Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

A I	For ti	he 201	5 calendar year, or tax year beginning $07\%01$, 2015, and er	nding		06	/30, 2	016	
В			C Name of organization		D Employer iden	tifica	tion num	ber	
IB (Check if a	applicable:	SETON HALL UNIVERSITY		22-1500	645	5		
	Addr		Doing business as						
		e change	Number and street (or P.O, box if mail is not delivered to street address) Room/su	ite	E Telephone nur	nber			
	Initia	l return	400 SOUTH ORANGE AVENUE		(973) 763	1 – 9	318		
	Final	return/	City or town, state or province, country, and ZIP or foreign postal code						
-	Ame		SOUTH ORANGE, NJ 07079		G Gross receipts	\$	617	, 390	,000.
\vdash	relur Appl	lcation	F Name and address of principal officer: MARY J. MEEHAN		H(a) Is this a grou			Yes	X No
_	pend	ling	400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079		subordinates' H(b) Are all subordi		aludad2	Yes	No
_	Tayou	kempt st		527	If "No," attac		-		
<u>. </u>			atus: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) or WWW . SHU . EDU	321	-				928
J_					H(c) Group exemp tion: 1856 M	National Contract of the Contr			
_		-		ear of forma	tion: 1000 M	State	or legal do	omicile:	NO
	art l		ımmary			_			
	1		y describe the organization's mission or most significant activities:ON HALL UNIVERSITY IS A CATHOLIC INSTITUTION OF HIC	TIP DE	NICAMION				
Governance		SEI	ON HALL UNIVERSITY IS A CATHOLIC INSTITUTION OF HIC	HER EL	JUCATION				
E									
Ve	2		this box 🕨 🔃 if the organization discontinued its operations or disposed of mor			1.0			A 77
	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3			47.
9	4		er of independent voting members of the governing body (Part VI, line 1b)			4			37 .
iţi	5	Total	number of individuals employed in calendar year 2015 (Part V, line 2a)			5		4 ,	,079.
Activities &	6		number of volunteers (estimate if necessary)			6			788.
4	7a	Total	unrelated business revenue from Part VIII, column (C), line 12			7a		518,	,000.
	b	Net u	nrelated business taxable income from Form 990-T, line 34			7b			0 .
					Prior Year			rent Y	
ø	8	Contri	ibutions and grants (Part VIII, line 1h)		42,850,00				,000.
Revenue	9	Progra	am service revenue (Part VIII, line 2g)		319,578,00	0.	336,	178	,000.
eV	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)	1 2	13,274,00	0.	9,	974	,000.
æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,105,00	0.	10,	695	,000.
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).		386,807,00	0.	400,	917	,000.
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		120,304,00	0.	128,	991	,000.
	14		its paid to or for members (Part IX, column (A), line 4)			0.			0.
(n	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		157,634,00	0.	166,	685	,000.
Expenses	16 a		ssional fundraising fees (Part IX, column (A), line 11e)			0.			0.
De l	ь	Total 1	fundraising expenses (Part IX, column (D), line 25) 6,552,000.						
Ω	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		99,971,00	0.	105,	115	,000.
	18	Total	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		377,909,00	0.	400,	791	,000.
	19		nue less expenses. Subtract line 18 from line 12	• •	8,898,00				,000.
es		110101	not lock expenses. Capital into 10 from the 121, 111, 111, 111, 111, 111, 111, 111		nning of Current Y	_	En	d of Yea	
isets or	20	Total	assets (Part X line 16)		537,881,00	_	618	392	,000.
Ass Bal	21	Total	assets (Part X, line 16) liabilities (Part X, line 26)		205,411,00				,000.
Net As Fund Ba	22		ssets or fund balances. Subtract line 21 from line 20.		432,470,00				,000.
	rt II		nature Block		, ,	- 1			,
_		_	of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements	and to the hest of	my k	nowledge	and b	elief it is
			complete. Declaration of preparer (other than officer) is based on all information of which prepare						911911
		l k	Stall no		41	3	0/_	20	17
Sig	n		Signature of officer		Date		10		
He			STEPHEN A. GRAHAM VP FOR FINAN	JCE/CFO					
			Type or print name and title	TCB/ CI C					
-			Type of print name and title Type preparer's name Preparer's signature Date		1. 7	. [TIN		
Paic	1	DAN:		30/20	17 Check	"		0418	8.2
Pre	parer		CDANIE BUODNIEN TID	0/20	Firm's EIN > 3				ے د
Use	Only		aname ►GRANT THORNTON, LLP address ►757 THIRD AVENUE NEW YORK, NY 10017				542-9		_
N.4	, th = 1				Phone no. 2	17-			
_			cuss this return with the preparer shown above? (see instructions)				. X ,		No
For	Pape	rwork	Reduction Act Notice, see the separate instructions.				Fo	m 99	0 (2015)

Page 2 Form 990 (2015) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: SEE SCHEDULE O Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program X No If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 258,962,000. including grants of \$ 118,798,000.) (Revenue \$ EDUCATIONAL - SETON HALL UNIVERSITY OPERATES TO PROVIDE BACCALAUREATE, MASTERS, AND DOCTORAL DEGREES. IT ENROLLS 9,800 UNDERGRADUATE AND GRADUATE STUDENTS. THE UNIVERSITY IS COMPOSED OF TEN SCHOOLS LOCATED ON TWO CAMPUSES, INCLUDING ITS LAW SCHOOL LOCATED IN NEWARK, NEW JERSEY. DAY AND EVENING SESSIONS ACCOMMODATE BOTH COMMUTER AND RESIDENTIAL STUDENTS ON A PART-TIME AND FULL TIME BASIS. 9,940,000.) (Revenue \$ 4b (Code:) (Expenses \$ 86,237,000. including grants of \$ ACADEMIC SUPPORT AND STUDENT SERVICES - ACADEMIC SUPPORT PROVIDES SUPPORT SERVICES, SUCH AS LIBRARIES, ACADEMIC TECHNOLOGY, FACULTY CURRICULUM DEVELOPMENT, FOR ITS PRIMARY MISSIONS OF INSTRUCTION, RESEARCH AND PUBLIC SERVICE. STUDENT SERVICES PROVIDE VARIOUS SERVICES TO STUDENTS, WHICH CONTRIBUTE TO THE STUDENTS' EMOTIONAL AND PHYSICAL WELL-BEING AND TO THEIR INTELLECTUAL, CULTURAL AND SOCIAL DEVELOPMENT OUTSIDE THE CONTEXT OF THE UNIVERSITY'S FORMAL INSTRUCTIONAL PROGRAMS. 253,000.) (Revenue \$ 4c (Code:) (Expenses \$ 8,802,000. including grants of \$ RESEARCH, TRAINING & PUBLIC SERVICES - ENABLES FACULTY TO EXPLORE NEW AREAS OF EDUCATION, LEARNING AND KNOWLEDGE AND PROVIDES NON-INSTRUCTIONAL SERVICES TO INDIVIDUALS AND GROUPS EXTERNAL TO THE UNIVERSITY. THE UNIVERSITY ALSO OFFERS FINANCIAL SUPPORT TO STUDENTS THROUGH ACADEMIC SCHOLARSHIPS AND WORK-STUDY PROGRAMS, WHICH ARE FUNDED BY FEDERAL, STATE AND PRIVATE GRANTS. 4d Other program services (Describe in Schedule O.) including grants of \$ (Expenses \$) (Revenue \$ 354,001,000. **4e** Total program service expenses ▶ JSA 5E1020 1.000 Form **990** (2015)

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Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more		3.7	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			37
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
Т	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schoolule D. Porte VI and VII</i>	120	Х	
h	Schedule D, Parts XI and XII	12a	21	
D	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
~	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	Х	
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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	Х	
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		X
			000	

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Part l	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a	Х	
	through 24d and complete Schedule K. If "No," go to line 25a		X	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	21	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	0.4 -		Х
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Λ
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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?			3.5
	If "Yes," complete Schedule L, Part I	25b		X
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		X
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	Х	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	Х	
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? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
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		X
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
30	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
	10: Note: All 1 of the 200 mero are required to complete deficulte O.	00	22	

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Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Effect the flumber of Forms W-28 included in line 1a. Effect -0- in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.0	Х	
•	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return 4,079			
h	clateriorite, mod for the daterial year charing with or within the year covered by the retain.	2b	Х	
D	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 <i>e-file</i> (see instructions)	20		
3 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
тu	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	. .		v
	required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	70		Х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 h		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
J	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	4.5		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	3			
	Enter the amount of reserves on hand	14a		X
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		
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Part VI (2015)

Sect	ion 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 <u>1a</u> 47			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 37			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	ə.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			37
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	4.01		
04	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(0	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X 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 int	erest	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 record STEPHEN A. GRAHAM 400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079 973 761 9003	s: ▶		

JSA 5E1042 1.000 Form **990** (2015) Form 990 (2015) SETON HALL UNIVERSITY 22-1500645 Page

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and 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) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unle	Pos heck ss pe	rson	e than of is both cor/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	45.00	X		Х				654,871.	0.	111,229.
(2)MOST REVEREND JOHN J. MYERS	1.00							001/071		
REGENT/TRUSTEE	0.	X						0.	0.	0.
(3) MOST REV. JAMES F. CHECCHIO REGENT	1.00	X						0.	0.	0.
(4) MOST REV. ARTHUR J. SERRATELLI	1.00									
REGENT/TRUSTEE	0.	Х						0.	0.	0.
(5) MOST REV. DENNIS J. SULLIVAN REGENT	1.00	Х						0.	0.	0.
(6) MOST REV. KURT R. BURNETTE REGENT	1.00	Х						0.	0.	0.
	45.00	Х						47,981.	0.	64,118.
	1.00 45.00	Х						750.	43,616.	38,035.
MONSIGNOR JOSEPH R. REILLY TRUSTEE	45.00	Х						34,955.	0.	99,498.
(10) MONSIGNOR ROBERT J. WISTER TRUSTEE	45.00 5.00	X						33,405.	1,000.	59,318.
(11) MOST REVEREND BERNARD A. HEBDA TRUSTEE	1.00	Х						0.	0.	0.
(12) PATRICK M. MURRAY REGENT/TRUSTEE	1.00	Х						0.	0.	0.
(13) MONSIGNOR MICHAEL A. ANDREANO TRUSTEE	1.00	Х						0.	0.	0.
	1.00	+	_	_						

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Form **990** (2015)

Form 990 (2015)

Part VII Section A. Officers, Directors, Tro	ustees, Ke	y En	plo	ye	es,	and l	lig	hest Compensat	ed Employees (co	ontinue	ed)	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r box,	not cl unles	Pos heck ss pe	C) sition more	e than control en is both tor/trust employee	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Es am com fro orga	(F) stimated nount of other pensaticom the anization direlated anization	on n
15) SR. MARGARET STALLMEYER, C.D.P	1.00											
REGENT	0.	Х						0.	0.			0.
16) RYAN K. DUFFY	1.00											
REGENT	0.	X						0.	0.			0.
17) HENRY F. D'ALESSANDRO	1.00											
REGENT/TRUSTEE	0.	X						0.	0.			0.
18) MARK E. GANTON	1.00											
REGENT	0.	X						0.	0.			0.
19) PHILLIP N. MAISANO	1.00											
REGENT/TRUSTEE	0.	X						0.	0.			0.
20) DONNA M. O'BRIEN	1.00											0
REGENT/TRUSTEE	0.	X						0.	0.			0.
21) JOSEPH M. SHERIDAN	1.00											0
REGENT	0.	X						0.	0.			0.
22) EUN-SOOK (LUCY) CHO-LEE,M.D. REGENT	1.00	X						0.	0.			0.
23) DAVID B. GERSTEIN	1.00	Λ						0.	0.			<u> </u>
REGENT	1.00	X						0.	0.			0.
24) JAMES E. COLLINS	1.00	- 1						0.	0.			
REGENT	1.00	X						0.	0.			0.
25) RICHARD F. LIEBLER	1.00	21						0.	0.			
REGENT	0.	X						0.	0.			0.
1b Sub-total								771,962.	44,616.	3	72,1	
c Total from continuation sheets to Part VII, S	ection A		• •	• •	• •			6,647,431.	0.		25,5	
d Total (add lines 1b and 1c)	_		• •		: :			7,419,393.	44,616.		97,7	
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste		bov	e) who	o re					
											Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3	X	
4 For any individual listed on line 1a, is the organization and related organizations gr individual	eater than	\$15	0,0	00?	. It	"Yes	5,"	complete Schedu	le J for such	4	X	
5 Did any person listed on line 1a receive or										-		
for services rendered to the organization? If "Y										5		X
Section B. Independent Contractors	,						,			1 -		

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.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 71

Form **990** (2015)

JSA 5E1055 1.000

Part VII Section A. Officers, Directors, T	rustees. Ke	y En	olgr	ove	es.	and F	lia	hest Compensat	ed Employees (c	ontinue		Page {
(A)	(B)	j		((C)		9	(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	heck ss pe d a d	erson	e than of is both tor/trust Highest compensated employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org an	nount of other opensation om the anization d related anization	if ion on d
26) MICHAEL J. LUCCIOLA	1.00					ed						
REGENT	0.	Х						0.	0.			0
27) FRANCIS J. HAGER	1.00											
REGENT/TRUSTEE		Х						0.	0.			0
28) DR. MICHAEL LOEVEN	1.00											
REGENT		X						0.	0.			0
29) RICHARD MANDELBAUM	1.00											
REGENT		X						0.	0.			0
30) JOHN D. HAYES	1.00											
REGENT		X						0.	0.			0
31) ROBERT S. BASSO	1.00											
REGENT		Х						0.	0.			0
32) JAMES T. BOYLE, JR.	1.00											
REGENT		X						0.	0.			0
33) STEPHEN G. WALDIS	1.00											
REGENT		X						0.	0.			0
34) ROBERT B. BUDELMAN, ESQ.	1.00											
REGENT		Х						0.	0.			0
35) JAMES M. O'BRIEN	1.00											
REGENT		Х						0.	0.			0
36) MARY ANN CHRISTOPHER	1.00											
REGENT/TRUSTEE		X						0.	0.			0
1b Sub-total												
c Total from continuation sheets to Part VII,	Section A		• •	• •	• •							
d Total (add lines 1b and 1c)	=											
2 Total number of individuals (including but no							o re	ceived more than	\$100,000 of			
reportable compensation from the organizati		233				o,			ψ.ου,ουσ υ.			
											Yes	No
3 Did the organization list any former off	icer directo	or or	trı	iste	٩	kev e	mn	lovee or highes	t compensated			
employee on line 1a? If "Yes," complete Sche										3	Х	
4 For any individual listed on line 1a, is the organization and related organizations g	sum of rep greater than	oortab	ole o	com 100?	per	nsation "Yes	n aı s,"	nd other compens	sation from the left of the sation from the			
individual										4	X	
5 Did any person listed on line 1a receive of for services rendered to the organization? If "										5		Х
Section B. Independent Contractors												
 Complete this table for your five highest co compensation from the organization. Report year. 												

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2015)

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	yee	es,	and F	ligl	hest Compensat	ed Employees (c	ontinue		Page 8
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r	not ch unles	Posi heck ss per	ition more	e than or/trustremployee	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Es am com fro orga	(F) timated nount of other pensation the anization drelated anization	f on n d
27) DEADLE W MANEGER	1 00		ě			ated						
37) BEATRIZ M. MANETTA REGENT	1.00	v						0.	0.			0
38) HELEN LERNER	1.00	X						0.	0.			0.
REGENT	0.	Х						0.	0.			0.
39) ROBERT A. LEY	1.00	Λ						0.	0.			
REGENT	0.	Х						0.	0.			0.
40) JAMES L. ORSINI	1.00	Λ						0.	0.			
REGENT	0.	Х						0.	0.			0.
41) RICHARD C. MCMAHON	1.00							0.	0.			
REGENT	0.	Х						0.	0.			0.
42) ROBERT J. SLOAN	1.00											
REGENT	0.	Х						0.	0.			0.
43) EDWARD C. CERNY	1.00											
REGENT	0.	Х						0.	0.			0.
44) MARK D. BENJAMIN	1.00											
REGENT	0.	Х						0.	0.			0.
45) JOHN F. SWIFT	1.00											
REGENT	0.	X						0.	0.			0.
46) MATTHEW W. WRIGHT	1.00											
REGENT	0.	Х						0.	0.			0.
47) LEO J. ZATTA	1.00											
REGENT	0.	X						0.	0.			0.
total from continuation sheets to Part VII, So d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										3	Х	
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,0	00?	If	"Yes	,"	complete Schedu	le J for such	4	X	
5 Did any person listed on line 1a receive or												
for services rendered to the organization? If "Ye	es," comple	te Sch	nedu	ıle J	for	such	per	son		5		Х
Complete this table for your five highest com compensation from the organization. Report compensation.												

year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2015)

Form 990 (2015) Page **8**

Part VII Section A. Officers, Directors, True	ustees, Ke	y En	ipioy			and Hi		tea Employees (d	continued)
(A)	(B)			(C))		(D)	(E)	(F)
Name and title	Average	(-1		ositi		41	Reportable	Reportable	Estimated
	hours per week (list any	,				than one is both a	00	compensation from related	amount of other
	hours for	office				or/trustee	110111	organizations	compensation
	related	Ind or o	Ins	Officer	<u></u>	Hig	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ividu	l tit	icer	em	hes	(W-2/1099-MISC)		organization
	below dotted line)	Individual trustee or director	iona		Key employee	t co			and related organizations
	2,	rust	2		/ee	npe			
		ee	Institutional trustee			Highest compensated employee			
						ted			
48) LARRY A. ROBINSON, ED.D.	45.00								
PROVOST & EXECUTIVE V.P.	0.			X			480,008	0.	70,069
49) DAVID J. BOHAN, MBA	45.00								
V.P. UNIVERSITY ADVANCEMENT	0.			X			349,026	0.	58,184
50) DENNIS J. GARBINI, MBA	45.00								
V.P. ADMINISTRATION	0.			Х			258,243	0.	46,688
51) TRACY H. GOTTLIEB, PH.D.	45.00								
V.P. STUDENT SERVICES	0.	1		Х			217,758	0.	41,923
52) STEPHEN A. GRAHAM, MBA	45.00								
VP FINANCE/CFO	0.	1		Х			235,152	0.	48,623
53) CATHERINE A. KIERNAN, JD	45.00								
V.P. GENERAL COUNSEL	0.	1		Х			263,233	. 0 .	55,465
54) ALYSSA MCCLOUD, PH.D.	45.00			\top					-
V.P. ENROLLMENT MANAGEMENT	0.	1		Х			318,384	0.	33,591
55) MONSIGNOR ANTHONY ZICCARDI, STD	45.00								
V.P. MISSION & MINISTRY	0.	1		х			50,822	0.	59,318
56) PATRICK G. LYONS	45.00			\top					
V.P.FOR ATHLETICS & REC. SVCS.	0.	1		х			455,839	0.	43,282
57) KATHLEEN BOOZANG, JD, LLM	45.00			\top					•
DEAN, SCHOOL OF LAW	0.	1			$_{\rm X}$		285,809	. 0 .	35,699
58) JOYCE A. STRAWSER, PH.D.	45.00			+					,
DEAN, SCHOOL OF BUSINESS	0.	1			$_{\rm X}$		237,961.	0.	87,860
4h Sub total									0.,000
c Total from continuation sheets to Part VII, S						'			
d Total (add lines 1b and 1c)						'			
2 Total number of individuals (including but not							received more than	\$100 000 of	
reportable compensation from the organizatio		233		abi	Ove	;) WIIO	received more man	\$100,000 OI	
Toportable compensation from the organization									Yes N
O Did the consideration list over 6 and 65			4						163 14
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Sched	er, directo	or, or	trus	stee	, к	key en	ipioyee, or nignes	st compensated	3 X
									3 11
4 For any individual listed on line 1a, is the									
organization and related organizations gr									4 X
individual									4 X
5 Did any person listed on line 1a receive or	accrue co	mpen	satio	n fr	om	any u	nrelated organizat	ion or individual	5 X
for services rendered to the organization? If "Y	es," comple	te Sch	nedul	e J i	or.	such p	erson		5 2

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.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2015)

JSA 5E1055 1.000

Part VII Section A. Officers, Directors, Tru	istees Ka	v Fr	ndo	VAC	96	and I	Hid	hest Companeat	ed Employees /	continue		Page 8
(A) Name and title	(B) Average			(C Posi	ition	e than o		(D) Reportable	(E) Reportable	Es	(F) stimated	
	hours per week (list any hours for related organizations below dotted line)	box,	unles	ss per	rson	is is cor/trust Highest compensated	an	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fro orga and	other pensation the anizatio d related	on on d
59) STEPHEN J. LUBBEN, JD, LLM LAW SCHOOL PROFESSOR	45.00					Х		259,014.	0.		56,3	329.
60) KEVIN WILLARD HEAD COACH MEN'S BASKETBALL	45.00					Х		1,566,619.	0.		67,1	131.
61) ANTHONY J. BOZZELLA HEAD COACH WOMEN'S BASKETBALL	45.00					Х		358,785.	0.	1	21,4	134.
62) BRIAN B. SHULMAN, PH.D. DEAN, SCHOOL OF HEALTH & MED.	45.00					Х		281,321.	0.		33,9	953.
63) ANDREA BARTOLI, PH.D. DEAN, SCHOOL OF DIPLOMACY	45.00					Х		262,082.	0.		58,1	L27
64) JOAN F. GUETTI, PH.D. FORMER DEAN, ARTS & SCIENCES	45.00						Х	182,492.	0.		25,7	750
65) PATRICK E. HOBBS, JD, LLM FORMER DEAN, SCHOOL OF LAW	45.00						Х	481,009.	0.		63,5	524
66) MICHAEL S. ZAVADA FORMER DEAN, ARTS & SCIENCES	45.00						Х	103,874.	0.		18,6	
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization)	ection A limited to t		liste				> > o re	eceived more than	\$100,000 of			
3 Did the organization list any former office	er, directo										Yes	No
 employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations graindividual. 	sum of repeater than	ortab \$15	ole c 50,0	com _l	per <i>If</i>	satio	n aı	nd other compens	sation from the	4	X	
Did any person listed on line 1a receive or for services rendered to the organization? If "You Section B. Independent Contractors	accrue co	mpen	sati	on f	ron	n any	uni	related organization	on or individual	5		Х
Complete this table for your five highest compensation from the organization. Report of year.												

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2015)

Part VIII Statement of Revenue

		Check if Schedule O co	ontains a respon	se or note to ar	y line in this Part VI	II		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1a					
iran oun	b	Membership dues						
S, G	c	Fundraising events		730,000.				
Gift	d	Related organizations						
ns, Simi	e	Government grants (contribu		27,417,000.				
utio er S	f	All other contributions, gifts,	, I I					
gig		and similar amounts not included		15,923,000.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included	in lines 1a-1f: \$	755,000.				
	h	Total. Add lines 1a-1f		▶	44,070,000.			
nne				Business Code				
eve	2a	TUITION & FEES		900099	302,395,000.	302,395,000.		
Program Service Revenue	b	ROOM AND BOARD		900099	32,861,000.	32,861,000.		
Σį	С	FEES AND CONTRACTS FROM G	GOVERMENT AGENCI	900099	75,000.	75,000.		
Se	d	MEDICAL RESIDENCY PROGRAM	И	900004	847,000.	847,000.		
ram	е							
rog	f	All other program service rev						
	g	Total. Add lines 2a-2f			336,178,000.			I
	3	,	cluding dividen					
		and other similar amounts).			5,260,000.		25,000.	5,235,000.
	5	Income from investment of	•		7,000.		104 000	7,000.
	3	Royalties	(i) Real	(ii) Personal	194,000.		104,000.	90,000.
			270,000.	(ii) i cisoriai				
	6a	Gross rents	59,000.					
	b	Less: rental expenses	211,000.					
	c d	Rental income or (loss) Net rental income or (loss)	211,000.		211,000.			211,000.
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	220,505,000.	48,000.				
	h	•		.,				
	b	Less: cost or other basis and sales expenses	215,763,000.	83,000.				
	С	Gain or (loss)	4 540 000	-35,000.				
	d	Net gain or (loss)			4,707,000.			4,707,000.
•	8a	Gross income from fundra						
Other Revenue	""	events (not including \$	730,000.					
eve		of contributions reported on	line 1c).					
er F		See Part IV, line 18	•	460,000.				
)th	b	Less: direct expenses	b	568,000.				
Ū	С	Net income or (loss) from fu		▶	-108,000.			-108,000.
	9a	Gross income from gaming	activities.					
		See Part IV, line 19	а					
	b	Less: direct expenses	b					
	С	Net income or (loss) from g	aming activities.	▶	0.			
	10a	Gross sales of inventoreturns and allowances	• .					
	b c	Less: cost of goods sold Net income or (loss) from sa	les of inventory		0.			
		Miscellaneous Revenu		Business Code	0.			
	44 -	NCAA/CONFERENCE DISTRIBUT		900099	3,173,000.	3,173,000.		
	11a	ATHLETICS TICKET SALES		900099	1,569,000.	1,569,000.		
	b	PARKING		812930	1,583,000.	1,555,665.		1,583,000.
	C	All other revenue		611430	4,073,000.	2,995,000.	389,000.	689,000.
	d	Total. Add lines 11a-11d			10,398,000.			
	12	Total revenue. See instruction			400,917,000.	343,915,000.	518,000.	12,414,000.

JSA 5E1051 1.000

Form **990** (2015)

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	127,000.	127,000.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	128,864,000.	128,864,000.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	4,798,000.	2,288,000.	1,726,000.	784,000.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	200 000	200 000		
	persons described in section 4958(c)(3)(B)	309,000.	309,000.		
7	Other salaries and wages	119,912,000.	102,361,000.	14,468,000.	3,083,000.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,083,000.	6,041,000.	859,000.	183,000.
9	Other employee benefits	26,261,000.	21,181,000.	4,262,000.	818,000.
10	Payroll taxes	8,322,000.	7,105,000.	1,004,000.	213,000.
11	` ' ' '	150 000	120 000	21 000	
	Management	159,000. 696,000.	128,000.	31,000. 672,000.	
	Legal	227,000.	24,000.	227,000.	
	Accounting	133,000.		133,000.	
	Lobbying	0.		133,000.	
	Professional fundraising services. See Part IV, line 17.	1,141,000.		1,141,000.	
9	Other. (If line 11g amount exceeds 10% of line 25, column	23,211,000.	20,965,000.	2,094,000.	152,000.
12	(A) amount, list line 11g expenses on Schedule O.). Advertising and promotion	1,272,000.	932,000.	287,000.	53,000.
	Office expenses	8,480,000.	6,710,000.	1,393,000.	377,000.
14	Information technology	5,923,000.	2,079,000.	3,844,000.	
15	Royalties	0.			
16	Occupancy	7,382,000.	6,912,000.	470,000.	
17	Travel	7,586,000.	6,923,000.	392,000.	271,000.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	3,118,000.	2,291,000.	577,000.	250,000.
20	Interest	4,887,000.	4,797,000.	90,000.	
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	16,697,000.	15,749,000.	898,000.	50,000.
23	Insurance	1,910,000.	23,000.	1,887,000.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.) REPAIRS AND MAINTENANCE	7,468,000.	7,109,000.	196,000.	163,000.
u	LOSS ON DEBT DEFEASANCE	4,225,000.	4,225,000.	190,000.	103,000.
-	SCHOOL OF MEDICINE (SOM)	3,151,000.	3,151,000.		
_	BOOKS AND SUBSCRIPTIONS	2,771,000.	2,716,000.	32,000.	23,000.
_	·	4,678,000.	991,000.	3,555,000.	132,000.
	All other expenses Total functional expenses. Add lines 1 through 24e	400,791,000.	354,001,000.	40,238,000.	6,552,000.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		222,232,000		2,222,000.
JSA	10110WILING SOF 30-2 (MSC 300-120)	0.			F 000 (0045)

Form **990** (2015)

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Part X **Balance Sheet**

	Check if Schedule O contains a response or note to any line in this Part X						
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			21,184,000.	1	5,014,000.
	2	Savings and temporary cash investments			2,378,000.	2	11,820,000.
	3	Pledges and grants receivable, net			9,093,000.	3	13,576,000.
	4	Accounts receivable, net			4,058,000.	4	4,504,000.
	5	Loans and other receivables from current and t	orme	r officers, directors,			
		trustees, key employees, and highest co					
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified personal 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu	0.		0.		
S		organizations (see instructions). Complete Part II of Sche			0.	_	0.
Assets	7	Notes and loans receivable, net			13,911,000.	7	13,196,000.
As	8	Inventories for sale or use			0.	8	0.
	9	Prepaid expenses and deferred charges			9,126,000.	9	8,198,000.
	10 a	Land, buildings, and equipment: cost or		F24 004 000			
			10a		281,520,000.	40.	285,337,000.
		Less: accumulated depreciation	10b	⊼୩~⊔ 2	198,324,000.		184,137,000.
	11	Investments - publicly traded securities			92,473,000.	11	88,172,000.
	12	Investments - other securities. See Part IV, line 11			92,473,000.		0.
	13	Investments - program-related. See Part IV, line 11			0.	13 14	0.
	14	Intangible assets			5,814,000.	15	4,438,000.
	15 16	Other assets. See Part IV, line 11			637,881,000.	16	618,392,000.
_	17	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses			37,964,000.	17	37,830,000.
	18	Grants payable			0.		0.
	19	Deferred revenue			12,982,000.	19	12,652,000.
	20	Tax-exempt bond liabilities			126,777,000.	20	119,246,000.
	21	Escrow or custodial account liability. Complete Pa	rt IV	of Schedule D	0.	_	0.
ဟ္	22	Loans and other payables to current and for					
Liabilities		trustees, key employees, highest compen-					
abil		disqualified persons. Complete Part II of Schedule			0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelate			0.	23	0.
	24	Unsecured notes and loans payable to unrelated to			0.	24	0.
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines	17-2	4). Complete Part X			
		of Schedule D			27,688,000.	25	28,259,000.
	26	Total liabilities. Add lines 17 through 25			205,411,000.	26	197,987,000.
ses		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	checl 34.	k here X and			
anc	27	Unrestricted net assets			257,821,000.	27	247,187,000.
Bal	28	Temporarily restricted net assets			87,010,000.	28	82,932,000.
pu	29	Permanently restricted net assets		<u></u>	87,639,000.	29	90,286,000.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds .				30	
SSe	31	Paid-in or capital surplus, or land, building, or equ	ipmer	nt fund		31	
Net Assets	32	Retained earnings, endowment, accumulated inco	ome,	or other funds		32	
Ne	33	Total net assets or fund balances			432,470,000.	33	420,405,000.
	34	Total liabilities and net assets/fund balances		<u> </u>	637,881,000.	34	618,392,000.
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	70 (2010)				. u	90
Part						
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		00,9		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	00,7		
3						000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		32,470,000.		
5	Net unrealized gains (losses) on investments	5		-9,8	34,0	000.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-2,3	57,0	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	4	20,4	05,0	00.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	overs	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent acc	ounta	ant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e	xplair	n in			
	Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	n in			
	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b	Х	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

Internal Revenue Service In

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

OMB No. 1545-0047
2015

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. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 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 5 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). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An 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 11 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. 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. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-9 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2015 Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (f) Total Gifts, contributions, grants. membership fees received. (Do not include any "unusual grants.") Tax revenues levied for 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 3 The portion of total contributions by each person (other governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) % 16a 331/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check b 331/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

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Schedule A (Form 990 or 990-EZ) 2015 Page 3

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

(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.)

					<u> </u>		
Sec	tion A. Public Support		ı				
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
. u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b						
Ü	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	(-,	(,	(5) = 5 · 5	(5) = 5 : 1	(-)	(7, 1000
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
h	Unrelated business taxable income (less						
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_							
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	-					
	organization, check this box and stop here						•
	tion C. Computation of Public Sup			(£))		T T	
15	Public support percentage for 2015 (line 8,					15	%
16	Public support percentage from 2014 Sche					16	%
	tion D. Computation of Investmen			101 (0)		14-	
17	Investment income percentage for 2015 (lin					17	%
18	Investment income percentage from 2014 S					18	%
19 a	331/3% support tests - 2015. If the org						
	17 is not more than 331/3 %, check thi	-	_	-			
b	331/3% support tests - 2014. If the orga						
	line 18 is not more than 331/3 %, check		•				
20	Private foundation. If the organization of	aid not check	a box on line	14, 19a, or 19b	, cneck this b	ox and see instr	uctions -

1004439621

Schedule A (Form 990 or 990-EZ) 2015 Page 4

Supporting Organizations Part IV

(Complete only if you checked a box in 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
----------------	------------	---------------

			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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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		
С	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.	3c		
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		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported 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? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
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 I of Schedule L (Form 990 or 990-EZ).	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 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		

10b

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.)

Schedule A (Form 990 or 990-EZ) 2015 Page **5**

				- 5
Part	Supporting Organizations (continued)			
			Yes	No
11	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)	44.		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secu	on B. Type I Supporting Organizations		Vaa	Na
			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.	4		
		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		
Sacti	on C. Type II Supporting Organizations			
Jectic	on c. Type ii dupporting Organizations		Yes	No
	Management of the control of the desired of the des		103	140
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations	'		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	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		
Section	on 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 ins	tructi	ons):	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru		
2	Activities Test. Answer (a) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
а	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	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	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2015

Page 6 Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations	3	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must con	-		structions. All
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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall	y-integra	ted Type III supporting	organization (see
instructions).		. ,, ,	÷ ,

Schedule A (Form 990 or 990-EZ) 2015

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Page 7 Schedule A (Form 990 or 990-EZ) 2015

Part '	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)				
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex	xempt purposes					
2	Amounts paid to perform activity that directly furthers exer						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	Administrative expenses paid to accomplish exempt purposes of supported organizations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2015 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
5	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2015:						
а							
b							
С							
d	From 2013						
е	From 2014						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2015 distributable amount						
i	Carryover from 2010 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2015 from Section						
	D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2015 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2015, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2015. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2016. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
а							
b							
С	Excess from 2013						
d	Excess from 2014						
е							

Schedule A (Form 990 or 990-EZ) 2015

5E1232 1.000 8263ES F42F V 15-7.18 1004439621 PAGE 23 Schedule A (Form 990 or 990-EZ) 2015

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2015

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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 www.irs.gov/form990.

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

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

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

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

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

	Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	on under section 501(h)): Complete Part II-B Do no	t complete Part II-Δ
	. , . ,	on Form 990, Part IV, line 5 (Proxy	,	, ·	•
Тах)	(see separate instructions), ther	1	, , ,	,	, , ,
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.		F(d.)	- 4161 41
	e of organization			' '	ntification number
	ON HALL UNIVERSITY			22-150	
	-	organization is exempt under			nization.
1	·	organization's direct and indirect p			
2					
3	volunteer nours				
Dar	t I-B Complete if the c	organization is exempt under	section 501(c)(3)		
		cise tax incurred by the organization		-	
1		cise tax incurred by the organization m			
3		a section 4955 tax, did it file Form			
	If "Yes," describe in Part IV.				Tes No
	t I-C Complete if the c	organization is exempt under	section 501(c). ex	cept section 501(c)(3).
1		expended by the filing organization			<i>j</i> -
'					
2		ng organization's funds contributed			
_		es			
3		enditures. Add lines 1 and 2. En			
•					
4		e Form 1120-POL for this year?			
5	Enter the names, addresses	and employer identification numb	er (EIN) of all section	n 527 political organiza	ations to which the filing
		s. For each organization listed, en			
		ributions received that were prom			
		nd or a political action committee (l	I .		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015	SEION HALL ONI	VEKSIII		22-1	.500645 Page Z
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ction under
		o an affiliated grou I share of excess l		rt IV each affiliated g itures).	roup member's
B Check ► if the filing organ	nization checked I	oox A and "limited	control" provision	ons apply.	
	on Lobbying Expen			(a) Filing	(b) Affiliated
(The term "expenditu	ıres" means amoui	nts paid or incurred.	.)	organization's totals	group totals
1a Total lobbying expenditures to in	nfluence public opini	on (grass roots lobb	bying)		
b Total lobbying expenditures to in	nfluence a legislative	e body (direct lobbyi	ing)		
c Total lobbying expenditures (add					
d Other exempt purpose expendit	ures				
e Total exempt purpose expenditu	ires (add lines 1c an	d 1d)			
f Lobbying nontaxable amount.	Enter the amount f	rom the following	table in both		
columns.					
If the amount on line 1e, column (a	or (b) is: The lobbying	g nontaxable amount	is:		
Not over \$500,000	20% of the	amount on line 1e.			
Over \$500,000 but not over \$1,000	,000 \$100,000 pl	us 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$1,50		us 10% of the excess			
Over \$1,500,000 but not over \$17,0	000,000 \$225,000 pl	us 5% of the excess of	over \$1,500,000.		
Over \$17,000,000	\$1,000,000				
g Grassroots nontaxable amount					
h Subtract line 1g from line 1a. If:					
i Subtract line 1f from line 1c. If z					
j If there is an amount other that		•	•		
reporting section 4911 tax for th	nis year?				Yes No
(Sama arganizations that		raging Period Unde	, ,	to all of the five column	ana halaw
(Some organizations that		te instructions for I	-		ins below.
	Lobbying Exper	nditures During 4-Yo	ear Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

JSA

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Sche	dule C (Form 990 or 990-EZ) 2015					Pa	age 3
Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 5768			
Eor	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)			(b)		
	cription of the lobbying activity.	Yes	No	4	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers?		X				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X					
С	Media advertisements?		Х				000
d	Mailings to members, legislators, or the public?	X	37			⊥,	200
e	Publications, or published or broadcast statements?	X	X			0	450
f	Grants to other organizations for lobbying purposes?	X					926
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			Ξ,	720
h i	0.00		X				
j	Other activities? Total. Add lines 1c through 1i				16	1.	576
J 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х				
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?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection			
	501(c)(6).	. , , ,					
				_	Ye	s	No
1	Were substantially all (90% or more) dues received nondeductible by members?			[1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501		-				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	rt III-A,	ine 3,	is	
4	answered "Yes."			4			
1	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)			1			
2	political expenses for which the section 527(f) tax was paid).	ants (OI				
а	Current year			2a			
b	Carriover from last year			2b			
C	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion		ne .				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible le						
	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
Pa	t IV Supplemental Information						
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d grou	up list); Part II-	A, lines	1	and
2 (se	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.						
SEI	C PAGE 4						

Schedule C (Form 990 or 990-EZ) 2015

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Schedule C (Form 990 or 990-EZ) 2015

Part IV Supplemental Information (continued)

PART II-B, LINE 1(I) OTHER LOBBYING ACTIVITIES

SETON HALL UNIVERSITY LOBBIED STATE LEGISLATORS REGARDING ANNUAL INDEPENDENT COLLEGE APPROPRIATIONS, STUDENT AID FOR INDEPENDENT COLLEGE STUDENTS AND SCHOOL OF MEDICINE SUPPORT. EFFORTS CONSISTED OF DIRECT MAILINGS, PHONE CALLS AND PERSONAL MEETINGS. MEMBERS OF CONGRESS WERE CONTACTED REGARDING STUDENT AID AND GRANTS FOR VARIOUS UNIVERSITY PROGRAMS. THE UNIVERSITY'S STAFF IS INVOLVED IN LOBBYING EFFORTS. THE VALUE OF THAT STAFF TIME IS APPROXIMATELY \$28,430. THOSE COSTS HAVE BEEN REPORTED ON LINE 7 (OTHER SALARIES AND WAGES) AND NOT SEPARATELY IDENTIFIED ON LINE 11 (D) IN PART IX, STATEMENT OF FUNCTIONAL EXPENSES.

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D (Form 990)

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

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

SET	TON HALL UNIVERSITY	22-1500645
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds	or Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets he	ld in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant	
•	only for charitable purposes and not for the benefit of the donor or donor advisor, or for	
	conferring impermissible private benefit?	
Pa	Int II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		on of a historically important land area
		on of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
-	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	
	tax year ▶	atou by the organization daming the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspe	
	violations, and enforcement of the conservation easements it holds?	-
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing of	
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing	conservation easements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue a	and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's final	ncial statements that describes the
	organization's accounting for conservation easements.	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it	s revenue statement and balance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it works of art, historical treasures, or other similar assets held for public exhibition, expublic service, provide, in Part XIII, the text of the footnote to its financial statements that d	escribes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its	
	works of art, historical treasures, or other similar assets held for public exhibition, ed	
	public service, provide the following amounts relating to these items:	
	(i) Revenue included in Form 990, Part VIII, line 1	1 175 000
	(ii) Assets included in Form 990, Part X	 \$1,1/5,000.
2	If the organization received or held works of art, historical treasures, or other similar	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these ite	ms:
a	Revenue included in Form 990, Part VIII, line 1	\$
b For F	Assets included in Form 990, Part X	Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Page **2**

Par	t III Organizations Maintaini	na Collections of	Art. Historical T	reasures	or Oth	ner Similar Asse	ts (co	ntinue	<u>əd)</u>
3	Using the organization's acquisition								
	collection items (check all that app		,	,		0 0			
а	X Public exhibition	,	d Loan	or exchang	e prograr	ms			
b	X Scholarly research		e Other	_	1 13				
С	X Preservation for future gene	erations							
4	Provide a description of the orga		and explain how t	hev furthe	er the ord	ganization's exemp	t purpo	se in	Part
	XIII.	THEATION O CONCOUNT	and oxplain now	inoy rantino		gamzation oxomp	r paipo	00 111	
5	During the year, did the organization	on solicit or receive o	lonations of art histo	orical treas	sures or o	other similar			
•	assets to be sold to raise funds rat					_	Yes	Х	No
Par	t IV Escrow and Custodial A		amed do part or the t	organizatio	110 001100				
ı uı	Complete if the organizar 990, Part X, line 21.	•	s" on Form 990, Pa	art IV, line	9, or re	ported an amoun	t on Fo	rm	
1a	Is the organization an agent, trusto	ee, custodian or othe	er intermediary for c	ontribution	s or other	r assets not			
	included on Form 990, Part X?		-			_	Yes	,	No
b	If "Yes," explain the arrangement								_
	11, 1 pr 11 1 1 3	,	3			Amount			
С	Beginning balance			10					
	Additions during the year								
е	Distributions during the year								
f	Ending balance								
	Did the organization include an an					account liability?	Yes		No
	If "Yes," explain the arrangement								1
	t V Endowment Funds.	mir are zam. Griodik in	oro ii tiro oxpianation	1100 00011	providou		<u> </u>		
· aı	Complete if the organiza	tion answered "Yes	s" on Form 990. Pa	art IV. line	10.				
		(a) Current year	(b) Prior year	(c) Two ye		(d) Three years back	(e) Fou	r vears	back
4.	Designing of completes	263,948,000.	272,174,000.	241,466		227,198,000.	234,		
	Beginning of year balance	4,424,000.	3,227,000.		5,000.	899,000.			,000.
	Contributions	1,121,000.	3722770001	3737	3,000.	0,5,7,000.			
С	Net investment earnings, gains,	-879,000.	10,750,000.	41,38	7 000	25,222,000.	2	077	,000.
	and losses	2,807,000.	2,742,000.		8,000.	2,785,000.			,000.
	Grants or scholarships	2,007,000.	2,742,000.	2,000	3,000.	2,703,000.	۷,	<u> </u>	
е	Other expenditures for facilities	15,669,000.	15,988,000.	10 26	2,000.	8,285,000.	7	501	,000.
	and programs	2,113,000.	3,473,000.		5,000.	783,000.			,000.
f	Administrative expenses	246,904,000.	263,948,000.						
g	End of year balance						221,	190,	
2 a	Provide the estimated percentage Board designated or quasi-endowr	nent ▶ <u>39.3000</u>	end balance (line 1g, _%	column (a))) held as	:			
	Permanent endowment ► 36.								
С	Temporarily restricted endowment								
	The percentages on lines 2a, 2b,	•							
3 a	Are there endowment funds not in	the possession of the	ne organization that	are held a	nd admir	nistered for the			
	organization by:							Yes	No
	(i) unrelated organizations						3a(i)	Х	
	(ii) related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the relat	•	•				3b		
4	Describe in Part XIII the intended								
Par	t VI Land, Buildings, and Equ Complete if the organiza	ipment.	all am Farma 000 F) _ ut \	- 11- 0	aa Farma 000 Da	od V Iioo	- 10	
	Description of property	(a) Cost or		or other basis			d) Book v		
		(inves		ther)		eciation (LI BOOK V	ııuc	
1a	Land		3,0	22,000.			3,0	22,0	00.
b	Buildings		457,9	69,000.	196,1	97,000.	261,7	72,0	00.
С	Leasehold improvements								
d	Equipment		61,7	755,000.	52,5	50,000.	9,2	05,0	00.
е	Other		11,3	38,000.			11,3		
Tota	I. Add lines 1a through 1e. (Column		n 990, Part X, colum	n (B), line 1	'0c.)		285,3	37,0	00.

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Schedule D (Form 990) 2015			Page 3
Part VII Investments - Other Securities. Complete if the organization answered	"Ves" on Form 000	Part IV line 11h See Form 000) Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	ition:
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) OUTSIDE TRUST	7,988,000.	FMV	
(B) HEDGE FUNDS	23,331,000.	FMV	
(C) COMMINGLED FUNDS	29,924,000.	FMV	
(D) PRIVATE EQUITY	8,308,000.	FMV	
(E) VENTURE CAPITAL	3,034,000.	FMV	
(F) PRINCIPAL GLOBAL REAL ESTATE	9,031,000.	FMV	
(G) EMERGING MARKET EQUITIES	6,556,000.	FMV	
(H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	88,172,000.		
Part VIII Investments - Program Related.	00,172,000.		
Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11c. See Form 990), Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mar	ation:
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See Form 990), Part X, line 15.
	scription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) li.	ne 15)	_	
Part X Other Liabilities.	10 10.)		
Complete if the organization answered line 25.	"Yes" on Form 990	, Part IV, line 11e or 11f. See Fo	rm 990, Part X,
1. (a) Description of liability	(b) Book valu	е	
(1) Federal income taxes			
(2) REFUNDABLE U.S. GOV'T GRANTS	11,491,0		
(3) CONDITIONAL ASSET RETIRE OBLIG	8,536,0		
(4) INTEREST RATE SWAP AGREEMENTS	7,200,0		
(5) ACCRUED POSTRETIREMENT BENEFIT	1,032,0	000.	
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 28,259,0	000	
i otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	40,439,0		

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

1004439621

Schedule D (Form 990) 2015 Page **4**

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	264,839,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	-10,949,000.
3	Subtract line 2e from line 1	3	275,788,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,141,000.		
a b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	125,129,000.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	400,917,000.
Part 2			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	277,025,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	1,965,000.
3	Subtract line 2e from line 1	3	275,060,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,141,000.		
b	Other (Describe in Part XIII.)	1	
С	Add lines 4a and 4b	4c	125,731,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	400,791,000.
	Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

Schedule D (Form 990) 2015

5E1271 1.000

JSA

Part XIII Supplemental Information (continued)

PART III, LINE 4

COLLECTIONS ARE COMPOSED OF: A MURAL, ANCIENT GREEK AND ROMAN COINS, BOOK COLLECTIONS, PAINTINGS, WILD LIFE ART COLLECTIONS, AND A SPECIAL COLLECTION OF RESEARCH PAPERS. COLLECTIONS ARE UTILIZED BY STUDENTS, FACULTY, ADMINISTRATORS AND THE GENERAL PUBLIC. THEIR USAGE HELPS ACHIEVE THE ULTIMATE GOAL OF ADVANCING THE EDUCATIONAL AND RESEARCH MISSION OF THE UNIVERSITY.

PART V, LINE 4

ENDOWMENT FUNDS SUPPORT THE UNIVERSITY'S MISSION BY PROVIDING A SUSTAINABLE FLOW OF FUNDS TO ANNUAL OPERATIONS. THIS SUPPORT INCLUDES FUNDS FOR SCHOLARSHIPS AND FOR SPECIFIC ACADEMIC PROGRAMS. UNIVERSITY HAS ADOPTED AN ENDOWMENT SPENDING POLICY DESIGNED TO PROVIDE A PREDICTABLE FLOW OF FUNDS TO OPERATIONS. THE POLICY IS INTENDED TO BALANCE CURRENT SPENDING NEEDS AND PRESERVE THE ENDOWMENT'S FUTURE PURCHASING POWER. THE UNIVERSITY APPLIES A 4.5% SPENDING RATE TO A THREE-YEAR MOVING AVERAGE OF ENDOWMENT INVESTMENT FUNDS. THE BOARD OF REGENTS SETS THE SPENDING RATE. THE PURPOSE OF USING A MOVING AVERAGE IS TO SMOOTH OUT ANY WIDE FLUCTUATIONS IN THE MARKET VALUE. ENDOWMENT EARNINGS IN EXCESS OF THE SPENDING RATE ARE ADDED BACK TO THE PRINCIPAL OF THE ENDOWMENT INVESTMENTS. IN YEARS WHEN YIELD EXCEEDS THE AMOUNT APPROPRIATED UNDER THE SPENDING POLICY THE EXCESS IS RETURNED TO PRINCIPAL AS APPRECIATION. WHEN ANNUAL YIELD IS INSUFFICIENT TO SUPPORT SPENDING APPROPRIATIONS, THE BALANCE IS PROVIDED FROM ACCUMULATED APPRECIATION. SPECIAL ALLOCATIONS ARE MADE FOR CERTAIN PURPOSES IN ADDITION TO THE SPENDING RATE, AS APPROVED BY THE UNIVERSITY'S BOARD OF REGENTS, ANNUALLY.

Schedule D (Form 990) 2015

JSA 5E1226 1.000

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Part XIII Supplemental Information (continued)

PART X, LINE 1: OTHER LIABILITIES - INCOME TAXES

ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS SECTION PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE UNIVERSITY IS EXEMPT FROM FEDERAL AND NEW JERSEY STATE INCOME

TAXATION BY VIRTUE OF BEING AN ORGANIZATION DESCRIBED IN SECTION

501(C)(3) OF THE IRC AND SIMILAR PROVISIONS OF THE NEW JERSEY STATE TAX

CODE. NEVERTHELESS, THE UNIVERSITY MAY BE SUBJECT TO TAX ON INCOME

UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED

BY THE CODE. THE TAX YEARS ENDED JUNE 30, 2013, 2014, 2015, AND 2016 ARE

STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. THE UNIVERSITY

BELIEVES THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS WITHIN ITS

FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER

CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENTS OF \$1,626,000.

Schedule D (Form 990) 2015

JSA 5E1226 1.000

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Part XIII Supplemental Information (continued)

PART XI, LINE 4B - OTHER

FINANCIAL AID OF \$124,590,000, ADD LIMITED PARTNERSHIP GAIN OF \$25,000, LESS RENTAL EXPENSE OF \$59,000, AND LESS SPECIAL EVENTS EXPENSES OF \$568,000.

PART XII, LINE 2D - OTHER

PROVISION FOR UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE OF \$827,000, PLUS SPECIAL EVENTS EXPENSE OF \$568,000 AND RENTAL EXPENSE OF \$59,000.

PART XII, LINE 4B - OTHER

FINANCIAL AID OF \$124,590,000.

Schedule D (Form 990) 2015

JSA 5E1226 1.000

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SCHEDULE E (Form 990 or 990-EZ)

Schools

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization Employer identification number 22-1500645 SETON HALL UNIVERSITY Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,	_	3.5	
_	programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media			
	during the period of solicitation for students, or during the registration period if it has no solicitation program,			
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please	3	Х	
	describe. If "No," please explain. If you need more space, use Part II	3		
	SEE SUPPLEMENTAL PAGE			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially		_	
	nondiscriminatory basis?	4b	Х	
С			3.7	
	with student admissions, programs, and scholarships?	4c	X	
d	, , , , , , , , , , , , , , , , , , , ,	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		Х
b	Admissions policies?	5b		X
С	Employment of faculty or administrative staff?	5c		X
				· v
d	Scholarships or other financial assistance?	5d		X
•	Educational policies?	50		Х
e	Educational policies?	5e		
f	Use of facilities?	5f		Х
-	Ose of facilities:			
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	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	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
~	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	7	Х	

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

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).

PART I, LINE:3

THE UNIVERSITY'S RACIALLY NONDISCRIMINATORY POLICY APPEARS IN ITS
UNDERGRADUATE AND GRADUATE CATALOGS, AS WELL AS IN THE ADMISSION
PROSPECTUS. IT IS ALSO IN ALL NEWSPAPER ADVERTISEMENTS AND THE
UNIVERSITY'S WEBSITE.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID

THE UNIVERSITY PARTICIPATES IN VARIOUS FEDERAL AND STATE FINANCIAL AID PROGRAMS, WHICH INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING PROGRAMS: FEDERAL DIRECT LENDING PROGRAM, FEDERAL PELL GRANT, FEDERAL COLLEGE WORK STUDY, FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT, N.J STATE TUITION ASSISTANCE GRANT AND N.J. STATE EDUCATION OPPORTUNITY FUND.

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

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

22-1500645 SETON HALL UNIVERSITY General Information on Activities Outside the United States Complete if the

Pa	Form 990, Part IV, line 14		Outside the t	Jnited States. Complete	if the organization answer	ered "Yes" on
1	For grantmakers. Does the orga assistance, the grantees' eligibility grants or assistance?	ty for the grant	s or assistance		_	Yes No
2	For grantmakers. Describe in			ocedures for monitoring	the use of its grants	
	assistance outside the United Sta	ates.				
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	pace is needed.)	
	(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 service(s) in region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		29,132,000.
(2)	EAST ASIA AND THE PACIFIC	1.	1.	PROGRAM SERVICES	STUDENT RECRUITMENT	55,000.
(3)	EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	MBA PROGRAM	43,000.
(4)	SEE PART V			PROGRAM SERVICES	STUDY ABROAD	91,000.
(5)	EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	MSPA PROGRAM	29,000.
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3 a	Total from continuation	1.	1.			29,350,000.
,	sheets to Part I	1	1			29.350.000.

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

SETON HALL UNIVERSITY 22-1500645

Schedule F (Form 990) 2015 Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of valuation (book, FMV, appraisal, other) (f) Manner of cash disbursement (g) Amount of non-cash assistance (h) Description of non-cash assistance (b) IRS code section and EIN (if applicable) (d) Purpose of grant (e) Amount of cash grant 1 (c) Region organization (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15)

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

Schedule F (Form 990) 2015

JSA 5E1275 1.000 8263ES F42F

V 15-7.18 1004439621 PAGE 39 SETON HALL UNIVERSITY 22-1500645

Schedule F (Form 990) 2015

Part III

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

Page 3

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							

Schedule F (Form 990) 2015

JSA 5E1276 1.000

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Schedule F (Form 990) 2015

Part IV Foreign Forms Page 4

ган	iv i oreign i ornis			
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)	X	Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)		Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X	Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X	Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X	Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)		Yes	X No

Part V Supplemental Information

Complete this part to 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).

PART I, LINE 3, (1); PART IV , LINES 1, 3, 4,& 5

BY VIRTUE OF ITS INVESTMENTS IN VARIOUS LIMITED PARTNERSHIP INVESTMENTS,

SETON HALL UNIVERSITY MAY INVEST IN PASSIVE FOREIGN INVESTMENT COMPANIES

AND/OR FOREIGN PARTNERSHIPS; TO THE EXTENT THE UNIVERSITY IS REQUIRED TO

FILE THE FORMS 926, 5471, 8621, OR 8865, THOSE FOREIGN FORMS WERE

PART I, LINES 3, (2)&(3)

ATTACHED TO THE UNIVERSITY'S FORM 990-T.

SUPPORT FOR STUDENT RECRUITMENT AND ACADEMIC EXCHANGE PROGRAM

DEVELOPMENTS. DURING FY2016, THE STILLMAN SCHOOL CONTINUED TO OFFER 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.

PART I, LINE 3, (4)

THE UNIVERSITY EXPENDS FUNDS OUTSIDE OF THE UNITED STATES ON VARIOUS
STUDY ABROAD PROGRAMS IN VARIOUS COUNTRIES. STUDENTS ENROLLED IN STUDY
ABROAD PROGRAMS PAY THEIR FEES RELATING TO TRAVEL AND OTHER EXPENSE
DIRECTLY TO SETON HALL UNIVERSITY AND THE UNIVERSITY REMITS PAYMENTS TO
THE OVERSEAS ENTITIES ON THE STUDENTS' BEHALF.

Part V Supplemental Information

Complete this part to 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).

PART I, LINE 3, (5)

IN JANUARY 2016, OUR AACSB-ACCREDITED STILLMAN SCHOOL OF BUSINESS, ONE OF TWO SCHOOLS IN NEW JERSEY TO HOLD THIS ACCREDITATION FOR ITS ACCOUNTING PROGRAM AND ONE OF LESS THAN 200 SCHOOLS TO HOLD THIS DISTINCTION WORLDWIDE, BEGAN ITS PARTNERSHIP WITH THE UNIVERSITY OF SANTO TOMAS (UST) IN MANILA, PHILIPPINES. THE UST FACULTY COHORT IS COMPRISED OF TEN (10) FACULTY MEMBERS WHO HAVE EACH BEEN ACCEPTED TO THE STILLMAN'S MASTER OF SCIENCE IN PROFESSIONAL ACCOUNTING DEGREE PROGRAM. THIS PROGRAM IS THIRTY (30) CREDITS AND THE STILLMAN SCHOOL HAS OFFERED ONE TO TWO COURSES PER SEMESTER. STUDENTS ARE FULLY ENGAGED WITH THE STILLMAN SCHOOL OF BUSINESS FACULTY USING THE SETON HALL UNIVERSITY LEARNING PLATFORMS.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number SETON HALL UNIVERSITY 22-1500645 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2015

Schedule G (Form 990 or 990-EZ) 2015

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

			(a) Event #1 LAW SCHL DINNER	(b) Event #2 SON LATINO	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	216,000.	206,000.	768,000.	1,190,000.
Ř		Less: Contributions Gross income (line 1 minus	84,000.	164,000.	482,000.	730,000
_	3	line 2)	132,000.	42,000.	286,000.	460,000
	4	Cash prizes			0.	
	5	Noncash prizes			13,000.	13,000
nses	6	Rent/facility costs			2,000.	2,000
Revenue Direct Expenses	7	Food and beverages	85,000.	29,000.	209,000.	323,000
Direc	8	Entertainment	18,000.	5,000.	99,000.	122,000
	9	Other direct expenses	8,000.	7,000.	93,000.	108,000
		Net income summary. Subtract line 1	0 from line 3, column (d	<u>)</u>		568,000 -108,000
Pa	rt l	Gaming. Complete if the orgathan \$15,000 on Form 990-E		es" on Form 990, Pa	rt IV, line 19, or repo	orted more
venue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
 	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct F	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)		▶	
_	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)		
9 a	ıls	nter the state(s) in which the organizates the organization licensed to conduct of "No," explain:		of these states?		. Yes No
		Vere any of the organization's gaming l	icenses revoked, suspe			. Yes No

SETON HALL UNIVERSITY

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Sched	ule G (Form 990 or 990-EZ) 2015
formed to administer charitable gaming? Indicate the percentage of gaming activity conducted in: a The organization's facility b An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ c if "Yes," enter name and address of the third party: Name ▶ Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ▶ \$	11	Does the organization conduct gaming activities with nonmembers? Yes No
Indicate the percentage of gaming activity conducted in: a The organization's facility	12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
a The organization's facility b An outside facility 13a 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$		
b An outside facility	13	
Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	а	
Name ► Address ► 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?.		
Address ▶ Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14	
Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Name ▶
revenue?		Address ▶
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	15 a	
amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party: Name ▶ Address ▶ 16 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer	h	If "Yes " enter the amount of gaming revenue received by the organization ▶ \$ and the
C If "Yes," enter name and address of the third party: Name ▶ Address ▶ 16 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer		amount of gaming revenue retained by the third party \$
Address ► Gaming manager information: Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	С	If "Yes," enter name and address of the third party:
Name ►		Name ▶
Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer		Address ▶
Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer	16	Gaming manager information:
Director/officer		Name ▶
Director/officer		Gaming manager compensation ▶ \$
 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Description of services provided ▶
 a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Director/officer Employee Independent contractor
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17	Mandatory distributions:
retain the state gaming license?	а	·
 b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information 		
Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information	b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information	Par	
	Ται	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information

Schedule G (Form 990 or 990-EZ) 2015

JSA 5E1503 1.000

SCHEDULE I (Form 990)

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. 2015
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury				tach to Form 990.		. "		Open to Public Inspection
nternal Revenue Service	► Inform	ation about S	schedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/torm990.		inspection
lame of the organization		•	•		•	•	Employer identific	ation number
SETON HALL UNIV	ERSITY						22-1500645	5
Part I General Ir	nformation on Grants a	nd Assistand	ce					
the selection crite Describe in Part Part II Grants an	reation maintain records to eria used to award the gra- IV the organization's proce- ad Other Assistance to IV, line 21, for any reci-	nts or assistan edures for mo Domestic O	ce?	of grant funds in the	e United States.	plete if the organiza	ation answered "Ye	X Yes No
	address of organization povernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VILLAGE OF SOUTH (ORANGE, N.J.							
101 SOUTH ORANGE	AVENUE	226002309	115	24,000.				SEE PART IV.
(2) SOCIETY OF THE SI	STERS OF CHRISTIAN							
350 BERNARDSVILLE	RD MENDHAM, NJ 07945	222138057	501(C)(3)	25,000.				GENERAL PURPOSE

or government		if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) VILLAGE OF SOUTH ORANGE, N.J.							
101 SOUTH ORANGE AVENUE	226002309	115	24,000.				SEE PART IV.
(2) SOCIETY OF THE SISTERS OF CHRISTIAN							
350 BERNARDSVILLE RD MENDHAM, NJ 07945	222138057	501(C)(3)	25,000.				GENERAL PURPOSE
(3) SAINT PAUL'S OUTREACH							
110 CRUSADER AVE WEST ST ST. PAUL, MN 55118	411621192	501(C)(3)	25,000.				GENERAL PURPOSE
(4) CHILDREN'S SPECIALIZED HOSPITAL							
150 NEW PROVIDENCE RD.	136844298	501(C)(3)	11,000.				GENERAL PURPOSE
(5) JFK JOHNSON REHABILITATION INSTITUTE							
65 JAMES ST EDISON, NJ 08820	226019101	501(C)(3)	15,000.				GENERAL PURPOSE
(6) HACKENSACK UMC FOUNDATION							
30 PROSPECT AVE. HACKENSACK, NJ 07601	222339534	501(C)(3)	10,000.				GENERAL PURPOSE
(7) LEADERSHIP EDUCATION FOR ASIA PACIFIC							
327 E 2ND ST STE 226 LOS ANGELES, CA 90012	953879677	501(C)(3)	10,000.				GENERAL PURPOSE
(8) IVY HILL NEIGHBORHOOD ASSOCIATION							
209 IVY ST NEWARK, NJ 07106	300222590	501(C)(3)	7,000.				GENERAL PURPOSE
(9)							
10)							
11)							
12)							

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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SETON HALL UNIVERSITY 22-1500645

Schedule I (Form 990) (2015) Page 2

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

Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance (c) Amount of (d) Amount of (f) Description of non-cash assistance (e) Method of valuation (book, cash grant FMV, appraisal, other) 1 FEDERAL AWARDS 2,087. 11,016,000. 12,018,000. 2 STATE OF NEW JERSEY AWARDS 1,683. 10,089. 3 INSTITUTIONAL SUPPORT 105,830,000. 5

Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2

6

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

Schedule I (Form 990) (2015)

JSA

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Schedule I (Form 990) (2015)					Page 2
Part III Grants and Other Assistance to Indivi- Part III can be duplicated if additional spa			mplete if the o	organization answered	I "Yes" on Form 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
_1					
2					
3					
4					
_5					
6					
7					
Part IV Supplemental Information. Complete the information.	his part to pro	vide the informa	tion required in	Part I, line 2, Part III,	column (b), and any other additional
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.

Schedule I (Form 990) (2015)

JSA

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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" on 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

OMB No. 1545-0047

Name of the organization Employer identification number 22-1500645 SETON HALL UNIVERSITY **Questions Regarding Compensation**

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

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

SETON HALL UNIVERSITY 22-1500645

Schedule J (Form 990) 2015

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

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

		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
A GABRIEL ESTEBAN, PH.D.	(i)	493,007.	146,250.	15,614.	21,200.	90,029.	766,100.	0.
1 PRESIDENT/REGENT/TRUSTEE	(ii)	0.	0.	0.	0.	0.	0.	0.
LARRY A. ROBINSON, ED.D.	(i)	344,684.	125,000.	10,324.	21,200.	48,869.	550,077.	0.
2PROVOST & EXECUTIVE V.P.	(ii)	0.	0.	0.	0.	0.	0.	0.
DAVID J. BOHAN, MBA	(i)	290,768.	50,000.	8,258.	21,200.	36,984.	407,210.	0.
3 ^{V.P.} UNIVERSITY ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
DENNIS J. GARBINI, MBA	(i)	247,947.	0.	10,296.	20,423.	26,265.	304,931.	0.
4 ^{V.P.} ADMINISTRATION	(ii)	0.	0.	0.	0.	0.	0.	0.
TRACY H. GOTTLIEB, PH.D.	(i)	209,267.	0.	8,491.	17,107.	24,816.	259,681.	0.
5 V.P. STUDENT SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
STEPHEN A. GRAHAM, MBA	(i)	227,735.	0.	7,417.	18,540.	30,083.	283,775.	0.
6 ^{VP} FINANCE/CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
CATHERINE A. KIERNAN, JD	(i)	254,975.	0.	8,258.	20,956.	34,509.	318,698.	0.
7 ^{V.P.} GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
ALYSSA MCCLOUD, PH.D.	(i)	255,938.	55,000.	7,446.	20,647.	12,944.	351,975.	0.
8 ^{V.P.} ENROLLMENT MANAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
STEPHEN J. LUBBEN, JD, gLAW SCHOOL PROFESSOR	(i)	258,790.	0.	224.	21,200.	35,129.	315,343.	0.
-	(ii)	0.	0.	0.	0.	0.	0.	0.
JOAN F. GUETTI, PH.D.	(i)	181,465.	0.	1,027.	14,626.	11,124.	208,242.	0.
10 FORMER DEAN, ARTS & SCIENCES	(ii)	0.	0.	0.	0.	0.	0.	0.
PATRICK E. HOBBS, JD, LLM 11 FORMER DEAN, SCHOOL OF LAW	(i)	359,216.	112,155.	9,638.	21,200.	42,324.	544,533.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KATHLEEN BOOZANG, JD, LLM 12 DEAN, SCHOOL OF LAW	` '	283,867.	0.	1,942.	21,200.	14,499.	321,508.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JOYCE A. STRAWSER, PH.D. 13 DEAN, SCHOOL OF BUSINESS	(i)	237,433.	0.	528.	19,383.	68,477.	325,821.	0.
KEVIN WILLARD	(ii)	1 410 222		0.	0.	0.	0.	0.
14 KEVIN WILLARD BASKETBALL	(i)	1,418,323.	115,000.	33,296.	21,200.	45,931. 0.	1,633,750.	0.
	(ii)	270,823.	67,500.	20,462.	21,200.	100,234.	480,219.	0.
ANTHONY J. BOZZELLA 15 ^{HEAD COACH WOMEN'S BASKETBALL}	(i)	270,823.	67,500.	20,462.	21,200.	100,234.	480,219.	0.
BRIAN B. SHULMAN, PH.D.	(ii)	255,281.	25,000.	1,040.	20,625.	13,328.	315,274.	0.
16 DEAN, SCHOOL OF HEALTH & MED.	(i)	233,281.	25,000.	1,040.	20,025.	13,320.	313,274.	0.
16	(ii)	0.	0.	0.	0.	0.	0.	<u> </u>

Schedule J (Form 990) 2015

JSA 5E1291 1.000

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SETON HALL UNIVERSITY 22-1500645

Schedule J (Form 990) 2015

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

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

					(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ANDREA BARTOLI, PH.D.	(i)	253,824.	0.	8,258.	21,068.	37,059.	320,209.	0
DEAN, SCHOOL OF DIPLOMACY	(ii)	0.	0.	0.	0.	0.	0.	0
PATRICK G. LYONS	(i)	338,993.	95,000.	21,846.	21,200.	22,082.	499,121.	0
2 V.P.FOR ATHLETICS & REC. SVCS.	(ii)	0.	0.	0.	0.	0.	0.	0
MICHAEL S. ZAVADA	(i)	103,392.	0.	482.	0.	0.	103,874.	0
3 FORMER DEAN, ARTS & SCIENCES	(ii)	0.	0.	0.	0.	0.	0.	0
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2015

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SETON HALL UNIVERSITY 22-1500645

Schedule J (Form 990) 2015 Part III Supplemental Information

Complete this part to 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.

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, AND MONSIGNOR ROBERT J. WISTER). 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 \$9,620. IT IS INCLUDED IN NONTAXABLE BENEFITS IN SCHEDULE J, PART II.

THE UNIVERSITY PAID MEMBERSHIP FEES TO A COUNTRY CLUB FOR ITS MEN'S

Schedule J (Form 990) 2015

JSA

5E1505 1.000 8263ES F42F

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SETON HALL UNIVERSITY 22-1500645

Part III Supplemental Information

Schedule J (Form 990) 2015

Complete this part to 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.

BASKETBALL COACH, KEVIN WILLARD, WOMEN'S BASKETBALL COACH ANTHONY J. BOZZELLA, AND V.P. FOR ATHLETICS & RECREATIONAL SERVICES, PATRICK G. LYONS. THEIR ATTENDANCE AT THESE ORGANIZATIONS WERE EXCLUSIVELY BUSINESS RELATED IN ORDER TO ASSIST UNIVERSITY ADVANCEMENT WITH DONOR CULTIVATION AND FUNDRAISING EFFORTS. SUCH FEES TOTALED \$11,722, \$22,980, AND \$19,864, RESPECTIVELY. THEY ARE INCLUDED IN NONTAXABLE BENEFITS IN SCHEDULE J, PART II.

PART I, LINE 5A

PATRICK G.LYONS, V.P. FOR ATHLETICS & RECREATION SERVICES, RECEIVED \$25,000 OF INCENTIVE COMPENSATION FOR REACHING CERTAIN PROGRESS GOALS ASSOCIATED WITH ATHLETIC DEPARTMENT REVENUE. DAVID J. BOHAN, V.P. ADVANCEMENT, RECEIVED \$50,000 OF INCENTIVE COMPENSATION FOR REACHING CERTAIN FUNDRAISING GOALS.

PART I, LINE 7

ALYSSA MCCLOUD, V.P. ENROLLMENT MANAGEMENT, RECEIVED A \$55,000 PERFORMANCE BASED BONUS APPROVED BY MANAGEMENT. SHE DID NOT HAVE INPUT INTO HER BONUS.

Schedule J (Form 990) 2015

Page 3

JSA

5E1505 1.000 8263ES F42F

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SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

SETON HALL UNIVERSITY

Employer identification number 22-1500645

(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ue price	(f) De	(f) Description of purpose			efeased	(h) (If of	(i) Po finan		
									Yes	No	Yes	No No	Yes		
A NJEFA - SETON HALL ISSUES 2008 D & E	221829511	646065WZ1	12/11/2008	73,	939,881.	SEE PART VI			103	х	103	Х	103		
MINISTA - SETON HALL - CIF 2004 A & 2006 A & 2014D	221829511	64605LNM6	04/14/2004	7,	805,700.	SEE PART VI	E PART VI			Х		Х	Х		
NJEFA - SETON HALL - ISSUE 2011 A	221829511	646065U83	06/10/2011	37,	578,532.	SEE PART VI				х		х			
NJEFA - SETON HALL - CIF 2014B	221829511	646066DG2	04/29/2014	19,	369,367.	SEE PART VI				х		х	Х		
Part II Proceeds															
				A			В	(D			
1 Amount of bonds retired				33,13	L5,000.	1,5	45,263.	25,1	40,00	00.		3	4,3		
2 Amount of bonds legally defeased															
3 Total proceeds of issue					33,251.		05,700.	37,5	78,53	32.	19	,36	9,36		
4 Gross proceeds in reserve funds				1,84	18,863.										
5 Capitalized interest from proceeds							78,458.								
Proceeds in refunding escrows															
7 Issuance costs from proceeds					54,021.		56,467.	411,094.		94. 113		3,3			
8 Credit enhancement from proceeds				1!	56,565.		59,024.								
9 Working capital expenditures from proceeds															
O Capital expenditures from proceeds				68	35,153.	7,6	11,751.				1	,01	4,8		
1 Other spent proceeds				70,88	30,432.			37,167,438.							
2 Other unspent proceeds															
3 Year of substantial completion				2008	3	200	5	201	1		2	015			
				Yes	No	Yes	No	Yes	No		Yes		No		
4 Were the bonds issued as part of a current refundi	ng issue?			X			X	X					X		
5 Were the bonds issued as part of an advance refur					Х	X			Х				Х		
6 Has the final allocation of proceeds been made? .				Х		X		Х			Х				
7 Does the organization maintain adequate boo	oks and record	ls to supp	ort the												
final allocation of proceeds?				X		X		X			X				
art III Private Business Use															
				A	١		В	(0			D			
1 Was the organization a partner in a partnership which owned property financed by tax-exempt bon	o, or a member ds?	r of an LLC),	Yes	No	Yes	No X	Yes	No)	Yes		No X		
2 Are there any lease arrangements that may bond-financed property?	result in privat	e business	use of				х						x		
	r Form 990.						41								

SCHEDULE K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on 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.

Employer identification number

OMB No. 1545-0047

Name of the organization

SETON HALL UNIVERSITY 22-1500645 Bond Issues **(h)** On (i) Pooled (c) CUSIP# (d) Date issued (g) Defeased (a) Issuer name (b) Issuer EIN (e) Issue price (f) Description of purpose behalf of issuer Yes No Yes No Yes No 8,131,497. SEE PART VI A NJEFA - SETON HALL - ELF ISSUE 2014B 221829511 6460658J4 01/30/2014 Х **B** NJEFA - SETON HALL - ISSUE 2013D 221829511 6460656D9 07/10/2013 43,935,728. SEE PART VI C NJEFA - SETON HALL - ISSUE 2015 C 221829511 646066MC1 07/14/2015 24,255,807. SEE PART VI D Part II Proceeds D 1 Amount of bonds retired 57,472. 1,550,000. 685,000. 8,131,497. 43,935,728. 24,255,807 2,405,009. 6 Proceeds in refunding escrows..... 54,772. 306,564 522,077. 330,900. 33,208,335. Other spent proceeds . . 7,800,307 23,949,243. 11 2015 2014 2015 Yes No Yes No Yes No Yes No 14 Were the bonds issued as part of a current refunding issue? Х X 15 Were the bonds issued as part of an advance refunding issue?. X Χ Х Χ Does the organization maintain adequate books and records to support the Χ Χ Χ final allocation of proceeds? Part III Private Business Use Yes 1 Was the organization a partner in a partnership, or a member of an LLC, Yes No No Yes Yes No which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of bond-financed property?

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

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SETON HALL UNIVERSITY 22-1500645

Schedule K (Form 990) 2015

Part III Private Business Use (Continued) I

Tart III Trivate Business Use (Continued)								
		Α		3	(С		D
3a Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	No	Yes	No X	Yes	No	Yes	No X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?				Х				Х
d 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?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		%	1.4800 %			%	% .5900	
6 Total of lines 4 and 5		%	1.	.4800 %		%		.5900 %
7 Does the bond issue meet the private security or payment test?				Х				X
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?				х				Х
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?			X				Х	
Part IV Arbitrage								
		A	В		(С		D
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No X	Yes	No X	Yes	No X	Yes	No X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X	Х			Х	Х	
b Exception to rebate?		Х		Х	X			X
c No rebate due?				X		Х		X
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?	X			X		Х		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	Х			Х		Х		Х
b Name of provider	CITIBANK,	N.A.				·		
c Term of hedge		21.000						-
d Was the hedge superintegrated?		Х						
e Was the hedge terminated?		Х						

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SETON HALL UNIVERSITY 22-1500645
Page 2

Yes

Nο

Х

X

%

Yes

Nο

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%

Yes

No

%

n

PAGE 58

No

Yes

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Part III Private Business Use (Continued)

3a Are there any management or service contracts that may result in private

business use of bond-financed property?

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

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, .6700 % 1.1900 % another section 501(c)(3) organization, or a state or local government ▶ 6700 % 1.1900 % % Х Х Does the bond issue meet the private security or payment test? 8a Has there been a sale or disposition of any of the bond-financed property to a Х X nongovernmental person other than a 501(c)(3) organization since the bonds were issued? ${\bf b}~$ If "Yes" to line 8a, enter the percentage of bond-financed property sold or % % c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 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 Regulations sections 1.141-12 and 1.145-2? Part IV Arbitrage Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Yes No Yes No Yes No Yes Νo If "No" to line 1, did the following apply?...... Χ Χ Χ Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was Is the bond issue a variable rate issue?..... Χ Χ Χ 4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? Х Х X d Was the hedge superintegrated?..... e Was the hedge terminated?..... Schedule K (Form 990) 2015 5E1296 1 000

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V 15-7.18

SETON HALL UNIVERSITY

D Yes No Yes No Yes No Yes No **5a** Were gross proceeds invested in a guaranteed investment contract (GIC)? Х Х Х Х \boldsymbol{d} $\,$ Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . Were any gross proceeds invested beyond an available temporary period? Χ Х Χ X Has the organization established written procedures to monitor the requirements of section 148? Х Х X Х Part V Procedures To Undertake Corrective Action В ח 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? No Yes No Yes No Yes Yes No Χ Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions). Schedule K (Form 990) 2015

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Schedule K (Form 990) 2015

Part IV Arbitrage (Continued)

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D

SETON HALL UNIVERSITY

Schedule K (Form 990) 2015

5E1328 1.000

Part IV Arbitrage (Continued)

Yes No Yes No Yes No Yes No **5a** Were gross proceeds invested in a guaranteed investment contract (GIC)? Х Х Х \boldsymbol{d} $\,$ Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . Were any gross proceeds invested beyond an available temporary period? Χ Х Χ Has the organization established written procedures to monitor the requirements of section 148? Х X Part V Procedures To Undertake Corrective Action В ח 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? No Yes No Yes No Yes Yes No Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions). Schedule K (Form 990) 2015

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

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PART IV, LINE 2C

REBATE COMPUTATIONS WERE PERFORMED THROUGH JUNE 30, 2016 FOR ALL SETON HALL UNIVERSITY BOND ISSUES LISTED IN PART I. THERE IS NO REBATE LIABILITY RELATED TO ANY BOND ISSUE AS OF JUNE 30, 2016.

PART I, COLUMN(F) DESCRIPTION OF PURPOSE

1. SETON HALL UNIVERSITY ISSUES, 2008 SERIES D & E,(CUSIP NUMBERS 646065WZ1 AND 646065XO0) 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 $\,$

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

BONDS, EQUALS THE PART II, LINE 3, TOTAL PROCEEDS OF THE ISSUE OF \$74,633,251. ALL OF THE \$685,153 HAS BEEN USED FOR CAPITAL EXPENDITURES. IN 2005, THE UNIVERSITY ENTERED INTO TWO LONG-TERM INTEREST RATE SWAP AGREEMENTS WITH CITIBANK, N.A. IN ORDER TO HEDGE INTEREST RATE EXPOSURE RELATED TO THEIR 2005 SERIES C AND 2006 SERIES A ISSUES. FOLLOWING THE REFUNDING OF THE 2005 AND 2006 ISSUES WITH 2008 SERIES D & E, THE INTEREST RATE SWAP AGREEMENTS REMAINED IN PLACE, FOLLOWING AN AMENDMENT, IN ORDER TO HEDGE INTEREST RATE EXPOSURE FOR THE 2008 SERIES D ISSUE. THE SWAP AGREEMENTS EXPIRE CONCURRENTLY WITH THE MATURITY OF THE 2008 SERIES D BONDS, THE LAST OF WHICH MATURE ON JULY 1, 2037. IN JULY 2015, SETON HALL UNIVERSITY ISSUE, 2015 SERIES C, WAS ISSUED BY THE NJEFA TO ADVANCE REFUND THE UNIVERSITY'S 2008 SERIES E BONDS. SEE FURTHER BELOW.

2. ON APRIL 14, 2004, THE NJEFA ISSUED CAPITAL IMPROVEMENT FUND ("CIF")SERIES 2004A BONDS PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE BONDS WERE ISSUED IN THE PRINCIPAL AMOUNT OF \$76,725,000 WHICH WAS ALLOCATED TO A TOTAL OF SEVEN INSTITUTIONS IN NEW JERSEY, THREE PUBLIC AND FOUR PRIVATE. AN 8038 WAS FILED FOR THE PORTION OF THE ISSUE ALLOCATED TO PRIVATE INSTITUTIONS AND A SEPARATE 8038-G WAS FILED FOR THE

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

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

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

CREDIT ENHANCEMENT COSTS FROM SCHEDULE K, PART II, LINES 7 AND 8 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE.

ON APRIL 29, 2014 THE NJEFA ISSUED CIF BONDS, SERIES 2014 B, AND ADVANCE REFUNDING CIF BONDS, SERIES 2014 D, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. ONE FORM 8038 WAS FILED BY THE NJEFA COVERING BOTH ISSUES, UNDER CUSIP NUMBER 646066DG2. GROSS PROCEEDS FROM BOTH ISSUES WERE \$19,369,367 WITH THE 2014 B PORTION BEING \$15,493,539 AND THE 2014 D PORTION BEING \$3,875,828. THE SERIES 2014 D ISSUE PARTIALLY ADVANCE REFUNDED THE 2004A BONDS RELATED TO THREE PRIVATE INSTITUTIONS OF HIGHER EDUCATION. AS A RESULT OF THIS ADVANCE REFUNDING, AMOUNTS PAYABLE BY EACH INSTITUTION, INCLUDING THE UNIVERSITY, WAS ADJUSTED TO TAKE INTO ACCOUNT ALLOCABLE DEBT SERVICE SAVINGS.

3. SETON HALL 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

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 Schedule K (Form 990) 2015

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

IMPROVEMENTS. THE 2001 SERIES A ISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES A ISSUE WHICH REFUNDED THE UNIVERSITY'S 1985 SERIES A ISSUE WHICH WAS ISSUED TO FINANCE CAPITAL IMPROVEMENTS. THE 2001 SERIES B ISSUE WAS ISSUED IN JUNE 2001 TO REFUND THE UNIVERSITY'S 1991 SERIES B ISSUE WHICH WAS ISSUED TO REFUND THE UNIVERSITY'S 1988 SERIES B ISSUE WHICH WAS ISSUED TO REFUND THE UNIVERSITY'S 1976 SERIES A ISSUE AND TO FINANCE CAPITAL IMPROVEMENTS. THE 1976 SERIES A ISSUE WAS ISSUED TO FINANCE CAPITAL IMPROVEMENTS. THE 2001 SERIES G ISSUE WAS ISSUED IN JUNE 2001 TO FINANCE CAPITAL IMPROVEMENTS.

4. AS NOTED ABOVE, ON APRIL 29, 2014 THE NJEFA ISSUED CIF BONDS, SERIES 2014 B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE GROSS PROCEEDS OF THIS ISSUANCE WERE \$15,493,539. THE PROCEEDS WERE ALLOCATED TO SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION. SETON HALL'S APPORTIONED AMOUNT WAS \$2,192,165. AFTER \$12,165 OF APPORTIONED ISSUANCE COSTS, THE REMAINDER THAT WAS RECEIVED BY SETON HALL WAS \$2,180,000, OF WHICH \$1,165,170 WAS A GRANT AND \$1,014,830 WAS DEBT REPAYABLE OVER 20 YEARS. BONDS ISSUED TO FINANCE GRANTS MUST BE APPROVED BY THE STATE TREASURER AND ARE REPAYABLE BY THE STATE SUBJECT TO APPROPRIATION. THE BONDS WERE SOLD BASED ON THE CREDIT OF THE STATE. EACH INSTITUTION ENTERED INTO A

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Schedule K (Form 990) 2015

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

GRANT AGREEMENT OBLIGATING THE GRANTEE TO PAY A PORTION OF THE DEBT SERVICE ON THE BONDS ALLOCABLE TO THE GRANT. SETON HALL SPENT THE ENTIRE AMOUNT OF THE DEBT PROCEEDS ALLOCATED TO IT ON CAPITAL IMPROVEMENTS. THE AMOUNT REPORTED ON SCHEDULE K, PART III, LINE 5 REPRESENTS THE BOND ISSUANCE COSTS FROM SCHEDULE K, PART II, LINE 7 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE.

5. ON JANUARY 30, 2014 THE NJEFA ISSUED HIGHER EDUCATION EQUIPMENT LEASING FUND ("ELF") PROGRAM BONDS, SERIES 2014 B, PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE ELF 2014 B ISSUE IS ALLOCATED TO EQUIPMENT PURCHASES AT SIX PRIVATE INSTITUTIONS OF HIGHER EDUCATION. THE GROSS PROCEEDS OF THIS ISSUANCE WERE \$8,131,497. SETON HALL'S APPORTIONED AMOUNT WAS \$1,522,184. AFTER \$10,253 OF APPORTIONED ISSUANCE COSTS, THE REMAINDER THAT WAS RECEIVED BY SETON HALL WAS \$1,511,931, OF WHICH \$1,181,031 WAS A GRANT AND \$330,900 WAS DEBT REPAYABLE OVER 9 YEARS. BONDS ISSUED TO FINANCE GRANTS MUST BE APPROVED BY THE STATE TREASURER AND ARE REPAYABLE BY THE STATE SUBJECT TO APPROPRIATION. THE BONDS WERE SOLD BASED ON THE CREDIT OF THE STATE. EACH INSTITUTION ENTERED INTO A GRANT AGREEMENT OBLIGATING THE GRANTEE TO PAY A PORTION OF THE DEBT SERVICE ON THE BONDS ALLOCABLE TO THE GRANT. SETON HALL SPENT THE ENTIRE

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

AMOUNT OF THE DEBT PROCEEDS ALLOCATED TO IT ON EQUIPMENT. THE AMOUNT REPORTED ON SCHEDULE K, PART III, LINE 5 REPRESENTS THE BOND ISSUANCE COSTS FROM SCHEDULE K, PART II, LINE 7 DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE.

6. SETON HALL UNIVERSITY ISSUE, 2013 SERIES D, (CUSIP 6460656D9) WAS ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY'S 2009 C BONDS SOLD DIRECTLY TO CAPITAL ONE, N.A., FINANCE A PORTION OF THE COST OF TERMINATING THE UNIVERSITY'S INTEREST RATE SWAP AGREEMENT WITH CITIBANK, N.A. THAT HEDGED INTEREST RATE EXPOSURE RELATED TO THE 2009 C BONDS, AND TO FINANCE CAPITAL IMPROVEMENTS. THE UNIVERSITY'S 2009 SERIES C BONDS REFUNDED THE UNIVERSITY ISSUE, 1998 SERIES F, ISSUED ON 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

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

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DIVIDED BY THE AMOUNT ON PART II, LINE 3, TOTAL PROCEEDS OF ISSUE.

7. SETON HALL UNIVERSITY ISSUE, 2015 C (CUSIP 646066MC1) WAS ISSUED BY THE NJEFA TO ADVANCE REFUND SETON HALL UNIVERSITY'S 2008 SERIES E BONDS. THE PROCEEDS OF \$24,255,807, WHICH INCLUDED A DEBT PREMIUM OF \$2,050,807, TOGETHER WITH \$1,850,957 OF 2008 SERIES E DEBT SERVICE RESERVE FUNDS, WERE DEPOSITED IN AN IRREVOCABLE TRUST TO PAY INTEREST ALONG WITH PRINCIPAL OUTSTANDING OF \$22,030,000 ON ITS 2008 SERIES E BONDS THROUGH JULY 1, 2019, AND PAY BOND ISSUANCE COSTS OF \$306,564. THE 2008 SERIES E ISSUE, ALONG WITH 2008 SERIES D, WERE ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY ISSUES, 2005 SERIES C AND 2006 SERIES A.

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SCHEDULE L

Department of the Treasury

Internal Revenue Service

Transactions With Interested Persons

(Form 990 or 990-EZ) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization Employer identification number SETON HALL UNIVERSITY 22-1500645 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

	Complete if the organization ar	iswered Yes on Form 990, Part IV, line 25	a or 25b, or Form 990-EZ, Part V, line 40b.		
4	(a) Name of discussified person	(b) Relationship between disqualified person and		(d) Cor	rected?
1	(a) Name of disqualified person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurred by	the organization managers or disqualified po	ersons during the year		
	under section 4958		▶ \$		
3	Enter the amount of tax if any on lir	ne 2 above reimbursed by the organization	▶ \$		

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		from the		from the		from the		from the		from the		from the principal amount		(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No										
(1)																						
(2)																						
(3)																						
(4)																						
(5)																						
(6)																						
(7)																						
(8)																						
(9)																						
(10)																						
Total						\$																

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) PATRICK HOBBS	CHILD OF FORMER KEY EMPLOYE	7,500.	MERIT SCHOLARSHIP	TUITION SCHOLARSHIP
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2015

Schedule L (Form 990 or 990-EZ) 2015

Part IV Business Transactions Involving Interested Persons.

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	naring of ization's nues?
					Yes	No
(1)	MARY ANN CHRISTOPHER	BROTHER OF TRUSTEE/REGENT	128,252.	LEGAL SERVICES		Х
(2)	ROBERT J. SLOAN	REGENT	504,735.	TELEPHONE CHARGES		Х
(3)	THOMAS SHARKEY, SR.	REGENT EMERITUS	25,386.	BROKERAGE FEES		Х
(4)	LARRY A. ROBINSON	WIFE OF OFFICER	26,977.	COMPENSATION & BENEFITS		Х
(5)	LARRY A. ROBINSON	DAUGHTER OF OFFICER	64,600.	COMPENSATION & BENEFITS		Х
(6)	TRACY H. GOTTLIEB	SISTER OF OFFICER	107,678.	COMPENSATION & BENEFITS		Х
(7)	TRACY H. GOTTLIEB	SISTER OF OFFICER	58,087.	COMPENSATION & BENEFITS		Х
(8)	TRACY H. GOTTLIEB	DAUGHTER-INLAW OF OFFICER	51,319.	COMPENSATION & BENEFITS		Х
(9)						
(10)						

Part V Supplemental Information

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

PART IV BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

THE BROTHER OF MARY ANN CHRISTOPHER, TRUSTEE/REGENT, IS A PARTNER IN THE

LAW FIRM OF GIBBONS P.C. SETON HALL UNIVERSITY PAID GIBBONS P.C. \$128,252

FOR LEGAL SERVICES IN THE YEAR ENDED JUNE 30, 2016.

ROBERT J. SLOAN, REGENT, IS A VICE PRESIDENT AT AT&T. SETON HALL UNIVERSITY PAID AT&T \$504,735 FOR TELEPHONE CHARGES IN THE YEAR ENDED JUNE 30, 2016.

THOMAS SHARKEY, SR., REGENT EMERITUS, AND HIS SON THOMAS SHARKEY, JR., ARE THE CHAIRMAN AND PRESIDENT, RESPECTIVELY, OF THE INSURANCE BROKERAGE COMPANY, MEEKER SHARKEY & HURLEY. SETON HALL DEALS DIRECTLY WITH THEM FOR ITS LONG TERM DISABILITY BENEFITS. THE CARRIER IS CIGNA. MEEKER SHARKEY & HURLEY RECEIVED \$25,386 IN BROKERAGE FEES FOR THIS ARRANGEMENT.

THE WIFE AND DAUGHTER OF DR. LARRY A. ROBINSON, PROVOST & EXECUTIVE V.P., SERVED AS AN EMPLOYEES OF THE UNIVERSITY. IN FISCAL YEAR 2016, THEY RECEIVED TOTAL COMPENSATION AND BENEFITS OF \$26,977 AND \$64,600, RESPECTIVELY.

8263ES F42F V 15-7.18

Schedule L (Form 990 or 990-EZ) 2015

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

THE DAUGHTER-IN-LAW AND TWO SISTERS OF DR. TRACY H. GOTTLIEB, V.P. FOR STUDENT SERVICES, SERVED AS EMPLOYEES OF THE UNIVERSITY. IN FISCAL YEAR 2016, THEY RECEIVED TOTAL COMPENSATION AND BENEFITS OF \$51,319, \$107,678, AND \$58,087, RESPECTIVELY.

PART III GRANTS OR ASSISTANCE BENEFITING INTERESTED PERSONS

THE CHILD OF PATRICK HOBBS, A FORMER KEY EMPLOYEE, WAS AWARDED A MERIT

SCHOLARSHIP AMOUNTING TO \$7,500. HIS POSITION AS A FORMER DEAN OF THE LAW

SCHOOL HAD NO BEARING IN THE AWARD PROCESS NOR WAS HE INVOLVED IN THE

PROCESS AT ALL.

8263ES F42F

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

20**15**

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

SETON HALL UNIVERSITY

Employer identification number 22-1500645

(a) (b) (c)	4.00
(a) (b) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	APPRAISAL
2 Art - Historical treasures	
3 Art - Fractional interests	
4 Books and publications	
5 Clothing and household	
goods X 2,000.	COST
6 Cars and other vehicles	
7 Boats and planes	
8 Intellectual property	
9 Securities - Publicly traded X 26. 572,000.	SELLING PRICE
10 Securities - Closely held stock	
11 Securities - Closely field stock	
or trust interests	
12 Securities - Miscellaneous	
13 Qualified conservation	
contribution - Historic	
structures	
14 Qualified conservation	
contribution - Other	
15 Real estate - Residential	
16 Real estate - Commercial	
17 Real estate - Other	
18 Collectibles	
19 Food inventory	COST
20 Drugs and medical supplies	
21 Taxidermy	
22 Historical artifacts	
23 Scientific specimens	
24 Archeological artifacts	
25 Other ▶(IT EQUIPMENT) X 1. 18,000.	COST
26 Other (MISCELLANEOUS) X 19. 17,000.	COST
27 Other ▶()	
28 Other ▶()	
29 Number of Forms 8283 received by the organization during the tax year for contributions for	
which the organization completed Form 8283, Part IV, Donee Acknowledgement	1.
milen the erganization completed i emi ezec, i aren, zenec / emi eugement i i i i i i i i i i i i i i i i i i i	Yes No
30a During the year, did the organization receive by contribution any property reported in Part I, line	
28, that it must hold for at least three years from the date of the initial contribution, and which is	-
to be used for exempt purposes for the entire holding period?	·
b If "Yes," describe the arrangement in Part II.	
31 Does the organization have a gift acceptance policy that requires the review of any	non-standard
contributions?	
32a Does the organization hire or use third parties or related organizations to solicit, process, or	
contributions?	
b If "Yes," describe in Part II.	
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.	

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

Schedule M (Form 990) (2015)

Schedule M (Form 990) (2015) Page **2**

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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.

JSA Schedule M (Form 990) (2015)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization 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.

SETON HALL UNIVERSITY

Employer identification number 22-1500645

FORM 990, PART III, LINE 1 SETON HALL UNIVERSITY IS THE NATION'S OLDEST DIOCESAN CATHOLIC UNIVERSITY. IN A DIVERSE AND COLLABORATIVE ENVIRONMENT, IT FOCUSES ON ACADEMIC, ETHICAL, AND SPIRITUAL DEVELOPMENT. SETON HALL STUDENTS ARE PREPARED TO BE LEADERS IN THEIR PROFESSIONAL AND COMMUNITY LIVES IN A GLOBAL SOCIETY AND ARE CHALLENGED BY OUTSTANDING FACULTY, AN EVOLVING TECHNOLOGICALLY ADVANCED SETTING, AND VALUES-CENTERED CURRICULA. SETON HALL UNIVERSITY'S 58-ACRE PARK-LIKE MAIN CAMPUS IS LOCATED IN SOUTH ORANGE, NEW JERSEY, ONLY 14 MILES WEST OF NEW YORK CITY. THE UNIVERSITY IS HOME TO TEN NATIONALLY RECOGNIZED AND ACCREDITED SCHOOLS, INCLUDING ITS NATIONALLY-RANKED LAW SCHOOL LOCATED IN NEWARK, NEW JERSEY. THESE SCHOOLS THE PROFESSORS OF SETON HALL EDUCATE, SHAPE, AND DEVELOP APPROXIMATELY 6,100 UNDERGRADUATE AND 3,700 GRADUATE STUDENTS, WHO ARE ENROLLED IN MORE THAN 90 RIGOROUS MAJORS. THIS HAS LED TO SETON HALL BEING NATIONALLY RECOGNIZED FOR ACADEMIC EXCELLENCE BY THE PRINCETON REVIEW, U.S. NEWS & WORLD REPORT, AND BLOOMBERG BUSINESSWEEK. REMAINS A PIONEER IN CATHOLIC EDUCATION.

IN FY2016, SETON HALL UNIVERSITY AND HACKENSACK UNIVERSITY HEALTH NETWORK (HUHN), FORMED THE SETON HALL-HACKENSACK SCHOOL OF MEDICINE (SOM), A NONPROFIT NEW JERSEY CORPORATION. THE UNIVERSITY AND HUHN EACH CONTROL FIFTY PERCENT OF THE SOM, WITH EACH INSTITUTION APPOINTING FIFTY PERCENT OF THE SOM'S BOARD OF GOVERNORS.

Name of the organization Employer identification number SETON HALL UNIVERSITY 22-1500645

FORM 990, PART VI

PART VI, SECTION A, LINE 7A: THE BOARD OF REGENTS IS RESPONSIBLE FOR THE ENTIRE MANAGEMENT OF THE AFFAIRS AND CONCERNS OF THE UNIVERSITY. THE BOARD OF REGENTS IS VESTED WITH THE RESPONSIBILITY, POWER, AND AUTHORITY TO GOVERN THE UNIVERSITY AND SHALL EXERCISE THE CORPORATE POWERS OF THE UNIVERSITY UNDER LAW. BOARD OF REGENT EMERITI 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 AUDIT 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 FOR ITS REVIEW AND APPROVAL FOR FILING WITH THE INTERNAL
REVENUE SERVICE. THE BOARD OF REGENTS SHALL CONTEMPORANEOUSLY DOCUMENT
THE MEETING AT WHICH THE FORMS 990 AND 990-T ARE REVIEWED AND APPROVED
FOR FILING.

PART VI, SECTION B, LINE 12C: THE UNIVERSITY'S CONFLICT OF INTEREST POLICY IS POSTED ON THE UNIVERSITY'S WEB SITE. ALL NEW EMPLOYEES ARE MADE AWARE OF THE POLICY AT THE TIME OF HIRE. FOR SENIOR MANAGEMENT, THE UNIVERSITY REQUIRES AN ANNUAL DISCLOSURE OF SIGNIFICANT FINANCIAL INTERESTS IN, OR EMPLOYMENT OR CONSULTING RELATIONSHIPS WITH, ENTITIES DOING BUSINESS WITH THE UNIVERSITY. THESE ANNUAL DISCLOSURES COVER BOTH SENIOR MANAGEMENT AND THEIR IMMEDIATE FAMILY MEMBERS. WHEN SUCH RELATIONSHIPS EXIST, MEASURES ARE TAKEN TO ADDRESS THE ACTUAL OR PERCEIVED CONFLICT TO PROTECT THE BEST INTERESTS OF THE UNIVERSITY. THE POLICY REQUIRES, AMONG OTHER THINGS, THAT NO MEMBER OF THE BOARD OF REGENTS OR ITS COMMITTEES CAN PARTICIPATE IN ANY DECISION IN WHICH HE OR SHE (OR AN IMMEDIATE FAMILY MEMBER) HAS A MATERIAL FINANCIAL INTEREST. EACH REGENT IS REQUIRED TO CERTIFY COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND INDICATE WHETHER THE UNIVERSITY DOES BUSINESS WITH AN ENTITY IN WHICH A REGENT HAS A MATERIAL FINANCIAL INTEREST. WHEN SUCH RELATIONSHIPS EXIST, MEASURES ARE TAKEN TO MITIGATE ANY ACTUAL OR PERCEIVED CONFLICT, INCLUDING REQUIRING THAT SUCH TRANSACTIONS BE CONDUCTED AT ARM'S LENGTH, FOR GOOD AND SUFFICIENT CONSIDERATION, BASED ON TERMS THAT ARE FAIR AND REASONABLE TO AND FOR THE BENEFIT OF THE UNIVERSITY, AND IN ACCORDANCE WITH RELEVANT CONFLICT OF INTEREST LAWS. THE UNIVERSITY IS UNAWARE OF ANY SUCH ASSOCIATIONS CONSIDERED TO BE SIGNIFICANT.

PART VI, SECTION B, LINE 15: SETON HALL UNIVERSITY CAN ENSURE AND

DEMONSTRATE THAT OUR COMPENSATION ACTIONS DO NOT INURE TO THE BENEFIT OF A PRIVATE INDIVIDUAL. WE CAN DEMONSTRATE THAT THE COMPENSATION OF ALL DISQUALIFIED PERSONS, SUCH AS OFFICERS, DIRECTORS, AND KEY EMPLOYEES, IS CONSIDERED REASONABLE AND WOULD ORDINARILY BE PAID FOR LIKE SERVICES BY LIKE ENTERPRISES UNDER LIKE CIRCUMSTANCES. THE REASONABLENESS OF OUR COMPENSATION TAKES INTO ACCOUNT ALL BENEFITS. ANY COMPENSATION TRANSACTIONS FOR THESE INDIVIDUALS ARE APPROVED BY AN AUTHORIZED BODY OF INDIVIDUALS WHO HAVE NO CONFLICT OF INTEREST. UTILIZING A COMPENSATION CONSULTANT, APPROPRIATE COMPENSATION DATA IS RELIED UPON FOR COMPARABILITY AND PROOF OF FAIR MARKET VALUE, BEFORE MAKING A DECISION. COMPENSATION DECISIONS AND REPORTS ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES OF THE MEETING OF THE COMMITTEE WHEN THE DECISIONS ARE MADE.

PART VI, SECTION C, LINE 19: THE UNIVERSITY'S BY-LAWS AND ITS CONFLICT OF INTEREST POLICY ARE POSTED ON THE UNIVERSITY'S WEBSITE.

PART X, LINE 20

AS OF JUNE 30, 2016 AND 2015, UNAMORTIZED BOND AND LETTER OF CREDIT ISSUANCE COSTS TOTAL \$1,109,000 AND \$1,206,000 RESPECTIVELY. THE UNIVERSITY EARLY ADOPTED ACCOUNTING STANDARDS UPDATE ("ASU") 2015-03, SIMPLIFYING THE PRESENTATION OF DEBT ISSUANCE COSTS. THE ASU REQUIRES THAT DEFERRED BOND AND LETTER OF CREDIT ISSUANCE COSTS BE PRESENTED NET OF RELATED DEBT ON THE STATEMENTS OF FINANCIAL POSITION. THIS GUIDANCE WAS RETROACTIVELY APPLIED TO THE PRIOR YEAR.

PART XI, LINE 9

CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENTS OF \$1,626,000, PLUS THE

Name of the organization

SETON HALL UNIVERSITY

Employer identification number
22-1500645

PROVISION FOR UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE OF \$827,000, PLUS

LIMITED PARTNERSHIP GAIN OF \$25,000, LESS REVERSAL OF A FY15 ACCRUAL IN

FY16 OF \$121,000 REPRESENTING ASSISTANCE GIVEN TO A DOMESTIC GOVERNMENT.

THIS WAS INCLUDED IN FORM 990-2014 IN PART IX, LINE 1, AND IN SCHEDULE I,

PART II, LINE 2 - ESSEX COUNTY PARK.

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
GOURMET DINING SERVICES 400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079	CATERING	9,765,047.
SAMUEL S GRAHAM, INC. P.O. BOX 319 EAST HANOVER, NJ 07936	GENERAL CONTRACTING	4,599,121.
TEMCO SERVICE INDUSTRIES, INC. ONE PARK AVENUE NEW YORK, NY 10016	HOUSEKEEPING	3,575,151.
TORCON, INC. 328 NEWMAN SPRINGS ROAD #5 RED BANK, NJ 07701	GENERAL CONTRACTING	3,389,775.
HOLLISTER CONSTRUCTION SERVICES, LLC 339 JEFFERSON ROAD PARSIPPANY, NJ 07054	CONSTRUCTION SERVICE	2,515,950.

ATTACHMENT 2

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

	BEGINNING	ENDING	COST
DESCRIPTION	BOOK VALUE	BOOK VALUE	OR FMV
CORPORATE EQUITY	124,740,000.	108,526,000.	FMV
CORPORATE BONDS	67,995,000.	72,258,000.	FMV

Schedule O (Form 990 or 990-EZ) 2015

JSA 5E1228 1.000

Name of the organization	Employer identification number
SETON HALL UNIVERSITY	22-1500645
ATT	ACHMENT 2 (CONT'D)

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	COST OR FMV
U.S. GOVERNMENT SECURITIES	106,000.		FMV
CASH & TEMPORARY INVESTMENTS	5,483,000.	3,353,000.	FMV
TOTALS	198,324,000.	184,137,000.	

SETON HALL UNIVERSITY

22-1500645

SCHEDULE R (Form 990)

Part I

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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification numbe 22-1500645 SETON HALL UNIVERSITY

	(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)							
(2)							
(3)							
(4)							
(5)							
(C)							
(6)							
Part II	Identification of Related Tax-Exempt Organizations Coone or more related tax-exempt organizations during the	omplete if the o tax year.	organization ansv	vered "Yes" on Fo	orm 990, Part IV,	line 34 because	it had
	(a)	(b)	(c)	(d)	(e)	(f)	(g)

Section 512(b)(13) Name, address, and EIN of related organization Direct controlling Primary activity Legal domicile (state Exempt Code section Public charity status controlled entity? or foreign country) (if section 501(c)(3)) entity Yes No (1) ROMAN CATHOLIC ARCHDIOCESE OF NEWARK 221487308 171 CLIFTON AVENUE NEWARK, NJ 07104 SEE PART VII 501(C)(3) N/A Χ (2) (3) (4) (5) (6) (7)

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

Schedule R (Form 990) 2015

5E1307 1.000 8263ES F42F V 15-7.18 1004439621 PAGE 80 SETON HALL UNIVERSITY 22-1500645

Schedule R (Form 990) 2015

Page 2

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34

because it had one or more related organizations treated as a partnership during the tax year.												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
		,,					Yes	No		Yes	No	
(1)												
(2)												
(3)	_											
(4)												
(5)	-											
(6)												
(7)												
	•			•			_			•		

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

(a) Name, address, and EIN of related organization	-	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		(13) led
									Yes N	0
(1) SETON HALL-HACKENSACK SCHOOL OF MEDICINE	81-3872529									
400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079		SEE PART VII	NJ	N/A	C CORP			50.0000	Х	2
(2) KINGSLAND STREET URBAN RENEWAL, LLC	81-3857390									
400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079		SEE PART VII	NJ	N/A	C CORP			50.0000	Х	٤
(3)										
(4)										
(5)										
										_
(6)										
(7)										

JSA Schedule R (Form 990) 2015 5E1308 1.000

SETON HALL UNIVERSITY 22-1500645

Page 3

Schedule R (Form 990) 2015

(5)

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V Yes No Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity..... Χ Gift, grant, or capital contribution to related organization(s) Х 1b c Gift, grant, or capital contribution from related organization(s) Х 1c X d Loans or loan guarantees to or for related organization(s) Χ e Loans or loan guarantees by related organization(s) f Dividends from related organization(s). 1f Χ g Sale of assets to related organization(s).... 1g Х Purchase of assets from related organization(s) 1h Exchange of assets with related organization(s) Х Χ Lease of facilities, equipment, or other assets to related organization(s) 1j k Lease of facilities, equipment, or other assets from related organization(s) 1k Χ Χ 11 Χ m Performance of services or membership or fundraising solicitations by related organization(s). 1m n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Χ 1n Χ Sharing of paid employees with related organization(s) X Reimbursement paid to related organization(s) for expenses. 1p Х 1q Other transfer of cash or property to related organization(s) Χ 1r Х Other transfer of cash or property from related organization(s). If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) Name of related organization (b) (c) Amount involved (d) Method of determining type (a-s) amount involved (1) (2) (3) (4)

(6)

JSA
Schedule R (Form 990) 2015

SETON HALL UNIVERSITY 22-1500645

Schedule R (Form 990) 2015 Page 4

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.

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	(h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) eral or aging ner?	(k) Percentage ownership
				sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)		_												
(4)														
(5)		-												
(6)														
(7)		_												
(8)														
(9)		_												
(10)														
(11)		_												
(12)														
(13)														
(14)														
(15)														
(16)														

JSA 5E1310 1.000 Schedule R (Form 990) 2015

Schedule R (Form 990) 2015 Page 5

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

PART II : IDENTIFICATION OF RELATED TAX-EXEMPT ORG.PRIMARY ACTIVITY PRIMARY ACTIVITY OF ROMAN CATHOLIC ARCHDIOCESE OF NEWARK - OVERSEES THE CATHOLIC CHURCH IN CERTAIN COUNTIES OF NEW JERSEY.

PART IV : IDENTIFICATION OF RELATED ORG. TAXABLE AS CORP. PRIMARY ACTIVITY IN JUNE 2015, SETON HALL UNIVERSITY ("UNIVERSITY") AND HACKENSACK UNIVERSITY HEALTH NETWORK ("HUHN"), ACTING ON BEHALF OF HACKENSACK UNIVERSITY MEDICAL CENTER ("HUMC"), SIGNED AN AGREEMENT TO ESTABLISH THE PRINCIPLE ELEMENTS OF A LONG-TERM RELATIONSHIP TO DEVELOP AN UNDERGRADUATE SCHOOL OF MEDICINE, AS WELL AS SPONSOR GRADUATE MEDICAL EDUCATION PROGRAMS.

IN JANUARY 2016, THE UNIVERSITY AND HUHN FORMED THE SETON HALL-HACKENSACK SCHOOL OF MEDICINE ("SOM"), A NONPROFIT NEW JERSEY CORPORATION. IT IS IN THE PROCESS OF FILING FOR EXEMPTION FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) AND SIMILAR STATE OF NEW JERSEY PROVISIONS. UNIVERSITY AND HUHN EACH CONTROL FIFTY PERCENT OF THE SOM, WITH EACH INSTITUTION APPOINTING FIFTY PERCENT OF THE SOM'S BOARD OF GOVERNORS. THE SOM WILL BE ACCOUNTED FOR BY THE UNIVERSITY USING THE EQUITY METHOD OF ACCOUNTING.

IN OCTOBER 2015, THE UNIVERSITY AND HUMC FORMED KINGSLAND STREET URBAN RENEWAL, LLC ("KINGSLAND") FOR THE PURPOSES OF RENOVATING AND LEASING A LOCATION FOR THE NEW SOM. KINGSLAND QUALIFIES AS AN URBAN RENEWAL ENTITY Schedule R (Form 990) 2015 Page **5**

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

UNDER NEW JERSEY LAW AND WITH THE NEW JERSEY DEPARTMENT OF COMMUNITY

AFFAIRS, WHICH ENABLES IT TO QUALIFY FOR MAKING PAYMENTS IN LIEU OF

PROPERTY TAXES AND ALSO TO APPLY FOR TAX CREDITS FROM THE NEW JERSEY

ECONOMIC DEVELOPMENT AUTHORITY. IT IS IN THE PROCESS OF FILING FOR

EXEMPTION FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL

REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) AND

SIMILAR STATE OF NEW JERSEY PROVISIONS. THE UNIVERSITY AND HUMC EACH HAVE

A FIFTY PERCENT MEMBERSHIP INTEREST IN THE JOINT VENTURE. KINGSLAND WILL

BE ACCOUNTED FOR BY THE UNIVERSITY USING THE EQUITY METHOD OF

ACCOUNTING.

IN JUNE 2016, KINGSLAND SIGNED AN AGREEMENT WITH A REAL ESTATE DEVELOPMENT FIRM WHEREBY KINGSLAND WILL RENOVATE AND LEASE A BUILDING IN NUTLEY AND CLIFTON, NEW JERSEY, WHICH BUILDING WILL SERVE AS THE LOCATION FOR THE SOM, ALONG WITH THE UNIVERSITY'S COLLEGE OF NURSING AND SCHOOL OF HEALTH AND MEDICAL SCIENCES, AND HUMC RESEARCH ACTIVITIES. THE FINANCIAL OBLIGATIONS OF KINGSLAND UNDER THE LEASE ARE GUARANTEED JOINTLY AND SEVERALLY BY THE UNIVERSITY AND HUMC. THE TERM OF THE LEASE IS TWENTY-FIVE YEARS AND THREE MONTHS, WITH FOUR TEN-YEAR RENEWAL OPTIONS. KINGSLAND HAS SEVERAL PURCHASE OPTIONS THAT ARE EXERCISABLE AT VARIOUS TIMES AND IN VARIOUS AMOUNTS DURING THE TERM. THE LEASE WILL NOT COMMENCE UNTIL CERTAIN OTHER AGREEMENTS HAVE BEEN EXECUTED, INCLUDING SUBLEASES BETWEEN KINGSLAND AND THE UNIVERSITY, THE SOM, AND HUMC. AGREEMENTS HAVE NOT BEEN EXECUTED YET. THE LANDLORD HAS PROVIDED KINGSLAND WITH A FULL INDEMNITY AGAINST PRE-EXISTING ENVIRONMENTAL

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Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

CONDITIONS, SUBJECT TO CUSTOMARY LIMITATIONS. IN ADDITION, THE LANDLORD HAS PROVIDED KINGSLAND WITH A FINANCIAL ALLOWANCE FOR LEASEHOLD IMPROVEMENTS. THE LOCATION OF THE SOM, ALONG WITH THE ANTICIPATED POSITIVE ECONOMIC IMPACT THE SOM WILL HAVE ON THE AREA AS A RESULT OF JOB CREATION AND CAPITAL INVESTMENT, QUALIFIES SOM TO RECEIVE A GRANT OF TAX CREDITS FROM THE GROW NEW JERSEY ASSISTANCE PROGRAM UNDER THE NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY.