 16a, 16b, o this box and stop	r 17a, and line here.	▶□
	supported organization			-			▶□

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

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

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the organization had excess business holdings).

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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

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Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 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? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

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

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.	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	sive (provide		
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).			

8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	ich the organization is respon	sive (provide	
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			
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		-	

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

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.

instructions)

d Excess from 2018. e Excess from 2019.

\$

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

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

Additional Data

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

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

Political Campaign and Lobbying Activities

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

OMB No. 1545-004

DLN: 93493124023551

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

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

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

• Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** Seton Hall University 22-1500645

CIL	TI-A	complete if the organization is exempt under section 501(c) or is a section 527 organization	tion.
1		de a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for ical campaign activities")	definition of
2	Politi	cal campaign activity expenditures (see instructions)	
3	Volur	teer hours for political campaign activities (see instructions)	
Parl	: I-B	Complete if the organization is exempt under section 501(c)(3).	

Par	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

☐ Yes □ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? ☐ Yes

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				

Sche	dule C (Form 990 or 990-EZ) 2019				P	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fill Form 5768 (election under section 501(h)).	led				
or e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ	• • • • • • • • • • • • • • • • • • • •	Yes	No		Amoun	nt
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:					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		7		
С	Media advertisements?		No			
d	Mailings to members, legislators, or the public?	Yes				1,200
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?	Yes			1	19,737
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			22	28,723
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		No			
j	Total. Add lines 1c through 1i				24	19,660
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
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?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), c	r sec	tion		
	501(c)(6).				T.,	
	Manager the transfer of 1 (000) or manager during received manager title by manager 2			4	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			2		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			•		1/61
Pal	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				301(C)(0)
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				
P	art IV Supplemental Information					
Pro	vide 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.	-Δ line	s 1 an	d 2 (se	

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference Explanation

Part II-B, Line 1(i) Other Lobbying Seton Hall University lobbied state legislators regarding annual independent college appropriations and aid

Activities for independent college students. Efforts consisted of direct mailings, phone calls and personal meetings. Members of Congress were contacted regarding student aid and grants for various university programs. The University's staff is involved in lobbying efforts. The value of that staff time is approximately \$30,723. Those

Part IX, statement of Functional Expenses.

costs have been reported on Line 7 (other salaries and wages) and not separately identified on Line 11 (d) in

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

As Filed Data -

DLN: 93493124023551

OMB No. 1545-0047

2019

Supplemental Financial Statements

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

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

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

Open to Public Inspection Employer identification number

Set	on Hall Un	niversity				22-1	500645		
Pa	art I	Organizations Maintaining Donor Adv Complete if the organization answered "You							
		· •	(a) Donor	advis	ed funds		(b) Funds a	nd other a	accounts
L	Total nu	umber at end of year							
2	Aggrega	ate value of contributions to (during year)							
3	Aggrega	ate value of grants from (during year)							
ŀ	Aggrega	ate value at end of year							
5		e organization inform all donors and donor advise zation's property, subject to the organization's e					unds are the		Yes 🗌 No
5	charita	e organization inform all grantees, donors, and d able purposes and not for the benefit of the dono be benefit?	r or donor advisor, or	r for a	ny other purpose				Yes 🗆 No
Pa	rt II	Conservation Easements. Complete if the organization answered "Yes	es" on Form 990. F	Part I	V. line 7.				
	Purpos	se(s) of conservation easements held by the orga							
	□ Р	reservation of land for public use (e.g., recreation	on or education)		Preservation of a	n histori	cally import	ant land a	irea
	_	rotection of natural habitat	,		Preservation of a				
	□ Р	reservation of open space							
2		ete lines 2a through 2d if the organization held a ent on the last day of the tax year.	a qualified conservation	on cor	tribution in the fo	rm of a			f the Year
а		umber of conservation easements				2a	Tiela ac c	ne Liid o	T the real
b	Total a	creage restricted by conservation easements				2b			
С	Numbe	er of conservation easements on a certified histor	ric structure included	in (a)		2c			
d		er of conservation easements included in (c) acquire listed in the National Register	uired after 7/25/06, a	nd no	t on a historic	2d			
3	Numbe tax yea	er of conservation easements modified, transferr ar ►	ed, released, extingu	ished,	or terminated by	the org	anization du	iring the	
ŀ	Numbe	er of states where property subject to conservati	on easement is locate	ed ►_			_		
5		he organization have a written policy regarding t forcement of the conservation easements it hold				of viola		Yes	□ No
5	Staff a ▶	nd volunteer hours devoted to monitoring, inspe	ecting, handling of vio	lation	s, and enforcing o	onserva	tion easeme	ents durin	g the year
,	Amoun ► \$	nt of expenses incurred in monitoring, inspecting	, handling of violatior	ns, an	d enforcing conse	rvation	easements o	during the	year
3	Does e	each conservation easement reported on line 2(d) above satisfy the re	quire	ments of section 1	L70(h)(4	1)(B)(i)		
	and se	ction 170(h)(4)(B)(ii)?		·				Yes	□ No
)	balanc	t XIII, describe how the organization reports con e sheet, and include, if applicable, the text of the ganization's accounting for conservation easeme	e footnote to the orga						
ar	rt III	Organizations Maintaining Collections Complete if the organization answered "You	of Art, Historica			ner Sir	nilar Asse	ts.	
La	art, his	organization elected, as permitted under SFAS 1 storical treasures, or other similar assets held fo e, in Part XIII, the text of the footnote to its fina	r public exhibition, ed	lucatio	on, or research in				
b	historic	organization elected, as permitted under SFAS 1 cal treasures, or other similar assets held for pul ng amounts relating to these items:							
((i) Rever	nue included on Form 990, Part VIII, line 1 . . .					> \$		
(i	ii)Assets	s included in Form 990, Part X					. > \$		1,724,000
2	If the d	organization received or held works of art, histor ng amounts required to be reported under SFAS	ical treasures, or oth	er sim	nilar assets for fina				
а		ue included on Form 990, Part VIII, line 1	,	-			. ▶\$_		61,000
b	Assets	included in Form 990, Part X					▶ \$		
~ × I	D	ork Paduction Act Notice, see the Instruction	fau Eaum 000		Cat Na	E2202		ula D /Fa	000\ 201

d Equipment .

Sche	edule D (Form 990) 2019									Page 2
Par	t III Organizations Maintaining	Collections of	f Art, Histori	ical Trea	sures, or	Other	Similar As	sets (conti	nued)	
3	Using the organization's acquisition, acceitems (check all that apply):	ession, and other	records, check	any of the	following t	hat are a	significant u	se of its coll	ection	
а	✓ Public exhibition		d	Loa	an or excha	ange prog	rams			
b	Scholarly research		е	Oth	ner					
C	Preservation for future generations	5								
4	Provide a description of the organization Part XIII.	's collections and	explain how the	ey further t	the organiz	ation's ex	empt purpos	se in		
5	During the year, did the organization sol assets to be sold to raise funds rather th							☐ Yes	☑ N	o
Pa	rt IV Escrow and Custodial Arra Complete if the organization (X, line 21.		on Form 990), Part IV,	line 9, or	r reporte	d an amou	nt on Form	990,	Part
1a	Is the organization an agent, trustee, cuincluded on Form 990, Part X?							☐ Yes	□ N	0
b	If "Yes," explain the arrangement in Part	: XIII and complet	te the following	table:	[Ar	mount		_
c	Beginning balance					1c				_
d	Additions during the year					1d				_
е	Distributions during the year					1e				_
f	Ending balance					1f				_
2a	Did the organization include an amount o	on Form 990, Part	t X, line 21, for	escrow or	custodial a	ccount lia	bility?	☐ Yes	□ N	0
b	If "Yes," explain the arrangement in Part	XIII. Check here	if the explanat	ion has bee	en provided	d in Part X	(III			
Pa	art V Endowment Funds.									
	Complete if the organization			<u> </u>						
_	5	(a) Current		Prior year	 		(d) Three yea		our year	
	Beginning of year balance	<u></u>	162,000	271,090,000		59,799,000		904,000		948,000
	Contributions		586,000	2,304,000		3,286,000	•	176,000		124,000
	Net investment earnings, gains, and losse	°	028,000	10,675,000		25,041,000	,	176,000		379,000
	Grants or scholarships	3,	167,000	3,474,000)	3,487,000	3,4	155,000	2,8	307,000
е	Other expenditures for facilities and programs		173,000	9,780,000		1,431,000	14,6	516,000		569,000
f	Administrative expenses	<u> </u>	436,000	1,653,000		2,118,000		174,000		113,000
g	End of year balance	270,	000,000	269,162,000	27	71,090,000	259,7	799,000	246,9	904,000
2 a b c	Provide the estimated percentage of the Board designated or quasi-endowment ▶ 38.100 % Temporarily restricted endowment ▶	34.800 % 27.100 %		g, column	(a)) held a	s:				
_	The percentages on lines 2a, 2b, and 2c	•				.				
3а	Are there endowment funds not in the poor organization by:	ossession of the o	rganization tha	t are held a	and admini	istered for	the		Yes	No
	(i) unrelated organizations							3a(i)	Yes	
	(ii) related organizations							3a(ii)		No_
b 1			•					3b		
4	Describe in Part XIII the intended uses o		n's endowment	runas.						
Pa	rt VI Land, Buildings, and Equip Complete if the organization		on Form 990). Part IV	line 11a	See For	m 990 Par	† X. line 10).	
	Description of property (a) Cost	or other basis estment)	(b) Cost or other				epreciation		ook value	9
1 -	Land			3,171,00	20		+		2	,171,000
				550,869,00			254,506,000			,363,000
D	Buildings			220,009,00	~		-54,500,000		290	,505,000

55,941,000

18,669,000

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

10,867,000

17,578,000

45,074,000

1,091,000

	Investments—Other Securities. Complete if the organization answered "Yes" on Form 9	990 Part IV line	11h See Form 990 F	Part X line 12
	(a) Description of security or category	(b) Book	(c) Metho	d of valuation:
.) Financia	(including name of security)	value	Cost or end-of-	-year market value
	held equity interests			
	nal Data Table			
4)	iai bata Table			
3)				
C)				
D)				
E)				
=)				
<u>′</u> G)				
H)				
otal. (Colum. Part VIII		191,414,000		
	Complete if the organization answered 'Yes' on Form 9	990, Part IV, line		
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
L)				value
2)				
3)				
.)				
5)				
5)				
')				
3)				
))				
-	nn (b) must equal Form 990, Part X, col.(B) line 13.)		•	
art IX	Other Assets. Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 1	.1d. See Form 990, Par	t X, line 15.
NEDOSIT	(a) Description TS W/TRUSTEE	,		(b) Book value 108,142,000
)	IS W/ TROSTEE			100,142,000
3)				
1)				
5)				
5)				
7)				
3)				
9)				
	ımn (b) must equal Form 990, Part X, col.(B) line 15.)	<u> </u>	<u> ▶</u>	108,142,000
	Other Liabilities.			000 Part V line 25
Part X	Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 1	1e or 11f.See Form	
Part X	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value
Part X) Federal	Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 1	1e or 11f.See Form	(b) Book
Part X) Federal) REFUND,) CONDITI	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000
Part X) Federal) REFUND) CONDITI) CAPITAL	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000 11,508,000
Part X L) Federal REFUNDA CONDITI CONDITI COPITAL ACCRUE	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000
Part X L) Federal R) REFUND CONDITI CAPITAL A) CACRUE O) OTHER L	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION D POSTRETIREMENT BENEFIT	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000 11,508,000 945,000
Part X 1) Federal 2) REFUND 3) CONDITI 4) CAPITAL 5) ACCRUE	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION D POSTRETIREMENT BENEFIT	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000 11,508,000 945,000
Part X 1) Federal 2) REFUND 3) CONDITI 4) CAPITAL 5) ACCRUE 6) OTHER L 7)	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION D POSTRETIREMENT BENEFIT	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000 11,508,000 945,000
Part X L) Federal L) REFUND CONDITI C	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION D POSTRETIREMENT BENEFIT	90, Part IV, line 1	.1e or 11f.See Form	(b) Book value 0 9,130,000 9,756,000 11,508,000 945,000
Part X L) Federal P) REFUND CONDITI CAPITAL CONDITI C	Complete if the organization answered 'Yes' on Form 9 (a) Description of liability income taxes ABLE U.S. GOV'T GRANTS IONAL ASSET RETIRE OBLIG LEASE OBLIGATION D POSTRETIREMENT BENEFIT	90, Part IV, line 1		(b) Book value 0 9,130,000 9,756,000 11,508,000 945,000

2

а

b

3

4

b

C

Part XII

5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

10,405,000

297,831,000

158,663,000

456,494,000

310,861,000

1,036,000

309,825,000

158,872,000

468,697,000

Schedule D (Form 990) 2019

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

Donated services and use of facilities . .

Prior year adjustments

Subtract line 2e from line 1

Other losses

Add lines 2a through 2d .

Return Reference

Other (Describe in Part XIII.) . . .

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

Net unrealized gains (losses) on investments Donated services and use of facilities

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

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

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

Total expenses and losses per audited financial statements

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

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

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

Supplemental Information

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

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

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

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

2c 2d 4a 4b

2a

2b

2a

2b

2c

2d

4a

4b

Explanation

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

22,000 2e 3 5,729,000 152,934,000 4c 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

9.852.000

531,000

531,000

505,000

5,729,000

153,143,000

2e

3

4c

5

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

Schedule D (Form 990) 2019

Additional Data

HEDGE FUNDS

COMMINGLED FUNDS

VENTURE CAPITAL

OPPORTUNISTIC

LONG EQUITY

PRIVATE EQUITY FUNDS

LIQUID FIXED INCOME

ILLIQUID FIXED INCOME

DIVERSIFYING ASSETS

Software ID: Software Version: EIN: 22-1500645

Name: Seton Hall University

54,233,000

1,022,000

7,470,000

6,134,000

19,734,000

22,764,000

21,374,000

22,921,000

16,925,000

F

F

F

F

Form 990, Schedule D, Part VII - Investments Other So	ecurities	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation: Cost or end-of-year market value
OUTSIDE TRUST	9,596,000	F

Form 990, Schedule D, Part VII - Investments Other Securities				
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation: Cost or end-of-year market value		
REAL ASSETS	9,241,000	F		

Return Reference Explanation

Part III, line 4 Collections are composed of: a mural, ancient Greek and Roman coins, book collections, paintings, wild life art collections, and a special collection of research papers. Collection s are utilized by students, faculty, administrators and the general public. Their usage he

versity.

lps achieve the ultimate goal of advancing the educational and research mission of the Uni

Supplemental Information					
Return Reference	Explanation				
Part V, line 4	Endowment funds support the University's mission by providing a sustainable flow of funds to annual operations. This support includes funds for scholarships and for specific academ ic programs. The University has adopted an endowment spending policy designed to provide a predictable flow of funds to operations. The policy is intended to balance current spending needs and preserve the endowment's future purchasing power. The University applies a 4. 5% spending rate to a three-year moving average of endowment investment funds. The Board of Regents sets the spending rate. The purpose of using a moving average is to smooth out a ny wide fluctuations in the market value. Endowment earnings in excess of the spending rat e are added back to the principal of the endowment investments. In years when yield exceed s the amount appropriated under the spending policy the excess is returned to principal as appreciation. When annual yield is insufficient to support spending appropriations, the balance is provided from accumulated appreciation. Special allocations may be made for cert ain purposes in addition to the spending rate, as approved by the University's Board of Regents. There were no special allocation made in the year ended June 30, 2020.				

upplemental Information					
Return Reference	Explanation				
Part X, line 2 - Other Liabilities - Income Taxes	Accounting Standards Codification ("ASC") 740-10 clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This section provides that the tax eff ects from an uncertain tax position can be recognized in the financial statements only if the position is "more-likely-than-not" to be sustained if the position were to be challeng ed by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. The University is exempt from Federal and New Jersey State Income taxation by virtue of being an organization described in Section 501(c)(3) of the IRC and similar provisions of the New Jersey State tax code. Nevertheless, The University may be subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. The University believes that there are no material uncertain tax positions within its financial statements.				

Supplemental Information	
Return Reference	Explanation
Part XI, Line 2D - Other	Change in the value of the split-interest agreements of \$22,000.

Supplemental Information Return Reference Explanation Financial Aid of \$153,143,000, less rental expense of \$27,000, and less special events expenses of \$182,000. Part XI, Line 4b - Other

Supplemental Information Return Reference Explanation Special events expense of \$182,000, rental expense of \$27,000, and provision for uncollectible contributions receivable of \$296,000.

Part XII, Line 2D - Other

upplemental Information	
Return Reference	Explanation
Part XII, Line 4B - Other	Financial aid of \$153,143,000.

-

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493124023551 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** Seton Hall University 22-1500645 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h No If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

Schedule E (Form 990 or 990EZ) (2019)				
Part II Supplemental Information. Provide the expany other additional information. See instructions	lanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide			
Return Reference	Explanation			
Part I, Line:3	The University's racially nondiscriminatory policy appears in its Undergraduate and Graduate catalogs, as well as in the Admission Prospectus. It is also in all newspaper advertisements and the University's website.			
Line 6 - Explanation of Government Financial Aid	The University participates in various Federal and State financial aid programs, which include, but are not limited to the following programs: Federal Direct Lending Program, Federal Pell Grant, Federal College Work Study, Federal Supplemental Education Opportunity Grant, N.J State Tuition Assistance Grant and N.J. State Education Opportunity Fund.			

SCHEDULE F	Statement of	Activities	Outside the Un	ited States	OMB No. 1545-0047
(Form 990) Department of the Treasury	► Complete if the organ		2019 Open to Public Inspection		
Internal Revenue Service				F!	·
Name of the organization Seton Hall University					entification number
				22-1500645	
Part I General Infor Form 990, Part		es Outside the I	United States. Comple	ete if the organization	answered "Yes" on
1 For grantmakers. Do	es the organization m	aintain records to	substantiate the amoun	t of its grants and	
			stance, and the selectior	r criteria used	
to award the grants or	assistance?				☐ Yes ☐ No
2 For grantmakers. De outside the United Stat		ganization's proce	edures for monitoring the	use of its grants and o	ther assistance
3 Activites per Region. (Th	ne following Part I, line 3	3 table can be dupl	icated if additional space is	s needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	fundraising, program	(e) If activity listed in (d) is program service, describe specific type of service(s) in the region	a (f) Total expenditures for and investments in the region
See Add'l Data			,		
3a Sub-total	heets to				150,088,000
Tarci					

Cat. No. 50082W Schedule F (Form 990) 2019

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

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

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

Schedule F	(Form 990) 20	19 Page
Part V	Provide the amounts of method); a	ntal Information information information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide nal information. See instructions.
990 S che	dule F, Sup	plemental Information
Return	Reference	Explanation

Return Reference	Explanation
	By virtue of its investments in various limited partnership investments, Seton Hall University may invest in passive foreign investment companies and/or foreign partnerships; to the extent the University is required to file the Forms 926, 5471, 8621, or 8865, those foreign
, , - , - , - ,	forms were attached to the University's Form 990-T.

990 Schedule F, Supplemental Information

Return

Reference	
Part I, Lines 3, (3)&(4)	Support for student recruitment and academic exchange program developments. During FY2020, the Stillman School continued to offer an executive-style MBA program in collaboration with Viagold International Education Management Group, with cohorts in Beijing, Shanghai and Zhuhai, China. Students are taught in Mandarin by a combination of Stillman faculty and faculty employed by Chinese universities, and the students spend a week during their final semester at Seton Hall's South Orange campus to complete the MBA program and participate in Graduate Commencement.

Explanation

990 Schedule F, Supplemental Information

Return

Reference	Explanation
Part 1, Line	The pharmaceutical, biotech, and medical device industries are increasingly facing a more challenging regulatory and enforcement landscape

regulatory, and compliance issues faced by life sciences manufacturers as well as their consultants and third parties doing business in LATAM.

Evolunation

990 Schedule F, Supplemental Information

Return

	erence	
Part 3 (6)		Humanitarian peacebuilding, stabilization, recovery, and development actors provide conflict sensitive programs in Yemen: This project will look to build a shared understand among service providers about the conflict contexts and how to operate most effectively in them, and agreement where possible on collective actions/approaches. It will do this through networking, coordination, strengthening of working relationships, and regular sessions to review available analysis and plan for shared actions.

Explanation

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

28,836,000

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			Investments		120,976,000

Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) East Asia and the Pacific Student Recruitment 91,000 IProgram Services East Asia and the Pacific Program Services MBA Program 20,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America Compliance Cert 40,000 IProgram Services South Asia Program Services Peacebuilding 125,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493124023551 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization Seton Hall University 22-1500645 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 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.

Cat. No. 50083H

Schedule G (Form 990 or 990-EZ) 2019

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

		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
נ		BeefsteakDinner (event type)	LawSch RedMass (event type)	(total number)	col. (c))
Nevelkie					
	1 Gross receipts	156,000	99,000	238,000	493,00
- 1	2 Less: Contributions	131,000	74,000	152,000	357,00
	3 Gross income (line 1 minus line 2)	25,000	25,000	86,000	136,00
	4 Cash prizes				
	5 Noncash prizes				
Direct Experises	6 Rent/facility costs	3,000	1,000	19,000	23,00
<u> </u>	7 Food and beverages	46,000	18,000	11,000	75,00
3	8 Entertainment	7,000	1,000	39,000	47,00
	9 Other direct expenses		25,000	12,000	37,00
	10 Direct expense summary. Add lines 4 t	hrough 9 in column (d)			182,00
	11 Net income summary. Subtract line 10	from line 3, column (d)		>	-46,00
	11 Net income summary. Subtract line 10	from line 3, column (d)		▶ V, line 19, or reported	-46,00
ari	11 Net income summary. Subtract line 10 Gaming. Complete if the organizations.	from line 3, column (d)	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo	► V, line 19, or reported (c) Other gaming	-46,00 more than \$15,000 (d) Total gaming (add
Pari	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-46,00 more than \$15,000 (d) Total gaming (add
Pari	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-46,00 more than \$15,000 (d) Total gaming (add
Pari Kevelkie	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-46,00 more than \$15,000 (d) Total gaming (add
Parises Keverne	Gaming. Complete if the organism on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-46,00 more than \$15,000 (d) Total gaming (add
Part Exhauses Keverine	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		
Part Exhauses Keverine	Gaming. Complete if the organism on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-46,00 more than \$15,000 (d) Total gaming (add
Part Shelises Kevelikie	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-46,00 more than \$15,000 (d) Total gaming (add
Part Shellows Kevellous	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo Yes% No	(b) Pull tabs/Instant bingo/progressive bingo — Yes %	(c) Other gaming	-46,00 more than \$15,000 (d) Total gaming (add
Pari Cyberged Keverine	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo Yes% No chrough 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	-46,00 more than \$15,000 (d) Total gaming (add
Pari Cyberged Keverine	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo Yes% No chrough 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	-46,00 more than \$15,000 (d) Total gaming (add
and and specifically specifically and	Gaming. Complete if the organization on Form 990-EZ, line 6a. Gash prizes	131,000 74,000 152,000 ss income (line 1 minus 2) 25,000 25,000 86,000 h prizes			
Pari Experises Keverale	Gaming. Complete if the organization on Form 990-EZ, line 6a. Gash prizes	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No Chrough 5 in column (d) t line 7 from line 1, column on conducts gaming activities in each of	(b) Pull tabs/Instant bingo/progressive bingo Yes	(c) Other gaming Yes % No	-46,00 more than \$15,000 (d) Total gaming (add col.(a) through col.(c))

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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

DLN: 93493124023551

Open to Public

Department of Freasury Internal Rever	nue Service		► Go to <u>ww</u>	► Attach to Form w.irs.gov/Form990 for		on.	,	Inspection
Name of the o S <mark>eton Hall</mark> U							Employer identifice 22-1500645	ation number
Part I	General Inform	ation on Grants	and Assistance				22-1300643	
the se	election criteria used to libe in Part IV the org Grants and Other A	to award the grants anization's procedur Assistance to Dom	or assistance? res for monitoring the us restic Organizations a	se of grant funds in the United States	nited States.	for the grants or assistance		✓ Yes □ No
` ′ 0	that received more on the second more of the second	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Add	litional Data							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
			-			· · · · · · · ·		5

(2) State of New Jersey Awards 1620 12,670,000 12074 134,270,000

(3) Institutional Support (3)

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

(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

ensuring that the funds are expended for the intended purposes.

Schedule I (Form 990) 2019

(4)

(5)

(6)

Part I, Line 2

grant assistance:

Part II, Line 2, (h) Purpose of

Part III can be duplicated if additional space is needed.

All University spending must be approved by a manager or higher level, depending on the amount of the expenditure. Any expenditure of \$1,000 or above would have to be approved by a Dean or other budget center manager. An expenditure in excess of \$10,000 must be approved by a Vice President (or that person's designee) or

the President. Grants or assistance to outside organizations are segregated in the University's financial accounting system through the use of a separate account code, which allows for review by University's central Finance Department. Scholarships are provided to students who are required to matriculate in the University, thereby

South Orange Performing Arts Center, Inc. (SOPAC) - Construction of South Orange Performing Arts Center,

Schedule I (Form 990) 2019

Page 2

Additional Data

Village 76 S Orange Ave South Orange, NJ 07079 South Orange Performing Arts

Center Inc 1 Sopac Way

South Orange, NJ 07079

Software ID: Software Version: **EIN:** 22-1500645 Name: Seton Hall University Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (g) Description of (h) Purpose of grant non-cash assistance or assistance

515,000

19,000

General Purpose

General Purpose

organization or government	(b) Liiv	if applicab
Township of South Orange	22-6002309	

32-0074004

(a) Name and address of	(p) FIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of Valuation	ĺ
organization		if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	l
						ĺ

115

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 41-1621192 501(C)(3) 16.000l General Purpose Saint Paul's Outreach 110 Crusader Ave West St

General Purpose

7.000

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

501(c)(3)

St Paul, MN 55118

Maison Fortune Orphanage
Foundation
999 Waterside Drive
Suite 1700

Norfolk, VA 23510

30-0007910

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

Township of Nutley NJ 22-6002167 115 220,000 General Purpose 1 Kennedy Drive

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

Nutley, NJ 07110

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49312	24023	551
Sch	nedule J	Co	mpensati	ion Information	OI	ИВ No.	1545-0	0047
(For	m 990)	For certain Office		rustees, Key Employees, and High	nest			
		► Complete if the orga		ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20)
D			▶ Attach	to Form 990. instructions and the latest inform) Dpen i		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.gov</u>	7 <u>1 01111990</u> 101	metractions and the latest morn	lation.		ectio	
	me of the organization Hall University	ation			Employer identifica	tion nu	ımber	
	<u> </u>				22-1500645			
Pa	rt I Questi	ons Regarding Compensat	ion				T	
1 a				the following to or for a person listed y relevant information regarding thes			Yes	No
	✓ First-class	s or charter travel	✓	Housing allowance or residence for p	personal use			
		companions	☑	Payments for business use of persor				
		nification and gross-up payments		Health or social club dues or initiation	n fees			
	Discretion	ary spending account	\checkmark	Personal services (e.g., maid, chaufi	eur, chef)			
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1b		No
2		•		or allowing expenses incurred by all		2	Yes	INO
	directors, truste	es, officers, including the CEO/E	ecutive Directo	r, regarding the items checked on Lin	e 1a? . .			
3				ed to establish the compensation of the	e			
	used by a relate	ed organization to establish comp	ensation of the	CEO/Executive Director, but explain in	n Part III.			
	✓ Compens	ation committee		Written employment contract				
		ent compensation consultant	led	Compensation survey or study				
	✓ Form 990	of other organizations	✓	Approval by the board or compensat	ion committee			
4	During the year related organiza		90, Part VII, Se	ction A, line 1a, with respect to the fil	ling organization or a			
а	Receive a sever	ance payment or change-of-conti	rol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a supple	mental nonqual	ified retirement plan?		4b		No
c		. ,		nsation arrangement? Dicable amounts for each item in Part		4c		No
	Only E01(a)(2) E01(a)(4) and E01(a)(20)	ovannizations	must complete lines E 0				
5), 501(c)(4), and 501(c)(29) ed on Form 990. Part VII. Section	_	the organization pay or accrue any				
		ontingent on the revenues of:		g				
а	The organization	1?				5a		No
b		anization?				5b		No
6		ed on Form 990, Part VII, Section ontingent on the net earnings of:		the organization pay or accrue any				
а	The organization	1?				6a		No
b						6b		No
_	· ·	6a or 6b, describe in Part III.						
7				the organization provide any nonfixed rt III		7		No
8	subject to the ir	nitial contract exception described	l in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de		8		No
9	If "Yes" on line	8, did the organization also follow	the rebuttable	presumption procedure described in l	Regulations section	9		No
For I	Panerwork Redu	iction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No 5	0053T Schedule J	(Forn	990)	2019

Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	(D) Nontaxable benefits	columns	(F) Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2019

Part I, Line 1a

and certain expense reimbursements. The University makes gross-up payments, which are included in taxable income, to him for certain of these amounts. The University reimburses him for the business use of his personal residence. Mary J. Meehan, Ph.D. Interim President/Trustee/Regent was in that position up until July 31, 2019. She became a member of the faculty at the University on August 1, 2019. Housing and related services were provided at no charge to members of its priest community which included an officer, along with certain Regents and Trustees listed in Form 990, Part VII(Monsignor Anthony Ziccardi, Monsignor Joseph R.Reilly, Monsignor Robert Coleman, Monsignor Thomas P. Nydegger, Monsignor Robert J. Wister, and Monsignor Gerald J. Buonopane). The value of the housing and related benefits are included in nontaxable benefits in Schedule J, Part II. The University paid membership fees to a country club for its Men's basketball coach, Kevin Willard, Women's basketball coach, Anthony J. Bozzella, and E.V.P. Operations/Chief of Staff, Patrick G. Lyons, M.B.A. Their attendance at these organizations were exclusively business related in order to assist University Advancement with donor cultivation and Fundraising efforts. Such fees totaled \$15,476, \$20,188, and \$24,193, respectively. They are included in nontaxable benefits in Schedule J. Part II The Men's Basketball team may travel via chartered flights to games to minimize the time spent away from for the players. The University spent \$22,241 for the Men's Basketball coach to travel via chartered flights for recruitment purposes. These benefits are not included in taxable income. Spouses of the President, the Men's Basketball coach, the Women's Basketball coach, and other members of the Executive Cabinet may travel to a limited number of events for business purposes; these events include fundraising/alumni events and Men's Basketball tournaments. Where applicable, the personal component of travel is included in taxable income. The University paid \$221,952 in 2019 to the former VP for Administration as severance. During 2019, the University made an end of term payment to an employee pursuant to contract. Due to non-disclosure provisions in the contract, the University is not disclosing the employee's name. However, such payment is properly disclosed on Form 990, Part VII and Schedule J as taxable wages. The compensation information reported on Form 990 is from calendar year 2019, as required. All amounts paid and disclosed were pursuant to employment agreements and done so prior to the COVID pandemic that currently affects our students, employees and society in general. Schedule 1 (Form 990) 2019

Joseph E. Nyre, Ph.D. became President/CEO/Trustee/Regent on August 1, 2019. The University includes in his taxable income certain payments made on his behalf

Page 3

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

Form 990, Schedule J, P (A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Mary J Meehan PhD Interim Pres./Regent/Trustee	(i)	485,893	155,168	11,912	22,000	780	675,753	d
	(ii)	0	0	0	0	0	0	c
1)Joseph E Nyre PhD President/CEO/Regent/Trustee	(i)	296,683	133,000	493,649	22,000	14,860	960,192	C
	(ii)	0	0	0	0	0	0	0
2 Patrick G Lyons MBA EVP Operations/Chief of Staff	(i)	408,000	240,000	21,969	22,000	25,135	717,104	C
	(ii)	0	0	0	0	0		0
3 Karen E Boroff PhD Interim Provost Thru 6/2020	(i)	364,886	36,720	10,324	22,000	24,615	458,545	C
	(ii)	0	0	0	0			
4 Alyssa McCloud PhD V.P. Enrollment Management	(i)	331,527	55,000	7,569	22,000	12,393	428,489	0
	(ii)	0						
5 Matthew Borowick MBA Interim V.P. Advancement	(i)	245,725	60,000	7,753	20,000	82,874	416,352	
	(ii)					02,074		
6 Stephen A Graham MBA	(i)	298,097	0 28,091	0 7,569	22,000	19,004	0 374,761	
V.P. Finance & CFO 7Catherine A Kiernan JD	(:)		20,091				374,701	
	(i)	394,597	0	1 570 251	0	76 503	0	0
V.P.& Gen. Counsel Thru 12/19	(1)	394,397	36,049 	1,578,251	22,000	76,582	2,107,479 	
8Kathleen Boozang JD LLM	(ii)	0	0	0	0	0	0	C
Dean, School of Law	(1)	372,427	7,200 	1,624	22,000	12,393	415,644	C
	(ii)	0	0	0	0	0	0	С
9 Joyce A Strawser PhD Dean, Stillman School Business	(i)	278,195	0	1,058	22,000	32,441	333,694	C
	(ii)	0	0	0	0	0	0	C
10Peter W Shoemaker PhD Dean College of Arts & Science	(i)	188,738	0	416	16,053	40,002	245,209	C
	(ii)	0	0	0	0	0	0	С
11Brian B Shulman PhD Dean, School Health & Medica	(i)	284,705	0	2,073	22,000	12,393	321,171	C
	(ii)	0	0	0	0	0	0	С
12 Kevin Willard Head Coach Men's Basketball	(i)	2,028,327	165,000	41,588	22,000	49,258	2,306,173	C
	(ii)	0	0	0	0	0	0	C
13Anthony J Bozzella Head Coach Women's Basketball	(i)	293,436	77,500	18,474	22,000	53,970	465,380	C
	(ii)	0	0	0	0	0	0	C
14Stephen J Lubben JD LLM Law School Professor	(i)	296,785	0	353	22,000	35,077	354,215	C
	(ii)	0	0	0	0	0	0	C
15 Steven J Lorenzet PhD Associate Dean, Stillman Schl	(i)	251,074	0	281	16,440	35,011	302,806	C
	(ii)	0	0	0	0	0		
16 Anthony O Skinn Asst. Coach Men's Basketball	(i)	225,988	5,000	11,600	18,180	11,239	272,007	0
	(ii)					, , , , , , , , , , , , , , , , , , , ,		
17Dennis J Garbini MBA Former V.P. Administration	(i)	103,840	33,293	228,676	22,000	25,765	413,574	0
	(ii)	0			,			
18Tracy H Gottlieb PhD Former V.P. Student Services 19Robin L Cunningham EdS	(i)	252,269	22,973	6,343	18,389	22,859	322,833	0
	(ii)							
	(i)	156,312	0	0 2,911	12.620	11.750	0 183,602	
Int.VP Student Serv thru 10/19				2,911	12,620	11,759	183,602	
	(ii)	1 0	0	0	0	0	0	<u> </u>

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

explanations, and any additional information in Part VI. ▶ Attach to Form 990.

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

2019

Open to Public

OMB No. 1545-0047

DLN: 93493124023551

Inspection

Name	e of the organization n Hall University	PG	o to <u>www.irs.gov/rom</u>	n990 for instruct	ions and th	e iatest	intor	rmation.			-		n numbe			
Da	rt I Bond Issues									22-15	00645					
Pa	(a) Issuer name	(b) Issuer EIN	(c) CUSIP # (d	d) Date issued	(e) Issue	price		(f) Description of purpose		(g) De	(g) Defeased		(h) On behalf of issuer		Pool ncing	
										Yes	No	Yes	No	Yes	No	
Α	NJEFA - Seton Hall - CIF 2014 D	22-1829511	646066DG2	04-29-2004	19,3	69,367	SEE F	PART VI			X		Х	Х		
В	NJEFA - Seton Hall - Issue 2011 A	22-1829511	646065U83	06-10-2011	37,5	78,532	SEE F	EE PART VI X					Х		Х	
С	NJEFA - Seton Hall - CIF 2014 B	22-1829511	646066DG2	04-29-2014	19,3	69,367	SEE F	EE PART VI			Х		Х	Х		
D	NJEFA - Seton Hall - ELF 2014 B	22-1829511	6460658J4	01-30-2014	8,1	31,497	SEE F	EE PART VI			X		Х	Х		
Pa	rt II Proceeds	L	<u> </u>	-												
						A		I	3	C	:			D		
1	Amount of bonds retired					994	4,835		30,855,000		186,	,058		2	202,023	
2	Amount of bonds legally defease	ed					0		0			0			0	
3	Total proceeds of issue					19,369	9,367 37,578,532				19,369,367			8,131,497		
4	Gross proceeds in reserve funds	S		•			0 0				0			0		
5	Capitalized interest from procee	eds					0		0			0 0				
6	Proceeds in refunding escrows .						0		0			0	0			
7	Issuance costs from proceeds .					113	113,339 411,094			113,339			54,722			
8	Credit enhancement from proce	eds					0 0				0			0		
9	Working capital expenditures fro	om proceeds					0 0			0			0			
10	Capital expenditures from proce	eds					0 0			1,014,830			330,900			
11	Other spent proceeds					1,226,845 37,167,438			37,167,438	0			0			
12	Other unspent proceeds						0 0,043			0			0			
13	Year of substantial completion .				20	014		20	11	20	15			2015		
					Yes	No)	Yes	No	Yes	No		Yes		No	
14	Were the bonds issued as part or bonds (or, if issued prior to 201	of a current refunding .8, a current refundir	g issue of tax-exempt ng issue)?			Х		Χ			Х				Х	
15	Were the bonds issued as part or bonds (or, if issued prior to 201				Х				X		Х				Х	
16	Has the final allocation of proce	eds been made? .			Х			Χ		Х			X			
17	Does the organization maintain proceeds?				Х			Х		Х			Х			
Pa	rt Ⅲ Private Business Us															
						Ą			3	C				D		
	Mantha against a sa	1		ala ayyya ad	Yes	No)	Yes	No	Yes	No		Yes	\perp	No	
1	Was the organization a partner financed by tax-exempt bonds?	<u> </u>	<u></u>			Х					X				X	
2	Are there any lease arrangemen	nts that may result ir	n private business use of I	bond-financed		×					X				Χ	

Are there any research agreements that may result in private business use of bond-financed

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

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

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

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

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

counsel to review any research agreements relating to the financed property?

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

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

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Private Business Use (Continued)

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

Exception to rebate?

hedge with respect to the bond issue?

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

Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

Part Ⅲ

b

d

Part IV

C

Arbitrage

0 %

0 %

0 %

0 %

Yes

Χ

Χ

No

Χ

Х

Х

Χ

Х

C

Χ

0 %

0 %

0 %

0 %

Χ

Yes

Χ

Schedule K (Form 990) 2019

D

Χ

Χ

Х

Page 2

Χ

0 %

0 %

0 %

0 %

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

	Yes	No	Yes	No	Yes	No	Yes	No
Are there any management or service contracts that may result in private business use of bond-financed property?		Х				X		Х
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								

Χ

0 %

0 %

0 %

0 %

В

No

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Х

Yes

Х

Χ

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

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

Yes

Yes

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

No

No

Yes

Yes

No

No

Yes

Χ

Nο

Page 3

No

No

D

Yes

Yes

Schedule K (Form 990) 2019

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

the GIC satisfied?

requirements of section 148? . . .

Return Reference	Explanation
PART IV, LINE 2C	REBATE COMPUTATIONS WERE PERFORMED IN THE JUNE AND JULY 2020 TIME FRAME FOR ALL SETON HALL UNIVERSITY BOND ISSUES LISTED IN PART I. THERE IS NO REBATE LIABILITY RELATED TO ANY OF T HE UNIVERSITY'S ISSUES AS OF JUNE 30, 2020. PART I. COLUMN(F) DESCRIPTION OF PURPOSE 1. ON APRIL 29, 2014 THE NJEFA ISSUED CIF BONDS, 2014 SERIES B, AND ADVANCE REFUNDING CIF BONDS, 2014 SERIES D, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPRO VEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. ONE FORM 8038 WAS FILED BY THE NJEFA COVERING BOTH ISSUES, UNDER CUSIP NUMBER 6460660G2. GROSS PROCEEDS FROM BOTH ISSUES WERE \$19,369,3 67 WITH THE 2014 B PORTION BEING \$15,493,539 AND THE 2014 D PORTION BEING \$3,875,828. THE 2014 SERIES B ISSUE IS DISCUSSED BELOW. THE 2014 SERIES D ISSUE ADVANCE REFUNDED THE REMAI NING BALANCE OF THE 2004 SERIES A BOND RELATED TO THREE PRIVATE INSTITUTIONS, OF WHICH THE UNIVERSITY WAS ONE. THE 2004 SERIES A BOND PROCEEDS WERE USED BY THE UNIVERSITY TO FUND CAPITAL IMPROVEMENTS ON ITS CAMPUS. THE UNIVERSITY'S PORTION OF THE \$3,875,828 WAS \$2,724,951, WITH \$1,226,845 BEING DEBT REPAYABLE OVER SEVEN YEARS AND THE REMAINDER REFUNDING OTHER STATE ISSUES THAT PROVIDED GRANT FUNDS FOR CAPITAL IMPROVEMENTS TO THE UNIVERSITY IN PR IOR YEARS. AS A RESULT OF THIS REFUNDING, AMOUNTS PAYABLE BY EACH INSTITUTION, INCLUDING THE UNIVERSITY, WAS ADJUSTED TO TAKE INTO ACCOUNT ALLOCABLE DEBT SERVICE SAVINGS. 2. SETON HALL UNIVERSITY'S 1599LE, 2011 SERIES A, (CUSIP NUMBER 646065U83) WAS ISSUED BY THE NJEFATO TO CURRENTLY REFUND SETON HALL UNIVERSITY'S 1999 SERIES O AND THE 1989 SERIES C ISSUES. THE 1991 SERIES O AND THE 1989 SERIES C ISSUES WAS ISSUED IN JULY 1999 TO REFUND THE UNIVERSITY'S 1991 SERIES D AND 1989 SERIES C ISSUES. THE 1991 SERIES D AND THE 1989 SERIES C ISSUES WHICH WAS ISSUED TO FINANCE CAPITAL IMPROVEMENTS. THE 2001 SERIES B ISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES A ISSUE WHICH WAS ISSUED TO FINANCE CAPITAL IMPROVEMENTS. THE 2001 SERIES B ISSUE WAS ISSUED IN JUNE

Return Reference	Explanation
PART IV, LINE 2C	T REPAYABLE OVER 20 YEARS. BONDS ISSUED TO FINANCE GRANTS MUST BE APPROVED BY THE STATE TR EASURER AND ARE REPAYABLE BY THE STATE SUBJECT TO APPROPRIATION. THE BONDS WERE SOLD BASED ON THE CREDIT OF THE STATE. EACH INSTITUTION ENTERED INTO A GRANT AGREEMENT OBLIGATING THE GRANTEE TO PAY A PORTION OF THE DEBT SERVICE ON THE BONDS ALLOCABLE TO THE GRANT. SETON HALL SPENT THE ENTIRE AMOUNT OF THE DEBT PROCEEDS ALLOCATED TO IT ON CAPITAL IMPROVEMENTS. 4. ON JANUARY 30, 2014 THE NIFER ISSUED HIGHER EDUCATION EQUIPMENT LEASING FUND ("ELF") P ROGRAM BONDS, SERIES 2014 B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE C APITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE ELF 2014 B ISSUE IS ALLOCATED TO EQUIPMENT PURCHASES AT SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION. THE ELF 2014 B ISSUE IS ALLOCATED TO EQUIPMENT PURCHASES AT SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION. THE GROSS PROCEED S OF THIS ISSUANCE WERE \$8,131,497. SETON HALL'S APPORTIONED AMOUNT WAS \$1,522,184. AFTER \$10,253 OF APPORTIONED ISSUANCE COSTS, THE REMAINDER THAT WAS RECEIVED BY SETON HALL WAS \$1,511,931, OF WHICH \$1,181,031 WAS A GRANT AND \$330,900 WAS DEBT REPAYABLE OVER 9 YEARS. B ONDS ISSUED TO FINANCE GRANTS MUST BE APPROVED BY THE STATE TREASURER AND ARE REPAYABLE BY THE STATE SUBJECT TO APPROPRIATION. THE BONDS WERE SOLD BASED ON THE CREDIT OF THE STATE. EACH INSTITUTION ENTERED INTO A GRANT AGREEMENT OBLIGATING THE GRANTES TO PAY A PORTION OF THE DEBT SERVICE ON THE BONDS ALLOCATED TO IT ON EQUIPMENT. 5. SETON HALL UNIVERSITY SUB, 2013 S ERIES D, (CUSIP 6460656D9) WAS ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY SOUP EACH STATE. SUBJECT TO APPROPRIATION OF THE COST OF TER MINATING THE UNIVERSITY'S INTEREST RATE SWAP AGREEMENT WITH CITIBANK, N.A. THAT HEDGED INTEREST RATE EXPOSURE RELATED TO THE 2009 C BONDS, AND TO FINANCE CAPITAL IMPROVEMENTS. THE UNIVERSITY'S 2009 SERIES C BONDS REFUNDED THE UNIVERSITY ISSUE, 1998 SERIES F, ISSUED ON J UNE 29, 1998 BY THE NJEFA TO REFUND A 1991 SERIES D SETON HAL

Return Reference	Explanation
PART IV, LINE 2C	THE UNIVERSITY. THE 2006 SERIES A ISSUE REFUNDED THE UNIVERSITY'S 1996 SERIES E ISSUE, WH ICH WAS FOR CAPITAL IMPROVEMENTS AND FOR REFUNDING THE UNIVERSITY'S 1999 SERIES C ISSUE, W HICH WAS FOR CAPITAL IMPROVEMENTS. 7. SETON HALL UNIVERSITY ISSUE, 2016 SERIES C (CUSIP 64 6066866), WAS ISSUED BY THE NJEFA TO FUND CAPITAL IMPROVEMENTS ON THE UNIVERSITY'S CAMPUS. 8. ON JULY 26, 2016 THE NJEFA ISSUED CIF BONDS, 2016 SERIES A, AND REFUNDED CIF BONDS, 20 06 SERIES A, AND OTHER SERIES OF CIF BONDS, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERS EY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE BONDS WERE ISS UED PRIVATELY (THEREFORE NO CUSIP #)IN THE PRINCIPAL AMOUNT OF \$20,805,115 WHICH WAS ALLOC ATED TO FOURTEEN PRIVATE INSTITUTIONS IN NEW JERSEY. THE UNIVERSITY'S SHARE OF THE PROCEED S WAS \$2,326,537, OF WHICH \$1,134,796 WAS USED TO REFUND THE REMAINING UNIVERSITY BALANCE OF 2006 SERIES A AND THE REMAINDER REFUNDED OTHER STATE ISSUES THAT PROVIDED GRANT FUNDS F OR CAPITAL IMPROVEMENTS TO THE UNIVERSITY IN PRIOR YEARS. THE 2006 SERIES A BONDS PARTIALL Y ADVANCE REFUNDED THE 2004 SERIES A BONDS AND OTHER SERIES OF CIF BONDS FOR CAPITAL IMPROV EMENTS. THE AMOUNTS PAYABLE TO THE STATE BY EACH INSTITUTION WERE ADJUSTED TO TAKE ACCOUNT OF ALLOCABLE DEBT SERVICES SAVINGS. 9. ON DECEMBER 20, 2016 THE NJEFA ISSUED CIF BONDS, 2016 SERIES B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVE MENTS AT INSTITUTIONS OF HIGHER EDUCATION. ONE FORM 8038 WAS FILED BY THE NJEFA ISSUED CIF BONDS, 2016 SERIES B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE COVERING THE ISSUE UNDEF CUSIP NUMBER 646066F54. THE BONDS WERE ISSUED IN THE PRINCIPAL AMOUNT OF \$3 0,676,062 WHICH WAS ALLOCATED TO A TOTAL OF TWELVE PRIVATE INSTITUTIONS IN NEW JERSEY. THE UNIVERSITY'S APPORTIONED AMOUNT, AFTER \$12,153 OF APPORTIONED ISSUANCE COSTS, WAS \$1,500,000. OF THIS AMOUNT THAT WAS RECEIVED BY THE UNIVERSITY, \$766,748 WAS A GRANT AND \$733,252 WAS DEBT REPAYABLE OVER TWENTY YEARS. BOTH AMOUNTS

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Are there any lease arrangements that may result in private business use of bond-financed

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

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

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Schedule K (Form 990) 2019

2019

DLN: 93493124023551

Open to Public Inspection

	e of the organization									Emplo	yer iden	tificatio	on numbe	r		
Seto	on Hall University									22-15	00645					
Pa	rt I Bond Issues									•						
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price		(f) Descripti	on of purpose	(g) De	b		(h) On (i) Finan issuer			
										Yes	No	Yes	No	Yes	No	
A	NJEFA - Seton Hall - Issue 2013 D	22-1829511	6460656D9	07-10-2013	43,9	35,728	SEE I	PART VI			X		X		Х	
В	NJEFA - Seton Hall - ISSUE 2015 C	22-1829511	646066MC1	07-14-2015	24,2	25,807	SEE I	PART VI			Х		Х		Х	
С	NJEFA - Seton Hall - ISSUE 2016 C	22-1829511	646066B66	09-15-2016	38,0	59,002	SEE I	PART VI			Х		Х		Х	
D	NJEFA - Seton Hall - CIF 2016 A	22-1829511		07-26-2016	20,8	05,115	SEE I	PART VI			Х		Х	Х		
Pa	rt II Proceeds									l						
					,	A		ı	3	C				D		
1	Amount of bonds retired					8,930	0,000		3,420,000			0			35,774	
2	Amount of bonds legally defease						0		0			0			0	
3	Total proceeds of issue					43,935	5,728		24,255,807		38,059,002			20,805,115		
4	Gross proceeds in reserve funds						0		0		0			0		
5	Capitalized interest from procee	ds				2,405	5,009		0	1,655,530			0			
6	Proceeds in refunding escrows .						0 0			0			0			
7	Issuance costs from proceeds .					522	2,077	2,077 306,564		403,47		,472	2 48,426			
8	Credit enhancement from proce	eds					0 0		C			0				
9	Working capital expenditures fro	om proceeds					0		0			0			0	
10	Capital expenditures from proce	eds				33,208	3,335		0		36,000	,000			0	
11	Other spent proceeds					7,800	0,307		23,949,243			0		1.0	046,461	
12	Other unspent proceeds					· ·	0		0			0		· ·		
13	Year of substantial completion .				20	014		20	15	20	18		-	2016		
					Yes	No	,	Yes	No	Yes	No		Yes		No	
14	Were the bonds issued as part of bonds (or, if issued prior to 201	of a current refunding 8, a current refundir	g issue of tax-exemp ng issue)?	t	Х				Х		Х		Х			
15	Were the bonds issued as part or bonds (or, if issued prior to 201					Х		Х			Х				Х	
16	Has the final allocation of procee	eds been made? .			Х			Х		Х			Χ			
17	Does the organization maintain proceeds?	adequate books and	records to support t	the final allocation of	Х			X		Х			Х			
Pa	rt III Private Business Us															
						Α		_	3					D		
1	Was the organization a partner i	in a partnership, or a	a member of an LLC.	which owned property	Yes	No		Yes	No	Yes	No		Yes		No	
	financed by tax-exempt bonds?					Х					Х				X	

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Cat. No. 50193E

Private Business Use (Continued)

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

Exception to rebate?

hedge with respect to the bond issue?

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

Term of hedge Was the hedge superintegrated?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

Part Ⅲ

C

d

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8a

Part IV

b

C

Arbitrage

		L
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside	Γ

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

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

counsel to review any research agreements relating to the financed property?

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

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

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

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

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

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

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

Page 2

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Schedule K (Form 990) 2019

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Schedule K (Form 990) 2019

Part V

Arbitrage (Continued)

requirements of section 148? . . .

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

а	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Χ		
b	Name of provider	0		0		0	

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

No

Yes

No

Yes

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Page 3

No

D

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No

Yes

Χ

Yes

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Nο

No

Yes

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Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period?

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

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, OMB No. 1545-0047

DLN: 93493124023551

Open to Public Inspection

Department of the Treasury

Schedule K

(Form 990)

1

2

explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

Internal Revenue Service

Name of the organization **Employer identification number** Seton Hall University 22-1500645 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No NJEFA - Seton Hall - CIF 2016 B 12-20-2016 30,676,062 | SEE PART VI Χ 22-1829511 646066F54 Χ Χ NJEFA - SETON HALL - ISSUE 22-1829511 646066V64 06-29-2017 41,827,193 SEE PART VI Χ Χ Χ 2017 D 34,025,223 | SEE PART VI NJEFA-SETON HALL-ISSUE 2020 22-1829511 6460667B0 06-18-2020 Χ Χ Χ Part ${
m I\hspace{-.1em}I}$ **Proceeds** В C 63,836 0 3 30,676,062 41,827,193 34,025,223 4 5 7 246,539 348,259 266,697 8 1,369,051 9 10 733,252 11 41,478,934 12 32,389,475 13 2019 2017 2023 Yes Yes Yes Yes No No No No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Χ Χ Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Χ **Private Business Use** Part 🏻 Α Yes No Yes No Yes No Yes No

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

Are there any lease arrangements that may result in private business use of bond-financed

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Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

No

D

Yes

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

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

counsel to review any research agreements relating to the financed property?

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

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

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

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

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

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

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Schedule K (Form 990) 2019

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Yes

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

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Term of GIC

the GIC satisfied?

requirements of section 148? . . .

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

В

No

No

Yes

Yes

No

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Page 3

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Calaadiili - 1	ic print - DO NC	T PROCESS	S As Fi	As Filed Data - DLN								: 93493124023551			
Schedule L		Trans	saction	ns with I	ntereste	ted Persons OMB No. 1545-0047									
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			28b, or 28	c, or Form 99	90-EZ, Part V	/, line 38a or 4		•	,	´	2019				
Department of the Tre		o to www.ir		h to Form 99		90-EZ. I the latest inf	ormai	tion)pen (o Pi	ublic		
Internal Revenue Serv	,	10 to <u>11 11 11 11 11 11 11 11 11 11 11 11 11</u>	3.901/10/1	101 1113	i decions and	the latest iii	o i i i i a				Insp				
Name of the org							En	ıploy	er ide	ntifica	tion n				
Seton Hall Univers	sity						1,,	-150	064E						
Part I Exce	ess Benefit Trar	sactions (s	ection 501/	c)(3) section	501(c)(4) an	d section 501(c				s only					
	olete if the organiza							-							
	a) Name of disquali			Relationship b			escripti) Cor	rected?				
					organization			transaction			Ye	es	No		
							+								
2 Fatautha	amount of tax incur														
4958. •	imount of tax incuri	ed by the orga	anization m	anagers or dis	quaimed pers	ons during the	ear u	naer •	Section • S						
3 Enter the a	amount of tax, if an	y, on line 2, al	bove, reimb	oursed by the	organization .				> 9	<u> </u>					
Down II La	ans to and /or l	Even Intere	seted Dou												
	oans to and/or I mplete if the organ				Part V line	383 or Form 99	0 Bar	+ T\/	line 26	· or if	the ora	aniza	tion		
rep	oorted an amount o				, rait v, iiie .	30a, 01 TOTHI 33	U, Pai	LIV,	iiile 20	, 0, 11		u	icioni		
(a) Name of	(b) Relationship	n Form 990, P	art X, line 5 (d) Loan 1	5, 6, or 22 to or from the	(e) Original	(f) Balance	(g)	In	(h	1)	(i) Wri	tten		
(a) Name of interested		n Form 990, P	art X, line 5 (d) Loan 1	5, 6, or 22	(e) Original principal		(g)	In	(h Approv	i) /ed by	(i		tten		
(a) Name of	(b) Relationship	n Form 990, P	art X, line 5 (d) Loan 1	5, 6, or 22 to or from the	(e) Original	(f) Balance	(g)	In	(h	r) ved by	(i) Wri	tten		
(a) Name of interested	(b) Relationship	n Form 990, P	art X, line 5 (d) Loan 1	5, 6, or 22 to or from the	(e) Original principal	(f) Balance	(g)	In	(h Approv	r) ved by	(i) Wri reem	tten		
(a) Name of interested person	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal	(f) Balance	(g) defa	In ult?	(h Approv boar comm	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization	n Form 990, P (c) Purpose of loan	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre	(b) Relationship with organization President/CEO/	n Form 990, P (c) Purpose of loan Home	art X, line 5 (d) Loan t orgai	5, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Ooseph E Nyre PhD	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase	art X, line 5 (d) Loan to organ	5, 6, or 22 to or from the nization? From X	(e) Original principal amount 2,893,750	(f) Balance due	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total . Part III Gra	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase	To To Ing Interes	5, 6, or 22 to or from the nization? From X ested Perso	(e) Original principal amount 2,893,750	(f) Balance due 2,893,750	(g) defa	In ult?	(h Approv boar comm Yes	ved by d or ittee?	(i ag) Wri reem	tten ent?		
(a) Name of interested person (1) Ooseph E Nyre PhD Total . Part III Gra Coi	(b) Relationship with organization President/CEO/ Trustee/Regent ants or Assistar mplete if the organization	Home Purchase ce Benefitianization ans	To To ng Interested "Yes	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 > \$	(f) Balance due 2,893,750 2,893,750 2,893,750	(g) defa	In ult?	(HApprovious boar comm Yes	ved by d or ittee?	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Ooseph E Nyre PhD Total . Part III Gra Coi	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ferm 990, P (c) Purpose of loan Home Purchase	To To Ing Interested "Yes between "Yes and in the second to the second	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750	(f) Balance due 2,893,750	(g) defa	In ult?	(HApprovious boar comm Yes	ved by d or ittee?	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Doseph E Nyre PhD Total . Part III Gra Coi	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ee Benefiti anization ans Relationship erested persor	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 > \$	(f) Balance due 2,893,750 2,893,750 2,893,750	(g) defa	In ult?	(HApprovious boar comm Yes	ved by d or ittee?	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total Part III Gra Cor (a) Name of interested person	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ferm 990, P (c) Purpose of loan Home Purchase	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 2,893,750 \$\rightarrow\$\$ \$ \$\rightarrow\$	(f) Balance due 2,893,750 2,893,750 2,893,750	(g) defa Yes	In ult? No No	(HApprovious boar comm Yes Yes	ved by d or ittee?	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total Part III Grace Core (a) Name of interested person	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ee Benefiti anization ans Relationship erested persor	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 2,893,750 \$\rightarrow\$\$ \$ \$\rightarrow\$	2,893,750 2,893,750 2,893,750 , line 27.	(g) defa Yes	In ult? No No	(HApprovious boar comm Yes Yes	ved by d or ittee? No	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total . Part III Gra Coi	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ee Benefiti anization ans Relationship erested persor	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 2,893,750 \$\rightarrow\$\$ \$ \$\rightarrow\$	2,893,750 2,893,750 2,893,750 , line 27.	(g) defa Yes	In ult? No No	(HApprovious boar comm Yes Yes	ved by d or ittee? No	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total Part III Grace Core (a) Name of interested person	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ee Benefiti anization ans Relationship erested persor	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 2,893,750 \$\rightarrow\$\$ \$ \$\rightarrow\$	2,893,750 2,893,750 2,893,750 , line 27.	(g) defa Yes	In ult? No No	(HApprovious boar comm Yes Yes	ved by d or ittee? No	Yes Yes) Wri	tten ent?		
(a) Name of interested person (1) Joseph E Nyre PhD Total Part III Gra Cor (a) Name of interested person	(b) Relationship with organization President/CEO/ Trustee/Regent	Home Purchase n Ee Benefiti anization ans Relationship erested persor	To To Ing Interested "Yes between and the	5, 6, or 22 to or from the nization? From X X ested Perso	(e) Original principal amount 2,893,750 2,893,750 \$\rightarrow\$\$ \$ \$\rightarrow\$	2,893,750 2,893,750 2,893,750 , line 27.	(g) defa Yes	In ult? No No	(HApprovious boar comm Yes Yes	ved by d or ittee? No	Yes Yes) Wri	tten ent?		

	person and the organization	transaction		organiz rever	ation's
				Yes	No
See Additional Data Table					
Part V Supplemental Inform Provide additional informat	nation tion for responses to questions on	Schedule L (see instruct	ions).		
Poturn Poforonco		Evolonati	on.		

Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).									
Return Reference			Explanati	on					
Part II - Loans to and/or From Interested Persons	proximit business requirer a reside is paid u	ty to the University's cam s on a continuous basis. A nents, the University prov nce. The residence was si	pus and that he use his re accordingly, as the Univers yided Dr. Nyre with a 30 y ubject to, and received th	Dr. Joseph Nyre, President and CEC sidence for official University functions that would ear loan in the amount of \$2,893,75 e approval of, the Board of Regents. ecured by a first mortgage. Annual	ns and satisfy tl 0 to pure Loan pri	hese chase incipal			
Part III - Grants or Assistance Benefiting Interested Persons	persons to whom assistance was pro	vided un	der						

art II - Loans to and/or From nterested Persons	The University requires that as a condition of employment, Dr. Joseph Nyre, President and CEO, live in close proximity to the University's campus and that he use his residence for official University functions and business on a continuous basis. Accordingly, as the University did not own property that would satisfy these requirements, the University provided Dr. Nyre with a 30 year loan in the amount of \$2,893,750 to purchase a residence. The residence was subject to, and received the approval of, the Board of Regents. Loan principal is paid upon maturity or termination of employment. It is secured by a first mortgage. Annual payments are for interest only.
art III - Grants or Assistance enefiting Interested Persons	Seton Hall University is not required to identify interested persons to whom assistance was provided under the Family Educational Rights and Privacy Act (FERPA).
	The brother of Mary Ann Christopher, trustee/Regent, is a partner in the Law Firm of Gibbons P.C. Seton Hall University paid Gibbons P.C. \$1,085,060, for legal services in the year ended June 30, 2020. Robert J. Sloan, Trustee/Regent, was a Vice President at AT&T up until April 1, 2020. Seton Hall University paid AT&T \$234,402 for telephone charges in FY2020. Francis J. Hager, Regent, has a business relationship with Appomattox Capital, the University's Outsourced Endowment Portfolio Manager. The University paid Appomattox management fees IN FY2020 of \$725,895. The two sisters and daughter-in-law of Dr. Tracy H. Gottlieb, Former V.P. for Student Services, served as employees of the University. In fiscal year 2020, they received total compensation and benefits of \$138,677, \$54,705, and \$69,323, respectively. The daughter of Matthew Borowick, M.B.A., Interim V.P. Advancement, served as an employee of the University. In fiscal year 2020, she received total compensation and benefits of \$59,425. Gourmet Dining, LLC, a substantial

contributor, is a University yendor providing food services. Seton Hall University paid Gourmet Dining, LLC \$11,931,839 in FY2020. All transactions with interested persons were conducted at arm's length, for good sufficient consideration, based on terms that are fair and reasonable to and for the benefit of the University. The applicable interested persons had no influence over the decisions to enter into the transactions.

Additional Data

(1) MARY ANN CHRISTOPHER

(1) Robert J Sloan

Software ID: Software Version:

EIN: 22-1500645 Name: Seton Hall University

|--|

Brother of

Trustee/Regent Employer of

Trustee/Regent

(a) Name of interested person	(b) Relationship	(c) Amount of	(d) Descrip
	between interested	transaction	
	person and the		

organization

1,085,060 LEGAL SERVICES

234,402 TELEPHONE CHARGES

ription of transaction

(e)	Sl
rasi	o niz

Yes

e) Sharing
of
ganization
evanuac?

No

No

ion's es?		
No		
No No		

(a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No No

138,677 COMPENSATION & BENEFITS

No

(3) Francis J Hager	Business Relationship with Regent	712,339	Management fees	

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Sister of Officer

(1) Tracy HGottlieb

(a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Vac No

69.323 COMPENSATION & BENEFITS

Nο

				163	- 1
(5) Tracy HGottlieb	Sister of Officer	54,705	COMPENSATION & BENEFITS		N

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Officer

Daughter-in-law of

(1) Tracy HGottlieb

(d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues?

11.931.839 Food Services

No

				Yes	No
(7) MATTHEW BOROWICK	DAUGHTER OF OFFICER	59,425	COMPENSATION & BENEFITS		No

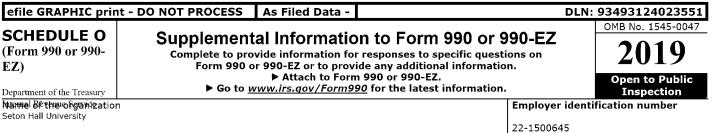
Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Substantial Contributor

(1) Gourmet Dining LLC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493124023551 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Seton Hall University 22-1500645 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 61,000 Appraisal 1 Art-Works of art . . Χ Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 26 1,063,000 Selling price 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles Χ 49,000 Cost 11 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ► (MISCELLANEOUS) Χ 16 47,000 Cost 26 Other ▶ (Trust Assets) Χ 1 1,165,000 FMV 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
,	Auction companies are used to process and/or sell noncash contributions in "silent auctions" at several fundraising events. To the extent Seton Hall University receives donations of publicly traded securities, its investment broker is engaged to sell those securities. The University reimbursed a related party, the Roman Catholic Archdiocese of Newark, for administrative expenses incurred in conducting the Archbishop's annual appeal to raise funds from the congregation for the benefit of the University.
	Schedule M (Form 990) (2019)



990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 1	Seton Hall University (the "University") is the nation's oldest Diocesan Catholic University. In a diverse and collaborative environment, it focuses on academic, ethical, and spiri tual development. Seton Hall students are prepared to be leaders in their professional and community lives in a global society and are challenged by outstanding faculty, a technolo gically advanced setting, and values-centered curricula. The University is home to ten nat ionally recognized and accredited schools located on three campuses, all within 15 miles of New York City. Its main campus is in South Orange, New Jersey, its nationally ranked Law School is in Newark, New Jersey, and its Interprofessional Health Sciences ("IHS") campus is in the City of Clifton and the Township of Nutley, New Jersey. Within these ten school s, the professors of Seton Hall educate, shape and develop approximately 6,100 undergradua te and 4,100 graduate students, who are enrolled in more than 90 rigorous majors. This has led to the University being nationally recognized for academic excellence by the Princeton Review, U.S. News and World Report, and Bloomberg Businessweek. The University remains a pioneer in Catholic education. In June 2015, the University and Hackensack University Hea Ith Network ("HUHN"), acting on behalf of Hackensack University Medical Center ("HUMC"), signed an agreement to establish the principle elements of a long-term relationship to deve lop an undergraduate school of medicine, as well as sponsor graduate medical education pro grams. In October 2015, the University and HUMC formed Kingsland Street Urban Renewal, LLC ("Kingsland") for the purposes of leasing and renovating a location for the University's new IHS campus, which was to house the school of medicine, as well as the University's Col lege of Nursing("CON") and School of Health and Medical Sciences ("SHMS"). Kingsland execu ted the lease in June 2016, with lease commencement in September 2016. Through March 18, 2 018, the University and Human the University and Human

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 1	e SOM academic degree program (the "MD Program"). The University received preliminary accr editation from the Liaison Committee on Medical Education (the "LCME") to operate the MD program in February 2018. The MD program commenced academic operations in July 2018 with the University being the degree-granting institution. On March 19, 2018, the University and H MH reached an agreement for the transition of the MD Program and the full control of the S OM to HMH. Under this agreement, the University's membership interest in Kingsland was transferred to HMH and all costs associated with the Kingsland lease were assumed by HMH, wit h a sublease established with the University continued to perform certain administrative functions for the SOM. The name of the MD Program was changed to the Hackensack Meridian School of Medicine at Seton Hall University. The University retained full control of academic matters associated with the MD Program until such time as the SOM earned independent accreditation as a standalone entity with the LCME and Middle States, and the appropriate actions had taken place related to all other appli cable regulatory bodies. In June 2020, the University was notified by HMH that HMH and the SOM had obtained all the accreditations and regulatory approvals necessary for the SOM to operate the MD Program as a standalone medical school, independent of the University's ac creditation. Effective July 3, 2020, control of the MD Program was transferred to HMH. The University is no longer the degree granting institution. The name of the MD Program was c hanged to the Hackensack Meridian School of Medicine ("HMSOM"). Academic and administrative functions provided by the University were terminated, apart from certain limited function as that could not be completed by July 3, 2020. In addition, the University were terminated, apart from certain limited function so that could not be completed by Duly 3, 2020 and that may arise subsequent to that date. The Strategic Academic Partnership Agreement entered into b

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part III, Line

demic partners in the SOM. Neither HMH nor the SOM are considered related parties of the U niversity.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI	Part VI, Section A, Line 7A: The Board of Regents is responsible for the entire management of the affairs and concerns of the University. The Board of Regents is vested with the re sponsibility, power, and authority to govern the University and shall exercise the corpora te powers of the University under Law. Board of Regent Emeriti do not have voting privileg es. Part VI, Section A, line 7b: The Board of Trustees stand in the stead of the original incorporators of Seton Hall College and have the rights and powers reserved to it by the U niversity's By-Laws. Those powers include the right to amend the University's organizing d ocuments, to authorize the sale of any University property and, most importantly, to elect the Board of Regents. Part VI, Section B, line 11: The Board of Regents adopted a written policy charging the Audit Committee with the responsibility to conduct, on an annual basi s, an appropriate review of the University's completed Form 990 and Form 990-T prior to fi ling with Internal Revenue Service. The Audit Committee is also charged with making an app ropriate report and recommendation to the Board of Regents on their review. Following revi ew by the Audit Committee, Forms 990 and 990-T are submitted to the entire Board of Regents for its review and approval for filing with the Internal Revenue Service. The Board of Regents shall contemporaneously document the meeting at which the Forms 990 and 990-T are reviewed and approved for filing. Part VI, Section B, Line 12c: The University's conflict of interest policy is posted on the University's web site. All new employees are made aware of the policy at the time of hire. For senior management, the University requires an annu al disclosure of significant financial interests in, or employment or consulting relations hips with, entities doing business with the University. These annual disclosures cover bot h senior management and their immediate family members. When such relationships exist, mea sures are taken to address the actual or perceived co

990 Schedule O, Supplemental Information

Return

Reference	
Form 990, Part VI	niversity can ensure and demonstrate that our compensation actions do not inure to the ben efit of a private individual. We can demonstrate that the compensation of all disqualified persons, such as officers, directors, and key employees, is considered reasonable and wou ld ordinarily be paid for like services by like enterprises under like circumstances. The reasonableness of our compensation takes into account all benefits. Any compensation trans actions for these individuals are approved by an authorized body of individuals who have n o conflict of interest. Utilizing a compensation consultant, appropriate compensation data is relied upon for comparability and proof of fair market value, before making a decision. Compensation decisions and reports are contemporaneously documented in the minutes of the meeting of the Committee when the decisions are made. Part VI, Section C, Line 19: The U niversity's By-Laws and its conflict of interest policy are posted on the University's web site.

Explanation

990 Schedule O, Supplemental Information

Return

Reference	- Explanation
Form 990,	Shawna Cooper-Gibson, Ed.D. became VP Student Services on October 14, 2019. Tracy H. Gottlieb, Ph.D. stepped down as VP
Part VII,	Student Services on June 30, 2019. Robin L. Cunningham, Ed. S. was Interim VP Student Services from July 1, 2019 to October
Section A	13, 2019. Katia Passerini, Ph.D. became Executive Vice President and Provost effective June 5, 2020. Accordingly, she is
	reported on the Form 990 with no current compensation (as she did not receive a W-2 in calendar year 2019). Karen E. Boroff,
	Ph.D Interim Provost was in that position up until June 4, 2020. Kimberly A. Capadona, Esq. served as a Regent for the
	University up until her accepting the position of VP and General Counsel effective April 27, 2020. Accordingly, she is reported on
	the Form 990 with no current compensation (as she did not receive a W-2 in calendar year 2019).

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Reference	·
Form 990, Part XI, Line	Provision for uncollectible contributions receivable of \$296,000 less the change in value of split-interest agreements of \$22,000.

Return Explanation
Reference

990 Schedule O, Supplemental Information

COVID-19	In March 2020, in response to the novel coronavirus COVID-19 pandemic, the University transitioned to remote learning for all
PANDEMIC	courses for the remainder of the Spring term. Accordingly, the University processed credits to students for prorated room, board,
	and parking fees for the Spring term.

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

Related Organizations and Unrelated Partnerships

▶ 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.

Open to Public Inspection

2019

DLN: 93493124023551 OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organizat

(Form 990)

Seton Hall University

Employer identification number 22-1500645

Part I Identification of Disregarded Entities. Complete if	the organ	nization answ	ered "Yes	s" on Form	1 990, Part	IV, line	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary ac	ctivity	Legal dom or foreigr	c) icile (state i country)	(d) Total in) come	(e) End-of-year as	ssets	(f Direct co ent	ntrolling	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	is. Compl								ecause			
(a) Name, address, and EIN of related organization	Prim	(b) ary activity	Legal dom or foreigr	c) icile (state n country)	(d) Exempt Cod	e section	Public of	(e) harity status on 501(c)(3))	Dir	(f) rect controlling entity	(13) co	g) n 512(b) ontrolled tity?
(1)Roman Catholic Archdiocese of Newark 171 Clifton Avenue	See Part	VII	ſ	NJ	501(c)(3)		1				Yes	No No
Newark, NJ 07104 22-1487308												
											-	
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.		Ca	t. No. 5013	5Y				Sche	edule R (Form	990) 2	019

Part III Identification of Related Organization one or more related organizations treated	ons Taxable as a P ed as a partnership o	artnership. during the ta	Comple x year.	te if the or	ganization	answered "	Yes" on Forr	n 990,	Part I	V, line 34,	becau	ıse it h	ad
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal Dire domicile contro	(d) Direct controlling entity	Predomina income(rela unrelated excluded freax unde sections 5:	ated, total incor d, rom er	f Share of end-of-year assets		n) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	alor Pe	(k) ercentage wnership	
					514)			Yes	No		Yes	No	
Part IV Identification of Related Organization because it had one or more related organization.	ons Taxable as a C anizations treated as	orporation a corporatio	or Trus n or tru	t. Complet st during t	e if the org he tax year	janization ar 	nswered "Ye	s" on F	orm 9	90, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	Le don (state d	c) egal nicile or foreign ntry)	Direc		(e) Type of entity C corp, S corp, or trust)	(f) Share of total income		(g) of end- year assets	of- Percer owne	ntage	(13)	(i) lon 512(b) controlled entity?
			,,									16	S NO
				-						Calcadada D	/ E	- 000)	2010

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		res	INO
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			<u> </u>
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		ĺ
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q Reimbursement paid by related organization(s) for expenses	1 q	Yes	
	1		No

1							
р	Reimbursement paid to related organization(s) for expenses				1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses				1 q	Yes	
l							
ır	Other transfer of cash or property to related organization(s)				1r		No
S	Other transfer of cash or property from related organization(s)				1s		No
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this lir	e, including covered	relationships and tra	nsaction thresholds.			
l							
1	(a)	(b)	(c)	(d)			
1	Name of related organization	Transaction	Amount involved	Mothod of determining a			
1		type (a-s)	/ who are involved	Method of determining a	nount i	nvolved	1
			7 in out to involved	Method of determining at	mount i	nvolved	
			, who are involved	Method of determining a	mount i	nvolved	
			7 Allouite IIIVoived	Preciou of determining a	mount i	nvolved	

Page **3**

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

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

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

Schedule R (For	m 990) 2019		Page 5						
Part VII	Trt VII Supplemental Information								
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).							
Retur	rn Reference	Explanation							
Part II : Identific Exempt Org.Prin		Primary activity of Roman Catholic Archdiocese of Newark - oversees the Catholic church in certain counties of New Jersey.							