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DLN: 93493122006317

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Return of Organization Exempt From Income Tax

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

Open to Public Inspection

A Fo	or the	2015 ca	lendar year, or tax year beginning	g 07-01-2015 , and ending 06-30-2010	5			<u> </u>
	eck if ap		C Name of organization	·		D Empl	oyer	identification number
	ldress ch	•	Seton Hall University			22-1	500	1645
Na	ame cha	nge	% STEPHEN A GRAHAM Doing business as				. 500	0+3
In	ıtıal retu	m	Doing Dusiness as					
Fir etum/	nal 'termina	ted	Number and street (or P O box if ma	all is not delivered to street address) Room/suit	·e	E Telep	hone	number
	ended r		400 South Orange Avenue			(973) 76	1-9318
Apr	plication	pending	City or town, state or province, count South Orange, NJ 07079	ry, and ZIP or foreign postal code				
			- '					ipts \$ 617,390,000
			F Name and address of principal Mary J Meehan	al officer		s this a grou		
			400 South Orange Avenue			ubordinates No	7	⊤ Yes √
			South Orange, NJ 07079			re all subor	dınat	es Yes No
[Tax	x-exem ı	pt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527		ncluded?		
J W	ebsit e:	: www	w shu edu			•		nst (see instructions) number ► 0928
K Fom	n of org	anızatıon	✓ Corporation Trust Associate	on Other ▶		of formation		M State of legal domicile N.
Do	T	£						
Pa	rt I		mary scribe the organization's mission	or most significant activities				
				IC INSTITUTION OF HIGHER EDUC	ATION			
e e								
Ĕ								
E E	2 0	hock th	us hov • □ if the organization dis	continued its operations or disposed o	f more th	25% of I	tc no	
<u>Š</u>		HECK III	is box > If the organization dis	continued its operations of disposed o	i illore ti	1411 23 70 01 1	LS IIC	;: assets
<i>)</i> ජ	3 N	umber	of voting members of the governir	ig body (Part VI, line 1a)			3	47
ů.	4 N	umber	of independent voting members of	the governing body (Part VI, line 1b)			4	37
Activities & Governance	5 T	otal nur	mber of individuals employed in ca	alendar year 2015 (Part V, line 2a)			5	4,079
5				cessary)			6	788
4	7a ⊤	otal unr	related business revenue from Pa	rt VIII, column (C), line 12			7a	518,000
	b Ne	t unrela	ated business taxable income from	m Form 990-T, line 34			71	b
ėnt						Prior Year		Current Year
	8	Contri	butions and grants (Part VIII, lin	e 1 h)		42,850	,000	44,070,000
	9	Progra	am service revenue (Part VIII, lir	ne 2g)		319,578	,000	336,178,000
Ravenue	10	Invest	tment income (Part VIII, column	(A), lines 3, 4, and 7d)		13,274	,000	9,974,000
ď	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							10,695,000
	12		revenue—add lines 8 through 11	(must equal Part VIII, column (A), line		386,807	,000	400,917,000
	13	12)	and cimilar amounts haid (Bart)	[X, column (A), lines 1-3)		120,304	000	128,991,000
	14		, ,	(, column (A), line 4)		120,504	.,000	<u> </u>
	15		·	e benefits (Part IX, column (A), lines				
&	15	5-10)		e beliefits (Fart IX, column (A), mes		157,634	,000	166,685,000
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			C) (
ŝ	ь	Total fu	ındraısıng expenses (Part IX, column (D)	, line 25) ▶6,552,000				
ш	17			nes 11a-11d, 11f-24e)		99,971	,000	105,115,000
	18	Total	expenses Add lines 13–17 (mus	t equal Part IX, column (A), line 25)		377,909	,000	400,791,000
	19	Reven	ue less expenses Subtract line 1	8 from line 12		8,898	,000	126,000
Net Assets or Fund Balances					Beginni	ing of Curren	t Yea	r End of Year
sets afan	20	Total	assets (Part X, line 16)			637,881	000	618,392,000
A B	21		liabilities (Part X, line 26)			205,411		1
ž Š	22		ssets or fund balances Subtract I		·	432,470		
	t III		ature Block	ine 21 from time 20		.52,	7000	7 1207.00700
Jnde ny kr	r penal nowled	ge and i	belief, it is true, correct, and com	mined this return, including accompany plete Declaration of preparer (other th				
orepa 	rer has	s any kr	nowledge					
		<u> </u>				2017-04-30		
Sign		Signa	ature of officer			Date		
Here	•		PHEN A GRAHAM VP For Finance/CFO					
		<u> </u>	e or print name and title	Dannara's signature				TNI
D-:			rint/Type preparer's name Daniel Romano	Preparer's signature Daniel Romano Da	ire	Check I if	PT:	TN 10504182
Paic		_ -	irm's name F Grant Thornton LLP			self-employed Firm's EIN ▶	1	
	pare	r F	irm's address ► 757 THIRD AVENUE			Phone no (21	12) 54	 12-9609
Jse	Only	У	New York, NY 10017				,	
May+	he IDC	- L	· · · · · · · · · · · · · · · · · · ·	own above? (see instructions)		I		No
iay t	.nc inc	, uiocus	,, and recurr with the piepaid Sil	OTTH ADDITION TO BE INDICACHOUS !				. IV 163 INU

	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	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
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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? If "Yes," complete Schedule D, 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	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, VIII, VIII, IX, or X as applicable			
а	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	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	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	14 b	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	t IV Checklist of Required Schedules (continued)			
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	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, 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, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $$. $$. $$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	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? <i>If "Yes," complete Schedule R, Part I </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	

		24a		
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, 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, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28 c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . \raisetas	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	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	
35a	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

38 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

Yes 38 Form 990 (2015)

Pai	rt V	Statements Regarding Other IRS Filings and Tax Compliance			_
		Check if Schedule O contains a response or note to any line in this Part V			
1.	Entor	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 390		Yes	No
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 1b	_		
		the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		
С		ie organization comply with backup withholding rules for reportable payments to vendors and reportable ig (gambling) winnings to prize winners?	1c	Yes	
2a	-	the number of employees reported on Form W-3, Transmittal of Wage and			
		tatements, filed for the calendar year ending with or within the year covered s return			
h		s return	2b	Yes	
U		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did th	e organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a		y time during the calendar year, did the organization have an interest in, or a signature or other authority			
		a financial account in a foreign country (such as a bank account, securities account, or other financial int)?	4a		No
ь		s," enter the name of the foreign country >			
		is, enter the name of the foreign country >			
	(FBAR				
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did ar	ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?			
_	_		5c		
6a		the organization have annual gross receipts that are normally greater than \$100,000, and did the ization solicit any contributions?	6a		No
b	_	s," did the organization include with every solicitation an express statement that such contributions or gifts			
		not tax deductible?	6b		
7	_	izations that may receive deductible contributions under section 170(c).			
а		re organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and see provided to the payor?	7a	Yes	
ь		s," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
		ie organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	,		
		rm 8282?	7c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year	-		
e	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_	5 1		7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	requir	organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
_		1098-C?	7h		
8	•	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
	durıng	the year?	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did th	e sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section	on 501(c)(7) organizations. Enter			
		tion fees and capital contributions included on Part VIII, line 12 10a			
b	Gross facılıtı	receipts, included on Form 990, Part VIII, line 12, for public use of club]		
11		on 501(c)(12) organizations. Enter			
а	Gross	income from members or shareholders			
b		income from other sources (Do not net amounts due or paid to other sources			
	agains	st amounts due or received from them)	-		
12a	Section	on 4947(a)(1) non-exempt charitable trusts.Is the organization filing Form 990 in lieu of Form 1041?	12a		
b		s," enter the amount of tax-exempt interest received or accrued during the			
13	year Section	on 501(c)(29) qualified nonprofit health insurance issuers.	1		
	J-00110	===(=)(==) quaintea nonprotte nearen maaranee maaeta.			
а		organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
L-		onal information the organization must report on Schedule O	13a		
D		the amount of reserves the organization is required to maintain by the states ch the organization is licensed to issue qualified health plans 13b			
c		the amount of reserves on hand			
14a	Did th	ie organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

) DEG IIII	(2015)		Р	
art VI	Governance, Management, and Disclosure			
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or describe the circumstances, processes, or changes in Schedule O. See instructions.	10b	below,	
	Check if Schedule O contains a response or note to any line in this Part VI			

	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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 37			
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		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?	7 b	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 R	eveni	ıe Cod	e.)
			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		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15 b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16h		
	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?	16 b		
Se	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16 b		

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply $\overline{\checkmark}$ O wn website $\overline{\checkmark}$ A nother's website $\overline{\checkmark}$ U pon request $\overline{\ }$ O ther (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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 year

- 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

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

organizations 연료 등 등 등 등 등 등 기기 interpretations inter	Inless compensation compensation amount of other from the from related compensation tee) organization (W- organizations (W- from the	(c) Position (do not check more than one box, unless person is both an officer and a director/trustee)					more t perso	(B) Average hours per week (list any hours	(A) Name and Title
1b Sub-Total	2/1099-MISC) 2/1099-MISC) organization and related organizations	Former	Highest compensated employee	key employee	Officer	Institutional Trustee	Individual trustee or director	below	
25 Sub-Total									See Additional Data Table
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
25 Sub-Total									
c Total from continuation sheets to Part VII, Section A 🟲			' . F						
d Total (add lines 1b and 1c)				•	•			•	
Total (add lines 1b and 1c)		a \ u.b		· ·					

Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Yes For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the $organization \ and \ related \ organizations \ greater \ than \ \$150,000? \ \textit{If "Yes," complete Schedule J for such that the property of th$ 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

services rendered to the organization? If "Yes," complete Schedule J for su	ch person	5 No
Section B. Independent Contractors		
Complete this table for your five highest compensated independent cont compensation from the organization. Report compensation for the calendary compensation.		
(A) Name and business address	(B) Description of services	(C) Compensation
Gourmet Dining Services, 400 South Orange Avenue SOUTH ORANGE, NJ 07079	Catering	9,765,047
Samuel S Graham Inc, PO Box 319 EAST HANOVER, NJ 07936	General Contracting	4,599,121
Temco Service Industries Inc, One Park Avenue NEW YORK, NY 10016	Housekeeping	3,575,151
Torcon Inc, 328 Newman Springs Road 5 RED BANK, NJ 07701	General Contracting	3,389,775
Hollister Construction Services LL, 339 Jefferson Road PARSIPPANY, NJ 07054	Construction Service	2,515,950
2 Total number of independent contractors (including but not limited to thos	e listed above) who received more than	

Form 99 Part V		Statement o	f Revenue					Page 9
			ule O contains a respor	nse or note to any lir				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a	Federated cam	paigns 1a					
Grants smounts	ь	Membership du	ies 1b					
. Gr	С	Fundraising eve	ents 1c	730,000				
ifts ar/	d	Related organiz	zations 1d					
s, G imil	e	Government grant	s (contributions) 1e	27,417,000				
tion ir S	f	All other contribution	ons, gifts, grants, and 1f	15,923,000		İ		
Contributions, Giffs, Grants and Other Similar Amounts	g		ons included in lines	755,000				
Contributions, Gifts, and Other Similar A	h	Total. Add lines	s 1a-1f		44,070,000			
ı				Business Code				
in a	2a	TUITION & FEES		900099	302,395,000	302,395,000		
₹	b	ROOM AND BOARD		900099	32,861,000	32,861,000		
ac e	С	FEES AND CONTRA GOVERMENT AGEN		900099	75,000	75,000		
Program Service Revenue	d	MEDICAL RESIDEN	ICY PROGRAM	900004	847,000	847,000		
granı	e f	All other progra	am service revenue					
Æ	g	Total. Add lines	s 2a-2f		336,178,000			
	3		ome (including dividen		5,260,000		25,000	5,235,000
	4		ar amounts) stment of tax-exempt bond		7,000		25,555	7,000
	5	Royalties		· > [194,000		104,000	90,000
			(ı) Real	(II) Personal				
	6a	Gross rents	270,000					
	ь	Less rental expenses	59,000					
	С	Rental income or (loss)	211,000	0				
	d	Net rental inco	me or (loss)		211,000			211,000
		Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other than inventory	220,505,000	48,000				
	b	Less cost or other basis and	215,763,000	83,000				
	С	sales expenses Gaın or (loss)	4,742,000	-35,000				
	d	Net gain or (los	ss)		4,707,000			4,707,000
Other Revenue	8a	Ψ						
æ		See Part IV, Iir	ne 18 a					
her	ь	Less direct ex	penses b	460,000 568,000				
ŏ	С		(loss) from fundraising		-108,000			-108,000
	9a		rom gaming activities ne 19 a					
			penses b	vities	0			
	10a	Gross sales of returns and allo		•				
	b c	_	oods sold b (loss) from sales of inv	entory ▶	0			
	11-	Miscellaneou		Business Code 900099	3,173,000	3,173,000		
	11a	DISTRIBUTIO	NS					
	ь	ATHLETICS T	ICKET SALES	900099	1,569,000	1,569,000		4 500 000
	d	PARKING All other reven		812930	1,583,000 4,073,000	2,995,000	389,000	1,583,000 689,000
	e e	Total. Add lines		•		2,555,000	203,000	303,000
	12		See Instructions .		10,398,000	242.045.000	F40.000	42 44 4 000
					400,917,000	343,915,000	518,000	12,414,000

Part IX Statement of Functional Expenses

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

	ot include amounts reported on lines 6b, o, 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	127,000	127,000		,
2	Grants and other assistance to domestic individuals See Part IV, line 22	128,864,000	128,864,000		
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	4,798,000	2,288,000	1,726,000	784,000
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	309,000	309,000		,
7	Other salaries and wages	· · ·	102,361,000	14 469 000	2 092 000
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,083,000	6,041,000	14,468,000 859,000	3,083,000
9	Other employee benefits	26,261,000	21,181,000	4,262,000	818,000
10	Payroll taxes	20,201,000	21,101,000	4,202,000	810,000
10		8,322,000	7,105,000	1,004,000	213,000
11	Fees for services (non-employees)				
а	Management	159,000	128,000	31,000	
ь	Legal	696,000	24,000	672,000	
c	Accounting	227,000	•	227,000	
d	Lobbying	133,000		133,000	
e	Professional fundraising services See Part IV, line 17	, 0		,	
f	Investment management fees	1,141,000		1,141,000	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	23,211,000	20,965,000	2,094,000	152,000
12	Advertising and promotion	1,272,000	932,000	287,000	53,000
13	Office expenses	8,480,000	6,710,000	1,393,000	377,000
14	Information technology	5,923,000	2,079,000	3,844,000	_
15	Royalties	0			-
16	Occupancy	7,382,000	6,912,000	470,000	
17	Travel	7,586,000	6,923,000	392,000	271,000
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0		,	•
19	Conferences, conventions, and meetings	3,118,000	2,291,000	577,000	250,000
20	Interest	4,887,000	4,797,000	90,000	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	16,697,000	15,749,000	898,000	50,000
23	Insurance	1,910,000	23,000	1,887,000	
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)				
а	REPAIRS AND MAINTENANCE	7,468,000	7,109,000	196,000	163,000
b	LOSS ON DEBT DEFEASANCE	4,225,000	4,225,000		
c	SCHOOL OF MEDICINE (SOM)	3,151,000	3,151,000		
d	BOOKS AND SUBSCRIPTIONS	2,771,000	2,716,000	32,000	23,000
e	A II other expenses	4,678,000	991,000	3,555,000	132,000
25	Total functional expenses. Add lines 1 through 24e	400,791,000	354,001,000	40,238,000	6,552,000
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)				

0

0

0

28,259,000

197,987,000

247,187,000

82.932.000

90,286,000

420.405.000

618.392.000 Form 990 (2015)

12,652,000

119.246.000

12,982,000

126,777,000

19

20

22 0

23

25

26

27

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30

31

32

33

0 21

0 24

27,688,000

205,411,000

257,821,000

87.010.000

87,639,000

432.470.000

637.881.000

Form 9	90 (2	2015)			Page 11
Part	Х	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	21,184,000	1	5,014,000
	2	Savings and temporary cash investments	2,378,000	2	11,820,000
	3	Pledges and grants receivable, net	9,093,000	3	13,576,000
	4	Accounts receivable, net	4,058,000	4	4,504,000
	5	Loans and other receivables from current and former officers, directors, trustee key employees, and highest compensated employees. Complete Part II of Schedule L	s, 0	5	0
s:	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Pa II of Schedule L	rt		
je			0	6	0
Assets	7	Notes and loans receivable, net	13,911,000	7	13,196,000
`	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	9,126,000	9	8,198,000
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 534,084,0	00		
	b	Less accumulated depreciation 10b 248,747,0	00 281,520,000	10 c	285,337,000
	11	Investments—publicly traded securities	198,324,000	11	184,137,000
	12	Investments—other securities See Part IV, line 11	92,473,000	12	88,172,000
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	5,814,000	15	4,438,000
	16	Total assets.Add lines 1 through 15 (must equal line 34)	637,881,000	16	618,392,000
T	17	Accounts payable and accrued expenses	37,964,000	17	37,830,000
	18	Grants payable	0	18	0

19

20

21

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34

Net Assets or Fund Balances

Deferred revenue

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets .

complete lines 30 through 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances

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

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

Loans and other payables to current and former officers, directors, trustees,

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

400,917,000

400,791,000

432,470,000

-9,834,000

-2,357,000

420,405,000

No

126,000

ΧI	Recon	cilliation	of Net	Assets

	Check if Schedule O contains a response or note to any line in this Part XI							. [~	ĩ
1	Total revenue (must equal Part VIII, column (A), line 12)								

A), line 12) Total expenses (must equal Part IX, column (A), line 25)

Revenue less expenses Subtract line 2 from line 1

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

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

Investment expenses .

Prior period adjustments . Other changes in net assets or fund balances (explain in Schedule O) .

column (B))

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII

Schedule O

1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

Separate basis Consolidated basis

Separate basis

Schedule O

b Were the organization's financial statements audited by an independent accountant? basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate Consolidated basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

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

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

Both consolidated and separate basis

Cash ✓ Accrual Other

Both consolidated and separate basis

1

2

3

4

5

6

7

8

9

10

2a

2b

2c

3a

3b

Νo

Yes

Yes

Yes

Yes Form 990 (2015)

Yes

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ecto	not box h an or/tr	offic ustee	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations
A Gabnel EstebanPhD President/Regent/Trustee	45 0	x		×				654,871	0	111,229
Most Reverend John J Myers Regent/Trustee	1 0	x						0	0	C
Most Rev James F Checchio Regent	1 0	×						0	0	C
Most Rev Arthur J Serratelli Regent/Trustee	1 0 0 0	x						0	0	C
Most Rev Dennis J Sullivan Regent	0 0	x						0	0	C
Most Rev Kurt R Burnette Regent	0 0	х						0	0	C
Monsignor Robert Coleman Regent/Trustee	45 0 0 0	х						47,981	0	64,118
Monsignor Thomas P Nydegger Regent/Trustee	1 0 45 0	x						750	43,616	38,035
Monsignor Joseph R Reilly Trustee	45 0	×						34,955	0	99,498
Monsignor Robert J Wister Trustee	45 0 5 0	×						33,405	1,000	59,318

(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer tor/t	not one n is and trus			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Most Reverend Bernard A Hebda	1 0	Х						0	0	0
Trustee	0 0	^						0	0	0
Patrick M Murray	10									
Regent/Trustee	0 0	X						0	0	0
Monsignor Michael A Andreano	1 0	X						0	0	0
Trustee	0.0	^						0	0	0
Pamela M SwartzbergEsg	1 0									
Trustee	0 0	Х						0	0	0
Sr Margaret Stallmeyer CDP	10									
Regent		X						0	0	0
	0 0									
Ryan K Duffy		Х						0	0	0
Regent	0 0									
Henry F D'Alessandro	1 0	x							0	
Regent/Trustee	0 0	X						U	U	U
Mark E Ganton	1 0									
Regent	0 0	Х						0	0	0
Phillip N Maisano	10									
Regent/Trustee	0 0	Х						0	0	0

0 0

Regent/Trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer tor/t	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Joseph M Shendan	1 0									
		Х						0	0	0
Regent	0 0									
Eun-Sook Lucy Cho-LeeMD	1 0									
Rogent		X						0	0	0
Regent ————————————————————————————————————	0 0									
David B Gerstein	1 0	.,								
Regent		X						0	0	0
	0 0 1 0									
James E Collins	1 0	×						0	0	_
Regent	0.0	^							0	٥
B. L. LE. LI	1 0									
Richard F Liebler		X						0	0	0
Regent	0 0									
Michael J Lucciola	1 0									
		Х						0	0	0
Regent	0 0									
Francis J Hager	1 0									
Regent/Trustee	0 0	Х						0	0	0
Dr Michael Loeven	1 0									
		X						0	0	0
Regent	0 0									
Richard Mandelbaum	1 0									
Regent		Х						0	0	0
- Regent	0.0			-	_		_			

0 0

John D Hayes Regent

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	m unle:	ore t ss pe	han erso cer tor/t	not one n is and trus	tee)	an	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	Miscy	Miscy	and related organizations
Robert S Basso	1 0									
Regent	0 0	X						0	0	0
James T Boyle Jr	1 0									
		×						0	0	0
Regent	0 0									
Stephen G Waldıs	1 0	×						0	0	0
Regent	0 0	^						0	0	0
Robert B BudelmanEsg	1 0									
		X						0	0	0
Regent	0.0									
James M O'Bnen	1 0	×						_	0	0
Regent	0.0	^						0	0	
Mary Ann Christopher	1 0									
		X						0	0	0
Regent/Trustee	0 0									
Beatnz M Manetta	1 0	×						0	0	0
Regent	0 0	^`								
Helen Lemer	1 0									
Regent		X						0	0	0
	0 0									
Robert A Ley	1 0	x						0	0	
Regent	0 0									

0 0

James L Orsini Regent Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

70,069

58,184

46,688

ol

480,008

349,026

258,243

Compensated Employees, and Inde					ı ı u	siee	э, г	cey Employed	es, nigliest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unle:	ition ore t ss pe	(C (do han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Rıchard C McMahon Regent	0 0	x						0	0	0
Robert J Sloan Regent	0 0	x						0	0	0
Edward C Cerny Regent	0 0	x						0	0	0
Mark D Benjamin Regent	1 0	x						0	0	0
John F Swift Regent	1 0	x						0	0	0
Matthew W Wnght Regent	1 0	×						0	0	0
	1 0									

0 0 45 0

0 0

Χ

Leo J Zatta Regent

Larry A RobinsonEdD

David J BohanMBA

Dennis J GarbiniMBA

V P Administration

Provost & Executive V P

V P University Advancement

(A) Name and Title	(B) Average hours per week (list any hours for related	m unle	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Tracy H GottliebPhD V P Student Services	45 0			x				217,758	0	41,923
Stephen A GrahamMBA VP Finance/CFO	0 0 45 0 0 0			Х				235,152	0	48,623
Catherine A KiernanJD V P General Counsel	45 0			×				263,233	0	55,465
Alyssa McCloudPhD V P Enrollment Management	45 0 0 0			×				318,384	0	33,591
Monsignor Anthony ZiccardiSTD V P Mission & Ministry	45 0 0 0			×				50,822	0	59,318
Patrick G Lyons V P for Athletics & Rec Svcs	45 0			×				455,839	0	43,282
Kathleen BoozangJDLLM Dean, School of Law	45 0				×			285,809	0	35,699
Joyce A StrawserPhD Dean, School of Business	45 0 0 0				×			237,961	0	87,860
Stephen J Lubben JD LLM	45 0					x		259,014	0	56,329

0 0

67,131

1,566,619

Law School Professor

Head Coach Men's Basketball

Kevin Willard

(F)

18,636

Name and Title	A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	one n is and			Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Anthony J Bozzella Head Coach Women's Basketball	45 0					x		358,785	0	121,434
Brian B Shulman PhD Dean, School of Health & Med	0 0 45 0 0 0					x		281,321	0	33,953
Andrea Bartoli PhD Dean, School of Diplomacy	45 0					х		262,082	0	58,127
Joan F GuettiPhD Former Dean, Arts & Sciences	45 0						x	182,492	0	25,750
Patnck E HobbsJDILM Former Dean, School of Law	45 0						x	481,009	0	63,524

103,874

45 0

0 0

Michael S Zavada

Former Dean, Arts & Sciences

efile	GRAPHIC	print -	DO NOT	PROCESS	As Filed	Data

DLN: 93493122006317 OMB No 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section

Public Charity Status and Public Support

Open to Public

Department of the Treasury Internal Revenue Service

Seton Hall University

⊽

990EZ)

Part I

1

2

3

Total

SCHEDULE A

Name of the organization

(Form 990 or

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Inspection Employer identification number 22-1500645 **Reason for Public Charity Status** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section **170(b)(1)(A)(iv).** (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross

receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. 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.

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

Provide the following information about the supported organization(s)

(i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see document? (described on lines (see instructions) instructions) 1-9 above (see instructions)) Yes No

must complete Part IV, Sections A and C.

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from line 4 Section B. Total Support Calendar vear (d)2014 (a)2011 (b)2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2014 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶□ 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

• •			_															
(Complete only	if you	ı che	cked	the box	on	lıne	9	of	Part	I or	ıf the	e organizatio	n ·	faıled	to q	lualify	under	Part
TT TC 11																		

Se	ction A. Public Support	Trans to quant	y under the tee	to noted below,	picase compi	20 1 410 1117	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f)Total
•	iscal year beginning in)	(-)	(-)	(-)	(=)===	(-)	(1)
1	Gifts, grants, contributions, and membership fees received (Do						
	not include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
D	A mounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
_	the amount on line 13 for the year Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f)Total
-	iscal year beginning in) ►		·	· · ·	. ,	· ,	
9 .0a	A mounts from line 6 Gross income from interest,						
.ua	dividends, payments received on	İ					
	securities loans, rents, royalties	İ					
	and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes)	İ					
	from businesses acquired after	İ					
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated	İ					
	business activities not included in line 10b, whether or not the	İ					
	business is regularly carried on						
12	Other income Do not include	İ					
	gain or loss from the sale of capital assets (Explain in Part	ı					
	VI)						
13	Total support. (Add lines 9, 10c,	ı					
14	11, and 12) First five years.If the Form 990 is f	or the organizati	nn's first second	third fourth or f	 	section 501(c)	(3) organization
-	check this box and stop here	or the organization	on 5 m 5 c, 5 c c o m a	, china, rouren, or r	men eax year as a	300000000000000000000000000000000000000	► □
Se	ction C. Computation of Pub	lic Support P	ercentage				
15	Public support percentage for 2015	(line 8, column	(f) divided by line	13, column (f))		15	
16	Public support percentage from 201	14 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
17	Investment income percentage for				nn (f))	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	17		18	
	33 1/3% support tests—2015. If the		,		line 15 is more t		nd line 17 is not
	more than 33 1/3%, check this box	=					▶ □
b	33 1/3% support tests—2014. If the						
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiza	tion 🕨
20	Private foundation. If the organizati	on did not check	a box on line 14	, 19a, or 19b, che	eck this box and s	see instructions	▶┌

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction 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		
2	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		<u> </u>
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
D	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		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			ı
	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	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 supervised	4b		
	by or in connection with its supported organizations			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4 c		
	organization was used exclusively for section 170(c)(2)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
h	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		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5 c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9 b		
С	Did a disqualified person (as defined in line 9(a)) 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 .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	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		
b	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		

Part IV Supporting Organizations (continued)

Sectio	n B.	Type	I Su	pporting	ı Organiz	ations

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 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 organization	2		
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 supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
	,, <u>, , , , , , , , , , , , , , , , , ,</u>		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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2			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 b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	2a		
	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

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

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

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

2b

3a

3b

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Suppor	ting C	rganizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying ti	rust on	Nov 20, 1970 See inst i	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	Sections	A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting c	organization (see

	arter Type III Non-Functionally Integra	ateu 309(a)(3) Suppoi	ting Organizations (co	Jiitiiiueu)
Se	ection D - Distributions			Current Year
1	A mounts paid to supported organizations to accom	plish exempt purposes		
2	A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	orted organizations, in	
3	Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4	A mounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval rec	quired)		
6	Other distributions (describe in Part VI) See instru	uctions		
7	Total annual distributions. Add lines 1 through 6			
	Distributions to attentive supported organizations t details in Part VI) See instructions	to which the organization is re	esponsive (provide	
9	Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3	Excess distributions carryover, if any, to 2015			
a				
b				
C	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
_	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D, line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7			
<u>a</u>				
b				
c	Excess from 2013			
d	From 2014			
е	From 2015			

Employer identification number

22-1500645

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Seton Hall University

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

<u>www.irs.gov/form990</u>.

2015
Open to Public Inspection

Service
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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

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

2	Political expenditures			>	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	; >	\$
2	Enter the amount of any excis	e tax incurred by organization manag	jers under sectio	n 4955 >	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	20 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	rt I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1 (c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to of	ther organizations	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	e amount paid fro lirectly delivered	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a
	(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-
2					
3					
4					
5					
6					
For I	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990)-EZ. (Cat No 50084S Schedule C (F	Form 990 or 990-EZ) 2015

P	art II-	A	Complete if the organization is exempt under section $501(c)(3)$ and file under section $501(h)$.	ed Form 5768	(election
	Check	•	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated groexpenses, and share of excess lobbying expenditures)	oup member's name	e, address, EIN,
	Check	•	If the filing organization checked box A and "limited control" provisions apply		
				/-\ E:::	/L \ A661:-44

	Limits on Lobb	pox A and "limited control" provisions apply ying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public	opinion (grass roots		•
b	lobbying) Total lobbying expenditures to influence a legis	slative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and	1b)		
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines	1c and 1d)		
f				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of I	ine 1f)		
h	Subtract line 1g from line 1a If zero or less, er	ter -0 -		
i	Subtract line 1f from line 1c If zero or less, en	ter - 0 -		
j	If there is an amount other than zero on either reporting section 4911 tax for this year?	line 1h or line 1i, did the organization file Form 4720		
j		line 1h or line 1i, did the organization file Form 4720	No	

	4-Year Ave (Some organizations that made a so columns below. See th		ection do not	have to com		ne five
	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c)2014	(d)2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
			·	Sche	dule C (Form 990	or 990-EZ) 2015

	edule C (Form 990 or 990-EZ) 2015				Pa	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has I filed Form 5768 (election under section 501(h)).	NOT				
_		(-	a)		(b)	
ror e activ	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity		No	١.,	A moun	t
		Yes		' <u></u>		
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?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?	Yes				1,200
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?	Yes				18,450
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			:	141,926
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		Νo			
j	Total Add lines 1c through 1i				:	161,576
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	4		
Ь	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	3 3	-01/-	\			
Раг	t III-A Complete if the organization is exempt under section $501(c)(4)$, section ! $501(c)(6)$.	501(c)(5),	or s	ectio	n
			ſ		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	-01/-	\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3		
	rt III-B Complete if the organization is exempt under section 501(c)(4), section ! 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" (
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				
		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

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

Return Reference	Explanation
Part II-B, Line 1(i) O ther Lobbying Activities	Seton Hall University lobbied state legislators regarding annual independent college appropriations, student aid for independent college students and School of Medicine support. 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 \$28,430. Those costs have been reported on Line 7 (other salaries and wages) and not separately identified on Line 11 (d) in Part IX, statement of Functional Expenses.

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SCHEDULE D (Form 990)

Department of the

Internal Revenue Service

Treasury

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493122006317OMB No 1545-0047

2015

Open to Public Inspection

	me of the organization on Hall University			Employer i	identification nun	nber
<i>3</i> e0	on Hall Officersity			22-15006	545	
Pa	Organizations Maintaining Dono Complete if the organization answer			nds or Ac	counts.	
		(a) Donor advised funds		(b)Funds	s and other accou	nts
L	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
1	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to			radvised	☐ Yes	┌ No
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				oose TYes	∏ No
Pa	rt III Conservation Easements. Compl	ete if the organization a	nswered "Yes" oı	າ Form 990), Part IV, line	7.
L	Purpose(s) of conservation easements held by the	he organization (check all th	nat apply)			
	Preservation of land for public use (e g , recreducation)	reation or	Preservation of an	historically	ımportant land aı	-ea
	Protection of natural habitat	Γ	Preservation of a	ertified hist	coric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation	on contribution in th	ie form of a d	conservation	
					eld at the End of	the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easem		1 (2)	2b		
c	Number of conservation easements on a certified		` '	2c		
d	Number of conservation easements included in (historic structure listed in the National Register	c) acquired after 8/17/06, a	and not on a	2d		
3	Number of conservation easements modified, tra	nsferred, released, extingui	shed, or terminated	d by the orga	anization during th	ne
	tax year ▶					
1	Number of states where property subject to cons	ervation easement is locate	ed ▶	_		
5	Does the organization have a written policy rega violations, and enforcement of the conservation		g, inspection, hand	ling of	☐ Yes ☐	- No
5	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of viol	ations, and enforcir	ıg conservat	tion easements di	ırıng the
	>					
7	A mount of expenses incurred in monitoring, insp ▶ \$	ecting, handling of violation	s, and enforcing co	nservation 6	easements during	the y ear
3	Does each conservation easement reported on II (B)(I) and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the re	equirements of sect	:ion 170(h)(·	- No
•	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the tex- the organization's accounting for conservation ea	t of the footnote to the orga				
a r	t III Organizations Maintaining Collection Complete if the organization answer			or Other S	imilar Assets	•
La	If the organization elected, as permitted under S works of art, historical treasures, or other simila					

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenue included on Form 990, Part VIII, fine 1

service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

\$ _______102,000

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

▶\$_____1,175,000

2011		Output land Maintainia	- Callantiana af	A 111-		I T		. 01	Ciil-			r age 🚣
i e l	t III	Organizations Maintaining (continued)	Collections of	Art, HIS	torica	ııreasuı	res, oi	r Ot	ner Similar	ASS	ets	
3		the organization's acquisition, acc ction items (check all that apply)	cession, and other r	ecords, ch	eck any	of the follo	wing tha	at ar	e a significant	use o	fits	
а	~	Public exhibition		d	Г	oan or excl	nange p	rogra	ims			
b	~	Scholarly research		е	Γ c	Other						
c	~	Preservation for future generations										
4		de a description of the organization	n's collections and e	explain how	they fu	ırther the or	ganızat	ion's	exempt purpo	se in		
5	Part) Durin	(III g the year, did the organization sol	ıcıt or receive dona	tions of art	t, histori	ıcal treasur	es or ot	hers	sımılar			
		s to be sold to raise funds rather t		d as part o	f the org	ganızatıon's	collect	ion?	Г	Yes	✓ No	•
Pa	rt IV	Escrow and Custodial Arr Complete if the organization Part X, line 21.		on Form 9	990, Pa	art IV, line	9, or 1	repo	rted an amo	unt c	n Forn	n 990,
1a		e organization an agent, trustee, cu ded on Form 990, Part X?	stodian or other int	ermediary	for cont	cributions oi	other a	asset		Yes	∏ No	•
b	If'	'Yes," explain the arrangement in F	Part XIII and compl	ete the foll	lowing ta	able				A mour	nt	
c	Ве	ginning balance						1 c				
d	A d	ditions during the year						1 d				
e	Dis	tributions during the year						1e				
f	En	ding balance						1 f				
2 a	Did th	ne organization include an amount	on Form 990, Part X	(, line 21, f	for escr	ow or custo	dıal acc	ount	liability?	Yes	┌ No	•
b	If"Y∈	es," explain the arrangement in Par	t XIII Check here	ıf the expla	ınatıon l	has been pr	ovided	ın Pa	rt XIII			
Pa	rt V	Endowment Funds. Compl										
			(a)Current year	(b) Pnor	year	b (c) Two y	ears back	k (d)Three years bad	k (e)Four ye	ars back
1a	Begir •	nning of year balance	263,948,000	27:	2,174,000	24	1,466,00	0	227,198,0	00	234	4,593,000
b	Conti •	ributions · · · · · · ·	4,424,000	:	3,227,000		3,576,00	0	899,0	00		679,000
c	Net II Iosse	nvestment earnings, gains, and	-879,000	10	0,750,000	4	1,387,00	0	25,222,0	00		2,077,000
d	Grant •	s or scholarships	2,807,000	:	2,742,000		2,658,00	0	2,785,0	00		2,611,000
е		r expenditures for facilities rograms 	15,669,000	1!	5,988,000	1	0,262,00	0	8,285,0	00	7	7,591,000
f	A dmı	nistrative expenses	2,113,000	:	3,473,000)	1,335,00	0	783,0	00		-51,000
g	End o	f year balance	246,904,000	26:	3,948,000	27	2,174,00	0	241,466,0	00	227	7,198,000
2	Provi	de the estimated percentage of the	current year end b	alance (lın	e 1 g, co	lumn (a)) h	eld as					
а	Board	l designated or quasi-endowment 🕽	39 300 %									
b	Perm	anent endowment ▶ 36 600 %										
c		orarily restricted endowment > ercentages on lines 2a, 2b, and 2c	24 100 % should equal 100%	/ o								
3а		nere endowment funds not in the polization by	ossession of the org	anızatıon t	hat are	held and ac	lmınıste	ered t	for the		Yes	No
	(i) un	related organizations								3a(i)	Yes	
		elated organizations								3a(ii)		No
ь 4		es" on 3a(II), are the related organi ribe in Part XIII the intended uses						•	[3b		
Pai	rt VI	Land, Buildings, and Equi		- 5 0/	00 D-		44-6-		000 D-		10	
		Complete if the organization Description of property	answered Yes to	Cos	(a) t or other	basis Cost	(b) or other t (other)		Accumulate (c)depreciation	ed	ne 10. (d)Book	
1a	Land			 `	,	,	3,022	2,000				3,022,000
	Buildin	gs • • • • • • • • • • • • • • • • • • •					457,969		196,197	.000		1 ,772,000
c	Leaseh	nold improvements		. [
d	Equipm	nent					61,755	5,000	52,550	.000	ġ	9,205,000
_	Othor			I						1		

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

11,338,000

285,337,000

(a) Description of security or category (including name of security)		(b)Book value	(c)Method of valuation Cost or end-of-year market valu
(1)Financial derivatives			2000 on one or year market vall
(2)Closely-held equity interests (3)Other	+		
A) OUTSIDE TRUST		7,988,000	F
(B) HEDGE FUNDS		23,331,000	F
(C) COMMINGLED FUNDS		29,924,000	F
(D) PRIVATE EQUITY		8,308,000	F
(E) VENTURE CAPITAL		3,034,000	F
(F) PRINCIPAL GLOBAL REAL ESTATE		9,031,000	F
(G) EMERGING MARKET EQUITIES		6,556,000	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	<u> </u>	88,172,000	
Complete if the organization answered '			
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market valu
	answered 'Yes' on Form	n 990, Part IV, line 1:	1d See Form 990, Part X, line 15
		n 990, Part IV, line 1	1d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1:	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization		n 990, Part IV, line 1	
Part IX Other Assets. Complete if the organization (a) Descrip	otion		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization (a) Descrip	otion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization (a) Descrip	otion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability	nization answered 'Ye		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	(b) Book value		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE U S GOV'T GRANTS	(b) Book value		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE U S GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG	(b) Book value 11,491,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE U S GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG INTEREST RATE SWAP AGREEMENTS	(b) Book value 11,491,000 8,536,000 7,200,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25.	(b) Book value 11,491,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE US GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG INTEREST RATE SWAP AGREEMENTS	(b) Book value 11,491,000 8,536,000 7,200,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE US GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG INTEREST RATE SWAP AGREEMENTS	(b) Book value 11,491,000 8,536,000 7,200,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE US GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG INTEREST RATE SWAP AGREEMENTS	(b) Book value 11,491,000 8,536,000 7,200,000	es' on Form 990, Pa	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes REFUNDABLE US GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG INTEREST RATE SWAP AGREEMENTS	(b) Book value 11,491,000 8,536,000 7,200,000	es' on Form 990, Pa	(b) Book value

Schedule D (Form 990) 2015

1 2 264,839,000

	Net unrealized gains (losses) on investments	2a	-9,834,000		
b	Donated services and use of facilities	2b	511,000		
c	Recoveries of prior year grants	2 c			
d	Other (Describe in Part XIII)	2d	-1,626,000		
e	Add lines 2a through 2d			2e	-10,949,000
3	Subtract line 2e from line 1			3	275,788,000
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	1,141,000		
b	Other (Describe in Part XIII)	4b	123,988,000		
c	Add lines 4a and 4b			4c	125,129,000
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line	12)		5	400,917,000
Part X	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990,			s per	Return.
1	Total expenses and losses per audited financial statements			1	277,025,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	511,000		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	1,454,000		
e	Add lines 2a through 2d			2e	1,965,000
3	Subtract line 2e from line 1			3	275,060,000
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,141,000		
b	Other (Describe in Part XIII)	4b	124,590,000		
c	Add lines 4a and 4b			4c	125,731,000
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, Iii	ne 18)	5	400,791,000

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

Total revenue, gains, and other support per audited financial statements .

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

Part XIII Supplemental Information

Explanation

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

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional

information

Return Reference

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. Collections are utilized by students, faculty, administrators and the general public. Their usage helps achieve the ultimate goal of advancing the educational and research mission of the University

Return Reference	Explanation
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 effects 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 challenged 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 tax years ended June 30, 2013, 2014, 2015, and 2016 are still open to audit for both federal and state purposes. The University believes that there are no material uncertain tax positions within its financial statements.
Part XI, Line 2D - Other	Change in value of interest rate SWAP agreements of \$1,626,000
Part XI, Line 4b - Other	Financial Aid of \$124,590,000, add limited partnership gain of \$25,000, less rental expense of \$59,000, and less special events expenses of \$568,000
·	Provision for uncollectible contributions receivable of \$827,000, plus special events expense of \$568,000 and rental expense of \$59,000
Part XII, Line 4B - Other	Financial aid of \$124,590,000

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SCHEDULE E (Form 990 or 990-EZ)

Schools

▶Complete if the organization answered "Yes" on Form 990,

Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No 1545-0047

Open to Public **Inspection**

▶ Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Service Name of the organization **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? 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," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Yes 4c d Copies of all material used by the organization or on its behalf to solicit contributions? Yes 4d 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 a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Nο **5**c c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 54 Νo e Educational policies? Νo 5e f Use of facilities? Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo 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? 6b Νo 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

Yes

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 NJ State Education Opportunity Fund

Schedule E (Form 990 or 990-EZ) (2015)

efile GRAPHIC print - DO NOT PROCESS			As Filed Da	ta -	DLN:	93493122006317	
SCHEDULE F (Form 990)		tement of	Activities (Outside the Unit	ed States	OMB No 1545-0047	
Denastment of the Treasury			·	Part IV, line ► Attach t	on answered "Yes" to Form 14b, 15, or 16. To Form 990. and its instructions is at w	·	2015 Open to Public Inspection
	e of the organizatio n Hall University	n					tification number
Pa					he United States. orm 990, Part IV, line	22-1500645 14b.	
1	For grantmake	s. Does the ance, the gr	organızatıon r antees' elıgıbı	maintain record	ds to substantiate the nts or assistance, and	amount of its grants	☐ Yes ☐ No
2	assistance outs	de the Unite	d States		procedures for monitor		ts and other
3	(a) Region	on (The follow	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in region
	Central America a Caribbean	and the			Investments		29,132,000
	East Asia and the	Pacıfic	1	1	Program Services	Student Recruitment	55,000
	East Asia and the	Pacıfic			Program Services	MBA Program	43,000
	SEE PART V				Program Services	Study Abroad	91,000
	East Asia and the	Pacıfic			Program Services	MSPA PROGRAM	29,000
	Sub-total Total from continu to Part I	uation sheets	1	1			29,350,000
С	Totals (add lines	3a and 3b)	1	1			29,350,000

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

Cat No 50082W

Schedule F (Form 990) 2015

rganization	section and EIN (if applicable)	(3)	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Page 2

t IIII Grants and Ot Part III can be	ther Assistance duplicated if addit	to Individuals	Outside the Unit	ted States. Complete	ıf the organızatıon a	nswered "Yes" to Form	990, Part IV, line 16
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

√ Yes 8621)

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

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 file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990) Yes Nο

Nο

Page 5

method; amounts of investments vs. expenditures per region); Part 11, line 1 (accounting method); Part 111
(accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete
this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Schedule F (Form 990) 2015

Return Reference	Explanation
	By virtue of its investments in various limited partnership investments, Seton Hall Univer sity 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 fore ign forms were attached to the University's Form 990-T

990 Schedule F, Supplemental Information

Return Reference Explanation

Part I. Lines 3, (2)&(3)

, , , , , ,	' '		•	•	-	,
	the Stillman School continued to offer an executive-st	yle ME	ЗА р	rogram in collabora	ition w i	
	th Viagold International Education Management Group	ın Zhı	uhaı,	, China Students ar	e taught	
	in Mandarin by a combination of Stillman faculty and fa	aculty	emp	oloyed by Chinese u	ınıversıt	
	ies, and the students spend a w eek during their final s	semes	stera	at Seton Hall's Sout	h Orang	

e campus to complete the MBA program and participate in Graduate Commencement

Support for student recruitment and academic exchange program developments. During FY 2016.

990 Schedule F, Supplemental Information

Return Reference Explanation

Part I, Line 3, (4) The University expends funds outside of the United States on various study abroad programs

in various countries Students enrolled in study abroad programs pay their fees relating to travel and other expense directly to Seton Hall University and the University remits payments to the overseas entities on the students' behalf

990 Schedule F, Supplemental Information

Return Reference

Part I, Line 3, (5)	in January 2016, our AACSB-accredited Stillman School of Business, one of two schools in N
	ew Jersey to hold this accreditation for its accounting program and one of less than 200 s
	chools to hold this distinction w orldwide, began its partnership with the University of Sa
	nto Tomas (UST) in Manila, Philippines The UST faculty cohort is comprised of ten (10) fa
	culty members w ho have each been accepted to the Stillman's Master of Science in Professio
	nal Accounting degree program. This program is thirty (30) credits and the Stillman School

has offered one to two courses per semester Students are fully engaged with the Stillman

School of Business faculty using the Seton Hall University learning platforms

Explanation

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DLN: 93493122006317

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ

▶Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

ame of the organization eton Hall University			E	Employer ide	ntification number	
			2	22-1500645		
Part I Fundraising Activities.Compl Form 990-EZ filers are not requi	_		on Form 9	990, Part IV	, line 17.	
Indicate whether the organization raised fur	nds through any of t	he following activities C	heck all that	t apply		
e ☐ Solicitation of non-government grants						
b Internet and email solicitations		f Solicitation of g	overnment g	rants		
c Phone solicitations		g	sing events			
d In-person solicitations						
Did the organization have a written or oral a or key employees listed in Form 990, Part \ services?					es No	
b If "Yes," list the ten highest paid individua to be compensated at least \$5,000 by the		users) pursuant to agree	ements unde	r which the fi	undrais er is	
(i) Name and address of individual or entity (fundraiser)	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(or reta fundraise	int paid to ined by) r listed in (i)	(vi) A mount paid to (or retained by) organization	
	Yes No					
otal	•					
B List all states in which the organization is reg registration or licensing	Jistered or licensed	to solicit contributions o	or has been r	notified it is e	exempt from	

Part II	Fundraising	Events

Fundraising Events.

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

	receipts greater than \$5,000.		on Form 990-EZ, line	s I and 6D. List even	ts with gross
		(a)Event #1 Law Schl Dinner (event type)	(b)Event #2 Son Latino (event type)	(c)Other events 0 (total number)	(d) Total events (add col (a) through col (c))
Expenses Reversie	1 Gross receipts	216,000 84,000 132,000 0 0 85,000	164,000 42,000 0 0	768,000 482,000 286,000 0 13,000 2,000 209,000	730,000 460,000 0 13,000 2,000 323,000
Direct	9 Other direct expenses	8,000	7,000	93,000	108,000
ā	10 Direct expense summary Add lines 4	through 9 in column (d)	•	568,000
Dar	11 Net income summary Subtract line 1: rt III Gaming.	0 from line 3, column (d)		-108,000
I- GI	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	19, or reported mor	e than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
d Expenses	2 Cash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes % No	Yes% No	☐ Yes%_ ☐ No	
	7 Direct expense summary Add lines 2	through 5 in column (d)		
	8 Net gaming income summary Subtrac	ct line 7 from line 1, col	umn (d)		
9 a	Enter the state(s) in which the organizat		•		Yes No
b	If "No," explain				
10a	, 5			the tax year?	Yes No
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS DLN: 93493122006317 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number Seton Hall University 22-1500645 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (d) A mount of cash (a) Name and address of **(b)** EIN (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

(a) Type of grant or assistance

Schedule I (Form 990) 2015

(f)Description of non-cash assistance

Part III can be duplicated if addi	tional space is needed		

(c)A mount of

	recipients	cash grant	non-cash assistance	(book,					
				FMV , appraisal, other)					
(1) Federal A wards	2087	11,016,000							
(2) State of New Jersey Awards	1683	12,018,000							
(3) Institutional Support	10089	105,830,000							
Part IV Supplemental Int	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.								

(d) A mount of

(e)Method of valuation

Return Reference Explanation Part I, Line 2 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 ensuring that the funds are expended for the intended purposes

Part II, Line 1, (h) Purpose of Village of South Orange - Construction of South Orange Performing Arts Center

(b) Number of

Additional Data

Village of South Orange NJ

101 South Orange Avenue South Orange, NJ 07079 Society of the Sisters of

110 Crusader Ave West St St Paul, MN 55118

350 Bernardsville Rd Mendham, NJ 07945 Saint Paul's Outreach

Christian

22-6002309

22-2138057

41-1621192

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

24,000

25,000

25,000

(h) Purpose of grant

or assistance

General Purpose

General Purpose

See Part IV

(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal,	157
or government				assistance	other)	

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

115

501(C)(3)

501(C)(3)

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 13-6844298 501(C)(3) 11,000 Children's Specialized General Purpose Hospital 150 New Providence Rd 22-6019101 501(c)(3) 15,000 General Purpose

10,000

General Purpose

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

501(C)(3)

Mountainside, NJ	07092
JFK Johnson Reha	abilitation
Institute	
65 lames St	

Hackensack UMC Foundation

22-2339534

Edison, NJ 08820

30 Prospect Ave Hackensack, NJ 07601

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) Leadership Education for Asia 95-3879677 501(C)(3) 10,000 General Purpose Pacific

327 E 2nd St Ste 226 Los Angeles, CA 90012 Ivv Hill Neighborhood 30-0222590 501(C)(3) 7,000 General Purpose

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

Newark, NJ 07106

Association 209 Ivv St

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule J

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

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

2015

OMB No 1545-0047

DLN: 93493122006317

Open to Public Inspection

Schedule J (Form 990) 2015

Cat No 50053T

Department of the Treasury

(Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

	al Revenue Service ne of the organization		Employer identificat	ion nu	mber	
Seto	on Hall University		22.4500645			
Dа	rt I Questions Regarding Compensation		22-1500645			
1 4	Questions Regulating compensation				Yes	No
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to				103	110
	First-class or charter travel	√	Housing allowance or residence for personal use			
	▼ Travel for companions		Payments for business use of personal residence	ĺ	Ì	Ì
	Tax idemnification and gross-up payments	~	Health or social club dues or initiation fees	Ì	Ì	
	Discretionary spending account	~	Personal services (e g , maid, chauffeur, chef)	İ		
b 2	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses desc Did the organization require substantiation prior to reim	rıbed	above? If "No," complete Part III to explain	1b		No
2	directors, trustees, officers, including the CEO/Executi			2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensation	apply	y Do not check any boxes for methods			
	√ Compensation committee		Written employment contract			
	✓ Independent compensation consultant	~	Compensation survey or study			
	Form 990 of other organizations	~	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	rt V I :	${ m I}$, ${ m Section \ A}$, ${ m Iine \ 1a}$ with respect to the filing organization	n		
а	Receive a severance payment or change-of-control pay	ymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplementa	Inone	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-base	ed cor	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provi	de th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ns mu	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line compensation contingent on the revenues of	ne 1a	a, did the organization pay or accrue any			
а	The organization?			5a	Yes	
b	Any related organization?			5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, line compensation contingent on the net earnings of	ne 1a	a, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, ling payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.			7	Yes	
8	Were any amounts reported on Form 990, Part VII, pair subject to the initial contract exception described in Rein Part III		·	8		No
9	If "Yes" on line 8, did the organization also follow the resection $53.4958-6(c)$?	ebutt	able presumption procedure described in Regulations	9		

	my for each noted marriag	ar mast equal the total	amount of Form 3307	rate vii, section ii, iii	с та, аррисавте сотат	im (b) and (b) amount	o for that marriadar
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-M I	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	• •
	Base	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	(i) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior

compensation

Schedule J (Form 990) 2015

See Additional Data Table

Form 990

Schedule J (Form 990) 2015

Page 3

Schedule J (Form 990) 2015

BENEFITS IN SCHEDULE J. PART II The University paid membership fees to a country club for its men's basketball coach, Keyin Willard, women's

Schedule J (Form 990) 2015

basketball coach Anthony J Bozzella, and V P for Athletics & Recreational services, Patrick G Lyons Their attendance at these organizations were exclusively business related in order to assist University Advancement with donor cultivation and fundraising efforts. Such fees totaled \$11,722, \$22,980, and \$19,864, respectively. They are included in nontaxable benefits in Schedule J. Part II

Part I, Line 5a Patrick G Lyons, V P for Athletics & Recreation Services, received \$25,000 of incentive compensation for reaching certain progress goals associated

with Athletic Department revenue David J Bohan, V P Advancement, received \$50,000 of incentive compensation for reaching certain fundraising goals

Part I, Line 7 ALYSSA MCCLOUD, V P ENROLLMENT MANAGEMENT, received a \$55,000 performance based bonus approved by management She did not have

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

Form 990, Schedule J, Par	t II							
(A) Name and Title		(B) Breakdown of (i) Base Compensation	W-2 and/or 1099-MIS (ii) Bonus & Incentive	(iii) O ther reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1A Gabnel EstebanPhD	(1)	493,007	compensation 146,250	compensation 15,614	21,200	90,029	766,100	0
President/Regent/Trustee	(11)	0	-		-	-		0
1Larry A RobinsonEdD Provost & Executive V P	(I) (II)	344,684 	125,000	10,324	21,200	48,869	550,077	0
2David J BohanMBA V P University Advancement	(1)	290,768	50,000	8,258	21,200	0 36,984	407,210	0
	(11)	0	- 0	- 0	- 0	- 0		0
3 Dennis J GarbiniMBA V P Administration	(1)	247,947	0	10,296	20,423	26,265	304,931	0
	(11)	0	- 0	- 0	- 0	0	0	0
4 Tracy H GottliebPhD V P Student Services	(I) (II)	209,267 0	0	8,491 	17,107 	24,816 	259,681 	0
5Stephen A GrahamMBA	(1)	227,735	0	0 7,417	18,540	30,083	283,775	0
VP Finance/CFO	(11)	0	-					0
6 Catherine A KiemanJD V P General Counsel	(1)	254,975	0	8,258	20,956	34,509	318,698	0
	(11)	0	- 0	- 0	- 0	<u>-</u> 0	0	0
7 Alyssa McCloudPhD V P Enrollment Management	(1)	255,938 0	55,000 	7,446 	20,647 	12,944 	351,975 	0
8Stephen J Lubben JD LLM	(1)	258,790	0	0 224	21,200	0 35,129	315,343	0
Law School Professor	(11)	0	-				313,343	0
9Joan F GuettiPhD Former Dean, Arts & Sciences	(1)	181,465	0	1,027	14,626	11,124	208,242	0
	(11)	0	0	- 0	- 0	0	0	0
10 Patnck E HobbsJDLLM Former Dean, School of Law	(1)	359,216	112,155	9,638	21,200	42,324	544,533	0
11Kathleen BoozangJDLLM	(1)	283,867	0	0	0	0	0	0
Dean, School of Law	(11)	0		1,942 	21,200 	14,499 	321,508	0
12Joyce A StrawserPhD Dean, School of Business	(1)	237,433	0	0 528	19,383	0 68,477	325,821	0
	(11)	0	-	- 0	-	- 0		0
13Kevin Willard Head Coach Men's Basketball	(1)	1,418,323	115,000	33,296	21,200	45,931	1,633,750	0
14Anthony J Bozzella	(11)	270,823	0	0	0	0	0	0
Head Coach Women's Basketball	(1)	270,823	67,500 	20,462	21,200	100,234	480,219	0
15Bnan B Shulman PhD Dean, School of Health &	(1)	255,281	0 25,000	1,040	20,625	13,328	315,274	0
Med	(11)	0						0
16Andrea Bartoli PhD Dean, School of Diplomacy	(1)	253,824	0	8,258	21,068	37,059	320,209	0
	(11)	0	- 0	- 0	0	0	0	0
17Patnck G Lyons V P for Athletics & Rec Svcs	(E)	338,993	95,000	21,846	21,200	22,082	499,121	0
18Mıchael S Zavada	(11)	102.202	0	0	0	0	0	0
Former Dean, Arts & Sciences	(I) (II)	103,392	0	482 	0 	0	103,874	0
			0	0	0	0	0	

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Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

DLN: 93493122006317 OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

	e of the organization									Em	ployer ic	lentifica	tion nu	mber	
Set	n Hall University									22	-15006	45			
P	rt I Bond Issues			_								_			
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f)	Descriptio	n of purpose	(g) De	feased		On alf of		Pool ncing
												1	uer	IIIIa	nemg
										Yes	No	Yes	No	Yes	No
A	NJEFA - Seton Hall Issues 2008 D & E	22-1829511	646065Wz1	12-11-2008	73,91	39,881	SEE P	PART VI			X		×		X
В	NJEFA - Seton Hall - CIF 2004 A & 2006 A & 2014D	22-1829511	64605LNM6	04-14-2004	7,80)5,700	SEE P	PART VI			Х		Х	Х	
С	NJEFA - Seton Hall - Issue 2011 A	22-1829511	646065U83	06-10-2011	37,5	78,532	SEE P	PART VI			х		Х		Х
D	NJEFA - Seton Hall - CIF 2014B	22-1829511	646066DG2	04-29-2014	19,36	59,367	SEE P	PART VI			Х		Х	Х	
Pa	rt III Proceeds						·						l		
						A		ı	3		С			D	
1	A mount of bonds retired.					33,115	,000		1,545,263		25,14	0,000			34,311
2	A mount of bonds legally defe	eased					0		0			0			0
3	Total proceeds of issue					74,633	,251		7,805,700		37,57	578,532		19,369,3	
4	Gross proceeds in reserve fu					1,848	,863		0			0			0
5	Capitalized interest from pro	ceeds					0		78,458			0			0
6	Proceeds in refunding escrov	ws					0		0			0			0
7	Issuance costs from proceed	ds				1,054	,021		56,467		41	1,094			113,339
8	Credit enhancement from pro	oceeds				156	,565		59,024			0			0
9	Working capital expenditures	from proceeds					0		0			0			0
10	Capital expenditures from pr	oceeds				685	,153		7,611,751			0		1	,014,830
11	Other spent proceeds					70,880	,432		0		37,16	7,438			0
12	Other unspent proceeds .			•			0		0			0			0
13	Year of substantial completion	on			2	800		20	05	2	2011			2015	
					Yes	No	,	Yes	No	Yes	ı	No	Yes	;	No
14	Were the bonds issued as pa	rt of a current refund	ding issue?		X				Х	X					X
15	Were the bonds issued as pa	rt of an advance refu	unding issue?			X		X				x			X
16	Has the final allocation of pro	oceeds been made?			Х			Х		Х			Х		
17	Does the organization mainta allocation of proceeds?	•		port the final	х			х		х			х		
Pa	t IIII Private Business				1				<u> </u>						
						A		I	3		С		_	D	
					Yes	No	•	Yes	No	Yes		No	Yes	•	No

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

Are there any lease arrangements that may result in private business use of bondΧ

Х

Χ

			A			В		c		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private to of bond-financed property?	business use				×				×
b prope	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina									
с	Are there any research agreements that may result in private business use	e of bond-								
C	financed property?	or bond				X				X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government			0 %		0 %		0 %		0 %
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government	ersection		0 %		1 480 %		0 %		0 590 %
6	Total of lines 4 and 5			0 %		1 480 %		0 %		0 590 %
7	Does the bond issue meet the private security or payment test?					Х				Х
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a $501(c)(3)$ organization since the bon issued?					×				x
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or o	disposed of		0 %		0 %		0 %		0 %
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations s	sections				×				×
9	Has the organization established written procedures to ensure that all nonq bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?				Х				х	
Par	Arbitrage							l		1
		A		1	В		С С			
		Yes	No	Yes	No	Ye		No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X	133	X		_	X		X
2	If "No" to line 1, did the following apply?		I.				<u> </u>			
a	Rebate not due yet?		х	X				Х	х	
b	Exception to rebate?		Х		X	Х				Х
С	No rebate due?	Х			х			Х		Х
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed				•					
3	Is the bond issue a variable rate issue?	Х			Х			Х		Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	х			Х			х		×
b	Name of provider	CITIBANK NA	4	0	•	0	•	0	•	
С	Term of hedge		21 %							
d	Was the hedge superintegrated?		Х							
e	Was the hedge terminated?		Х							
		•								

SCIIE	edule K (Form 990) 2015								Page 3	
Pai	rt IV Arbitrage (Continued)							,		•
			A	В		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	_
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		Х		х		х	_
b	Name of provider	0		0		0		0		
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									_
6	Were any gross proceeds invested beyond an available temporary period?	х			Х		Х		Х	_
7	Has the organization established written procedures to monitor	Х		Х		х		х		

Part V Procedures To Undertake Corrective Action

	A		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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 if self-remediation is not available under applicable regulations?	x		x		X		x	

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

Return	Reference

REBATE COMPUTATIONS WERE PERFORMED THROUGH JUNE 30, 2016 FOR ALL SETON HALL UNIVERSITY BOND ISSUES LISTED IN PART I THERE IS NO REBATE LIABILITY RELATED TO ANY BOND ISSUE AS OF JUNE 30, 2016 PART I, COLUMN(F) DESCRIPTION OF PURPOSE 1 SETON HALL UNIVERSITY ISSUES, 2008 SERIES D & E,(CUSIP NUMBERS 646065WZ1 AND 646065XQ0) WERE ISSUED BY THE NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY (NJEFA) TO CURRENTLY REFUND SETON HALL UNIVERSITY ISSUES, 2005 SERIES C AND 2006 SERIES A THE 2005 SERIES C ISSUE WAS ISSUED ON AUGUST 18,2005 BY THE NJEFA TO FINANCE CAPITAL IMPROVEMENTS AT THE UNIVERSITY THE 2006 SERIES A ISSUE WAS ISSUED ON JUNE 1, 2006 IT REFUNDED THE UNIVERSITY'S 1996 SERIES E ISSUE, WHICH WAS FOR CAPITAL IMPROVEMENTS AND FOR REFUNDING THE UNIVERSITY'S 1989 SERIES C ISSUE, WHICH WAS FOR CAPITAL IMPROVEMENTS THE 2008 SERIES D & E ISSUES WERE TREATED AS A SINGLE ISSUE FOR TAX PURPOSES AMOUNTS REPORTED IN SCHEDULE K HEREIN ARE FOR THE COMBINED ISSUE ALL PROCEEDS DEPOSITED IN THE REFUNDING ESCROWS HAVE BEEN SPENT THE ISSUE PRICE IN PART I, COLUMN E,OF \$73,939,881 PLUS \$8,217 OF INTEREST EARNINGS AT THE TIME OF ISSUE AND \$685,153 OF PROJECT FUNDS REMAINING FROM THE 2005 AND 2006 BONDS AT THE TIME OF THE REFUNDING, WHICH WERE TRANSFERRED TO THE 2008 SERIES D & E BONDS, EQUALS THE PART II, LINE 3, TOTAL PROCEEDS OF THE ISSUE OF \$74,633,251 ALL OF THE \$685,153 HAS BEEN USED FOR CAPITAL EXPENDITURES IN 2005, THE UNIVERSITY ENTERED INTO TWO LONG-TERM INTEREST RATE SWAP AGREEMENTS WITH CITIBANK, N A IN ORDER TO HEDGE INTEREST RATE EXPOSURE RELATED TO THEIR 2005 SERIES C AND 2006 SERIES A ISSUES FOLLOWING THE REFUNDING OF THE 2005 AND 2006 ISSUES WITH 2008 SERIES D & E, THE INTEREST RATE SWAP AGREEMENTS REMAINED IN PLACE, FOLLOWING AN AMENDMENT, IN ORDER TO HEDGE INTEREST RATE EXPOSURE FOR THE 2008 SERIES D ISSUE THE SWAP AGREEMENTS EXPIRE CONCURRENTLY WITH THE MATURITY OF THE 2008 SERIES D BONDS, THE LAST OF WHICH MATURE ON JULY 1, 2037 In July 2015, Seton Hall University issue, 2015 Series C, was issued by the NJEFA to advance refund the University's 2008 Series E bonds See further below 2 ON APRIL 14, 2004, THE NJEFA ISSUED CAPITAL IMPROVEMENT FUND ("CIF")SERIES 2004A BONDS PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION THE BONDS WERE ISSUED IN THE PRINCIPAL AMOUNT OF \$76,725,000 WHICH WAS ALLOCATED TO A TOTAL OF SEVEN INSTITUTIONS IN NEW JERSEY, THREE PUBLIC AND FOUR PRIVATE AN 8038 WAS FILED FOR THE PORTION OF THE ISSUE ALLOCATED TO PRIVATE INSTITUTIONS AND A SEPARATE 8038-G WAS FILED FOR THE PORTION ALLOCATED TO PUBLIC INSTITUTIONS SETON HALL'S APPORTIONED AMOUNT, AFTER \$115,491 OF APPORTIONED ISSUANCE AND CREDIT ENHANCEMENT COSTS, WAS \$7,690,209 OF THIS AMOUNT \$78,458 WAS ALLOCATED TO CAPITALIZED INTEREST THE REMAINDER THAT WAS RECEIVED BY SETON HALL WAS \$7,611,751, OF WHICH \$3,805,875 WAS A GRANT AND \$3,805,876 WAS DEBT REPAYABLE OVER 20 YEARS BONDS ISSUED TO FINANCE GRANTS MUST BE APPROVED BY THE STATE TREASURER AND ARE REPAYABLE BY THE STATE SUBJECT TO APPROPRIATION THE BONDS ARE SOLD BASED ON THE CREDIT OF THE STATE EACH GRANTEE ENTERED INTO A GRANT AGREEMENT OBLIGATING THE GRANTEE TO PAY 1/2 OF THE DEBT SERVICE ON THE BONDS ALLOCABLE TO THE GRANT ON OCTOBER 26, 2006, NJEFA ISSUED CIF BONDS, SERIES 2006 A TO PARTIALLY ADVANCE REFUND THE 2004 A BONDS AND OTHER SERIES OF CIF BONDS AT THAT TIME, THE AMOUNTS PAYABLE BY EACH GRANTEE WERE ADJUSTED TO TAKE ACCOUNT OF ALLOCABLE DEBT SERVICE SAVINGS THE CUSIP NUMBER AND ISSUE DATE SHOWN IN PART I OF SCHEDULE KARE FOR THE SERIES 2004 A BONDS THE NJEFA HAS FURTHER INFORMATION ABOUT THE TOTAL BOND ISSUE SETON HALL SPENT THE ENTIRE AMOUNT OF BOND PROCEEDS ALLOCATED TO IT ON CAPITAL IMPROVEMENTS ON THE UNIVERSITY'S CAMPUS SETON HALL UNIVERSITY DOES NOT USE ANY OF THE DEBT FINANCED PROPERTY TO UNDERTAKE A NON-EXEMPT ACTIVITY THE AMOUNTS REPORTED ON SCHEDULE K, PART III, LINE 5 REPRESENT THE BOND ISSUANCE AND CREDIT ENHANCEMENT COSTS FROM SCHEDULE K, PART II, LINES 7 AND 8 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE ON APRIL 29, 2014 THE NJEFA ISSUED CIF BONDS, SERIES 2014 B, AND ADVANCE REFUNDING CIF BONDS, SERIES 2014 D, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION ONE FORM 8038 WAS FILED BY THE NJEFA COVERING BOTH ISSUES,UNDER CUSIP NUMBER 646066DG2 GROSS PROCEEDS FROM BOTH ISSUES WERE $\$19,\!369,\!367$ WITH THE 2014 B PORTION BEING $\$15,\!493,\!539$ AND THE 2014 D PORTION BEING \$3,875,828 THE SERIES 2014 D ISSUE PARTIALLY ADVANCE REFUNDED THE 2004A BONDS RELATED TO THREE PRIVATE INSTITUTIONS OF HIGHER EDUCATION AS A RESULT OF THIS ADVANCE REFUNDING, AMOUNTS PAYABLE BY EACH INSTITUTION, INCLUDING THE UNIVERSITY, WAS ADJUSTED TO TAKE INTO ACCOUNT ALLOCABLE DEBT SERVICE SAVINGS 3 SETON HALL

Part IV, Line 2C

UNIVERSITY ISSUE, 2011 SERIES A, (CUSIP NUMBER 646065U83)WAS ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY'S 1999 REFUNDING, 2001 SERIES A, 2001 SERIES B, AND 2001 SERIES G BOND ISSUES THE 1999 REFUNDING ISSUE 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 WERE ISSUED TO FINANCE CAPITAL IMPROVEMENTS THE 2001 SERIES A ISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES A ISSUE WHICH REFUNDED THE UNIVERSITY'S 1985 SERIES A ISSUE WHICH WAS ISSUED TO FINANCE CAPITAL IMPROVEMENTS THE 2001 SERIES B ISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES B ISSUE WHICH WAS ISSUED TO REFUND THE UNIVERSITY'S 1988 SERIES B ISSUE WHICH WAS ISSUED TO REFUND THE UNIVERSITY'S 1976 SERIES A ISSUE AND TO FINANCE CAPITAL IMPROVEMENTS THE 1976 SERIES A ISSUE WAS ISSUED TO FINANCE CAPITAL MPROVEMENTS THE 2001 SERIES G ISSUE WAS ISSUED IN JUNE 2001 TO IMPROVEMENTS 4 AS NOTED ABOVE, ON APRIL 29, 2014 THE NJEFA ISSUED CIF BONDS, SERIES 2014 B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION THE GROSS PROCEEDS OF THIS ISSUANCE WERE \$15,493,539 THE PROCEEDS WERE ALLOCATED TO SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION SETON HALL'S APPORTIONED AMOUNT WAS \$2,192,165 AFTER \$12,165 OF APPORTIONED ISSUANCE COSTS, THE REMAINDER THAT WAS RECEIVED BY SETON HALL WAS \$2,180,000, OF WHICH \$1,165,170 WAS A GRANT AND \$1,014,830 WAS DEBT REPAYABLE OVER 20 YEARS BONDS 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 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 THE AMOUNT REPORTED ON SCHEDULE K, PART III, LINE 5 REPRESENTS THE BOND ISSUANCE COSTS FROM SCHEDULE K, PART II, LINE 7 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE 5 ON JANUARY 30, 2014 THE NJEFA ISSUED HIGHER EDUCATION EQUIPMENT LEASING FUND ("ELF") PROGRAM BONDS, SERIES 2014 B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION THE ELF 2014 B ISSUE IS ALLOCATED TO EQUIPMENT PURCHASES AT SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION THE GROSS PROCEEDS 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 BONDS 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 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 EQUIPMENT THE AMOUNT REPORTED ON SCHEDULE K, PART III, LINE 5 REPRESENTS THE BOND ISSUANCE COSTS FROM SCHEDULE K, PART II, LINE 7 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE 6 SETON HALL UNIVERSITY ISSUE, 2013 Series D, (CUSIP 6460656D9) WAS ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY'S 2009 C BONDS SOLD DIRECTLY TO CAPITAL ONE, N A , FINANCE A PORTION OF THE COST OF TERMINATING THE UNIVERSITY'S INTEREST RATE SWAP AGREEMENT WITH CITIBANK, NA 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 JUNE 29, 1998 BY THE NJEFA TO REFUND A 1991 SERIES D SETON HALL UNIVERSITY ISSUE THAT

FINANCED CAPITAL IMPROVEMENTS AT THE UNIVERSITY THE PORTION OF THE 2013 D TOTAL

PROCEEDS OF \$43,935,7

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

OMB No 1545-0047

DLN: 93493122006317

Open to Public **Inspection**

Employer identification number

Schedule K

(Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

explanations, and any additional information in Part VI. ► Attach to Form 990. ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Seton Hall University 22-1500645 Part I **Bond Issues** (b) Issuer EIN (c) CUSIP # (i) Pool (a) Issuer name (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On behalf of financing ıssuer Yes No Yes No Yes No NJEFA - Seton Hall - ELF 22-1829511 6460658J4 01-30-2014 8,131,497 | SEE PART VI Χ Х ISSUE 2014B 22-1829511 43,935,728 SEE PART VI Х NJEFA - SETON HALL -6460656D9 07-10-2013 Χ ISSUE 2013D 24,255,807 | SEE PART VI Х Х NJEFA - Seton Hall - ISSUE 22-1829511 646066MC1 07-14-2015 2015 C **Proceeds** Part II С 57,472 1,550,000 685.000 3 Total proceeds of issue 8,131,497 43,935,728 24,255,807 5 0 2,405,009 0 6 0 0 7 54,772 522.077 306.564 8 0 0 9 0 10 330,900 33,208,335 0 11 7,800,307 23,949,243 12 13 2015 2014 2015 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х Χ Χ 14 Were the bonds issued as part of an advance refunding issue? Х Χ 15 Χ Has the final allocation of proceeds been made? Χ Х Χ 16

allocation of proceeds? Private Business Use

17

- (-	Private business use								
			A		В		С)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		x		×				
2	A re there any lease arrangements that may result in private business use of bond-financed property?		X		X				
_									

Х

Does the organization maintain adequate books and records to support the final

Х

Χ

	Trivate basiless ese (continued)									
				Ą		В		c		D
			Yes	No	Yes	No	Yes	No	Yes	No
3а	Are there any management or service contracts that may result in private to of bond-financed property?			X		Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or									
prope	counsel to review any management or service contracts relating to the fina	nced								
	Are there any research agreements that may result in private business use	a of bond-		+				+		
c	financed property?			Х		Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert									
4	Enter the percentage of financed property used in a private business use by other than a section 501(c)(3) organization or a state or local government			0 %		0 %		0 %		
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government	ersection		0 670 %		1 190 %		0 %		
6	Total of lines 4 and 5			0 670 %		1 190 %		0 %		
7	Does the bond issue meet the private security or payment test?			X		Х				
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bond issued?			x		Х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or o	disposed of		0 %		0 %		0 %		•
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations s	sections		x		×				
9	Has the organization established written procedures to ensure that all nonq bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		х		Х					
Par	t IV Arbitrage									
		Α.			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		х		Х			х		
2	If "No" to line 1, did the following apply?						· · · · · · · · · · · · · · · · · · ·			
a	Rebate not due yet?	Х		Х		X				
b	Exception to rebate?		X		X			Х		
c	No rebate due?		X		X			Х		
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed		•		'		•		•	
3	Is the bond issue a variable rate issue?		Х		Х			Х		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		х			х		
b	Name of provider	0		0	•	0	•		•	
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									

		Α		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		x		Х		×		
b	Name of provider	0		0		0			
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х		×		
7	Has the organization established written procedures to monitor the requirements of section 148?	×		х		×			
Pa	Part V Procedures To Undertake Corrective Action								

No

Yes

No

Yes

No

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

Yes

self-remediation is not available under applicable regulations?

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

Yes

Page 3

No

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at

DLN: 93493122006317 OMB No 1545-0047

2015

Open to Public

Department of the Treasury Internal Revenue Se	ervice	►Intorn	nation a	bout Sche		n 990 or 990-EZ <u>:ov/form990</u> .) and its instr	uctions	is at			en to Pi Ispecti	
Name of the or Seton Hall Univers	ganızatıon							Er	nploye	r identi	fication	n numbei	r
	<i>,</i>	it Tranca	ctions	E (soction	501/6//2)	section 501(c)	1(4) and 501(2-150		only)		
						, Part IV , line .						40b	
	ne of disqual				ationship be	etween disquali			c) Des	cription		(d) Corr	rected?
					(organization			tran	saction		Yes	No
								-					
2 5			L										
2 Enter the 4958 .	amount of ta	x incurred i	by orgar • •	nization ma	nagers or d	isqualified pers	sons during th		under •	section \$			
3 Enter the	amount of ta	x, ıf any, or	line 2,	above, rei	mbursed by	the organizatio	on			> \$			
Part II Lo	ans to an	d/or Fro	m Int	arastad	Parsons								
Co	mplete if the	e organizati	on answ	ered "Yes	" on Form 9	90-EZ, Part V,	line 38a, or F	orm 99	0, Par	t IV , lır	ne 26, c	r if the	
or	ganization re	ported an a	imount o	on Form 99	90, Part X, I	ine 5, 6, or 22							
(a) Name of	(b) Relatio		(c)	(d) Loan		(e)O riginal		(g) In		(h		(i)Written	
ınterested person			or from th organizatio		principal amount	due	default?			Approved by board or		agreement?	
person									committee?				
				То	From			Yes	No	Yes	No	Yes	No
											1		
											†	1	
					1								
											1		
											+	1	
													
Total Part III Gr	ants or As		► \$ Rene	fiting In	tarastad	Darsons							
						Form 990, Pa	rt IV, line 27	'.					
(a) Name of				between	(c) A mour	nt of assistance	e (d) Type	ofassı	stance	(e)	Purpos	se of ass	ıstance
pers	on		ganızatı ganızatı	n and the									
(1) Patrick Hob	os	Child of F	ormer K	еу		7,50	0 Merit Schol	arship		Tuit	ion Sch	olarship	,
		Employe											
		+								-			

(1) MARY ANN CHRISTOPHER

(2) ROBERT J SLOAN

(3) THOMAS SHARKEY SR

(4) LARRY A ROBINSON

(5) LARRY A ROBINSON

(6) TRACY H GOTTLIEB

(7) TRACY H GOTTLIEB

(8) TRACY H GOTTLIEB

Part IV Business Transactions Involving Interested Persons.

Dart IV line 28a 28h or 28c

BROTHER OF

REGENT

OFFICER

OFFICER

\$58,087, respectively

he involved in the process at all

TRUSTEE/REGENT

REGENT EMERITUS

SISTER OF OFFICER

SISTER OF OFFICER

WIFE OF OFFICER

DAUGHTER OF

Complete if the organization	<u>n answered "Yes" on F</u>	Form 990, F
(a) Name of interested person	(b) Relationship	(c) A m
	between interested	transa

mizatioi	ranswered	res	OH	FOLLI	990, I
n	(b) Relati	ionshi	р		(c) A m
	hetween in	terest	ed		transa

1	Offit 220, Fart IV, life	200, 20D, OI 20C.
	(c) A mount of	(d) Description of tran
	transaction	

200, OI 2	.00.
escription	of transaction

(e) Sharing Ωf

Complete il the organizatio	ii alisweleu Tes Oli F	Ollii 990, Pait IV
(a) Name of interested person	(b) Relationship	(c) A mount of
	between interested	transaction
	person and the	
	organization	

organization's revenues?

Yes

No

128,252 LEGAL SERVICES 504,735 TELEPHONE CHARGES

Nο Νo

Nο

Νo

Νo

Νo

64,600 COMPENSATION & BENEFITS

25,386 BROKERAGE FEES 26,977 COMPENSATION & BENEFITS

Nο Νo

DAUGHTER-INLAW of

107,678 COMPENSATION & BENEFITS 58,087 COMPENSATION & BENEFITS 51,319 COMPENSATION & BENEFITS

Part V **Supplemental Information** Provide additional information for responses to questions on Schedule L (see instructions) Return Reference

PART IV Business Transactions Involving Interested Persons

Part III Grants or Assistance

Benefiting Interested Persons

Explanation The brother of Mary Ann Christopher, trustee/Regent, is a partner in the Law Firm of Gibbons P C

compensation and benefits of \$26,977 and \$64,600, respectively. The daughter-in-law and two sisters of Dr Tracy H Gottlieb, V P for Student Services, served as employees of the University In fiscal year 2016, they received total compensation and benefits of \$51,319, \$107,678, and

The child of Patrick Hobbs, a former key employee, was awarded a merit scholarship amounting to \$7,500 His position as a former Dean of the Law School had no bearing in the award process nor was

Seton Hall University paid Gibbons P C \$128,252 for legal services in the year ended June 30, 2016 Robert J Sloan, regent, is a Vice President at AT&T Seton Hall University paid AT&T \$504,735 for telephone charges in the year ended June 30,2016 Thomas Sharkey, Sr, Regent Emeritus, and his son Thomas Sharkey, Jr., are the Chairman and President, respectively, of the Insurance Brokerage Company, Meeker Sharkey & Hurley Seton Hall deals directly with them for its Long Term Disability benefits The carrier is CIGNA Meeker Sharkey & Hurley received \$25,386 in brokerage fees for this arrangement. The wife and daughter of Dr. Larry A. Robinson, Provost & executive V P, served as an employees of the University In fiscal year 2016, They received total

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

(Form 990)

Department of the Treasury

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at <u>www.irs.gov/form990</u>

DLN: 93493122006317 OMB No 1545-0047

2015

Open to Public

	al Revenue Service e of the organization				Employer identificat	ion nu	mber	
	Hall University							
					22-1500645			
Pa	rt I Types of Property							
		(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of de noncash contrib	- etermı	_	ts
1	Art—Works of art	Х	1	102,000	appraisal			
2	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household goods	X		2,000	Cost			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	26	572,000	Selling price			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory	X	5	44,000	Cost			
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(X	1	18,000	Cost			
	QUIPMENT) Other►(×	19	17,000) Cost			
	CELLANEOUS)	^	19	17,000	Cost			
	O ther ▶ ()							
	O ther ▶ ()							
	Number of Forms 8283 received for which the organization comple				29			
				-	•		Yes	No
30a	During the year, did the organiza				-			
	it must hold for at least three ye			,	ireu to de used		ļ	i
	for exempt purposes for the enti	re holding p	period?			30a		Νo
	If "Yes," describe the arrangeme			roviou of any non-standard	Looptributions	31	Vec	
31	Does the organization have a gif	·		·		31	Yes	
32a	Does the organization hire or use contributions?		-		noncash 	32a	Yes	
	If "Yes," describe in Part II							
33	If the organization did not report	: an amount	: in column (c) for a type of	property for which column	(a) is checked,			

describe in Part II

Schedule M (Form 990) (2015)

Return Reference		Explanation	l	
Also complete this p	art for any additional inform	ation.		

Part I, Line 32b 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 Isecurities, 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

University

conducting the Archbishop's annual appeal to raise funds from the congregation for the benefit of the

Page 2

Schedule M (Form 990) (2015)

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to <u>Public</u> Inspection

Name of the organization Seton Hall University

Employer identification number

22-1500645

Return Reference	Explanation
Reference Form 990, Part III, Line	Seton Hall University is the nation's oldest diocesan Catholic University. In a diverse and collaborative environment, it focuses of academic, ethical, and spiritual development. Seton Hall students are prepared to be leaders in their professional and community
1	lives in a global society and are challenged by outstanding faculty, an evolving technologically advanced setting, and values-centered curricula. Seton Hall University's 58-acre park-like main campus is located in South Orange, New Jersey, only 14 miles west of New York City. The University is home to ten nationally recognized and accredited schools, including its Nationally-Ranked Law School located in New ark, New Jersey. Within these schools the professors of Seton Hall educate, shape, and develop approximately 6,100 undergraduate and 3,700 graduate students, who are enrolled in more than 90 rigorous majors. This has led to Seton Hall being nationally recognized for academic excellence by The Princeton Review, U.S. News & World Report, and Bloomberg Businesswieck. Seton Hall remains a pioneer in Catholic education. In FY2016, Seton Hall University and Hackensack University. Health Network (HUHN), formed the Seton Hall-Hackensack School of Medicine (SOM), a nonprofit New Jersey corporation. The University and HUHN each control fifty percent of the SOM, with each institution appointing fifty percent of the SOMs Board of Governors.
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
aitvi	sponsibility, power, and authority to govern the University and shall exercise the corpora
	te pow ers 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-Law's 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 wiritten 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 Regent
	s for its review and approval for filing with the Internal Revenue Service. The Board of R
	egents shall contemporaneously document the meeting at w hich the Forms 990 and 990-T are r
	eview ed and approved for filing Part VI, Section B, Line 12c. The University's conflict o f interest policy is posted on the University's wieb 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 conflict to protect the best interests
	of the University The policy requires, among other things, that no member of the Board of
	Regents or its Committees can participate in any decision in w hich he or she (or an immed late family member) has a material financial interest. Each Regent is required to certify
	compliance with the conflict of interest policy on an annual basis and indicate whether th
	e University does business with an entity in which a Regent has a material financial inter
	est When such relationships exist, measures are taken to mitigate any actual or perceived
	conflict, including requiring that such transactions be conducted at arm's length, for go
	od and sufficient consideration, based on terms that are fair and reasonable to and for th
	e benefit of the University, and in accordance with relevant conflict of interest laws. Th
	e University is unaware of any such associations considered to be significant. Part VI, Se ction B, Line 15. Seton Hall University can ensure and demonstrate that our compensation a
	ctions do not inure to the benefit of a private individual. We can demonstrate that the co
	mpensation of all disqualified persons, such as officers, directors, and key employees, is
	considered reasonable and would ordinarily be paid for like services by like enterprises
	under like circumstances. The reasonableness of our compensation takes into account all be
	nefits. Any compensation transactions for these individuals are approved by an authorized
	body of individuals who have no conflict of interest. Utilizing a compensation consultant,
	appropriate compensation data is relied upon for comparability and proof of fair market v alue, before making a decision. Compensation decisions and reports are contemporaneously d
	ocumented in the minutes of the meeting of the Committee when the decisions are made. Part
	VI, Section C, Line 19 The University's By-Law's and its conflict of interest policy are
	posted on the University's w ebsite

990 Schedule O, Supplemental Information

Return Reference

		4
Part X, Line 20	As of June 30, 2016 and 2015, unamortized bond and letter of credit issuance costs total \$1,109,000 and \$1,206,000 respectively. The University early adopted Accounting Standards Update ("ASU") 2015-03, simplifying the presentation of debt issuance costs. The ASU requires that deferred bond and letter of credit issuance costs be presented net of related debt on the statements of financial position. This guidance was retroactively applied to the prior year.	
Part XI, Line 9	Change in value of interest rate sw ap agreements of \$1,626,000, plus the provision for unc ollectible contributions receivable of \$827,000, plus limited partnership gain of \$25,000, less reversal of a FY 15 accrual in FY 16 of \$121,000 Representing assistance given to a do mestic government. This was included in Form 990-2014 in Part IX, line 1, and in Schedule I, Part II, line 2 - Essex County Park	

Explanation

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

DLN: 93493122006317 OMB No 1545-0047

Related Organizations and Unrelated Partnerships

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

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization Seton Hall University

,				22-15006	545			
Part I Identification of Disregarded Entities Com	plete if the organization	answered "Yes" o	n Form 990, Pa	art IV, line 33.				
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	D	(f) rect controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations Complete if the tax year.	the organization an	iswered "Yes"	on Form 990, Pa	irt IV, li	ine 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	tion (e) Public charity (if section 501)		(f) Direct controlling entity	Section (13) co	g) n 512(b) ontrolled tity?
							Yes	No
(1)Roman Catholic Archdiocese of Newark 171 Clifton Avenue	See Part VII	NJ	501(c)(3)	1				No
Newark, NJ 07104 22-1487308								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	i) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				314/			Yes	No	1	Yes	No	
			_									
Part IV Identification of Polated Organizations Taxable	25.2.60****	ration	or Truct C	omplete if th	0.0000017	tion and	warad	 	on Form 0	VOO. [) n == 1	IV line

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling		Share of total	Share of end-of-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S corp,	ıncome	year	ownership	(b)(13)	
•		(state or foreign	1	l` '' ''		assets		contro	lled
		country)		or trust)		"""		entit	
		55 41.47,7		0,		l		Yes	No
Seton Hall-Hackensack	SEE PART VII	NJ	NA	C			50 000 %	163	No
(1)School of Medicine	SEE PART VII	INJ	INA	С согр			30 000 %		INO
400 South Orange Avenue									
South Orange, NJ 07079									
81-3872529									
	SEE PART VII	NJ	NA	C corp			50 000 %		No
(2)Renewal LLC									
• •									
400 South Orange Avenue									
South Orange, NJ 07079									
81-3857390									

				1				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			_	Y	es N			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more r	related organizations li	sted in Parts II-IV?	 	a	l N			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity								
Gift, grant, or capital contribution to related organization(s)								
Gift, grant, or capital contribution from related organization(s)								
l Loans or loan guarantees to or for related organization(s)								
e Loans or loan guarantees by related organization(s)				е	N-			
f Dividends from related organization(s)			1	f				
g Sale of assets to related organization(s)			1	g	N-			
f h Purchase of assets from related organization(s)			[1	h	N-			
i Exchange of assets with related organization(s)			[1	.i	N-			
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				.j	N-			
k Lease of facilities, equipment, or other assets from related organization(s)				k	N.			
Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)			1	m Y	es			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				ln	N-			
o Sharing of paid employees with related organization(s)				0	N-			
p Reimbursement paid to related organization(s) for expenses			1	p Y	es			
q Reimbursement paid by related organization(s) for expenses			1	q	N			
r Other transfer of cash or property to related organization(s)			1	.r	N.			
s O ther transfer of cash or property from related organization(s)			1	s	N			
If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	overed relationships	and transaction thresholds					
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amour	nt invo	ved			

Part VI 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

revenue) that was not a related organization. See instructions i																		
(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)	section 501(c)(3) organizations				section 501(c)(3) organizations?		(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)	managing partner?		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No						
													_					

Page 5

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

Return Reference

Part II Identification of Related Primary activity of Roman Catholic Archdiocese of Newark - oversees the Catholic church in certain counties of New Jersey

Tax-Exempt Org Primary Activity Part IV Identification of Related Org Taxable as Corp Primary Activity

In June 2015, Seton Hall University ("University") and Hackensack University Health Network ("HUHN"), acting on behalf of Hackensack University

Assistance Program under the New Jersey Economic Development Authority

Medical Center ("HUMC"), signed an agreement to establish the principle elements of a long-term relationship to develop an undergraduate school of medicine, as well as sponsor graduate medical education programs. In January 2016, the University and HUHN formed the Seton Hall-Hackensack. School of Medicine ("SOM"), a nonprofit New Jersey corporation. It is in the process of filing for exemption from federal income taxes under Section 501. (a) of the Internal Revenue Code as an organization described in Section 501(c)(3) and similar State of New Jersey provisions. The University and HUHN each control fifty percent of the SOM, with each institution appointing fifty percent of the SOM's Board of Governors. The SOM will be accounted for by the University using the equity method of accounting In October 2015, the University and HUMC formed Kingsland Street Urban Renewal, LLC ("Kingsland") for the purposes of renovating and leasing a location for the new SOM. Kingsland qualifies as an urban renewal entity under New Jersey law and with the New Jersey Department of Community Affairs, which enables it to qualify for making payments in lieu of property taxes and also to apply for tax credits from the New Jersey Economic Development Authority. It is in the process of filing for exemption from federal income taxes under Section 501(a) of the Internal Revenue Code as an organization described in Section 501(c)(3) and similar State of New Jersey provisions. The University and HUMC each have a fifty percent membership interest in the joint venture. Kingsland will be accounted for by the University using the equity method of accounting. In June 2016, Kingsland signed an agreement with a real estate development firm whereby Kingsland will renovate and lease a building in Nutley and Clifton, New Jersey, which building will serve as the location for the SOM, along with the University's College of Nursing and School of Health and Medical Sciences, and HUMC research activities. The financial obligations of Kingsland under the lease are guaranteed jointly and severally by the University and HUMC. The term of the lease is twenty-five years and three months, with four ten-year renewal options. Kingsland has several purchase options that are exercisable at various times and in various amounts during the term. The lease will not commence until certain other agreements have been executed, Including subleases between Kingsland and the University, the SOM, and HUMC Such agreements have not been executed yet. The landlord has provided Kingsland with a full indemnity against pre-existing environmental conditions, subject to customary limitations. In addition, the landlord has provided Kingsland with a financial allowance for leasehold improvements. The location of the SOM, along with the anticipated positive economic impact the SOM. will have on the area as a result of job creation and capital investment, qualifies SOM to receive a grant of tax credits from the Grow New Jersey

Explanation