DLN: 93493127007586

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public ► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

| A Fo | r the | 2014 ca | lendar year, or tax year beginnin | g 07-01-2014 , and ending 06-30-2 | 2015 | | | |
|--------------------------------|--|-----------------|---|---|------------|--------------------------|--------------|----------------------------|
| B Ch | eck ıf | applicable | C Name of organization Seton Hall University | | | D Empl | oyer ider | ntification number |
| Ad | dress o | change | % STEPHEN A GRAHAM | | | 22-1 | 500645 | 5 |
| ∏ Na | me ch | ange | Doing business as | | | | | |
| ☐ Inr | tial ret | um | | | | E Teleph | one num | ber |
| Fir | | rminated | Number and street (or P O box if n 400 South Orange Avenue | nail is not delivered to street address) Roor | n/suite | | 761-9 | |
| ┌ Am | ended | d return | City or town, state or province, cou | ntry, and ZIP or foreign postal code | | | | |
| _ | | on pending | South Orange, NJ 07079 | ····, , ····· =-· | | G Gross | receipts \$ | 654,880,000 |
| | | | F Name and address of prii | ncipal officer | H(a) | Is this a grou | n return | for |
| | | | A Gabriel Esteban | | "(") | subordinates? | | roi res r No |
| | | | 400 South Orange Avenue South Orange, NJ 07079 | | | | | F., F., |
| | | | | | Н(Б) | Are all subord included? | ınates | ┌ Yes ┌ No |
| I Ta | x-exe | mpt status | 501(c)(3) 501(c)() 4 (| insert no) 4947(a)(1) or 527 | | | n a list | (see instructions) |
| j W | ebsit | t e:► ww | w shu edu | | H(c) | Group exemp | tion nun | nber ► 0928 |
| K For | m of o | rganızatıor | n Corporation Trust Association | on Other ► | L Ye | ear of formation 1 | 856 M | State of legal domicile NJ |
| | rt I | _ | nmary | | | | - | - |
| | 1 | Briefly c | describe the organization's mission | on or most significant activities | | | | |
| | | | Iall University is a catholic instit | | | | | |
| 9 | | | | | | | | |
| Ē | | | | | | | | |
| E . | , | Chock t | this hav by if the arganization di | scontinued its operations or dispos | ad of mora | than 2 50/2 of its | not ac | cotc |
| \$ | _ | Спескі | nis box 🖣 II the organization di | scontinued its operations or dispos | ed of more | than 25% of its | s net as | sets |
| Activities & Governance | 3 | Number | of voting members of the govern | ing body (Part VI, line 1a) | | | 3 | 43 |
| ده دي | | | | of the governing body (Part VI, line | | | 4 | 33 |
| Ě | | | | calendar year 2014 (Part V, line 2a | | | 5 | 4,098 |
| 듄 | | | | necessary) | | | 6 | 593 |
| ∢ | 1 | | | art VIII, column (C), line 12 | | | 7a | 507,000 |
| | 1 | | | rom Form 990-T, line 34 | | | 7b | 307,000 |
| | | | | | | Prior Year | 1 7 1 | Current Year |
| | l g | Contr | ributions and grants (Part VIII, li | ne 1 h) | | 47,381 | 000 | 42,850,000 |
| ≗ | 9 | | - ' | ne 2g) | • | 316,550 | | 319,578,000 |
| Revenue | 10 | | | n (A), lines 3, 4, and 7d) | | 32,259 | | 13,274,000 |
| 歪 | 11 | | | lines 5, 6d, 8c, 9c, 10c, and 11e) | • | 10,175 | | 11,105,000 |
| | 12 | | | (must equal Part VIII, column (A), | line — | 10,173 | ,000 | 11,103,000 |
| | | | | | | 406,365 | 000 | 386,807,000 |
| | 13 | Grant | s and sımılar amounts paıd (Part | IX, column (A), lines 1-3) | | 115,463 | .000 | 120,304,000 |
| | 14 | Benef | fits paid to or for members (Part I | X, column (A), line 4) | | | 0 | 0 |
| | 15 | | | ee benefits (Part IX, column (A), lin | es | 155,553 | .000 | 157,634,000 |
| Expenses | | 5-10 | • | (0) 1 (1) | | | | |
| কু | 16a | | | column (A), line 11e) | · • | | 0 | 0 |
| ਡੋ | b | Total f | undraising expenses (Part IX, column (D |), line 25) b -6,045,000 | _ | | | |
| | 17 | Other | r expenses (Part IX, column (A), | lines 11a-11d, 11f-24e) | | 93,541 | ,000 | 99,971,000 |
| | 18 | Total | expenses Add lines 13-17 (mu | st equal Part IX, column (A), line 2! | 5) | 364,557 | 000 | 377,909,000 |
| | 19 | Rever | nue less expenses Subtract line | 18 from line 12 | | 41,808 | ,000 | 8,898,000 |
| ያ የ | | | | | Ве | ginning of Curre | ent | End of Year |
| Net Assets or Fund Balances | | _ | | | <u> </u> | Year | 255 | |
| A.S. | 20 | | | | • | 652,078 | | 639,087,000 |
| 2 E | 21 | | | | • • | 223,602 | | 206,617,000 |
| | 22 | | | line 21 from line 20 | • | 428,476 | 000 | 432,470,000 |
| | rt II | | nature Block | | | | | |
| my k | nowle | edge and | | amined this return, including accom nplete Declaration of preparer (othe | | | | |
| | | <u> </u> | | | | 2016-05-05 | | |
| Sigr | 1 | Sign | nature of officer | | | Date | | |
| Her | | STF | PHEN A GRAHAM VP For Finance/CFO | | | | | |
| | | | e or print name and title | | | | | |
| | | | Print/Type preparer's name | Preparer's signature | Date | Check If | PTIN | 103 |
| Pai | d | <u> </u> | Daniel Romano Firm's name - Grant Thornton LLB | Daniel Romano | | self-employed | P00504 | 102 |
| Pre | | | Firm's name F Grant Thornton LLP | | | Firm's EIN 🟲 | | |
| Use | • | | Firm's address 🕨 757 THIRD AVE 4TH FL | OOR | | Phone no (21 | 2) 599-01 | .00 |
| | . J. | , | New York, NY 100172 | 013 | | | | |

✓ Yes ☐ No

| Form | n 990 (2014) | | | | | Page |
|------------|--|---|---|---|--|--|
| Par | | t of Program Serv nedule O contains a res | | | III | ٦ |
| 1 | Briefly describe th | e organization's missio | n | | | |
| SEE | SCHEDULE O | | | | | |
| | | | | | | |
| | | | | | | |
| 2 | | n undertake any signific or 990-EZ? | | = : | r which were not listed on | ┌ Yes ┌ No |
| | If "Yes," describe t | hese new services on S | Schedule O | | | |
| 3 | | n cease conducting, or | make sıgnıfıca | nt changes in how it co | onducts, any program | ┌ Yes ┌ No |
| | If "Yes," describe t | hese changes on Sche | dule O | | | |
| 4 | expenses Section | | 4) organization | is are required to repor | ree largest program services, a t the amount of grants and alloo | |
| 4a | (Code |) (Expenses \$ | 238,767,000 | ıncludıng grants of \$ | 109,277,000) (Revenue \$ | 322,151,000) |
| | University is composed | | wo campuses, inc | luding its Law School located | grees It enrolls 9,600 undergraduate a d in Newark, New Jersey Day and eve | |
| | (Code |) (Expenses \$ | 82,404,000 | including grants of \$ | 10,811,000) (Revenue \$ | 4,700,000) |
| | Academic Support and primary missions of in | Student Services - Academ struction, research and publi | ic Support provide c service Student | s support services, such as services provide various se | libraries, academic technology, faculty rvices to students, which contribute to of the University's formal instructional | curnculum development, for it the students' emotional and |
| | | | | | | |
| 4 c | (Code |) (Expenses \$ | 10,073,000 | , | 216,000) (Revenue \$ | 884,000) |
| | ındıvıduals and groups | | The University also | | ng and knowledge and provides non-ii students through academic scholarship | |
| | | | | | | |
| 4d | Other program se (Expenses \$ | rvices (Describe in Sch inc | iedule O) Iluding grants o | of\$ |) (Revenue \$ |) |

331,244,000

Total program service expenses ►

| art TV | Check | list 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^{\bullet} | 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? <i>If "Yes," complete Schedule C, Part III</i> | 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 | 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 $\sqrt{2}$ | 10 | Yes | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | | |
| 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 | |
| С | 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 | 11d | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet} | 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 | |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes | |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Yes | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | No |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | 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? <i>If "Yes," complete Schedule G, Part I</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 | | |

| 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? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | Yes | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | 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 | | Νo |
| 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 | | No |
| 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 | | | |
| | | 28a | Yes | |
| | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | Yes | |
| С | 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> | 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 |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 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 | | | No |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🐉 | 37 | | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Part V | · · | Yes | No. |
|----|--|----------|------|-----|
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 448 | | 162 | 140 |
| | Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0 | 1 | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | . 03 | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | Yes | |
| la | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | Yes | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | Yes | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | N |
| h | If "Yes," enter the name of the foreign country | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot . | 5a | | N |
|) | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | N |
| 2 | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | E. | | |
| a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 5c 6a | | N |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| | Organizations that may receive deductible contributions under section 170(c). | | 1 | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Yes | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | N |
| ł | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| 2 | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | N |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | N |
| | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as | | | |
| 1 | required? | 7g | | |
| | Form 1098-C? | 7h | | |
| _ | , | 8 | | |
| | Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9a 9b | | |
| , | Section 501(c)(7) organizations. Enter | 90 | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
|) | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| | Section 501(c)(12) organizations. Enter | | | |
| 3 | Gross income from members or shareholders | 4 | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states | | | |
| _ | m which the organization is neclised to issue qualified health plans | 1 | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | N |
| | Dia the organization receive any payments for muoor taining services duffing the tax year (| l Tag | l | IN. |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| Check if Schedule O contains a re | esponse or note to an | v line in this Part VI | _ | _ | _ | | _ | _ | _ | _ | _ | マ |
|--------------------------------------|-----------------------|-------------------------|-------|---|---|------|---|---|---|---|---|----|
| Check is self-caute of contains a re | caponac or note to un | y mile in this i art 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 | 43 | | | |
| | 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 | 33 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a busin other officer, director, trustee, or key employee? | | | 2 | Yes | |
| 3 | Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management com | | | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since t | | · | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the org | anız | ation's assets? | 5 | | No |
| 6 | Did the organization have members or stockholders? | | | 6 | | Νο |
| 7a | Did the organization have members, stockholders, or other persons who had the power more members of the governing body? | | | 7a | Yes | |
| b | Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body? | by) r | nembers, stockholders, | 7b | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written action 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, w organization's mailing address? If "Yes," provide the names and addresses in Schedule C | | | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not re | | | evenu | ıe Cod | e.) |
| | | | • | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | | Νo |
| b | If "Yes," did the organization have written policies and procedures governing the actival affiliates, and branches to ensure their operations are consistent with the organization | | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its the form? | gov | erning body before filing | 11a | Yes | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Fo | rm 9 | 90 | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 $$. | | | 12a | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? | ınte • | rests that could give | 12b | Yes | |
| C | Did the organization regularly and consistently monitor and enforce compliance with the state of | he p | olicy? If "Yes," describe | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | | | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | | | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a revieundependent persons, comparability data, and contemporaneous substantiation of the | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | Yes | |
| b | Other officers or key employees of the organization | | | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? | sım • | ılar arrangement with a | 16a | | No |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements? | step | s to safeguard the | 16b | | |

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply own website. Another's website. Upon request. Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 - ►STEPHEN A GRAHAM 400 SOUTH ORANGE AVENUE
 - South Orange, NJ 07079 (973) 761-9003

| Form 990 (2014) | |
|-----------------|--|
|-----------------|--|

|) | a | g | e | 7 |
|---|---|---|---|---|
|---|---|---|---|---|

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

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

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 (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the |
|-----------------------|---|---|---|---|---|
| | for related organizations below dotted line) | Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |

Form **990** (2014)

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

| (A) Name and Title | (B) A verage hours per week (list any hours | more t perso | han d n is l | ne l both | box, an d | officer stee) | į | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the |
|-----------------------|---|-----------------------------------|-----------------------|--------------|--------------|------------------------------|--------|---|--|---|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |

| 1b | Sub-Total | • | | | |
|----|---|---|-----------|--------|-----------|
| c | Total from continuation sheets to Part VII, Section A | • | | | |
| d | Total (add lines 1b and 1c) | ► | 7,144,044 | 12,141 | 1,338,907 |
| | | | | | |

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►234

| | | | Yes | No | | | |
|---|--|---|-----|----|--|--|--|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | Yes | | | | |
| 4 | | | | | | | |
| | ındıvıdual | 4 | Yes | | | | |
| 5 | 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 I for such person | 5 | | No | | | |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

| , | 5 | , | | | | |
|--|--------------------------------------|---------------------|--|--|--|--|
| (A) Name and business address | (B) Description of services | (C) Compensation | | | | |
| Torcon Inc, 328 Newman Springs Rd 5 RED BANK, NJ 07701 | General Contracting | 32,605,014 | | | | |
| Gourmet Dining Services, 400 South Orange Avenue SOUTH ORANGE, NJ 07079 | Catering | 9,367,654 | | | | |
| Samuel S Graham Inc, PO Box 319 EAST HANOVER, NJ 07936 | General Contracting | 4,412,398 | | | | |
| The Leggis Group Inc, 2333 US Highway 22 West UNION, NJ 07083 | General Contracting | 3,519,175 | | | | |
| Temco Service Industries Inc, One Park Avenue NEW YORK, NY 10016 | Housekeeping | 3,426,236 | | | | |
| Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶76 | | | | | | |

| Part VIII | | Statement o | f Revenue ule O contains a respon | se or note to any lir | | | | <u>.</u> | |
|---------------------------------------|----------|---|---|-----------------------|----------------------|--|---|--|--|
| | 1a | Federated cam | paigns 1a | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 | |
| its nts | _ | | | | | | | | |
| ons, Gifts, Grants Similar Amounts | b | | es 1b | | | | | | |
| s, G Am | С | Fundraising eve | ents 1c | 514,000 | | | | | |
| Sift Iar | d | Related organiz | zations 1d | | | | | | |
| īs, (| e | Government grant | s (contributions) 1e | 29,517,000 | | | | | |
| Contributions, and Other Sim | f | All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines | | 12,819,000 | j | į | | | |
| ıti Ot | g | Noncash contribution 1a-1f \$ | ons included in lines | 645,000 | | | | | |
| Con' and | h | Total. Add lines | s 1a-1f | 🗼 | 42,850,000 | | | | |
| | | | | Business Code | | | | | |
| nue | 2a | TUITION & FEES | | 900099 | 286,746,000 | 286,746,000 | | | |
| ж | ь | ROOM AND BOARD |) | 900099 | 30,614,000 | 30,614,000 | | | |
| Program Serwce Revenue | c | FEES AND CONTRA | | 900099 | 884,000 | 884,000 | | | |
| er wi | d | GOVERMENT AGEN MEDICAL RESIDEN | | 900004 | 1,334,000 | 1,334,000 | | | |
| Š | e | | | 30001 | 1,551,660 | 1,55 1,666 | | | |
| graf | f | All other progra | am service revenue | | | | | | |
| Ρ̈́ | | | | _ | | | | | |
| | g 3 | | ome (including dividence | | 319,578,000 | | | | |
| | | | ar amounts) | | 5,467,000 | | -4,000 | 5,471,000 | |
| | 4 | Income from inves | stment of tax-exempt bond p | proceeds | 5,000 | | | 5,000 | |
| | 5 | Royalties | | | 312,000 | | 225,000 | 87,000 | |
| | 63 | Gross rents | (1) Real 276,000 | (II) Personal | | | | | |
| | ь | Less rental | 34,000 | | | | | | |
| | _ | expenses Rental income | 242,000 | 0 | | | | | |
| | . | or (loss) | · | | 242,000 | | | 242,000 | |
| | d | Net rental inco | me or (loss) (ı) Securities | ► (II) O ther | 242,000 | | | 242,000 | |
| | 7a | Gross amount from sales of assets other than inventory | 275,336,000 | (ii) o thei | | | | | |
| | ь | Less cost or | 265 225 220 | 2 222 222 | | | | | |
| | | other basis and sales expenses | 265,325,000 | 2,209,000 | | | | | |
| | C | Gain or (loss) | 10,011,000 | -2,209,000 | 7 002 000 | | | 7 002 000 | |
| | d 8a | | ss) | · · · · • | 7,802,000 | | | 7,802,000 | |
| Other Revenue | - Gu | ¥ | luding ,000 s reported on line 1c) | | | | | | |
| r G | | | a | 485,000 | | | | | |
| the | | | penses b | 505,000 | -20,000 | | | -20,000 | |
| 0 | 9a | | (loss) from fundraising (rom gaming activities ie 19 | events 🛌 | -20,000 | | | -20,000 | |
| | ь | | a penses b | | | | | | |
| | | Gross sales of returns and allo | | /ities | 0 | | | | |
| | | | a oods sold b | | | | | | |
| | <u>c</u> | Miscellaneous | (loss) from sales of inve | Business Code | 0 | | | | |
| | 11a | NCAA/CONFE DISTRIBUTIO | RENCE | 900099 | 2,981,000 | 2,981,000 | | | |
| | ь | ATHLETICS T | | 900099 | 1,719,000 | 1,719,000 | | | |
| | С | PARKING | | 812930 | 1,462,000 | | | 1,462,000 | |
| | d | All other reven | ue | | 4,409,000 | 3,457,000 | 286,000 | 666,000 | |
| | e | Total. Add lines | s 11a-11d | ▶ [| 10,571,000 | | | | |
| | 12 | Total revenue. | See Instructions | · · · · • | 386,807,000 | 327,735,000 | 507,000 | 15,715,000 | |

Part IX Statement of Functional Expenses

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

| Section | on 501(c)(3) and 501(c)(4) organizations must complete all columns Al Check if Schedule O contains a response or note to any line in this | | | | |
|---------|--|--------------------|------------------------------------|-------------------------------------|-----------------------------------|
| | ot include amounts reported on lines 6b, p, 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 | 1,559,000 | 1,559,000 | | |
| 2 | Grants and other assistance to domestic individuals See Part IV, line 22 | 118,745,000 | 118,745,000 | | |
| 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 | 4,446,000 | 2,203,000 | 1,504,000 | 739,000 |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | 653,000 | 653,000 | | |
| 7 | Other salaries and wages | 113,666,000 | 96,371,000 | 14,443,000 | 2,852,000 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 6,902,000 | 5,851,000 | 878,000 | 173,000 |
| 9 | Other employee benefits | 23,883,000 | 19,067,000 | 4,015,000 | 801,000 |
| 10 | Payroll taxes | 8,084,000 | 6,860,000 | 1,022,000 | 202,000 |
| 11 | Fees for services (non-employees) | | | | _ |
| а | Management | 175,000 | 150,000 | 25,000 | |
| b | Legal | 1,040,000 | 682,000 | 358,000 | _ |
| С | Accounting | 222,000 | | 222,000 | |
| d | Lobbying | 130,000 | | 130,000 | |
| е | Professional fundraising services See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 2,437,000 | | 2,430,000 | 7,000 |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 24,945,000 | 22,078,000 | 2,646,000 | 221,000 |
| 12 | Advertising and promotion | 1,315,000 | 981,000 | 277,000 | 57,000 |
| 13 | Office expenses | 8,156,000 | 6,378,000 | 1,460,000 | 318,000 |
| 14 | Information technology | 5,218,000 | 2,175,000 | 3,043,000 | |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 7,797,000 | 7,491,000 | 306,000 | |
| 17 | Travel | 7,756,000 | 6,909,000 | 601,000 | 246,000 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 | Conferences, conventions, and meetings | 2,848,000 | 2,191,000 | 511,000 | 146,000 |
| 20 | Interest | 5,469,000 | 5,385,000 | 84,000 | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 15,510,000 | 14,568,000 | 892,000 | 50,000 |
| 23 | Insurance | 2,066,000 | 39,000 | 2,027,000 | |
| 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 | 7,084,000 | 5,618,000 | 1,309,000 | 157,000 |
| b | BOOKS AND SUBSCRIPTIONS | 3,123,000 | 3,049,000 | 29,000 | 45,000 |
| c | BAD DEBT PROVISION | 1,846,000 | | 1,846,000 | |
| d | MEMBERSHIPS | 1,204,000 | 847,000 | 340,000 | 17,000 |
| e | All other expenses | 1,630,000 | 1,394,000 | 222,000 | 14,000 |
| 25 | Total functional expenses. Add lines 1 through 24e | 377,909,000 | 331,244,000 | 40,620,000 | 6,045,000 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

Form 990 (2014)

Part X Balance Sheet

| Par | t X | Balance Sheet Check if Schedule O contains a response or note to any line i | n this | Part X | | | |
|---------------|--------|--|--------------------|-------------|--------------------------|-------------|------------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash-non-interest-bearing | | | 28,273,000 | 1 | 21,184,000 |
| | 2 | Savings and temporary cash investments | | | 3,025,000 | 2 | 2,378,000 |
| | 3 | Pledges and grants receivable, net | | | 14,014,000 | 3 | 9,093,000 |
| | 4 | Accounts receivable, net | | | 3,909,000 | 4 | 4,058,000 |
| | 5 | Loans and other receivables from current and former officers employees, and highest compensated employees Complete Schedule L | of | o | 5 | 0 | |
| ts | 6 | Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, an and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul | ributing employers | 0 | 6 | 0 | |
| Assets | , | Notes and loans receivable, net | | | 14,054,000 | 7 | 13,911,000 |
| AS | 7 8 | Inventories for sale or use | | | 14,004,000 | 8 | 13,311,000 |
| | 9 | Prepaid expenses and deferred charges | | | 11,684,000 | 9 | 10,332,000 |
| | 10a | Land, buildings, and equipment cost or other basis | Ι. | I | 11,004,000 | | 10,552,550 |
| | 104 | Complete Part VI of Schedule D | 10a | 514,322,000 | | | |
| | ь | Less accumulated depreciation | 10b | 232,802,000 | 270,932,000 | 10 c | 281,520,000 |
| | 11 | Investments—publicly traded securities | | | 212,971,000 | 11 | 198,324,000 |
| | 12 | Investments—other securities See Part IV, line 11 | 82,080,000 | 12 | 92,473,000 | | |
| | 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 | | | 11,136,000 | 15 | 5,814,000 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) . | | | 652,078,000 | 16 | 639,087,000 |
| | 17 | Accounts payable and accrued expenses | | | 46,079,000 | 17 | 37,964,000 |
| | 18 | Grants payable | | | 0 | 18 | 0 |
| | 19 | Deferred revenue | | | 14,346,000 | 19 | 12,982,000 |
| | 20 | Tax-exempt bond liabilities | | | 134,879,000 | 20 | 127,983,000 |
| S | 21 | Escrow or custodial account liability Complete Part IV of Sc | hedule | e D | 0 | 21 | 0 |
| Liabilitie | 22 | Loans and other payables to current and former officers, dire key employees, highest compensated employees, and disqua | | trustees, | | | |
| jab | | persons Complete Part II of Schedule L | | | 0 | 22 | 0 |
| | 23 | Secured mortgages and notes payable to unrelated third part | ies . | • | 0 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 0 | 24 | 0 |
| | 25 | Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete FD | art X | | 28,298,000 | 25 | 27,688,000 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 223,602,000 | 26 | 206,617,000 |
| 5 | | Organizations that follow SFAS 117 (ASC 958), check here | | | | | |
| eg | | lines 27 through 29, and lines 33 and 34. | | | | | |
| <u>a</u> | 27 | Unrestricted net assets | | | 256,535,000 | 27 | 257,821,000 |
| Fund Balances | 28 | Temporarily restricted net assets | | | 86,503,000 | 28 | 87,010,000 |
| nd | 29 | Permanently restricted net assets | | | 85,438,000 | 29 | 87,639,000 |
| or Fu | | Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34. | | ► 「 and | | | |
| Ş | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| Assets | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| Ą | 32 | Retained earnings, endowment, accumulated income, or othe | r funds | i | | 32 | |
| Net | 33 | Total net assets or fund balances | | | 428,476,000 | 33 | 432,470,000 |
| | 34 | Total liabilities and net assets/fund balances | | | 652,078,000 | 34 | 639,087,000 |
| | | | | | | | Form 990 (2014) |

| Pai | Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI | | | | F |
|-----|--|---------|-------------|--------|---------|
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 386,8 | 307,000 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 377,9 | 909,000 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 8,8 | 398,000 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 428,4 | 176,000 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | 306,000 |
| 6 | Donated services and use of facilities | 6 | | · · | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | | -1,0 | 98,000 | |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | 432,4 | 170,000 |
| Par | t XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . Г |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Νo |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both | wed or | וי | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both | rate | | | |
| | ▼ Separate basis | | | | |
| c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant? | t of th | e 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | 1 | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | е | 3a | Yes | |
| 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 | | 3b | 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

| Form 990, Part VII - Compensation Compensated Employees, and Inde | | | | ıru | 316 | es, I | ve à | | iest | |
|---|---|-----------------------------------|-----------------------|--|---|--|--------|---------------|---------------|--------------------------|
| (A) Name and Title | (B) A verage hours per week (list any hours for related | | | (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 | | | | |
| | organizations below dotted line) | Individual trustae or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1033 11130/ | 2/1033 11130/ | related organizations |
| (1) A Gabriel EstebanPhD President/Regent/Trustee | 45 0 0 0 | х | | х | | | | 644,031 | 0 | 103,112 |
| (1) Most Reverend John J Myers Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (2) Most Rev Paul G Bootkoski | 1 0 | х | | | | | | 0 | 0 | 0 |
| (3) Most Rev Arthur J Serratelli Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (4) Most Rev Dennis J Sullivan Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (5) Most Rev Kurt R Burnette Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (6) Monsignor Robert Coleman Regent/Trustee | 45 0 0 0 | х | | | | | | 40,662 | 0 | 63,059 |
| (7) Monsignor Thomas P Nydegger Regent/Trustee | 5 0 | х | | | | | | 3,700 | 11,141 | 18,566 |
| (8) Monsignor Joseph R Reilly Trustee | 45 0 0 0 | х | | | | | | 34,339 | 0 | 114,749 |
| (9) Monsignor Robert J Wister Trustee | 45 0 5 0 | х | | | | | | 32,679 | 1,000 | 58,259 |
| (10) Most Reverend Bernard A Hebda Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (11) Patrick M Murray Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (12) Reverend Mark O'Malley Trustee | 45 0 | х | | | | | | 26,238 | 0 | 36,649 |
| (13) Pamela M SwartzbergEsq Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (14) William B Aimetti Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (15) Robert E Baldını Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (16) Henry F D'Alessandro Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (17) Mark E Ganton Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (18) Phillip N Maisano Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (19) Donna M O'Brien Regent/Trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| (20) Joseph Sheridan Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (21) Eun-Sook Lucy Cho-LeeMD Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (22) David B Gerstein Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (23) James E Collins Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| (24) Richard F Liebler Regent | 1 0 | х | | | | | | 0 | 0 | 0 |
| <u> </u> | | | | | - | | | <u>I</u> | <u> </u> | <u> </u> |

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

| Compensated Employees, and Independent Contractors | | | | | | | | | | | | |
|--|---|-----------------------------------|-----------------------|---|---|---|--------|--------------|--------------|--|--|--|
| (A) Name and Title | (B) A verage hours per week (list any hours | | | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the | | | | | | |
| | for related organizations below dotted line) | Individual trustae or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations | | |
| (26) Michael J Lucciola | 1 0 | х | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | | | | | | | Ů | Ů | | | |
| (1) Francis J Hager | 1 0 | x | | | | | | 0 | 0 | 0 | | |
| Regent/Trustee (2) Dr Michael Loeven | 0 0 | | | | | | | | | | | |
| Regent | 0 0 | Х | | | | | | 0 | 0 | 0 | | |
| (3) Richard Mandelbaum | 1 0 | ,, | | | | | | | | | | |
| Regent | 0 0 | Х | | | | | | 0 | 0 | 0 | | |
| (4) John D Hayes | 1 0 | X | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | | | | | | | | | | | |
| (5) Robert S Basso | 1 0 | × | | | | | | 0 | 0 | 0 | | |
| Regent (6) James T Boyle Jr | 0 0 | | | | | | | | | | | |
| | 0 0 | Х | | | | | | 0 | 0 | 0 | | |
| Regent (7) Stephen G Waldıs | 1 0 | | | | | | | | | | | |
| Regent | 0 0 | × | | | | | | 0 | 0 | 0 | | |
| (8) Robert B BudelmanEsq | 1 0 | х | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | _ ^ | | | | | | Ů | Ü | 0 | | |
| (9) Mary Ann Christopher | 1 0 | l x | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | | | | | | | | | | | |
| (10) Beatriz M Manetta | 1 0 | × | | | | | | 0 | 0 | 0 | | |
| Regent (11) Helen Lerner | 0 0 | | | | | | | | | | | |
| Regent | 0 0 | X | | | | | | 0 | 0 | 0 | | |
| (12) Robert A Ley | 1 0 | x | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | ^ | | | | | | 0 | U | U | | |
| (13) James L Orsını | 1 0 | l x | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | | | | | | | | | | | |
| (14) Richard C McMahon | 1 0 | х | | | | | | 0 | 0 | 0 | | |
| Regent (15) William M Staats | 0 0 | | | | | | | | | | | |
| Regent | 0 0 | Х | | | | | | 0 | 0 | 0 | | |
| (16) Edward C Cerny | 1 0 | ,, | | | | | | | | | | |
| Regent | 0 0 | Х | | | | | | 0 | 0 | 0 | | |
| (17) Mark D Benjamın | 1 0 | l x | | | | | | 0 | 0 | 0 | | |
| Regent | 0 0 | | | | | | | _ | _ | | | |
| (18) Larry A RobinsonEdD | 45 0 | | | х | | | | 435,418 | 0 | 53,792 | | |
| Provost & Executive V P (19) David J BohanMBA | 0 0 45 0 | | | | | | | | | | | |
| V P University Advancement | 0 0 | | | х | | | | 342,476 | 0 | 55,594 | | |
| (20) Dennis J GarbiniMBA | 45 0 | | | | | | | | | | | |
| V P Administration | 0 0 | | | X | | | | 251,406 | 0 | 44,793 | | |
| (21) Tracy H GottliebPhD | 45 0 | | | Х | | | | 212,951 | 0 | 59,631 | | |
| V P Student Services | 0 0 | | | <u> </u> | | | | 212,931 | | 37,031 | | |
| (22) Stephen A GrahamMBA | 45 0 | | | × | | | | 230,248 | 0 | 45,963 | | |
| VP Finance/CFO (23) Catherine A KiernanJD | 0 0 45 0 | - | | | | | | | | | | |
| | 0 0 | | | × | | | | 257,863 | 0 | 52,963 | | |
| V P General Counsel (24) Alyssa McCloudPhD | 45 0 | | | | | | | | | | | |
| V P Enrollment Management | 0 0 | | | Х | | | | 312,984 | 0 | 32,522 | | |
| | • | - | - | | • | • | | - | - | | | |

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

| Compensated Employees, and Independent Contractors | | | | | | | | | | | |
|--|---|-----------------------------------|-----------------------|--|---|---|--------|--------------|--------------|--|--|
| (A) Name and Title | (B) A verage hours per week (list any hours | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the | | | | | |
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations | |
| (51) Monsignor Anthony ZiccardiSTD V P Mission & Ministry | 45 0 0 0 | | | х | | | | 57,277 | 0 | 58,259 | |
| (1) Michael S Zavada PhD Dean College of Arts & Science | 45 0 | | | | х | | | 167,417 | 0 | 35,458 | |
| (2) Patrick E HobbsJDLLM Dean School of Law | 45 0 0 0 | | | | х | | | 480,724 | 0 | 67,837 | |
| (3) Joyce A StrawserPhD Dean School of Business | 45 0 | | | | х | | | 232,793 | 0 | 65,967 | |
| (4) Kevin Willard Head Coach Men's Basketball | 45 0 | | | | | х | | 1,492,509 | 0 | 67,870 | |
| (5) Anthony J Bozzella Head Coach Women's Basketball | 45 0 | | | | | х | | 371,957 | 0 | 73,234 | |
| (6) Brian B Shulman PhD Dean School of Health & Med | 45 0 | | | | | х | | 262,321 | 0 | 35,858 | |
| (7) Andrea Bartoli PhD Dean School of Diplomacy | 45 0 0 0 | | | | | х | | 259,736 | 0 | 53,075 | |
| (8) Patrick G Lyons Dir of Athletics & Rec Svcs | 45 0 0 | | | | | х | | 433,435 | 0 | 49,116 | |
| (9) Joan F GuettıPhD Former Dean Arts & Sciences | 45 0 0 0 | | | | | | Х | 174,637 | 0 | 24,365 | |
| (10) Kathleen BoozangJDLLM FORMER VICE PROVOST | 45 0 | | | | | | х | 206,085 | 0 | 32,811 | |
| (11) Karen E BoroffPhD Former Dean School of Business | 45 0 | | | | | | х | 180,158 | 0 | 35,405 | |
| Torrier Dean School of Dusiness | 1 | l | l | | <u> </u> | | | | | | |

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

Employer identification number Name of the organization Seton Hall University 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). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 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 See section 509(a)(2), (Complete Part III) 10 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 must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. 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)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

| Pa | Support Schedule for (Complete only if you c | | | | | | |
|----------|--|--------------------------------|---------------------|-------------------|---------------------|--|-------------------|
| | Part III. If the organiza | | | | | | aamy anao. |
| S | ection A. Public Support | • | • | | , , | , | |
| Cal | endar year (or fiscal year beginning | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | in) ► | (4) 2010 | (5) 2022 | (3) 23 22 | (2) 2010 | (0) 2021 | (1) otal |
| 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 | | | | | | |
| _ | (f) | | | | - | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | |
| S | ection B. Total Support | • | • | • | • | | |
| Cal | endar year (or fiscal year beginning | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| _ | in) ► | (4) 2010 | (5) 2011 | (6) 2012 | (4) 2013 | (0) 2011 | (i) rotar |
| 7 | A mounts from line 4 | | | | | | |
| 8 | Gross income from interest, dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar | | | | | | |
| | sources | | | | | | |
| 9 | Net income from unrelated | | | | | | |
| | business activities, whether or not the business is regularly carried | | | | | | |
| | on | | | | | | |
| 10 | Other income Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI) Total support Add lines 7 through | | | | | | |
| 11 | 10 | | | | | | |
| 12 | Gross receipts from related activities | s, etc (see inst | ructions) | | | 12 | |
| 13 | First five years. If the Form 990 is f | | | | | | |
| | organization, check this box and sto | | | | | <u> </u> | ▶ ┌ |
| <u>S</u> | ection C. Computation of Pub Public support percentage for 2014 | | | 11 column (f)\ | | | |
| | · · · · · · · · · · · · · · · · · · · | • | | 11, Column (1)) | | 14 | |
| 15 | Public support percentage for 2013 | - | • | | | 15 | |
| 16a | 33 1/3% support test—2014. If the and stop here. The organization qual | | | | line 14 is 33 1/3% | or more, cneck | tnis box ▶□ |
| b | 33 1/3% support test—2013. If the | | | | , and line 15 is 33 | 3 1/3% or more, c | . , |
| | box and stop here. The organization | | | | , | -, - · · · · · · · · · · · · · · · · · · | ▶ □ |
| 17a | 10%-facts-and-circumstances test- | | | | | | |
| | is 10% or more, and if the organization | | | | | | |
| | in Part VI how the organization mee organization | is the lacts-and | u-circumstances" | test The organi | Zacion quanties as | a publicly suppo | orted F |
| ь | 10%-facts-and-circumstances test— | - 2013. If the ora | anızatıon dıd not o | check a box on lu | ne 13, 16a, 16b. d | or 17a, and line | -1 |
| _ | 15 is 10% or more, and if the organ | | | | | | |
| | Explain in Part VI how the organizat | ion meets the "f | acts-and-circums | stances" test Th | e organization qua | alıfıes as a publıc | |
| 10 | supported organization | ا الما المام المام المام المام | , a hay an line 43 | 165 165 17- | or 17h obselvelse | . hav and | ► □ |
| 18 | Private foundation. If the organization instructions | on ala not check | ca DOX OH HITE 13 | , 10a, 10b, 1/a, | or 170, CHECK THIS | S DOX alla See | ▶ □ |

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 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, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 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 and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

| Section A. All Supporting Organizations |
|---|
|---|

| Se | ection 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 | | |
| За | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | За | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? 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? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | 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 by or in connection with its supported organizations. | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes. | 4c | | |
| 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 | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 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 . | 9b | | |
| c | 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 . | 9c | | |
| L0a | 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). | 10b | | |
| l1 | 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 | | |

c 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

| Pa | rt IV Supporting Organizations (continued) | | | |
|----|--|----|-----|----|
| 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 | | | |
| | | | 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 | | | |
| 1 | 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 | Activities Test Answer (a) and (b) below. | | Yes | No |
| | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3 | | | | |
| | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. | За | | |
| | b Did the organization evergice a substantial degree of direction over the policies, programs and activities of each | | | l |

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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

| 1 | _ | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other |
|-----|----|---|
| ype | [] | II non-functionally integrated supporting organizations must complete Sections A through E |

| | Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---|--|---|----------------|--------------------------------|
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |

| | Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|---|--|----|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI) | | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

| | | Current Year |
|---|---|--------------|
| | 1 | |
| | 2 | |
| | 3 | |
| ĺ | 4 | |
| | 5 | |
| | 6 | |

| Section D - Distributions | Current Year | | |
|---|-------------------------------|--|---|
| 1 Amounts paid to supported organizations to accom | plish exempt purposes | | |
| 2 A mounts paid to perform activity that directly furthexcess of income from activity | ers exempt purposes of supp | ported organizations, in | |
| 3 Administrative expenses paid to accomplish exemp | ot purposes of supported org | anızatıons | |
| 4 Amounts paid to acquire exempt-use assets | | | |
| 5 Qualified set-aside amounts (prior IRS approval rec | nured) | | |
| | | | |
| 6 Other distributions (describe in Part VI) See instru | JCTIONS | | |
| 7 Total annual distributions. Add lines 1 through 6 | | | |
| 8 Distributions to attentive supported organizations t details in Part VI) See instructions | o which the organization is r | esponsive (provide | |
| 9 Distributable amount for 2014 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-2014 | (iii) Distributable Amount for 2014 |
| 1 Distributable amount for 2014 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions) | | | |
| 3 Excess distributions carryover, if any, to 2014 | | | |
| a From 2009 | | | |
| b From 2010 | | | |
| c From 2011 | | | |
| d From 2012 | | | |
| e From 2013 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) | | | |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 Distributions for 2014 from Section D, line 7 \$ | | | |
| A pplied to underdistributions of prior years | | | |
| b Applied to 2014 distributable amount | | | |
| c Remainder Subtract lines 4a and 4b from 4 | | | |
| 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) | | | |
| 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) | | | |
| 7 Excess distributions carryover to 2015. Add lines 3j and 4c | | | |
| 8 Breakdown of line 7 | | | |
| a From 2010 | | | |
| b From 2011 | | | |
| c From 2012 | | | |
| d From 2013 | | | |

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

Facts And Circumstances Test

| Return Reference | Explanation |
|------------------|-------------|

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493127007586

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Seton Hall University Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

| 5 c | hedule C (Form 990 or 990-EZ) 2014 | | | | | Page 2 |
|-----|--|---------------------------|------------------------|-----------------|--|-----------------------------|
| Ρ | art II-A Complete if the organization under section 501(h)). | is exempt under | section 501(c | :)(3) and file | d Form 5768 | |
| | Check If the filing organization belongs to a expenses, and share of excess lobb | ying expenditures) | | _ | p member's nam | e, address, EIN, |
| | Limits on Lobbying E (The term "expenditures" means an | xpenditures | | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to influence public o | pinion (grass roots lob | bying) | | | |
| b | Total lobbying expenditures to influence a legisla | ative body (direct lobby | ying) | | | |
| c | Total lobbying expenditures (add lines 1a and 1b | o) | | | | |
| d | Other exempt purpose expenditures | | | | | |
| е | Total exempt purpose expenditures (add lines 1 | c and 1d) | | | | |
| f | Lobbying nontaxable amount Enter the amount fo | rom the following table | ın both | | | |
| | If the amount on line 1e, column (a) or (b) is: | The lobbying nontax | | | | |
| | Not over \$500,000 | 20% of the amount on lir | ne 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the | e excess over \$500,00 | 00 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the | e excess over \$1,000, | 000 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the | excess over \$1,500,0 | 00 | | |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount (enter 25% of lin | ne 1f) | | | | |
| h | Subtract line 1g from line 1a If zero or less, ente | er-0- | | | | |
| i | Subtract line 1f from line 1c If zero or less, ente | ır - 0 - | | | | |
| j | If there is an amount other than zero on either lin section 4911 tax for this year? | ne 1h or line 1ı, did the | organızatıon file F | Form 4720 repo | rtıng | ┌ Yes ┌ No |
| | 4-Year Av (Some organizations that made a s columns below. See t | | ection do not | have to com | | ne five |
| | Lobbying Expe | enditures During | 4-Year Avera | ging Period | | |
| | Calendar year (or fiscal year beginning in) | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | | |
| ь | 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)) | | | | | |

Grassroots lobbying expenditures

| Ра | Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). | | | | | | |
|-------|---|--|--|------------------------------|---------------------------------|--------|--|
| For a | ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying | (a) | | (b) | | | |
| activ | | Yes | No | A | moui | nt | |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | | | | |
| а | Volunteers? | | 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 | |
| e | Publications, or published or broadcast statements? | Yes | | | | | |
| f | Grants to other organizations for lobbying purposes? | Yes | | | | 18,864 | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | Yes | | | 13 | 37,733 | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | No | | | | |
| i | O ther activities? | | Νo | | | | |
| j | Total Add lines 1c through 1i | | | | 1: | 57,797 | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | No | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | I | | | | | |
| Par | t III-A Complete if the organization is exempt under section 501(c)(4), section 5 | 01(c |)(5), o | r se | ctio | n | |
| | 501(c)(6). | | | | | | |
| | | | _ | _ | Yes | No | |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | <u> </u> | 1 | | _ | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | 3 | | | |
| Par | tIII-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes." | | | | | | |
| 1 | Dues, assessments and similar amounts from members | 1 | | | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | | | | | |
| а | Current year | 2a | | | | | |
| ь | Carryover from last year | 2b | | | | | |
| c | Total | 2c | | | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | | | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and | | | | | | |
| | political expenditure next year? | 4 | | | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | | | | | |
| Pa | rt IV Supplemental Information | | | | | | |
| | vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1 Also, complete this part for any additional information | ıp lıst), | Part II | ·A , lı | nes 1 | . and | |
| | Return Reference Explanation | | | | | | |
| | Seton Hall University lobbied state legislators regarding annual independent vities Seton Hall University lobbied state legislators regarding annual independent consisted of direct mailings, phone calls and personal meetings. Membe contacted regarding student aid and grants for various university prograinvolved in lobbying efforts. The value of that staff time is approximately been reported on Line 7 (other salaries and wages) and not separately in IX. statement of Functional Expenses. | t colled rs of C ms Th \$27,8 | ge stude ongress e Unive 72 Tho | nts were rsity se c | Effort : 's sta osts l | iff is | |

| Part IV Supplemental Information (continued) | | | | | |
|--|-------------|--|--|--|--|
| Return Reference | Explanation | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

Schedule C (Form 990 or 990EZ) 2014

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

DLN: 93493127007586

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to 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.

Open to Public

| | me of the organization on Hall University | | Employer identification number | | | |
|--------|---|--|--------------------------------|----------------------|------------|-------------|
| Da | rt I Organizations Maintaining Donor Ad | vised Funds or Other Similar | | 1500645 | Comple | to if the |
| · | organization answered "Yes" to Form 990 | | runus | or Accounts | • Comple | ite ii tile |
| | | (a) Donor advised funds | | (b) Funds and | other acco | unts |
| | Total number at end of year | | | | | |
| | Aggregate value of contributions to (during year) | | | | | |
| | Aggregate value of grants from (during year) | | | | | |
| | Aggregate value at end of year | | | | | |
| | Did the organization inform all donors and donor advis funds are the organization's property, subject to the o | | onor advı | sed | ┌ Yes | ┌ No |
| | Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit? | | | | ☐ Yes | ┌ No |
| aı | t II Conservation Easements. Complete if | f the organization answered "Yes" | ' to Form | n 990, Part I' | V, line 7. | |
| | Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held | n or education) Preservation of a | a certified | d historic struc | cture | |
| | easement on the last day of the tax year | | | | | |
| _ | Total number of conservation easements | | 2- | Held at the | End of the | e Year |
| a b | Total acreage restricted by conservation easements | | 2a 2b | | | |
| : | Number of conservation easements on a certified hist | oric structure included in (a) | 2D 2c | | | |
| I | Number of conservation easements included in (c) acc | ` , | 20 | | | |
| | historic structure listed in the National Register | | 2d | | | |
| | Number of conservation easements modified, transfer | red, released, extinguished, or termina | ited by th | e organization | during | |
| | the tax year - | | | | | |
| | Number of states where property subject to conservat | tion easement is located ► | | | | |
| | Does the organization have a written policy regarding enforcement of the conservation easements it holds? | the periodic monitoring, inspection, ha | indling of | violations, and | ☐ Yes | ┌ No |
| | Staff and volunteer hours devoted to monitoring, inspe | ecting, and enforcing conservation eas | ements d | uring the year | | |
| | * | | | | | |
| | Amount of expenses incurred in monitoring, inspecting | g, and enforcing conservation easemer | nts during | the year | | |
| | * \$ | | | | | |
| | Does each conservation easement reported on line 2 (and section $170(h)(4)(B)(II)$? | d) above satisfy the requirements of s | ection 17 | '0(h)(4)(B)(ı) | ☐ Yes | ┌ No |
| | In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem | ne footnote to the organization's financi | | | | |
| ar | Complete if the organization answered " | | , or Oth | ner Similar | Assets. | |
| a | If the organization elected, as permitted under SFAS : works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote | 116 (ASC 958), not to report in its rev ets held for public exhibition, education | n, or rese | arch in further | | |
| b | If the organization elected, as permitted under SFAS : works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these | 116 (ASC 958), to report in its revenu ets held for public exhibition, educatior | e statem | ent and balanc | | olic |
| | (i) Revenue included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| | (ii) Assets included in Form 990, Part X | | | F \$ | 1,0 | 73,000 |
| | If the organization received or held works of art, historical following amounts required to be reported under SFAS | | | | | |
| ı | Revenue included in Form 990, Part VIII, line 1 | | | - \$ | 2 | 20,000 |
| ь | | | | | | |
| _ | Assets included in Form 990, Part X | | | F > | | |

| Part | Organizations Maintaining Co | llections of Art, | Hist | toric | al Trea | sures, or O | the | r Similar As | sets (c | ontınued) |
|--------|--|--------------------------------|---------|---------|------------------------------|-------------------------|--------|------------------------------|--|-------------------------|
| 3 | Using the organization's acquisition, access collection items (check all that apply) | ion, and other record | ls, ch | eck a | ny of the 1 | following that a | re a | significant use | of its | |
| а | Public exhibition | | d | Γ | Loan or e | xchange progr | ams | | | |
| b | Scholarly research | | e | Γ | Other | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's c Part XIII | ollections and explai | n how | they | further th | ne organization | 's ex | empt purpose ı | n | |
| 5 | During the year, did the organization solicit | | | | | | | | - | <u> </u> |
| Dav | assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang | • | | | | | | <u> </u> | Yes | ✓ No |
| Pai | Part IV, line 9, or reported an ar | | | | | | u i | es to roilli 9 | 90, | |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | | | | | | ets r | | _ Yes | □ No |
| b | If "Yes," explain the arrangement in Part XI $$ | [I and complete the f | follow | ıng ta | able | _ | | | | |
| | | | | | | - | | Am | ount | |
| c | Beginning balance | | | | | - | 1c | | | |
| d | Additions during the year | | | | | - | 1d | | | |
| e | Distributions during the year | | | | | - | 1e | | | |
| f | Ending balance | | | | | L | 1f | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | 21, f | or es | crow or cu | ustodial accou | nt lıa | bility? | Yes | ∏ No — |
| ь | If "Yes," explain the arrangement in Part XI | | | | | - | | | | <u> </u> |
| Pa | rt V Endowment Funds. Complete | | | | | | _ | | (a)[aur. | voore book |
| 1a | Beginning of year balance | (a)Current year 272,174,000 | | rior ye | 66,000 | 227,198,000 | _ | 234,593,000 | | ears back 66,196,000 |
| b | Contributions | 3,227,000 | | 3,5 | 76,000 | 899,000 | | 679,000 | | 2,398,000 |
| c | Net investment earnings, gains, and losses | | | | | | | | | |
| | Grants or scholarships | 10,750,000 2,742,000 | | | 87,000 58,000 | 25,222,000 2,785,000 | _ | 2,077,000 2,611,000 | | 78,428,000 |
| d e | Other expenditures for facilities | 2,742,000 | | 2,0 | 30,000 | 2,703,000 | | 2,011,000 | | 2,014,000 |
| - | and programs | 15,988,000 | | 10,2 | 62,000 | 8,285,000 | | 7,591,000 | | 6,875,000 |
| f | Administrative expenses | 3,473,000 | | 1,3 | 35,000 | 783,000 | | -51,000 | | 2,940,000 |
| g | End of year balance | 263,948,000 | | 272,1 | 74,000 | 241,466,000 | | 227,198,000 | 2 | 34,593,000 |
| 2 | Provide the estimated percentage of the cur | rent year end balanc | e (lıne | e 1g, | column (a | a)) held as | | | | |
| а | Board designated or quasi-endowment ► | 41 600 % | | | | | | | | |
| b | Permanent endowment ► 33 200 % | | | | | | | | | |
| c | Temporarily restricted endowment ► 25 | 200 % | | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c sho | uld equal 100% | | | | | | | | |
| 3a | Are there endowment funds not in the posse organization by | ssion of the organiza | tıon t | hat a | re held an | id administered | d for | the | | |
| | (i) unrelated organizations | | _ | _ | | | _ | 3a(| Yes i) Yes | No |
| | (ii) related organizations | | | | | | | 3a(i | | No |
| b | If "Yes" to 3a(II), are the related organization | ns listed as required | on S | ched | ule R? . | | | Зъ | , | |
| 4 | Describe in Part XIII the intended uses of t | ne organization's end | lowme | ent fu | nds | | | | | |
| Par | t VI Land, Buildings, and Equipme | | he or | ganı | zatıon aı | nswered 'Yes | ' to | Form 990, Pa | rt IV, l | ine |
| | 11a. See Form 990, Part X, line Description of property | 10. | | | Cost or other (investment | | | (c) Accumulated depreciation | (d) Bo | ook value |
| 12 1 | _and | | | | | 3,022 | 000 | | 1 | 3,022,000 |
| | Buildings | | _ } | | | 444,523 | _ | 182,568,000 | 26 | 51,955,000 |
| | Leasehold improvements | | · | | | 774,323, | 550 | 102,300,000 | | 21, 233,000 |
| | Equipment | | | | | 59,623, | 000 | 50,234,000 | 1 | 9,389,000 |
| | Other | | . | | | 7,154, | - | 0 | 1 | 7,154,000 |
| | I. Add lines 1a through 1e (Column (d) must e | | | mn (E | 3), line 10(| | • | | 28 | 31,520,000 |
| | - · · · · · · | · | | • | , | | | Schedule D | 1 | |

| See Form 990, Part X, line 12. | npiete if the organization a | inswered 'Yes' to Form 990, Part IV, line 11b. |
|---|------------------------------|--|
| (a) Description of security or category | (b)Book value | (c) Method of valuation |
| (including name of security) | | Cost or end-of-year market value |
| (1)Financial derivatives (2)Closely-held equity interests | | |
| (3)Other | | |
| (A) OUTSIDE TRUST | 8,803,000 | F |
| (B) HEDGE FUNDS | 25,808,000 | F |
| (C) COMMINGLED FUNDS | 36,058,000 | F |
| (D) PRIVATE EQUITY | 10,668,000 | F |
| | | <u> </u> |
| (E) VENTURE CAPITAL | 2,928,000 | F |
| (F) PRINCIPAL GLOBAL REAL ESTATE | 8,208,000 | F |
| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) | 92,473,000 | |
| Part VIII Investments—Program Related. Co | , , | answered 'Yes' to Form 990, Part IV, line 11c. |
| See Form 990, Part X, line 13. | | |
| (a) Description of investment | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| | | |
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| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) | > | |
| Total: (Column (B) mast equal form 550, fact X, cor (B) line 15) | | Part IV, line 11d See Form 990, Part X, line 15 |
| (a) Descri | ption | (b) Book value |
| | | |
| | | |
| | | |
| | | |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 | | |
| Part X Other Liabilities. Complete if the orga | | ▶ Form 990, Part IV, line 11e or 11f. See |
| Form 990, Part X, line 25. | | <u> </u> |
| 1 (a) Description of liability | (b) Book value | |
| Federal income taxes | 12.705.000 | |
| REFUNDABLE U.S. GOV'T GRANTS CONDITIONAL ASSET RETIRE OBLIG | 12,785,000 8,312,000 | |
| INTEREST RATE SWAP AGREEMENTS | 5,574,000 | |
| ACCRUED POSTRETIREMENT BENEFIT | 1,017,000 | |
| | | |
| | | |
| - | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | 27,688,000 | |
| | | |

| Schedu | ıle D (I | Form 990) 2014 | | | Page 4 | | | | | |
|--|-------------|---|--|--|--|--|--|--|--|--|
| Part | ΧI | | evenue per Audited Financial Statements With Revenue pwered 'Yes' to Form 990, Part IV, line 12a. | er R | eturn Complete If | | | | | |
| 1 | Total | | r support per audited financial statements | 1 | 267,179,000 | | | | | |
| 2 | A mou | ints included on line 1 bu | it not on Form 990, Part VIII, line 12 | | | | | | | |
| a | Netu | nrealized gains (losses) | on investments 2a -3,806,000 | | | | | | | |
| b | Dona | ted services and use of f | acılıtıes 2b 493,000 | | | | | | | |
| c | Reco | veries of prior year grants | s 2c | | | | | | | |
| d | Othe | r (Describe in Part XIII) | | | | | | | | |
| e | Addl | ines 2a through 2d . | | 2e | -3,277,000 | | | | | |
| 3 | Subtr | act line 2e from line 1 . | | 3 | 270,456,000 | | | | | |
| 4 | A mou | ınts ıncluded on Form 99 | 0, Part VIII, line 12, but not on line 1 | | | | | | | |
| а | Inves | stment expenses not incl | uded on Form 990, Part VIII, line 7b . 4a 2,437,000 | | | | | | | |
| b | Othe | r (Describe in Part XIII) | 4b 113,914,000 | | | | | | | |
| c | A dd I | ines 4a and 4b | | 4c | 116,351,000 | | | | | |
| 5 | Total | revenue Add lines 3 and | d 4c. (This must equal Form 990, Part I, line 12) | 5 | 386,807,000 | | | | | |
| Part | XII | | xpenses per Audited Financial Statements With Expenses | per | Return. Complete | | | | | |
| | | | swered 'Yes' to Form 990, Part IV, line 12a. | | 262405000 | | | | | |
| 1 | | | r audited financial statements | 1 | 263,185,000 | | | | | |
| 2 | | | t not on Form 990, Part IX, line 25 | | | | | | | |
| a | | | acilities | | | | | | | |
| b | | • | <u>2b</u> | | | | | | | |
| C | | | <u>2</u> c | | | | | | | |
| d | | | | _ | | | | | | |
| е | | - | | 2e | 2,170,000 | | | | | |
| 3 | | | | 3 | 261,015,000 | | | | | |
| 4 | | | 0, Part IX, line 25, but not on line 1: | | | | | | | |
| a | | | uded on Form 990, Part VIII, line 7b 4a 2,437,000 | | | | | | | |
| b | | | | | | | | | | |
| С | | | | 4c | 116,894,000 | | | | | |
| 5 | | Supplemental Inf | nd 4c. (This must equal Form 990, Part I, line 18) | 5 | 377,909,000 | | | | | |
| Provi Part \ | de the | descriptions required for | Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to | | de any additional | | | | | |
| | Re | eturn Reference | Explanation | | | | | | | |
| Part II | I, lıne | 4 | Collections are composed of a mural, ancient Greek and Roman coins, be | ook co | l ollections, paintings, | | | | | |
| | • | | wild life art collections, and a special collection of research papers. Colle | ctions | 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 | | | | | | | |
| Part V | , lıne 4 | | Endowment funds support the University's mission by providing a sustair | nable f | flow of funds to annual | | | | | |
| | | | operations This support includes funds for scholarships and for specific a University has adopted an endowment spending policy designed to provide operations. The policy is intended to balance current spending needs a endowment's future purchasing power. The University applies a 4.5% spending average of endowment investment funds. The Board of Regents sepurpose of using a moving average is to smooth out any wide fluctuations. Endowment earnings in excess of the spending rate are added back to the investments. In years when yield exceeds the amount appropriated under excess is returned to principal as appreciation. When annual yield is insulappropriations, the balance is provided from accumulated appreciation. | de a property of the a property of the series of the serie | redictable flow of funds eserve the grate to a three-year e spending rate The e market value cipal of the endowment spending policy the at to support spending | | | | | |
| | | | for certain purposes in addition to the spending rate, as approved by the University's Board of Regents, annually | | | | | | | |
| Part X, line 1 Other Liabilities - Income Taxes | | | The FASB ASC Topic 740 established criterion that an individual tax posall of the benefits of that position to be recognized in an entity's financial required the University to determine whether a tax position is more likely upon examination by the applicable taxing authority, including resolution litigation processes, based on the technical merits of the position. The U presently in place to ensure the maintenance of its tax-exempt status, to unrelated income, determine its filing and tax obligations in jurisdictions to review other matters that may be considered tax positions. The tax ye 2014, and 2015 remain open to audit for both federal and state purposes for the University on July 1, 2008, and did not have an impact on the Uni | stated than of any nivers o ident for wh ars en | ments This standard not to be sustained related appeals or sity has processes tify and report ich it has nexus, and ading 2012, 2013, standard was effective | | | | | |

Change in value of interest rate SWAP agreements of \$36,000

\$34,000, and less special events expenses of \$505,000

\$505,000 and rental expense of \$34,000

Financial aid of \$114,457,000

Financial Aid of \$114,457,000, less limited partnership loss of \$4,000, less rental expense of

Provision for uncollectible contributions receivable of \$1,138,000, plus special events expense of

statements

Part XI, Line 2D - Other

Part XI, Line 4b - Other

Part XII, Line 2D - Other

Part XII, Line 4B - Other

| Jenedale 2 (1 31111 33 3) 23 13 | | 1 age 3 | | |
|------------------------------------|----------------|----------------|--|--|
| Part XIII Supplemental Information | on (continued) | | | |
| Return Reference | Explanation | | | |
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Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493127007586

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number Name of the organization Seton Hall University 22-1500645 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 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 b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes ${f d}$ Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? Νo 5h 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? 6a Yes **b** Has the organization's right to such aid ever been revoked or suspended? 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

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

| Return Reference | Explanation | | | | |
|--|--|--|--|--|--|
| Part I, Line 3 | The University's racially nondiscriminatory policy appears in its Undergraduate and Graduate catalogs, as well as in the Admission Prospectus it is also in all new spaper advertisements and the University's website | | | | |
| Line 6 - Explanation of Government Financial Aid | The University participates in various Federal and State financial aid programs, which include, but are not limited to the following programs. Federal Direct Lending Program, Federal Pell Grant, Federal College Work Study, Federal Supplemental Education Opportunity Grant, N J State Tuition Assistance Grant and N J State Education Opportunity Fund | | | | |

Schedule E (Form 990 or 990-EZ) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493127007586

OMB No 1545-0047

Employer identification number

Department of the Treasury

Internal Revenue Service

Name of the organization

SCHEDULE F

(Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

Open to Public **Inspection**

| Seto | n Hall University | | | | 22-1500645 | |
|------|---|-------------------------------------|---|---|---|--|
| Pa | rt I General Information "Yes" to Form 990, Par | | | he United States. C | | ation answered |
| 1 | For grantmakers. Does the cand other assistance, the grants or a used to award the grants or a | ┌ Yes ┌ No | | | | |
| 2 | For grantmakers. Describe in assistance outside the United Activites per Region (The follow | d States. | | | | s and other |
| | (a) Region | (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 |
| (1) | Central America and the Caribbean | | - | Investments | | 32,590,000 |
| (2) | East Asia and the Pacific | 1 | 1 | Program Services | Student Recruitment | 55,000 |
| (3) | East Asia and the Pacific | | | Program Services | MBA Program | 8,000 |
| (4) | | | | | | |
| (5) | | | | | | |
| | Sub-total Total from continuation sheets to Part I | 1 | 1 | | | 32,653,000 |
| | Totals (add lines 3a and 3b) | 1 | 1 | | No FOOOSW Galacte | 32,653,000 |

| Pā | | | | | | ited States. Compl duplicated if additior | | | to Form 990, |
|----|--------------------------|---|--------------------|-------------------------|------------------------------|---|--|--|--|
| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| (| 1) | | | | | | | | |
| (| 2) | | | | | | | | |
| (| 3) | | | | | | | | |
| (| 4) | | | | | | | | |
| 2 | | | | | | les by the foreign co (c)(3) equivalency l | | | |
| 3 | Enter total nur | nber of other ord | ganizations or ent | ities | | | | | |

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

| Part III can be | <u>e duplicated if addit</u> | cional space is no | eded. | | | | |
|---------------------------------|------------------------------|--------------------------|-------|------------------------------------|--|--|--|
| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | | (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) |
| (1) | | | | | 7 | | 1 |
| (2) | | + | | | <u> </u> | | <u> </u> |
| (3) | | + + | | | <u> </u> | | <u>'</u> |
| (4) | | + + | | | | | <u> </u> |
| (5) | | + + | | | † | | |
| (6) | | + + | · | | + | | |
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| (8) | + | | | | + | | + |
| (9) | | | | | | | |
| (10) | + | | | | + | | |
| (11) | + | + | | | + | | |
| (12) | | | | | | | |
| (13) | | | | | | | |
| (14) | | | | | | | |
| (15) | + | | · | | | | |
| (16) | | + | 1 | | | | |
| (17) | + | + | | | | | |
| (18) | + | + + | | | | | |
| | | | | | | | |

Part IV Foreign Forms

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

| Return Reference | Explanation |
|---------------------|--|
| Part I, Line 3, (1) | 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 2 & 3 | Support for student recruitment and academic exchange program developments. In July 2014, the Stillman School launched an executive-style MBA program in collaboration with Viagold International Education Management Group in Zhuhai, China Students are taught in Mandarin by a combination of Stillman faculty and faculty employed by Chinese universities, and the students spend a week during their final semester at Seton Hall's South Orange campus to complete the MBA program and participate in Graduate Commencement |

DLN: 93493127007586

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

Fundraising or Gaming Activities Complete if the organization answered "Yes" to 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.

Supplemental Information Regarding

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

Open to Public Inspection

| on Hall University | | | | | 22-15 | 00645 |
|---|--|-------------------------|--|--------------------------------------|--|----------------------------|
| | tivities. Complete uired to complete th | | ganızatıo | n answered "Yes" to |) Form 990, Pa | rt IV, line 17. Form 990-E |
| Indicate whether the org | anızatıon raısed funds | through a | ny of the f | ollowing activities Ch | eck all that apply | 1 |
| Mail solicitations | | | е | Solicitation of nor | n-government gra | ants |
| Internet and email s | olicitations | | f | Solicitation of gov | ernment grants | |
| Phone solicitations | | | g | Special fundraisir | g events | |
| ☐ In-person solicitation | ons | | | | | |
| Did the organization hav | | | | | | |
| If "Yes," list the ten high to be compensated at le | | | fundraıse | rs) pursuant to agreem | ents under which | n the fundraiser is |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | fundrai cust cont | Did ser have ody or trol of outions? | (iv) Gross receipts from activity | (v) A mount pa (or retained fundraiser list col (i) | by) (or retained by) |
| | | Yes | No | | | |
| | | | | | | |
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| ıl | | | > | | | |
| List all states in which the registration or licensing | ne organization is regis | tered or lı | censed to | solicit contributions o | r has been notifi | ed it is exempt from |

| Sche | dule | G (Form 990 or 990-EZ) 2014 | | | | Page 2 |
|-------------|-------|--|------------------------------|--|--------------------------|--|
| Pa | rt II | Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of | aising event contribut | | | |
| | | | (a) Event #1 Seminary Golf | (b) Event #2 Son LatinoGala | (c) O ther events | (d) Total events (add col (a) through col (c)) |
| di | | | (event type) | (event type) | (total number) | |
| Ĭ. | 1 | Gross receipts | 148,000 | 117,000 | 734,000 | 999,000 |
| Revenue | 2 | Less Contributions | 47,000 | 22,000 | 445,000 | 514,000 |
| | 3 | Gross income (line 1 minus line 2) | 101,000 | 95,000 | 289,000 | 485,000 |
| | 4 | Cash prizes | | | | |
| မှာ | 5 | Noncash prizes | 5,000 |) | 2,000 | 7,000 |
| Expenses | 6 | Rent/facility costs | | | 16,000 | 16,000 |
| ă | 7 | Food and beverages . | 37,000 | 33,000 | 233,000 | 303,000 |
| Direct | 8 | Entertainment | | 5,000 | 48,000 | 53,000 |
| à | 9 | Other direct expenses . | 9,000 | 11,000 | 106,000 | 126,000 |
| | 10 | Direct expense summary Add lir | nes 4 through 9 in column | (d) | | (505,000) |
| | 11 | Net income summary Subtract li | _ | | | -20,000 |
| Par | t II | | | "Yes" to Form 990, Pa | irt IV, line 19, or repo | · |
| Revenue | | \$15,000 on Form 990-EZ, li | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col (a) through col (c)) |
| Æ | 1 | Gross revenue | | | | |
| Ses | 2 | Cash prizes | | | | |
| sesued | 3 | Non-cash prizes | | | | |
| Direct D | 4 | Rent/facility costs | | | | |
| <u>ā</u> | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | │ Yes | ☐ Yes | ┌ Yes <u>%</u> ┌ No | |
| | 7 | Direct expense summary Add line | s 2 through 5 in column (| d) | | |
| | 8 | Net gaming income summary Sub- | tract line 7 from line 1, co | olumn (d) | | |
| 9 a b | Ist | er the state(s) in which the organization licensed to conduction." No," explain | t gaming activities in eac | h of these states? | | |
| 10a b | Wei | re any of the organization's gaming Yes," explain | licenses revoked, susper | nded or terminated during | the tax year? | |

| Sche | edule G (Form 990 or 990-EZ) 2014 | | | | Page 3 | | | | |
|------|---|--|---|--------------------|-----------------|--|--|--|--|
| 11 | Does the organization conduct gaming | activities with nonn | members? | T _{Yes} [| | | | | |
| 12 | Is the organization a grantor, beneficia | ry or trustee of a tru | ust or a member of a partnership or other entity | | | | | | |
| | formed to administer charitable gaming | ,, | | Г _{Yes} Г | — No | | | | |
| 13 | Indicate the percentage of gaming acti | | 1 1 | , , , , | | | | | |
| а | The organization's facility | | 13a | | % | | | | |
| b | An outside facility | | | | % | | | | |
| 14 | Enter the name and address of the pers | on who prepares th | ne organization's gaming/special events books and records | | | | | | |
| | Name ▶ | | | | | | | | |
| | Address ► | | | | | | | | |
| 15a | Does the organization have a contract | with a third party fro | om whom the organization receives gaming | | | | | | |
| 154 | | | | ┌ Yes 「 | – _{No} | | | | |
| b | If "Yes," enter the amount of gaming re amount of gaming revenue retained by | • | the organization > \$ and the | | | | | | |
| C | If "Yes," enter name and address of the | e third party | | | | | | | |
| | Name ► | | | | | | | | |
| | Address 🏲 | | | | | | | | |
| 16 | Gaming manager information | | | | | | | | |
| | Name 🟲 | | | | | | | | |
| | Gaming manager compensation 🕨 \$ | | ······ | | | | | | |
| | Description of services provided | | | | | | | | |
| | Director/officer | _ Employee | ☐ Independent contractor | | | | | | |
| 17 | Mandatory distributions | | | | | | | | |
| а | Is the organization required under state | s the organization required under state law to make charitable distributions from the gaming proceeds to | | | | | | | |
| | retain the state gaming license? | | | | | | | | |
| b | Enter the amount of distributions requi | red under state law | distributed to other exempt organizations or spent | | | | | | |
| | ın the organization's own exempt activi | | · | | | | | | |
| Pa | | | explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr | | | | | | |
| | Return Reference | | Explanation | | | | | | |
| | | | | | | | | | |

DLN: 93493127007586

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspect ion

Name of the organization Seton Hall University **Employer identification number**

22-1500645

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" to 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.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|----------------------------------|--------------------------------------|---|---|--|---------------------------------------|
| (1) Village of South Orange NJ 101 South Orange Avenue South Orange, NJ 07079 | 22-6002309 | 115 | 25,000 | | | | See Part IV |
| (2) Essex County Park 115 Clifton Ave Newark, NJ 07104 | 22-6002433 | 115 | 1,500,000 | | | | See Part IV |
| (3) Saint Paul's Outreach 110 Crusader Ave West St St Paul, MN 55118 | 41-1621192 | 501(C)(3) | 25,000 | | | | |
| (4) Mater Dei Prep High School 538 Church St Middletown, NJ 07748 | 21-0680607 | 501(C)(3) | | 9,000 | FMV | Used Computers | |

| 2 | Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | ► | 4 |
|---|---|---|---|
| 3 | Enter total number of other organizations listed in the line 1 table | • | |

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a)Type of grant or assistance | (b) Number of recipients | (c) A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|---------------------------------|-------------------------------------|--------------------------------------|--|---------------------------------------|
| (1) Federal Awards | 2118 | 10,609,000 | | | |
| (2) State of New Jersey Awards | 1752 | 12,213,000 | | | |
| (3) Institutional Support | 9658 | 95,923,000 | | | |

| 4 | | | | | |
|--|---|--|--|--|--|
| Part IV Supplemental Ir | Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. | | | | |
| Return Reference | Explanation | | | | |
| , and the second | 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 grant assistance | Village of South Orange - Construction of South Orange Performing Arts Center Essex County Park - Improvements to the Ivy Hill Park softball field | | | | |

Schedule I (Form 990) 2014

DLN: 93493127007586

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization Seton Hall University

Employer identification number

22-1500645

| | | | 22-1300043 | | | |
|----|---|--------------|--|----|-----|----|
| Pa | rt I Questions Regarding Compensati | ion | | | | |
| | | _ | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part 1 | | ny of the following to or for a person listed in Form vide any relevant information regarding these items | | | |
| | First-class or charter travel | 굣 | Housing allowance or residence for personal use | | | |
| | ▼ Travel for companions | Г | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | <u> </u> | | | | |
| | Discretionary spending account | [▼ | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses | | | 1b | | No |
| 2 | Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex | | | 2 | Yes | |
| 3 | Indicate which, if any, of the following the filing orgonization's CEO/Executive Director Check all used by a related organization to establish compe | I that apply | | | | |
| | Compensation committee | Г | Written employment contract | | | |
| | ✓ Independent compensation consultant | ₽ | Compensation survey or study | | | |
| | Form 990 of other organizations | <u> </u> | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990 or a related organization | 0, Part VII | I , Section A , line $1 a$ with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-contr | rol paymen | nt? | 4a | | No |
| b | Participate in, or receive payment from, a supplen | mental non | iqualified retirement plan? | 4b | | No |
| С | Participate in, or receive payment from, an equity | -based co | mpensation arrangement? | 4c | | No |
| | If "Yes" to any of lines $4a-c$, list the persons and | provide th | ne applicable amounts for each item in Part III | | | |
| | Only 501(c)(3), 501(c)(4), and 501(c)(29) organia | izations mu | ust complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of | | | | | |
| а | The organization? | | | 5a | Yes | |
| b | Any related organization? | | | 5b | | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of | A, line 1a | , did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | No |
| b | Any related organization? | | | 6b | | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | | | | |
| 7 | For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes, | | | 7 | Yes | |
| 8 | Were any amounts reported in Form 990, Part VII | | | | | |
| | | d ın Regula | itions section 53 4958-4(a)(3)? If "Yes," describe | | | |
| | ın Part III | | | 8 | | No |
| 9 | If "Yes" to line 8, did the organization also follows section 53 4958-6(c)? | the rebutta | able presumption procedure described in Regulations | 9 | | |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

| (A) Name and Title | (B) Breakdown o | f W-2 and/or 1099-MIS | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of | (F) Compensation in |
|---------------------------|--------------------------|---|---|--------------------------------|------------------------|-----------------------|--|
| | (i) Base compensation | (ii) Bonus & ıncentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | columns (B)(ı)-(D) | column(B) reported as deferred in prior Form 990 |
| See Additional Data Table | | | | | | | |

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

| Return Reference | Explanation |
|------------------|--|
| Part I, Line 1a | As a condition of employment at the University, the University provided housing and related services at no charge to its President, A Gabriel Esteban, and its Provost & Executive Vice President, Larry A Robinson In addition, housing and related services were provided at no charge to members of its priest community which included an officer, along with certain Regents and Trustees listed in Form 990, Part VII (Monsignor Anthony Ziccardi, Monsignor Joseph R Reilly, Monsignor Robert Coleman, Monsignor Thomas P Nydegger, Monsignor Robert J Wister and Reverend Mark O'Malley) The value of the housing and related benefits are included in Part VII, Column F, and, for the President and Provost, they are also included in Schedule J, Part II, Column D THE PRESIDENT'S SPOUSE ACCOMPANIED HIM ON CERTAIN BUSINESS TRIPS, AND SHE PROVIDED BUSINESS SERVICES AS A VOLUNTEER FOR THE UNIVERSITY ON THOSE TRIPS THE COST TO THE UNIVERSITY WAS APPROXIMATELY \$3,705 IT IS INCLUDED IN NONTAXABLE BENEFITS IN SCHEDULE J, PART II The University paid membership fees to a country club for its men's basketball coach, Kevin Willard, women's basketball coach Anthony J Bozzella, and Director of Athletics & Recreational services, Patrick 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 \$14,963,\$22,097, and \$26,103, respectively They are included in nontaxable benefits in Schedule J, Part II |
| Part I, Line 5a | Patrick G Lyons, Director of 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 input into her bonus |

Schedule J (Form 990) 2014

Software ID: Software Version:

EIN: 22-1500645

Name: Seton Hall University

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

| Form 990, Schedule J, Pa | 11 C 11 | , - Officers, Direct | ors, rrustees, key | / Employees, and | riighest compens | ated Lilipioyees | | · |
|--|-------------|--------------------------|---|---|--|--------------------------------|------------------------------------|---|
| (A) Name and Title A Gabriel EstebanPhD | | (i) Base Compensation | of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation | SC compensation (iii) Other reportable compensation | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(ı)-(D) | (F) Compensation in column (B) reported as deferred in prior Form 990 |
| A Gabriel EstebanPhD, President/Regent/Trustee | (1) (11) | · | 146,250 | 15,614 0 | 20,800 | 82,312 | 747,143 | 0 0 |
| Larry A RobinsonEdD, Provost & Executive V P | (I) (II) | | 100,000 | 10,324 | 20,800 | 32,992 0 | 489,210 | 0 |
| David J BohanMBA, V P University Advancement | (I) (II) | | 50,000 | 7,766 0 | 20,800 | 34,794 0 | 398,070 | 0 |
| Dennis J GarbiniMBA, V P Administration | (1) (11) | | 0 | 8,775 | 19,975 | 24,818 | 296,199 | 0 0 |
| Tracy H GottliebPhD, V P Student Services | (1) (11) | | 0 | 8,455 0 | 16,732 0 | 42,899 0 | 272,582 | 0 0 |
| Stephen A GrahamMBA, VP Finance/CFO | (I) (II) | | 0 | 7,411 0 | 18,133 0 | 27,830 0 | 276,211 | . 0 |
| Catherine A KiernanJD, V P General Counsel | (1) (11) | | 0 | 8,253 0 | 20,496 0 | 32,467 0 | 310,826 | 0 0 |
| Alyssa McCloudPhD, V P Enrollment Management | (1) (11) | | 55,000 | 7,442 0 | 20,194 0 | 12,328 | 345,506 | 0 0 |
| Michael S Zavada PhD, Dean College of Arts & Science | (I) (II) | | 0 | 946 0 | 13,599 0 | 21,859 0 | 202,875 | 0 |
| Joan F GuettiPhD, Former Dean Arts & Sciences | (I) (II) | | 0 | 987 0 | 14,011 | 10,354 0 | 199,002 | 0 0 |
| Patrick E HobbsJDLLM, Dean School of Law | (I) (II) | | 112,155 | 6,205 | 20,800 | 47,037 0 | , 548,561 0 | . 0 |
| Kathleen BoozangJDLLM, FORMER VICE PROVOST | (I) (II) | | 0 | 832 0 | 16,889 0 | 15,922 0 | 2 238,896 | 0 0 |
| Joyce A StrawserPhD, Dean School of Business | (1) (11) | | 0 | 514 0 | 18,956 0 | 47,011 0 | 298,760 | 0 0 |
| Kevin Willard, Head Coach Men's Basketball | (1) (11) | | 115,000 | 33,742 0 | 20,800 | 47,070 0 | 1,560,379 | 0 0 |
| Anthony J Bozzella, Head Coach Women's Basketball | (1) (11) | | 17,500 | 97,782 0 | 20,200 | 53,034 0 | 445,191 | . 0 |
| Brian B Shulman PhD, Dean School of Health & Med | (I) (II) | . _ | | 1 | | | 1 | I |
| Andrea Bartoli PhD, Dean School of Diplomacy | (1) (11) | | 0 | 8,258 0 | 20,606 0 | 32,469 0 | 312,811 | . 0 |
| Karen E BoroffPhD, Former Dean School of Business | (1) (11) | 0 | o o | 1,015 0 | 14,244 0 | 21,161 0 | . 215,563 | 0 0 |
| Patrick G Lyons, Dir of Athletics & Rec Svcs | (I) (II) | 331,589 | 80,000 | 21,846 0 | | | 482,551 | 0 0 |

DLN: 93493127007586

Open to Public

D

OMB No 1545-0047

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.

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

Inspection Employer identification number

22-1500645

С

Χ

Χ

| Name of the | organization |
|-------------|--------------|
| Seton Hall | University |

Department of the Treasury

Internal Revenue Service

| Р | art I Bond Issues | | | | | | | | | | | |
|-----|---|----------------|------------|-----------------|-----------------|--|-----|--------|---|----|-----|---------------|
| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP# | (d) Date issued | (e) Issue price | (f) Description of purpose (g) Defease | | feased | ed (h) On behalf of issuer | | | Pool ncing |
| | | | | | | | Yes | No | Yes | No | Yes | No |
| A | NJEFA - Seton Hall Issues 2008 D & E | 22-1829511 | 646065WZ1 | 12-11-2008 | 73,939,881 | SEE PART VI | | Х | | Х | | Х |
| В | NJEFA - Seton Hall - CIF 2004 A & 2006 A & 2014D | 22-1829511 | 64605LNM6 | 04-14-2004 | 7,805,700 | SEE PART VI | | Х | | Х | Х | |
| c ¯ | NJEFA - Seton Hall - Issue 2011 A | 22-1829511 | 646065U83 | 06-10-2011 | 37,578,532 | SEE PART VI | | Х | | Х | | Х |
| D | NJEFA - Seton Hall - CIF 2014B | 22-1829511 | 646066DG2 | 04-29-2014 | 19,369,367 | SEE PART VI | | Х | | Х | Х | |

Α

| Part II | Р | roc | ee | as |
|---------|---|-----|----|----|
| | | | | |

| 1 | A mount of bonds retired | | 7,135,000 | | 1,359,108 | 2 | 21,610,000 | | 0 |
|----|--|------------|------------|-----------|-----------|------------|------------|---------|------------|
| 2 | A mount of bonds legally defeased | 0 | | 0 | | | 0 | | 0 |
| 3 | Total proceeds of issue | 74,633,251 | | 7,805,700 | | 37,578,532 | | : | 19,369,367 |
| 4 | Gross proceeds in reserve funds | | 1,848,863 | | 0 | | 0 | | 0 |
| 5 | Capitalized interest from proceeds | | 0 | | 78,458 | | 0 | | 0 |
| 6 | Proceeds in refunding escrows | | 0 | | 0 | | 0 | | 0 |
| 7 | Issuance costs from proceeds | | 1,054,021 | | 56,467 | 411,094 | | 411,094 | |
| 8 | Credit enhancement from proceeds | | 156,565 | 59,024 | | 0 | | ו | |
| 9 | Working capital expenditures from proceeds | | 0 | 0 | | | 0 | | 0 |
| 10 | Capital expenditures from proceeds | | 685,153 | 7,611,751 | | | 0 | | 1,014,830 |
| 11 | O ther spent proceeds | | 70,880,432 | 0 | | ; | 37,167,438 | | 0 |
| 12 | O ther unspent proceeds | | 0 | | 0 | | 0 | | 0 |
| 13 | Year of substantial completion | 2008 | | 20 | 05 | 20 | 11 | 20 | 15 |
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 14 | Were the bonds issued as part of a current refunding issue? | x | | | x | Х | | | X |
| 15 | Were the bonds issued as part of an advance refunding issue? | | Х | Х | | | Х | | Х |

allocation of proceeds? Part IIII Private Business Use

16

17

| | | | ١ | i i | В | • | С | I | • |
|---|--|-----|----|-----|----|-----|----|-----|----|
| | | 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? | | | | × | | | | Х |
| 2 | Are there any lease arrangements that may result in private business use of bond-financed property? | | | | Х | | | | Х |
| | | | | | | | _ | | |

Χ

Χ

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

Has the final allocation of proceeds been made?

Х

Χ

В

Х

Χ

Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bondc Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 % 1 480 % 0 % 0 590 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 1 480 % 0 % 0 590 % Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b 0 % 0 % 0 % 0 % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Χ Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Х Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Х Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? b Χ Χ Χ Χ No rebate due? Χ c Х Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? CITIBANK NA Name of provider Term of hedge 22 C Was the hedge superintegrated? d Χ Was the hedge terminated? Х

| | date K (101111 330) 2011 | | | | | | | | rage J |
|-----|---|-----|----|-----|----|-----|----|-----|---------------|
| Par | t IV Arbitrage (Continued) | | | | | | | | |
| | | Α | | В | | С | | D | |
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 5a | Were gross proceeds invested in a guaranteed investment contract (GIC)? | | Х | | × | | X | | 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? | X | | | x | | X | | X |
| 7 | Has the organization established written procedures to monitor the requirements of section 148? | X | | X | | x | | x | |

Part V Procedures To Undertake Corrective Action

| | A | | В | | C | | ט | | |
|--|-----|----|-----|----|-----|----|-----|----|--|
| | 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 | | х | | X | | X | | |

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

Return Reference Explanation

OBLIGATING THE GRANT

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, LINE3, 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, NA 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 2 SETON HALL 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 BISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES BISSUE 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 IMPROVEMENTS THE 2001 SERIES G ISSUE WAS ISSUED IN JUNE 2001 TO FINANCE CAPITAL IMPROVEMENTS 3 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 K ARE 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 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 SETON HALL UNIVERSITY ISSUE, 2013 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 \$43.935.728 THAT WAS USED TO REFUND THE 2009 C BONDS AND TO FINANCE A PORTION OF THE COST TO TERMINATE THE RELATED SWAP AGREEMENT WAS \$7,800,307 THE REMAINDER OF \$36,135,421 WAS USED TO PAY COSTS OF ISSUANCE OF \$522,077, PAY \$2,405,009 OF CAPITALIZED INTEREST, AND DEPOSIT \$33,208,335 INTO A CONSTRUCTION FUND FOR 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 6 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

REBATE COMPUTATIONS WERE PERFORMED THROUGH JUNE 30, 2015 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, 2015 PART I, COLUMN(F) DESCRIPTION OF PURPOSE 1

Part IV, Line 2C

DLN: 93493127007586

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, 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.

| Nam | ne of the organization | | | | Employer identification num | | | | | | | | mber | | |
|-----|--|-----------------------|--------------------|-----------------|-----------------------------|----------------------|-----|----------------------|--------------|-------------------|--------|-------------------|---------------------|-----|---------------|
| Set | on Hall University | | | | | | | | | | | | | | |
| P | art I Bond Issues | | | | | | | | | | -15006 | | | | |
| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue | price | (f | f) Descriptio | n of purpose | (g) De | feased | beha | On alf of uer | | Pool ncing |
| | | | İ | | | | | | | Yes | No | Yes | No | Yes | No |
| A | NJEFA - Seton Hall - ELF ISSUE 2014B | 22-1829511 | 6460658J4 | 01-30-2014 | 8,13 | 31,497 | SEE | PART VI | | | Х | | Х | X | |
| В | ISSUE 2013D | | | | | 35,728 | SEE | PART VI | | | Х | | Х | | Х |
| P | art III Proceeds | | | | | • | | | | <u>'</u> | | | | | |
| | | | | | | ١ | | В | | | С | \longrightarrow | | D | |
| 1_ | | | | | | 25,2 | 253 | | 820,000 | | | \longrightarrow | | | |
| | | | | | | | 0 | | 0 | | | | | | |
| 3 | | | | | | 8,131,497 43,935,728 | | | | | | | | | |
| 4 | Gross proceeds in reserve ful | | | | | | 0 | | 0 | | | | | | |
| 5 | Capitalized interest from proc | | | | | | 0 | | 2,405,009 | | | \longrightarrow | | | |
| 6 | Proceeds in refunding escrow | | | | | | 0 | | 0 | | | \longrightarrow | | | |
| 7 | Issuance costs from proceed | | | | | 54, | 772 | | 522,077 | | | \longrightarrow | | | |
| 8 | Credit enhancement from pro | | | | 0 0 | | | | | \longrightarrow | | | | | |
| 9 | Working capital expenditures | | | | 0 0 | | | | | \longrightarrow | | | | | |
| 10 | Capital expenditures from pro | oceeds | | | 330,900 33,208,335 | | | | | | | | | | |
| 11 | O ther spent proceeds | | | | <u> </u> | | 0 | | 7,800,307 | | | | | | |
| 12 | O ther unspent proceeds | | | | | | 0 | | 0 | | | | | | |
| 13 | Year of substantial completio | n | | | 20 | | | 20 | | | | | | | ļ |
| ı — | | | | | Yes | No | | Yes | No | Yes | N N | lo | Yes | ; | No |
| 14 | Were the bonds issued as pai | | | | | Х | | Х | | | | | | | |
| 15 | Were the bonds issued as pai | rt of an advance refu | nding issue? | | | Х | | | Х | | | | | | |
| 16 | Has the final allocation of pro | ceeds been made? | | | х | | | Х | | | | | | | |
| 17 | Does the organization maintain adequate books and records to support the final allocation of proceeds? | | | | | | | Х | | | | | | | |
| Pa | Part IIII Private Business Use | | | | | | | | | | | | | | |
| l | | | - / | | | B V | · | | C | | | D | - N- | | |
| 1 | Was the organization a partne property financed by tax-exe | | ra member of an Ll | LC, which owned | Yes | No X | | Yes | No X | Yes | N | lo | Yes | + | No |

financed property?

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

Χ

Schedule K (Form 990) 2014 Page **2** Part IIII Private Business Use (Continued) C В D Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Χ of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0 670 % 1 190 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0 670 % 1 190 % Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of 0 % 0 % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Χ Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С D 1 2

| | | Yes | No | Yes | No | Yes | No | Yes | No | | | |
|----|--|----------------------------|----|-----|----|-----|----|-----|----|--|--|--|
| 1 | Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? | | X | | × | | | | | | | |
| 2 | If "No" to line 1, did the following apply? | | | | | | | | | | | |
| а | Rebate not due yet? | Х | | Х | | | | | | | | |
| b | Exception to rebate? | | Х | | Х | | | | | | | |
| С | No rebate due? | | 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 | | | | | | | |
| 4a | Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | X | | X | | | | | | | |
| b | Name of provider | 0 | | 0 | | | | | | | | |
| С | Term of hedge | | | | | | | | | | | |
| d | Was the hedge superintegrated? | | | | | | | | | | | |
| е | Was the hedge terminated? | | | | | | | | | | | |
| | | Schedule K (Form 990) 2014 | | | | | | | | | | |

| Par | Part IV Arbitrage (Continued) | | | | | | | | | | | | | |
|-----|---|-----|----|-----|----|-----|----|-----|----|--|--|--|--|--|
| | | Α | | В | | С | | D | | | | | | |
| | | Yes | No | Yes | No | Yes | No | Yes | No | | | | | |
| 5a | Were gross proceeds invested in a guaranteed investment contract (GIC)? | | Х | | Х | | | | | | | | | |
| b | Name of provider | 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? | X | | х | | | | | | | | | | |

Part V Procedures To Undertake Corrective Action

| | Α | | В | | C | | 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? | Х | | х | | | | | |

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

Schedule K (Form 990) 2014

DLN: 93493127007586

OMB No 1545-0047

Schedule L

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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 www.irs.gov/form990.

Open to Public Inspection

| | ame of the organization ton Hall University | | | | | | | | Employer identification number | | | | | | |
|---|--|-------------|-------------------------|----------------------------------|----------------------------|------------------------------|---------------------------|---------|------------------------------------|---------------|-------------|-----------------------|----------|--|--|
| Scion hall onlyci | Sity | | | | | | | | 22-15 | 00645 | | | | | |
| | ess Benefit | | | | | | | | | | | | | | |
| | plete if the orga | | | | | | | | | | | | | | |
| 1 (a) Nar | ne of disqualifie | d person | (b) I | | nip between and organiz | disqualified | (c) Desc | ription | of tra | nsaction | ' <u> </u> | (d) Cor | | | |
| | | | | person | anu organiz | ation | | | | | | Yes | No | | |
| | | | | | | 1 | | | | | | | | | |
| 4958. 3 Enter the Part II Loans to a Complete if the | amount of tax I amount of tax, nd/or From ne organization mount on Form | Interest | ed F | above, rei Persons on Form 9 | mbursed by | the organizati | on | | · · | ▶ \$ | | anızatıoı | 1 | | |
| (a) Name of interested person | (b) Relations with organiza | | se of | (d) Loar or from organizat | the | (e)Original principal amount | (f) Balance due | |) In (h) ault? Appro by boa commit | | ved d or | (i)Written agreement? | | | |
| | | | | То | From | | | Yes | No | Yes | No | Yes | No | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | · | | | | | | | | | | <u> </u> | | | |
| Total | | ▶ \$ | | | | | | | | | | | | | |
| Part III Gr | ants or Ass | istance B | | | | | art IV line 3 | 7 | | | | | | | |
| Part IIII Gr | omplete if the interested (| istance B | on a ship b erson | nswered between and the | "Yes" on | | | | ıstanc | e (e) |) Purpo | se of ass | sistance | | |

Part IV Business Transactions Involving Interested Persons.

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

| Complete if the organization | <u>n answered "Yes" on F</u> | <u>-orm 990, Part IV, iin</u> | e 28a, 28b, or 28c. | | |
|-------------------------------|--|-----------------------------------|--------------------------------|----------------------------------|----------|
| (a) Name of Interested person | (b) Relationship between interested person and the organization | (c) A mount of transaction | (d) Description of transaction | (e) Sh of organiz reven | tation's |
| | | | | Yes | No |
| (1) MARY ANN CHRISTOPHER | BROTHER OF REGENT | 89,411 | LEGAL SERVICES | | No |
| (2) WILLIAM M STAATS | REGENT | 612,000 | BANKING SERVICES | | No |
| ` ' | DAUGHTER OF OFFICER | 69,649 | COMPENSATION & BENEFITS | | No |
| (4) TRACY H GOTTLIEB | SISTER OF OFFICER | 112,717 | COMPENSATION & BENEFITS | | No |
| (5) TRACY H GOTTLIEB | SISTER OF OFFICER | 60,658 | COMPENSATION & BENEFITS | | No |

Part V Supplemental Information

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

| Return Reference | Explanation |
|---|--|
| PART IV Business Transactions Involving Interested Persons | The brother of Mary Ann Christopher, Regent, is a partner in the Law Firm of Gibbons P C Seton Hall University paid Gibbons P C \$89,411 for legal services in the year ended June 30, 2015, with one transaction in excess of \$10,000 William M Staats, Regent, is a managing director at US Trust, a business unit of Bank of America For the year ended June 30, 2015, the cost incurred by Seton Hall University for banking services provided by Bank of America was approximately \$612,000 A daughter of Dr Larry A Robinson, Provost & executive V P, served as an employee of the University In fiscal year 2015, she received total compensation and benefits of \$69,649 Two sisters of Dr Tracy H Gottlieb, V P for Student Services, served as employees of the University In fiscal year 2015 one sister received total compensation and benefits of \$112,717, and the second sister received total compensation and benefits of \$60,658 In all of the above business transactions involving interested persons (legal services, banking services, compensation and benefits), each transaction was conducted at arm's length and no party was involved in the deliberations or decision-making in the granting of the work or the hiring of the individual |

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493127007586

OMB No 1545-0047

Inspection

Open to Public

(Form 990)

SCHEDULE M

Name of the organization

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Seton Hall University

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

Employer identification number

| | | | | 22 | -1500645 | | | |
|-----|--|----------------------------------|--|---|--|-----|-----|-----|
| Pa | rt I Types of Property | | | | Г | | | |
| | | (a) Check If applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (eggleen) (eggle | | _ | nts |
| 1 | Art—Works of art | Χ | 2 | 20,000 | appraisal | | | |
| 2 | Art—Historical treasures . | | | | | | | |
| 3 | Art—Fractional interests | | | | | | | |
| 4 | Books and publications | Х | | 94,000 | appraisal | | | |
| 5 | Clothing and household goods | Х | | 1,000 | Cost | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| | Securities—Publicly traded . | Х | 34 | 465,000 | 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 | | | | | | | |
| | Real estate—O ther | | | | | | | |
| | Collectibles | | | | | | | |
| 19 | Food inventory | Х | 5 | 38,000 | Cost | | | |
| 20 | Drugs and medical supplies . | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| | Archeological artifacts | | | | | | | |
| | Other►(QUIPMENT) | . X | 1 | 16,000 | Cost | | | |
| | Other►(CELLANEOUS) | . X | 30 | 11,000 | Cost | | | |
| | O ther ▶() | | | | | | | |
| | O ther ▶ () | | | | | | | |
| 29 | Number of Forms 8283 received by th for which the organization completed F | | | | 9 | | | 1 |
| | | | | | | | Yes | No |
| 30a | During the year, did the organization | | | | | | | |
| | it must hold for at least three years fr | om the date | e of the initial contribution, | , and which is not required | l to be used | | | |
| | for exempt purposes for the entire ho | ldıng period | ? | | | 30a | | Νo |
| b | If "Yes," describe the arrangement in | Part II | | | | | | |
| 31 | Does the organization have a gift acc | eptance po | licy that requires the revie | w of any non-standard co | ntributions? | 31 | Yes | |
| 32a | Does the organization hire or use thir contributions? | d parties or | related organizations to s | olicit, process, or sell nor | ncash • • • | 32a | Yes | |
| b | If "Yes," describe in Part II | | | | | | | |
| 33 | If the organization did not report an a | mount in co | olumn (c) for a type of prop | erty for which column (a) | ıs checked, | | | |
| | describe in Part II | | | | | | | |

| 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | | | | |
| 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 securities, its investment broker is engaged to sell those securities. The University reimbursed a related party, the Roman Catholic Archdiocese of Newark, for administrative expenses incurred in conducting the Archbishop's annual appeal to raise funds from the congregation for the benefit of the University | | | | | | | | | |

Schedule M (Form 990) (2014)

DLN: 93493127007586

OMB No 1545-0047

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization Seton Hall University

Employer identification number

22-1500645

| Return Reference | Explanation |
|---------------------------|---|
| orm 990, Part III, Line 1 | |
| Form 990, Part VI | Part VI, Section A, Line 2 Three Board of Regents members have a business relationship with the Regent William Staats' team at US Trusts. 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 responsibility, power, and authority to govern the University and shall exercise the corporate powers of the University under Law. Board of Regent Emerit do not have voting privileges 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 University's By-Laws. Those powers include the right to amend the University's organizing documents, to authorize the sale of any University property and, most importantly, to elect the Board of Regents. Part VI, Section B, line 11. The Board of Regents adopted a written policy charging the Audt Committee with the responsibility to conduct, on an annual basis, an appropriate review of the University's completed Form 990 and Form 990-T prior to filing with Internal Revenue Service. The Audit Committee is also charged with making an appropriate report and recommendation to the Board of Regents on their review. Following review by the Audit Committee, Forms 990 and 990-T are submitted to the entire Board of Regents of its review and approval for filing with the Internal Revenue Service. The Board of Regents shall contemporaneously document the meeting at which the Forms 990 and 990-T are reviewed and approved for filing with the Internal Revenue Service. The Board of Regents ball contemporaneously document the meeting at which the Forms 990 and 990-T are reviewed and approved for filing. Part VI, Section B, Line 12c. The University's conflict of interest policy is posted on the University's somition of interest policy and proved for filing. Part VI, Section B, Line 12c. The University's complication of the sense of the Board of Regents of the Board of |
| Part XI, Line 9 | Change in value of interest rate swap agreements of \$36,000 less the provision for uncolle ctible contributions receivable of \$1,138,000, plus limited partnership loss of \$4,000 |

DLN: 93493127007586

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Seton Hall University

Related Organizations and Unrelated Partnerships

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

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

22-1500645 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | Section (13) co ent | 512(b) ntrolled |
|--|--------------------------------|---|----------------------------|--|--|---------------------------|--------------------|
| | | | | | | 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, Pa | art IV, line 34 |
|----------|--|-----------------|
| | because it had one or more related organizations treated as a partnership during the tax year. | |

| (a) | (b) | (c) | (d) | (e) | (f) | (g) | (h) |) | (i) | (j) | $\overline{}$ | (k) |
|---------------------------|------------------|-----------|-------------|-----------------|--------------|-------------|----------|----------|---------------|----------|-------------------|------------|
| Name, address, and EIN of | Primary activity | / Legal | Direct | Predominant | Share of | Share of | Dispropi | rtionate | Code V-UBI | Genera | al or | Percentage |
| related organization | , | domicile | controlling | income(related, | total income | end-of-year | allocati | ions? | amount in box | manac | ging | ownership |
| | , | (state or | entity | unrelated, | | assets | | ļ | 20 of | partne | er? | ľ |
| | , | foreign | i ' | excluded from | | | | ļ | Schedule K-1 | 1 | | ŀ |
| | , | country) | i ' | tax under | | | | ļ | (Form 1065) | 1 | | |
| | , | 1 | i ' | sections 512- | | | | ļ | () | 1 | | |
| | , | l J | i | 514) | | | L | | | <u> </u> | \longrightarrow | |
| | , | | | | | | Yes | No | | Yes | No | |
| | | | | | | | | | (| | | |
| | | | i | | | | | | | | — | |

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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 | Type of entity | Share of total | Share of end- | Percentage | Section 512 | |
| related organization | | domicile | entity | (C corp, S | ıncome | of-year | ownership | (b)(13) | |
| | | (state or foreign | | corp, | | assets | | controlled | |
| | | country) | | or trust) | | | | entity? | |
| | | | | | | | | Yes | No |
| | | | | | | | | | |

| | Transactions With Related Organizations Complete if the organization ans | Wered res offroi | 1111 550, Tarc 1 v , Illic | | 1 | |
|--|--|--|-----------------------------------|-------------------------------------|--------|------|
| | e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | <u></u> | Ye | s No |
| L During | the tax year, did the orgranization engage in any of the following transactions with one or more | related organizations | listed in Parts II-IV? | | | |
| a Red | eipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | 1a | | No |
| b Giff | , grant, or capital contribution to related organization(s) | | | 16 |) | No |
| c Gıft | , grant, or capital contribution from related organization(s) | | | 10 | : | No |
| d Loa | ns or loan guarantees to or for related organızatıon(s) | | | 1d | | No |
| e Loa | ns or loan guarantees by related organization(s) | | | 1e | : | No |
| f Div | dends from related organization(s) | | | 1f | | |
| g Sal | e of assets to related organization(s) | | | 19 | | No |
| h Pur | chase of assets from related organization(s) | | | 1h | | No |
| i Exc | hange of assets with related organization(s) | | | 1i | | No |
| j Lea | se of facilities, equipment, or other assets to related organization(s) | | | 1j | | No |
| k Lea | se of facilities, equipment, or other assets from related organization(s) | | | 1k | : | No |
| l Performance of services or membership or fundraising solicitations for related organization(s) | | | | | | |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | | | | | |
| n Sha | ring of facilities, equipment, mailing lists, or other assets with related organization(s) | | | 11 | 1 | No |
| | ring of paid employees with related organization(s) | | | 10 | | No |
| p Rei | mbursement paid to related organization(s) for expenses | | | 1p | Ye | s |
| q Rei | mbursement paid by related organization(s) for expenses | | | 1q | | No |
| r Oth | er transfer of cash or property to related organization(s) | | | 1r | | No |
| s Oth | er transfer of cash or property from related organization(s) | | | 1s | | No |
| | e answer to any of the above is "Yes," see the instructions for information on who must comple | te this line, including | covered relationships | and transaction thresholds | | |
| | (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount | ınvolv | ed |

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

| 4 <u> </u> | | | | | | | | | | | | | | |
|---|-------------------------|----------------------------------|---|------------------|--|------------------------------------|-------------------------------------|----------------------------------|--------|---|---|----|--------------------------------|--|
| (a) Name, address, and EIN of entity | (b) Primary activity | domicile (state or foreign | (d) Predominant income (related, unrelated, excluded from tax under sections 512- | s 50 orgai | (e) all partners section i01(c)(3) anizations? | (f) Share of total income | Share of Share of total end-of-year | (h) Disproprtionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership | |
| | | <u> </u> | 514) | Yes | No | <u> </u> | <u> </u> | Yes | No | | Yes | No | 1 | |
| | | | | \Box | | | | , | \Box | | | | ļ | |

Part VII Supplemental Information

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

| Return Reference | Explanation |
|-----------------------------------|---|
| 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 | |

Schedule R (Form 990) 2014