

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)

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2022** calendar year, or tax year beginning **07/01/2022** and ending **06/30/2023**

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

C Name of organization
SETON HALL UNIVERSITY
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
400 SOUTH ORANGE AVENUE
City or town, state or province, country, and ZIP or foreign postal code
SOUTH ORANGE, NJ 07079

D Employer identification number
22-1500645
E Telephone number
(973) 761-9318
G Gross receipts \$
629,755,000.

F Name and address of principal officer: **KATIA PASSERINI, PH.D.**
400 SOUTH ORANGE AVENUE, SOUTH ORANGE, NJ 07079
H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☒ No
If "No," attach a list. See instructions.

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

J Website: **WWW.SHU.EDU**
H(c) Group exemption number **0928**

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other **L** Year of formation: **1856** **M** State of legal domicile: **NJ**

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SETON HALL UNIVERSITY IS A CATHOLIC INSTITUTION OF HIGHER EDUCATION

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

3 Number of voting members of the governing body (Part VI, line 1a) **3** **36**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **29**

5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) **5** **3,999**

6 Total number of volunteers (estimate if necessary) **6** **646**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** **2,719,000.**

b Net unrelated business taxable income from Form 990-T, Part I, line 11 **7b** **3,371.**

Revenue

8 Contributions and grants (Part VIII, line 1h) **70,128,000.** **66,745,000.**

9 Program service revenue (Part VIII, line 2g) **428,763,000.** **438,656,000.**

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) **10,526,000.** **6,237,000.**

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) **17,108,000.** **16,789,000.**

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) **526,525,000.** **528,427,000.**

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) **194,549,000.** **195,362,000.**

14 Benefits paid to or for members (Part IX, column (A), line 4) **NONE** **NONE**

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) **182,328,000.** **186,148,000.**

16a Professional fundraising fees (Part IX, column (A), line 11e) **NONE** **340,000.**

b Total fundraising expenses (Part IX, column (D), line 25) **8,928,000.**

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) **132,199,000.** **131,771,000.**

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) **509,076,000.** **513,621,000.**

19 Revenue less expenses. Subtract line 18 from line 12 **17,449,000.** **14,806,000.**

Net Assets or Fund Balances

20 Total assets (Part X, line 16) **868,383,000.** **881,744,000.**

21 Total liabilities (Part X, line 26) **388,698,000.** **368,011,000.**

22 Net assets or fund balances. Subtract line 21 from line 20. **479,685,000.** **513,733,000.**

Part II Signature Block

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

Sign Here
Edward J. Bischof Sr.
Signature of officer **05/08/2024**
Date
EDWARD J. BISHOF, M.B.A.
Type or print name and title **INT. VP FINANCE/CFO**

Paid Preparer Use Only
Print/Type preparer's name **DANIEL ROMANO, PARTNER**
Preparer's signature **[Signature]**
Date **05/07/2024**
Check ☐ if self-employed **PTIN** **P00504182**
Firm's name **GRANT THORNTON, LLP**
Firm's EIN **36-6055558**
Firm's address **757 THIRD AVENUE NEW YORK, NY 10017**
Phone no. **212-542-9609**

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

JSA
2E1010 2.000
0336WY 700A 05/07/2024 14:34:29 V22-7.11 0160884-00022

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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

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

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

4a (Code:) (Expenses \$ 337,405,000. including grants of \$ 180,414,000.) (Revenue \$ 444,157,000.)

EDUCATIONAL - SETON HALL UNIVERSITY OPERATES TO PROVIDE
BACCALAUREATE, MASTERS, AND DOCTORAL DEGREES. DAY AND EVENING
SESSIONS ACCOMMODATE BOTH COMMUTER AND RESIDENTIAL STUDENTS ON A
PART-TIME AND FULL TIME BASIS.

4b (Code:) (Expenses \$ 101,566,000. including grants of \$ 14,189,000.) (Revenue \$ 8,564,000.)

ACADEMIC SUPPORT AND STUDENT SERVICES - ACADEMIC SUPPORT PROVIDES
SUPPORT SERVICES, SUCH AS LIBRARIES, ACADEMIC TECHNOLOGY, FACULTY
CURRICULUM DEVELOPMENT, FOR ITS PRIMARY MISSIONS OF INSTRUCTION,
RESEARCH AND PUBLIC SERVICE. STUDENT SERVICES PROVIDE VARIOUS
SERVICES TO STUDENTS, SUCH AS COUNSELING, CAREER GUIDANCE,
FINANCIAL AID, STUDENT RECORDS, HEALTH SERVICES AND
TRANSPORTATION, WHICH CONTRIBUTE TO THE STUDENTS' EMOTIONAL AND
PHYSICAL WELL-BEING AND TO THEIR INTELLECTUAL, CULTURAL AND SOCIAL
DEVELOPMENT OUTSIDE THE CONTEXT OF THE UNIVERSITY'S FORMAL
INSTRUCTIONAL PROGRAMS.

4c (Code:) (Expenses \$ 10,774,000. including grants of \$ 759,000.) (Revenue \$)

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 on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 449,745,000.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 X	
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 X	
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 Rev. Proc. 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 donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a X	
b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b X	
c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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 reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b X	
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	X
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 X	
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
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	X	
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b 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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	X	
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	573	
1b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	NONE	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No
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.	2a 3,999		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			X
b If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
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?			X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
a 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?		X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.			
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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>			
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.			

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

Check if Schedule O contains a response or note to any line in this Part VI ☒ X

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	36		
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 on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent.	1b	29		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, 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:				
a 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 on Schedule O.	9		X	

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

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		X
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 on 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	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on 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?			
a 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 on Schedule O. See instructions.			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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 organization's exempt status with respect to such arrangements?	16b		

Section 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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

EDWARD J. BISHOP, M.B.A. 400 SOUTH ORANGE AVENUE SOUTH ORANGE, NJ 07079

973 761 9343

Form 990 (2022)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☒ X**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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

☐ 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)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SHAHEEN HOLLOWAY HEAD COACH MEN'S BB (AS OF 3/22)	60.00 NONE					X		1,665,466.	NONE	52,662.
(2) JOSEPH E. NYRE, PH.D. PRESIDENT/CEO/REGENT/TRUSTEE	60.00 NONE	X		X				1,499,371.	NONE	131,573.
(3) KEVIN WILLARD HEAD COACH MEN'S BB (THRU 3/22)	60.00 NONE					X		1,056,713.	NONE	36,380.
(4) PATRICK G. LYONS, MBA EXECUTIVE VP & CHIEF OF STAFF	60.00 NONE			X				706,542.	NONE	169,599.
(5) KATIA PASSERINI, PH.D. EXECUTIVE VP AND PROVOST	60.00 NONE			X				469,458.	NONE	65,744.
(6) ALYSSA MCCLOUD, PH.D. SR.VP ENROLLMENT MANAGEMENT	50.00 NONE			X				418,096.	NONE	79,567.
(7) ANTHONY J. BOZZELLA HEAD COACH WOMEN'S BASKETBALL	60.00 NONE					X		425,301.	NONE	68,318.
(8) KATHLEEN BOOZANG, JD, LLM DEAN SCHOOL OF LAW (THRU 12/22)	45.00 NONE				X			433,071.	NONE	39,567.
(9) JON PAPARSENOS VP UNIV.ADVANCEMENT	50.00 NONE			X				392,197.	NONE	79,011.
(10) KIMBERLY A.CAPADONA, ESQ. GENERAL COUNSEL	50.00 NONE			X				355,827.	NONE	91,126.
(11) STEPHEN J.LUBBEN, JD, PH.D. LAW SCHOOL PROFESSOR	45.00 NONE					X		317,404.	NONE	66,674.
(12) BRYAN FELT, M.A. ATHLETICS DIRECTOR	45.00 NONE					X		350,444.	NONE	26,342.
(13) MONICA BURNETTE, PH.D. VP STUDENT SERVICES	50.00 NONE			X				279,289.	NONE	91,317.
(14) JOYCE A. STRAWSER, PH.D. DEAN, STILLMAN SCHOOL BUSINESS	45.00 NONE				X			298,284.	NONE	64,511.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MATTHEW BOROWICK, MBA VP UNIVERSITY RELATIONS	50.00 NONE			X				291,627.	NONE	60,928.
(16) BRIAN B. SHULMAN, PH.D. DEAN, SCHOOL HEALTH & MEDICAL	45.00 NONE				X			309,836.	NONE	39,567.
(17) DONNA M. MCMONAGLE VP FINANCE & CFO (AS OF 3/28/22)	50.00 NONE			X				265,508.	NONE	20,732.
(18) JOHN CORNWELL, J.D., M. PHIL. INT. DEAN, SCHOOL OF LAW (1/23)	45.00 NONE				X			226,026.	NONE	46,739.
(19) GEORITA FRIERSON, PH.D. DEAN COLLEGE OF A&S (THRU 5/23)	45.00 NONE				X			236,928.	NONE	34,326.
(20) KAREN E. BOROFF, PH.D. FORMER INTERIM PROVOST	45.00 NONE						X	198,650.	NONE	47,910.
(21) MICHELE NELSON, PH.D. VP BOARD AFFAIRS & STRATEGY	50.00 NONE			X				183,685.	NONE	58,800.
(22) ROBERT MCLAUGHLIN FORMER INTERIM VP FIN. & CFO	50.00 NONE						X	222,482.	NONE	16,351.
(23) JONATHAN V. FARINA, PH.D. INT. DEAN COLLEGE OF A&S (6/23)	45.00 NONE				X			170,178.	NONE	53,248.
(24) PETER W. SHOEMAKER, PH.D. FORMER DEAN COLLEGE OF A&S	45.00 NONE						X	156,961.	NONE	59,313.
(25) REV. COLIN KAY, M. DIV. VP FOR MISSION & MINISTRY	50.00 NONE			X				67,119.	NONE	75,972.
1b Sub-total								10,996,463.	NONE	1,576,277.
c Total from continuation sheets to Part VII, Section A								84,909.	NONE	295,068.
d Total (add lines 1b and 1c)								11,081,372.	NONE	1,871,345.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 390

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

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 ►

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) MSGR. GERALD MCCARREN TRUSTEE/RECTOR/DEAN	45.00 NONE		X					48,839.	NONE	73,972.
(27) REV. GERALD J. BUONOPANE REGENT/TRUSTEE/SR. LECTURER	45.00 NONE	X						35,070.	NONE	79,870.
(28) MSGR. PETER SMUTELOVIC TRUSTEE	1.00 NONE	X						NONE	NONE	90,800.
(29) REV. JOHN J. CHADWICK REGENT/TRUSTEE	45.00 NONE	X						1,000.	NONE	50,426.
(30) CARDINAL JOSEPH W. TOBIN C SSR REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(31) MOST REV. KURT R. BURNETTE REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(32) MOST REV. JAMES F. CHECCHIO REGENT	1.00 NONE	X						NONE	NONE	NONE
(33) MOST REV. DENNIS J. SULLIVAN REGENT	1.00 NONE	X						NONE	NONE	NONE
(34) SR. MARGARET STALLMEYER, C.D.P. REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(35) KEVIN H. MARINO, ESQ. REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(36) MARK E. GANTON REGENT	1.00 NONE	X						NONE	NONE	NONE
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 not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

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

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 ►

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) ROBERT J. SLOAN REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(38) JAMES E. COLLINS REGENT	1.00 NONE	X						NONE	NONE	NONE
(39) HENRY F. D'ALESSANDRO REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(40) ROBERT S. BASSO REGENT	1.00 NONE	X						NONE	NONE	NONE
(41) ROBERT B. BUDELMAN, ESQ. TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(42) EDWARD C. CERNY REGENT	1.00 NONE	X						NONE	NONE	NONE
(43) ROBERT C. GARRETT REGENT	1.00 NONE	X						NONE	NONE	NONE
(44) RICHARD A. GIUDITTA, JR. REGENT	1.00 NONE	X						NONE	NONE	NONE
(45) ANTHONY MASHERELLI REGENT	1.00 NONE	X						NONE	NONE	NONE
(46) RICHARD C. MCMAHON REGENT	1.00 NONE	X						NONE	NONE	NONE
(47) STEPHEN G. WALDIS REGENT	1.00 NONE	X						NONE	NONE	NONE
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 not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

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

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 ►

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) MATTHEW W. WRIGHT REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(49) JAMES T. BOYLE, JR. REGENT	1.00 NONE	X						NONE	NONE	NONE
(50) KEVIN P. FLOOD REGENT	1.00 NONE	X						NONE	NONE	NONE
(51) LEO J. ZATTA REGENT/TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(52) MOST REV. KEVIN J. SWEENEY REGENT	1.00 NONE	X						NONE	NONE	NONE
(53) SR. SHARON A. EUART, RSM TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(54) SR. MAUREEN SHAUGHNESSY, S.C. TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(55) STEPHEN P. LOUGHREY REGENT	1.00 NONE	X						NONE	NONE	NONE
(56) MICHAEL J. LUCCIOLA REGENT	1.00 NONE	X						NONE	NONE	NONE
(57) KEVIN J. MCMAHON REGENT	1.00 NONE	X						NONE	NONE	NONE
(58) MARY PAT CHRISTIE REGENT	1.00 NONE	X						NONE	NONE	NONE
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 not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

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

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 ►

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(59) BONNIE A. EVANS REGENT	1.00 NONE	X						NONE	NONE	NONE
(60) BRIAN T. FITZPATRICK REGENT	1.00 NONE	X						NONE	NONE	NONE
(61) PATRICK M. MURRAY REGENT	1.00 NONE	X						NONE	NONE	NONE
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 not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►			
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	No	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	X		

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
SEE SCHEDULE O	
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 ►	117

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	387,000.				
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	43,496,000.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	22,862,000.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 697,000.				
	h	Total. Add lines 1a-1f		66,745,000.				
	Program Service Revenue				Business Code			
2a		TUITION & FEES		900099	401,060,000.	401,060,000.		
b		ROOM AND BOARD		900099	37,596,000.	37,596,000.		
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f		438,656,000.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			8,427,000.		2,110,000.	6,317,000.
	4	Income from investment of tax-exempt bond proceeds .			2,309,000.			2,309,000.
	5	Royalties			196,000.			196,000.
	6a	Gross rents	(i) Real	(ii) Personal				
				309,000.				
			6b	Less: rental expenses		19,000.		
	6c	Rental income or (loss)		290,000.	NONE			
	d	Net rental income or (loss)			290,000.			290,000.
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				96,492,000.				
			7b	Less: cost or other basis and sales expenses . .		100,991,000.		
	7c	Gain or (loss)		-4,499,000.				
	d	Net gain or (loss)			-4,499,000.			-4,499,000.
	8a	Gross income from fundraising events (not including \$ 387,000. of contributions reported on line 1c). See Part IV, line 18						
			8a	370,000.				
			8b	Less: direct expenses		318,000.		
	c	Net income or (loss) from fundraising events			52,000.			52,000.
	9a	Gross income from gaming activities. See Part IV, line 19						
9a			NONE					
9b			Less: direct expenses		NONE			
c	Net income or (loss) from gaming activities			NONE				
10a	Gross sales of inventory, less returns and allowances							
		10a	NONE					
		10b	Less: cost of goods sold		NONE			
c	Net income or (loss) from sales of inventory			NONE				
Miscellaneous Revenue				Business Code				
	11a	NCAA/CONFERENCE DISTRIBUTIONS		900099	4,842,000.	4,842,000.		
	b	ATHLETIC REVENUE		900099	3,722,000.	3,722,000.		
	c	PARKING		812930	1,472,000.		1,472,000.	
	d	All other revenue		900099	6,215,000.	4,769,000.	609,000.	837,000.
	e	Total. Add lines 11a-11d		16,251,000.				
12	Total revenue. See instructions			528,427,000.	451,989,000.	2,719,000.	6,974,000.	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,143,000.	1,143,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	194,219,000.	194,219,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	7,817,000.	3,605,000.	2,779,000.	1,433,000.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	461,000.	461,000.		
7 Other salaries and wages	130,058,000.	110,613,000.	15,606,000.	3,839,000.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,800,000.	6,633,000.	937,000.	230,000.
9 Other employee benefits	30,519,000.	24,946,000.	4,265,000.	1,308,000.
10 Payroll taxes	9,493,000.	8,078,000.	1,136,000.	279,000.
11 Fees for services (nonemployees):				
a Management	208,000.	188,000.	20,000.	
b Legal	2,835,000.	15,000.	2,820,000.	
c Accounting	276,000.		276,000.	
d Lobbying	204,000.		204,000.	
e Professional fundraising services. See Part IV, line 17.	340,000.			340,000.
f Investment management fees	3,860,000.		3,860,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	30,781,000.	26,832,000.	3,868,000.	81,000.
12 Advertising and promotion	2,463,000.	1,661,000.	635,000.	167,000.
13 Office expenses	7,295,000.	4,775,000.	2,117,000.	403,000.
14 Information technology.	6,275,000.	1,432,000.	4,841,000.	2,000.
15 Royalties.	NONE			
16 Occupancy	12,127,000.	12,127,000.		
17 Travel	8,967,000.	7,950,000.	738,000.	279,000.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	3,188,000.	2,532,000.	455,000.	201,000.
20 Interest	10,922,000.	10,837,000.	85,000.	
21 Payments to affiliates.	NONE			
22 Depreciation, depletion, and amortization	21,851,000.	20,600,000.	1,158,000.	93,000.
23 Insurance	3,752,000.	192,000.	3,560,000.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a REPAIRS AND MAINTENANCE	6,782,000.	5,796,000.	790,000.	196,000.
b BOOKS AND SUBSCRIPTIONS	3,172,000.	3,081,000.	78,000.	13,000.
c BAD DEBT EXPENSE	2,320,000.		2,320,000.	
d REVENUE SHARING	1,315,000.	1,315,000.		
e All other expenses	3,178,000.	714,000.	2,400,000.	64,000.
25 Total functional expenses. Add lines 1 through 24e	513,621,000.	449,745,000.	54,948,000.	8,928,000.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☒ **X**

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	30,880,000.	1	22,596,000.
	2 Savings and temporary cash investments.	56,045,000.	2	58,697,000.
	3 Pledges and grants receivable, net	18,334,000.	3	27,741,000.
	4 Accounts receivable, net	3,202,000.	4	4,434,000.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	NONE	6	NONE
	7 Notes and loans receivable, net	3,882,000.	7	1,818,000.
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges . . SEE SCHEDULE O	18,935,000.	9	17,257,000.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 682,336,000.		
	b Less: accumulated depreciation.	10b 336,072,000.		
		331,058,000.	10c	346,264,000.
	11 Investments - publicly traded securities. . . SEE SCHEDULE O	94,735,000.	11	93,482,000.
	12 Investments - other securities. See Part IV, line 11.	225,096,000.	12	235,155,000.
	13 Investments - program-related. See Part IV, line 11.	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
15 Other assets. See Part IV, line 11	86,216,000.	15	74,300,000.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	868,383,000.	16	881,744,000.	
Liabilities	17 Accounts payable and accrued expenses.	57,512,000.	17	50,943,000.
	18 Grants payable	NONE	18	NONE
	19 Deferred revenue	13,839,000.	19	15,282,000.
	20 Tax-exempt bond liabilities	183,745,000.	20	179,933,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
	24 Unsecured notes and loans payable to unrelated third parties.	NONE	24	NONE
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	133,602,000.	25	121,853,000.
	26 Total liabilities. Add lines 17 through 25.	388,698,000.	26	368,011,000.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/> X			
	27 Net assets without donor restrictions	250,996,000.	27	270,658,000.
	28 Net assets with donor restrictions.	228,689,000.	28	243,075,000.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	479,685,000.	32	513,733,000.
	33 Total liabilities and net assets/fund balances.	868,383,000.	33	881,744,000.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	528,427,000.
2	Total expenses (must equal Part IX, column (A), line 25)	2	513,621,000.
3	Revenue less expenses. Subtract line 2 from line 1	3	14,806,000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	479,685,000.
5	Net unrealized gains (losses) on investments	5	20,824,000.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O).	9	-1,582,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	513,733,000.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII. ☐

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . .
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

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

Form **990** (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

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

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

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

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

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

Schedule A (Form 990) 2022

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	43,567,000.	45,513,000.	56,312,000.	70,128,000.	66,745,000.	282,265,000.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4 Total. Add lines 1 through 3.	43,567,000.	45,513,000.	56,312,000.	70,128,000.	66,745,000.	282,265,000.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						1,734,060.
6 Public support. Subtract line 5 from line 4						280,530,940.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	43,567,000.	45,513,000.	56,312,000.	70,128,000.	66,745,000.	282,265,000.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,029,000.	2,787,000.	2,675,000.	1,780,000.	9,112,000.	20,383,000.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	499,000.	171,000.	690,000.	1,265,000.	2,719,000.	5,344,000.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,255,000.	1,438,000.	1,792,000.	2,141,000.	2,679,000.	10,305,000.
11 Total support. Add lines 7 through 10						318,297,000.
12 Gross receipts from related activities, etc. (see instructions)					12	2,096,745,000.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	88.13 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	90.12 %
16a 33 1/3 % support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input checked="" type="checkbox"/>
b 33 1/3 % support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)).	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . ☐

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 on line 2, above, 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 E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, 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 lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," 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			

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
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 (<i>explain in detail in Part VI</i>):			
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 0.015 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 0.035.	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 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2022

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
e	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
c	Excess from 2020			
d	Excess from 2021			
e	Excess from 2022			

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

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2018	2019	2020	2021	2022	TOTAL
INCOME FUNDRAISING EVENTS	321,000.	136,000.	185,000.	321,000.	370,000.	1,333,000.
PARKING	1,247,000.	1,004,000.	550,000.	1,383,000.	1,472,000.	5,656,000.
SALE OF NJ TAX CREDITS			1,000,000.	350,000.	732,000.	2,082,000.
OTHER REVENUE	687,000.	298,000.	57,000.	87,000.	105,000.	1,234,000.
TOTALS	2,255,000.	1,438,000.	1,792,000.	2,141,000.	2,679,000.	10,305,000.

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

Employer identification number

SETON HALL UNIVERSITY

22-1500645

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$ 14,652,513.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A	\$ 9,792,510.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A	\$ 8,100,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A	\$ 3,000,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A	\$ 1,361,428.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

22-1500645

Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

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

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$
- 3 Volunteer hours for political campaign activities. See instructions

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990) 2022

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(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) 2022

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?	X		1,200.
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?	X		22,737.
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		214,540.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities?		X	
j	Total. Add lines 1c through 1i			238,477.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

SEE PAGE 4

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 AND AID FOR INDEPENDENT COLLEGE STUDENTS. EFFORTS CONSISTED OF DIRECT MAILINGS, PHONE CALLS AND PERSONAL MEETINGS. MEMBERS OF CONGRESS WERE CONTACTED REGARDING STUDENT AID AND GRANTS FOR VARIOUS UNIVERSITY PROGRAMS. THE UNIVERSITY'S STAFF IS INVOLVED IN LOBBYING EFFORTS. THE VALUE OF THAT STAFF TIME IS APPROXIMATELY \$34,290. 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 D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

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.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Employer identification number

22-1500645

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1.	\$
(ii) Assets included in Form 990, Part X.	\$ 1,799,000.
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1.	\$
b Assets included in Form 990, Part X.	\$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☒ Public exhibition d ☐ Loan or exchange program
 b ☒ Scholarly research e ☐ Other _____
 c ☒ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements.

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐ Yes ☐ No

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	317,919,000.	336,330,000.	270,000,000.	269,162,000.	271,090,000.
b Contributions	13,635,000.	28,465,000.	7,963,000.	3,891,000.	5,490,000.
c Net investment earnings, gains, and losses	21,753,000.	-30,013,000.	74,306,000.	14,028,000.	10,675,000.
d Grants or scholarships	3,787,000.	3,206,000.	3,291,000.	3,167,000.	3,474,000.
e Other expenditures for facilities and programs	9,948,000.	9,469,000.	8,438,000.	8,173,000.	9,780,000.
f Administrative expenses	3,755,000.	4,188,000.	4,210,000.	5,741,000.	4,839,000.
g End of year balance	335,817,000.	317,919,000.	336,330,000.	270,000,000.	269,162,000.

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

a Board designated or quasi-endowment 37.5500 %

b Permanent endowment 37.8100 %

c Term endowment 24.6400 %

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

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

(i) Unrelated organizations

(ii) Related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,184,000.		5,184,000.
b Buildings		595,823,000.	283,803,000.	312,020,000.
c Leasehold improvements				
d Equipment		66,441,000.	52,268,000.	14,173,000.
e Other		14,887,000.		14,887,000.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				346,264,000.

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) SEE SUPPLEMENTAL PAGE		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . . .	235,155,000.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) DEPOSITS W/ TRUSTEE	64,031,000.
(2) RIGHT-OF-USE UNDER OPER LEASES	952,000.
(3) RIGHT-OF-USE UNDER FINA LEASES	9,317,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	74,300,000.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) REFUNDABLE U.S. GOV'T GRANTS	2,878,000.
(3) CONDITIONAL ASSET RETIRE OBLIG	10,009,000.
(4) OTHER LIABILITIES, NET	4,583,000.
(5) OPERATING LEASE LIABILITIES	952,000.
(6) FINANCE LSE LIAB/SECURED BORRO	17,309,000.
(7) TAXABLE BONDS PAYABLE	86,122,000.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	121,853,000.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . ☒

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

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

1	Total revenue, gains, and other support per audited financial statements	1	356,049,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	20,824,000.
b	Donated services and use of facilities	2b	507,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	202,000.
e	Add lines 2a through 2d	2e	21,533,000.
3	Subtract line 2e from line 1	3	334,516,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,859,000.
b	Other (Describe in Part XIII.)	4b	190,052,000.
c	Add lines 4a and 4b	4c	193,911,000.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	528,427,000.

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

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

1	Total expenses and losses per audited financial statements	1	322,002,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	507,000.
b	Prior year adjustments	2b	
c	Other losses	2c	2,122,000.
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	2,629,000.
3	Subtract line 2e from line 1	3	319,373,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,859,000.
b	Other (Describe in Part XIII.)	4b	190,389,000.
c	Add lines 4a and 4b	4c	194,248,000.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	513,621,000.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

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. THE UNIVERSITY HAS ADOPTED AN ENDOWMENT SPENDING POLICY DESIGNED TO PROVIDE A PREDICTABLE FLOW OF FUNDS TO OPERATIONS. THE POLICY IS INTENDED TO BALANCE CURRENT SPENDING NEEDS AND PRESERVE THE ENDOWMENT'S FUTURE PURCHASING POWER. THE UNIVERSITY APPLIES A 4.5% SPENDING RATE TO A THREE-YEAR MOVING AVERAGE OF ENDOWMENT INVESTMENT FUNDS. THE BOARD OF REGENTS SETS THE SPENDING RATE. THE PURPOSE OF USING A MOVING AVERAGE IS TO SMOOTH OUT 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 MAY BE MADE FOR CERTAIN PURPOSES IN

Part XIII Supplemental Information (continued)

ADDITION TO THE SPENDING RATE, AS APPROVED BY THE UNIVERSITY'S BOARD OF REGENTS. THERE WERE NO SPECIAL ALLOCATION MADE IN THE YEAR ENDED JUNE 30, 2023.

PART X, LINE 2 - OTHER LIABILITIES - INCOME TAXES

THE UNIVERSITY HAS ADOPTED THE PROVISIONS OF THE ASC 740, ACCOUNTING FOR UNCERTAINTIES IN INCOME TAXES. 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 UNIVERSITY BELIEVES THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS WITHIN ITS FINANCIAL STATEMENTS.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 2D - OTHER

CHANGE IN THE VALUE OF THE SPLIT-INTEREST AGREEMENTS OF \$202,000.

PART XI, LINE 4B - OTHER

FINANCIAL AID OF \$190,389,000 LESS SPECIAL EVENTS EXPENSES OF \$318,000
LESS RENTAL EXPENSE OF \$19,000.

PART XII, LINE 2D - OTHER

SPECIAL EVENTS EXPENSES OF \$318,000, PROVISION FOR UNCOLLECTIBLE
CONTRIBUTIONS RECEIVABLE OF \$1,785,000, AND RENTAL EXPENSE OF \$19,000.

PART XII, LINE 4B - OTHER

FINANCIAL AID OF \$190,389,000.

Part XIII Supplemental Information (continued)

SCHEDULE D, PART VII - INVESTMENTS - OTHER SECURITIES

DESCRIPTION -----	BOOK VALUE -----	COST OR FMV -----
OUTSIDE TRUST	11,697,000.	FMV
HEDGE FUNDS	52,311,000.	FMV
COMMINGLED FUNDS	847,000.	FMV
PRIVATE EQUITY FUNDS	18,561,000.	FMV
VENTURE CAPITAL	8,091,000.	FMV
LIQUID FIXED INCOME	12,634,000.	FMV
ILLIQUID FIXED INCOME	44,442,000.	FMV
OPPORTUNISTIC	22,495,000.	FMV
LONG EQUITY	20,477,000.	FMV
DIVERSIFYING ASSETS	24,455,000.	FMV
REAL ASSETS	19,145,000.	FMV

TOTALS	235,155,000.	
	=====	

SCHEDULE E
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

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.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Employer identification number

22-1500645

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 X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2 X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3 X	
SEE SUPPLEMENTAL PAGE		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	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:		
a Students' rights or privileges?	5a	X
b Admissions policies?	5b	X
c Employment of faculty or administrative staff?	5c	X
d Scholarships or other financial assistance?	5d	X
e Educational policies?	5e	X
f Use of facilities?	5f	X
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 X	
b Has the organization's right to such aid ever been revoked or suspended?	6b	X
If you answered "Yes" on 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, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain on Part II	7 X	

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 F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

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.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		127,095,756.
(2) EUROPE			INVESTMENTS		31,992,802.
(3) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RECRUITMENT & MBA PROG	42,109.
(4) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	PEACE BUILDING	45,834.
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					159,176,501.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					159,176,501.

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

Schedule F (Form 990) 2022

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

	(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

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

Schedule F (Form 990) 2022

Part V Supplemental Information

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

PART I, LINE 3, (1 & 2); PART IV, LINES 1, 3, 4, AND 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, OR 8865, THOSE FOREIGN FORMS WERE ATTACHED TO THE UNIVERSITY'S FORM 990-T.

PART I, LINE 3 (3)

SUPPORT FOR STUDENT RECRUITMENT AND ACADEMIC EXCHANGE PROGRAM DEVELOPMENTS. DURING FY2023, THE STILLMAN SCHOOL CONTINUED TO "TEACH OUT" STUDENTS IN A PREVIOUSLY ACTIVE EXECUTIVE-STYLE MBA PROGRAM OFFERED IN COLLABORATION WITH VIAGOLD INTERNATIONAL EDUCATION MANAGEMENT GROUP, WITH COHORTS IN SHANGHAI AND ZHUHAI, CHINA. THIS PROGRAM HAS BEEN CLOSED.

Part V**Supplemental Information**

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

PART I, LINE 3 (4)

HUMANITARIAN PEACEBUILDING, STABILIZATION, RECOVERY, AND DEVELOPMENT
ACTORS PROVIDE CONFLICT SENSITIVE PROGRAMS IN YEMEN: THIS PROJECT WILL
LOOK TO BUILD A SHARED UNDERSTANDING AMONG SERVICE PROVIDERS ABOUT THE
CONFLICT CONTEXTS AND HOW TO OPERATE MOST EFFECTIVELY IN THEM, AND
AGREEMENT WHERE POSSIBLE ON COLLECTIVE ACTIONS/APPROACHES. IT WILL DO
THIS THROUGH NETWORKING, COORDINATION, STRENGTHENING OF WORKING
RELATIONSHIPS, AND REGULAR SESSIONS TO REVIEW AVAILABLE ANALYSIS AND PLAN
FOR SHARED ACTIONS.

HUMANITARIAN PEACEBUILDING, STAKEHOLDER MAPPING AND CONTEXT ANALYSIS, AND
RESILIENCY ANALYSIS IN LIBYA: THESE PROJECTS WILL LOOK TO BUILD A
PROPOSED METHODOLOGY, ROADMAP FOR CONSULTATION AND PROPOSED STRUCTURE OF
THE STRATEGY, AND TO IDENTIFY OPPORTUNITIES TO INTEGRATE AND AMPLIFY
DIVERSE LOCAL VOICES AND PERSPECTIVES THROUGHOUT FOREIGN ASSISTANCE
IMPLEMENTATION. IT WILL DO THIS THROUGH NETWORKING, COORDINATION,
STRENGTHENING OF WORKING RELATIONSHIPS, AND REGULAR SESSIONS TO REVIEW

Part V Supplemental Information

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

AVAILABLE ANALYSIS AND PLAN FOR SHARED ACTIONS.

SCHEDULE G
(Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> a Mail solicitations | <input type="checkbox"/> e Solicitation of non-government grants |
| <input type="checkbox"/> b Internet and email solicitations | <input type="checkbox"/> f Solicitation of government grants |
| <input type="checkbox"/> c Phone solicitations | <input type="checkbox"/> g Special fundraising events |
| <input type="checkbox"/> d In-person solicitations | |

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SEE SUPPLEMENT INFORMATION 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				NONE	340,000.	-340,000.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

ALL STATES

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

		(a) Event #1 <u>LS DINNER DANCE</u> (event type)	(b) Event #2 <u>SEMINARY GOLF</u> (event type)	(c) Other events 6 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	265,000.	126,000.	366,000.	757,000.
	2 Less: Contributions	174,000.	54,000.	159,000.	387,000.
	3 Gross income (line 1 minus line 2)	91,000.	72,000.	207,000.	370,000.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes			2,000.	2,000.
	6 Rent/facility costs	1,000.	12,000.	8,000.	21,000.
	7 Food and beverages	73,000.	14,000.	140,000.	227,000.
	8 Entertainment	3,000.	7,000.	10,000.	20,000.
	9 Other direct expenses	13,000.	5,000.	30,000.	48,000.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				318,000.
	11 Net income summary. Subtract line 10 from line 3, column (d)				52,000.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law 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 (see instructions).

PART I, LINE 2B COL (II)

COMMUNITY COUNSELING SERVICE FUND RAISING ACTIVITY INCLUDES CONSULTING, ANALYSIS AND STRATEGIC ADVICE RELATED TO SOLICITATIONS FOR THE CAMPAIGN AND ENCOURAGING POTENTIAL DONORS TO CONTRIBUTE.

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

NAME:

COMMUNITY COUNSELING SERVICE

ADDRESS:

527 MADISON AVENUE 5TH FLOOR
NEW YORK, NY 10022

ACTIVITY :

CONSULTING ADVICE

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

340,000.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-340,000.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TOWNSHIP OF SOUTH ORANGE VILLAGE 76 S. ORANGE AVE. SOUTH ORANGE, NJ 07079	22-6002309	115	611,000.				GENERAL PURPOSE
(2) SOUTH ORANGE PERFORMING ARTS CENTER, INC. 1 SOPAC WAY SOUTH ORANGE, NJ 07079	32-0074004	501 (C) (3)	8,000.				GENERAL PURPOSE
(3) SAINT PAUL'S OUTREACH 110 CRUSADER AVE WEST ST ST. PAUL, MN 55118	41-1621192	501 (C) (3)	6,000.				GENERAL PURPOSE
(4) TOWNSHIP OF NUTLEY, NJ 1 KENNEDY DRIVE NUTLEY, NJ 07110	22-6002167	115	154,000.				GENERAL PURPOSE
(5) TOWNSHIP OF CLIFTON, NJ 900 CLIFTON AVE. CLIFTON, NJ 07013	22-2940857	115	262,000.				GENERAL PURPOSE
(6) SOMA CROSS CULTURAL WORKS, INC 572 PROSPECT STREET MAPLEWOOD, NJ 07040	82-2722982	501 (C) (3)	10,000.				GENERAL PURPOSE
(7) CITY OF SUMMIT NJ 512 SPRINGFIELD AVENUE SUMMIT, NJ 07901	22-6002329	115	52,000.				GENERAL PURPOSE
(8) SOCIETY NEURO IMMUNE PHARMACOLGY GEORGE WASHINGTON U ROSS H RM 502 DC 20037	58-2586479	501 (C) (3)	28,000.				GENERAL PURPOSE
(9) SOUTH ORANGE RESCUE SQUAD 62 SLOAN ST. SOUTH ORANGE, NJ 07079	22-6077379	501 (C) (3)	12,000.				GENERAL PURPOSE
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							9
3 Enter total number of other organizations listed in the line 1 table							NONE

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

Schedule I (Form 990) 2022

JSA

2E1288 1,000

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FEDERAL AWARDS	2,367	12,885,000.			
2 STATE OF NEW JERSEY AWARDS	1,975	17,097,000.			
3 INSTITUTIONAL SUPPORT	16,155	164,237,000.			
4					
5					
6					
7					

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

PART I, LINE 2

ALL UNIVERSITY SPENDING MUST BE APPROVED BY A MANAGER OR HIGHER LEVEL, DEPENDING ON THE AMOUNT OF THE EXPENDITURE. ANY EXPENDITURE OF \$1,000 OR ABOVE WOULD HAVE TO BE APPROVED BY A DEAN OR OTHER BUDGET CENTER MANAGER. AN EXPENDITURE IN EXCESS OF \$10,000 MUST BE APPROVED BY A VICE PRESIDENT (OR THAT PERSON'S DESIGNEE) OR THE PRESIDENT. GRANTS OR ASSISTANCE TO OUTSIDE ORGANIZATIONS ARE SEGREGATED IN THE UNIVERSITY'S FINANCIAL ACCOUNTING SYSTEM THROUGH THE USE OF A SEPARATE ACCOUNT CODE, WHICH ALLOWS FOR REVIEW BY UNIVERSITY'S CENTRAL FINANCE DEPARTMENT.

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of 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. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHOLARSHIPS ARE PROVIDED TO STUDENTS WHO ARE REQUIRED TO MATRICULATE IN THE UNIVERSITY, THEREBY ENSURING THAT THE FUNDS ARE EXPENDED FOR THE INTENDED PURPOSES.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Compensation Information

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

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Employer identification number

22-1500645

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input checked="" type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

	Yes	No
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 on line 1a?

2	X	
---	---	--

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in or receive payment from a supplemental nonqualified retirement plan?
- c Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

4a		X
4b	X	
4c		X

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:

- a The organization?
- b Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

5a		X
5b		X

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
- b Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

6a		X
6b		X

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

7		X
---	--	---

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" on 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.

Schedule J (Form 990) 2022

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 aren't 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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JOSEPH E. NYRE, PH.D. 1 PRESIDENT/CEO/REGENT/TRUSTEE	(i) 736,052.	360,781.	402,538.	24,400.	107,173.	1,630,944.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KIMBERLY A.CAPADONA, ES 2 GENERAL COUNSEL	(i) 316,585.	31,673.	7,569.	48,945.	42,181.	446,953.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KATIA PASSERINI, PH.D. 3 EXECUTIVE VP AND PROVOST	(i) 420,803.	41,000.	7,655.	64,400.	1,344.	535,202.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
PATRICK G. LYONS, MBA 4 EXECUTIVE VP & CHIEF OF STAFF	(i) 429,573.	255,000.	21,969.	149,400.	20,199.	876,141.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KAREN E. BOROFF, PH.D. 5 FORMER INTERIM PROVOST	(i) 196,323.	NONE	2,327.	16,383.	31,527.	246,560.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ALYSSA MCCLOUD, PH.D. 6 SR.VP ENROLLMENT MANAGEMENT	(i) 355,330.	55,000.	7,766.	64,400.	15,167.	497,663.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KATHLEEN BOOZANG, JD, LL 7 DEAN SCHOOL OF LAW (THRU 12/22)	(i) 424,247.	NONE	8,824.	24,400.	15,167.	472,638.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOYCE A. STRAWSER, PH.D 8 DEAN, STILLMAN SCHOOL BUSINESS	(i) 296,660.	NONE	1,624.	24,205.	40,306.	362,795.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
PETER W.SHOEMAKER, PH.D 9 FORMER DEAN COLLEGE OF A&S	(i) 150,672.	NONE	6,289.	10,375.	48,938.	216,274.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
BRIAN B. SHULMAN, PH.D 10 DEAN, SCHOOL HEALTH & MEDICAL	(i) 306,491.	NONE	3,345.	24,400.	15,167.	349,403.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KEVIN WILLARD 11 HEAD COACH MEN'S BB(THRU 3/22)	(i) 732,209.	25,000.	299,504.	22,800.	13,580.	1,093,093.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ANTHONY J. BOZZELIA 12 HEAD COACH WOMEN'S BASKETBALL	(i) 310,122.	92,500.	22,679.	24,400.	43,918.	493,619.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
STEPHEN J.LUBBEN, JD, PH 13 LAW SCHOOL PROFESSOR	(i) 316,838.	NONE	566.	24,400.	42,274.	384,078.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JON PAPARSENOS 14 VP UNIV.ADVANCEMENT	(i) 349,778.	34,850.	7,569.	38,289.	40,722.	471,208.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MATTHEW BOROWICK, MBA 15 VP UNIVERSITY RELATIONS	(i) 257,748.	25,625.	8,254.	21,058.	39,870.	352,555.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MICHELE NELSON, PH.D. 16 VP BOARD AFFAIRS & STRATEGY	(i) 127,947.	48,431.	7,307.	11,371.	47,429.	242,485.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE

Schedule J (Form 990) 2022

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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	BRYAN FELT, M.A.	(i) 265,256.	65,000.	20,188.	21,227.	5,115.	376,786.	NONE
	(ii) ATHLETICS DIRECTOR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
2	ROBERT MCLAUGHLIN	(i) 192,355.	NONE	30,127.	15,395.	956.	238,833.	NONE
	(ii) FORMER INTERIM VP FIN. & CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
3	MONICA BURNETTE, PH.D.	(i) 247,347.	24,500.	7,442.	46,451.	44,866.	370,606.	NONE
	(ii) VP STUDENT SERVICES	NONE	NONE	NONE	NONE	NONE	NONE	NONE
4	DONNA M. MCMONAGLE	(i) 249,091.	10,667.	5,750.	19,584.	1,148.	286,240.	NONE
	(ii) VP FINANCE & CFO (AS OF 3/28/22)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
5	JOHN CORNWELL, J.D., M.	(i) 224,746.	NONE	1,280.	18,379.	28,360.	272,765.	NONE
	(ii) INT. DEAN, SCHOOL OF LAW (1/23)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
6	JONATHAN V. FARINA, PH.	(i) 170,091.	NONE	87.	11,530.	41,718.	223,426.	NONE
	(ii) INT. DEAN COLLEGE OF A&S (6/23)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
7	SHAHEEN HOLLOWAY	(i) 1,269,160.	62,500.	333,806.	24,400.	28,262.	1,718,128.	NONE
	(ii) HEAD COACH MEN'S BB (AS OF 3/22)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
8	GEORITA FRIERSON, PH.D	(i) 236,595.	NONE	333.	19,108.	15,218.	271,254.	NONE
	(ii) DEAN COLLEGE OF A&S (THRU 5/23)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
9		(i)						
	(ii)							
10		(i)						
	(ii)							
11		(i)						
	(ii)							
12		(i)						
	(ii)							
13		(i)						
	(ii)							
14		(i)						
	(ii)							
15		(i)						
	(ii)							
16		(i)						
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

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

PART I, LINE 1A

JOSEPH E. NYRE, PH.D. BECAME PRESIDENT/CEO/TRUSTEE/REGENT ON AUGUST 1, 2019. UNDER THE TERMS OF HIS BOARD APPROVED EMPLOYMENT AGREEMENT WITH THE UNIVERSITY, THE UNIVERSITY PROVIDES HIM WITH CERTAIN PERMISSIBLE EXPENSE REIMBURSEMENTS. WHERE APPLICABLE, GROSS-UP PAYMENTS ARE MADE TO HIM TO COVER THE TAX WITHHOLDING IMPACT ASSOCIATED WITH IMPUTED INCOME.

AS A CONDITION OF EMPLOYMENT, THE PRESIDENT IS REQUIRED TO LIVE IN A BOARD OF REGENTS ("BOARD") APPROVED RESIDENCE WHICH IS IN CLOSE PROXIMITY TO THE UNIVERSITY'S SOUTH ORANGE, NEW JERSEY CAMPUS, AND IS SUITABLE FOR ENTERTAINING GROUPS LARGE AND SMALL AND CONDUCTING UNIVERSITY BUSINESS. RATHER THAN THE UNIVERSITY INITIALLY PURCHASING A RESIDENCE SUITABLE FOR CONDUCTING UNIVERSITY BUSINESS, THE EMPLOYMENT AGREEMENT REQUIRED THE PRESIDENT TO PURCHASE A BOARD-APPROVED RESIDENCE WITH A LOAN FROM THE UNIVERSITY.

A NEW AGREEMENT WAS ENTERED INTO IN JUNE OF 2021, THE PRESIDENT CONVEYED

Part III Supplemental Information

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

THE RESIDENCE TO THE UNIVERSITY FOR \$1.00 ON AUGUST 6, 2021, AND HIS TOTAL COMPENSATION WAS REDUCED. THE FISCAL YEAR 2023 FORM 990 FILING REFLECTS THE CONVEYANCE OF THIS RESIDENCE, AND INCLUDES INTEREST RELATED TO THE PROPERTY LOAN FORGIVEN BY THE UNIVERSITY IN CY 2022. FOR FURTHER INFORMATION RELATED TO THE RESIDENCE, SEE THE SCHEDULE L, PART II NARRATIVE INCLUDED IN PART V SUPPLEMENTAL INFORMATION.

HOUSING AND RELATED SERVICES ARE PROVIDED AT NO CHARGE TO MEMBERS OF ITS PRIEST COMMUNITY, WHICH INCLUDES AN OFFICER AND CERTAIN REGENTS AND TRUSTEES AS REFLECTED IN PART VII OF THE FORM 990. WHERE APPROPRIATE, THE VALUE OF THESE HOUSING AND RELATED BENEFITS IS REFLECTED IN PART VII, SECTION A, COLUMN F AS OTHER COMPENSATION AND IN SCHEDULE J, PART II AS NONTAXABLE BENEFITS FOR THE PRIEST WHO MET THE COMPENSATION REQUIREMENT FOR INCLUSION IN SCHEDULE J.

MEMBERSHIP FEES FOR JOSEPH E. NYRE, PH.D., PRESIDENT/CEO/TRUSTEE/REGENT, THE UNIVERSITY'S MEN'S BASKETBALL COACH THRU MARCH 2022, KEVIN WILLARD, ITS WOMEN'S BASKETBALL COACH, ANTHONY BOZZELLA, ITS ATHLETICS DIRECTOR,

Part III Supplemental Information

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

BRYAN FELT, AND ITS EVP/CHIEF OF STAFF, PATRICK G. LYONS, WERE PAID BY THE UNIVERSITY TO ASSIST SUCH INDIVIDUALS IN THEIR DUTIES INVOLVING DONOR CULTIVATION AND FUNDRAISING FOR THE UNIVERSITY. THE FEES ASSOCIATED WITH THEIR BUSINESS-RELATED ATTENDANCE ARE INCLUDED IN NONTAXABLE BENEFITS IN SCHEDULE J, PART II. TO THE EXTENT OF ANY PERSONAL USAGE OF SAME, A PORTION OF THESE FEES ARE INCLUDED IN THE RECIPIENT'S TAXABLE INCOME.

CERTAIN MEMBERS OF THE UNIVERSITY, INCLUDING ITS PRESIDENT, MEN'S AND WOMEN'S BASKETBALL COACHES, AND OTHER MEMBERS OF THE EXECUTIVE CABINET, ARE PERMITTED TO HAVE THEIR SPOUSES ACCOMPANY THEM TO A LIMITED NUMBER OF UNIVERSITY BUSINESS EVENTS, INCLUDING FUNDRAISING AND ALUMNI EVENTS.

WHERE APPROPRIATE, THE VALUE OF PERSONAL TRAVEL BENEFITS IS INCLUDED IN THE RECIPIENT'S TAXABLE INCOME.

CERTAIN MEMBERS OF THE UNIVERSITY AND ITS BOARD OF TRUSTEES INCLUDING ITS PRESIDENT, EVP/CHIEF OF STAFF, VP ADVANCEMENT, ATHLETICS DIRECTOR, AND MEN'S AND WOMEN'S BASKETBALL COACHES, TOGETHER WITH THEIR SPOUSES OR FAMILIES, WILL OCCASIONALLY JOIN THE MEN'S OR WOMEN'S BASKETBALL TEAMS ON

Part III Supplemental Information

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

CHARTERED FLIGHTS TO BASKETBALL TOURNAMENTS OR GAMES.

THE COMPENSATION INFORMATION REFLECTED IN THE FORM 990 IS BASED ON
CALENDAR YEAR 2022 AND WAS PAYABLE (OR DISCLOSABLE, AS THE CASE MAY BE)
CONSISTENT WITH THE TERMS OF EACH EXECUTIVE'S UNDERLYING EMPLOYMENT
AGREEMENT AS APPLICABLE.

PART I, LINE 4B

CERTAIN KEY EXECUTIVES OF THE UNIVERSITY PARTICIPATE IN ITS 457(F)
NON-QUALIFIED DEFERRED COMPENSATION PLAN, WHICH IS INTENDED TO PERMIT THE
UNIVERSITY TO ATTRACT AND RETAIN TALENTED INDIVIDUALS WHILE REQUIRING
SAME TO GENERALLY SATISFY CERTAIN PERFORMANCE AND EMPLOYMENT CONTINUATION
REQUIREMENTS AS A PRECONDITION OF HIS OR HER RECEIPT OF ANY AMOUNTS
THEREUNDER. DURING 2022, THE FOLLOWING EXECUTIVES PARTICIPATED IN THE
DEFERRED COMPENSATION PLAN: PATRICK G. LYONS, MBA, EVP/CHIEF OF STAFF,
\$125,000; KATIA PASSERINI, PH.D., PROVOST AND EVP, \$40,000; ALYSSA
MCCLOUD, PH.D., \$40,000; KIMBERLY A. CAPADONA, ESQ., GENERAL COUNSEL,

Part III Supplemental Information

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

\$31,673; JON PAPARSENOS, VP, \$35,896; AND MONICA BURNETTE, PH.D. VP,

\$25,866. DEFERRED AMOUNTS WHICH MAY BE PAYABLE IN THE FUTURE ARE

REFLECTED IN COLUMN C OF SCHEDULE J, PART II FOR THOSE EXECUTIVES WHO

MEET THE COMPENSATION REQUIREMENT FOR INCLUSION IN SCHEDULE J.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	NUEFA - SETON HALL - ISSUE 2020C	221829511	6460667B0	06/18/2020	34,025,223.	SEE PART VI		X		X		X
B	NUEFA - SETON HALL - ISSUE 2011 A	221829511	646065083	06/10/2011	37,578,532.	SEE PART VI		X		X		X
C	NUEFA - SETON HALL - CIF 2014 B	221829511	646066DG2	04/29/2014	19,369,367.	SEE PART VI		X		X		X
D	NUEFA - SETON HALL - ISSUE 2017 D	221829511	646066V64	06/29/2017	41,827,193.	SEE PART VI		X		X		X

Employer identification number
22-1500645

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

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.

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

Part II Proceeds

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Amount of bonds retired					33,025,000.		320,119.	
2	Amount of bonds legally defeased								
3	Total proceeds of issue					34,025,223.		19,369,367.	41,827,193.
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds					2,389,475.			
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds					266,697.		113,339.	348,259.
8	Credit enhancement from proceeds					1,369,051.			
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds					30,000,249.		1,014,830.	
11	Other spent proceeds					37,157,438.			41,478,934.
12	Other unspent proceeds								
13	Year of substantial completion	2023		2011		2015		2017	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X	X			X	X	
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X		X		X
16	Has the final allocation of proceeds been made?		X	X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

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

Schedule K (Form 990) 2022

Part III Private Business Use

I

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X				X		X
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X				X		X
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X				X		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?		X				X		X
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		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X				X		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?		X				X		X
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				X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X			X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?		X	X		X		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		X		X

Schedule K (Form 990) 2022

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

PART IV, LINE 2C

REBATE COMPUTATIONS WERE PERFORMED IN JUNE AND JULY 2023 TIME FRAME FOR ALL SETON HALL UNIVERSITY BOND ISSUES LISTED IN PART I, WITH THE EXCEPTION OF BOND 2014 SERIES B, AND BOND 2016 SERIES B. THE 2014 B AND 2016 B BONDS ARE PART OF POOLED FINANCINGS AND THE REBATE CALCULATIONS ARE PERFORMED BY THE ISSUER. THERE IS NO REBATE LIABILITY RELATED TO ANY OF THE UNIVERSITY'S ISSUES AS OF JUNE 30, 2023.

PART I, COLUMN(F) DESCRIPTION OF PURPOSE

1. SETON HALL UNIVERSITY ISSUE, 2020 SERIES C (CUSIP 6460667B0), WAS ISSUED BY THE NJEFA TO FUND CAPITAL IMPROVEMENTS ON THE UNIVERSITY'S CAMPUS.
2. SETON HALL UNIVERSITY ISSUE, 2011 SERIES A, (CUSIP NUMBER 646065U83) WAS ISSUED BY THE NJEFA TO CURRENTLY REFUND SETON HALL UNIVERSITY'S 1999 REFUNDING, 2001 SERIES A, 2001 SERIES B, AND 2001 SERIES G BOND ISSUES.
3. THE NJEFA ISSUED CIF BONDS, 2014 SERIES B, AND 2014 SERIES D, WERE ISSUED PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE UNIVERSITY'S PORTION OF THE 2014 B WAS \$2,192,165 OF WHICH \$1,165,170 WAS GRANT AND \$1,014,830 WAS DEBT REPAYABLE OVER 20 YEARS. THE UNIVERSITY'S SHARE OF 2014 D WAS \$2,724,951 WITH \$1,226,845 BEING DEBT AND THE REMAINDER BEING A GRANT. THE UNIVERSITY PAID OFF ITS 2014 SERIES D DEBT DURING IT'S FISCAL YEAR ENDED JUNE 30, 2021.
4. SETON HALL UNIVERSITY ISSUE, 2017 SERIES D (CUSIP 646066V64), WAS ISSUED BY THE NJEFA TO REFUND THE UNIVERSITY'S 2008 SERIES D BONDS AND TO PAY \$4,872,000 FOR THE TERMINATION OF SWAP AGREEMENTS.
5. SETON HALL UNIVERSITY ISSUE, 2013 SERIES D, (CUSIP 646065D9) 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

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

CITIBANK, N.A. THAT HEDGED INTEREST RATE EXPOSURE RELATED TO THE 2009 C BONDS, AND TO FINANCE CAPITAL IMPROVEMENTS.

6. SETON HALL UNIVERSITY ISSUE, 2015 C (CUSIP 646066MC1) WAS ISSUED BY THE NJEFA TO ADVANCE REFUND SETON HALL UNIVERSITY'S 2008 SERIES E BONDS.

7. SETON HALL UNIVERSITY ISSUE, 2016 SERIES C (CUSIP 646066B66), WAS ISSUED BY THE NJEFA TO FUND CAPITAL IMPROVEMENTS ON THE UNIVERSITY'S CAMPUS.

8. THE NJEFA ISSUED CIF BONDS, 2016 SERIES A, REFUNDED CIF BONDS PREVIOUSLY ISSUED. PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE PRIVATELY PLACED BONDS WERE ALLOCATED TO FOURTEEN PRIVATE INSTITUTIONS IN NEW JERSEY. THE UNIVERSITY'S SHARE OF THE PROCEEDS WAS \$2,326,537.

9. THE NJEFA ISSUED CIF BONDS, 2016 SERIES B, WERE ISSUED PURSUANT TO A PROGRAM OF THE STATE OF NEW JERSEY TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION. THE BONDS WERE ALLOCATED TO TWELVE PRIVATE INSTITUTIONS IN NEW JERSEY. THE UNIVERSITY'S SHARE AFTER ISSUANCE COSTS, WAS \$1,500,000 OF WHICH \$766,748 WAS A GRANT AND \$733,252 WAS DEBT REPAYABLE OVER TWENTY YEARS.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	NUEFA - SETON HALL - ISSUE 2013 D	221829511	6460656D9	07/10/2013	43,935,728.	SEE PART VI		X		X		X
B	NUEFA - SETON HALL - ISSUE 2015 C	221829511	646066MC1	07/14/2015	24,225,807.	SEE PART VI		X		X		X
C	NUEFA - SETON HALL - ISSUE 2016 C	221829511	646066B66	09/15/2016	38,059,002.	SEE PART VI		X		X		X
D	NUEFA - SETON HALL - CIF 2016 A	221829511	000000000	07/26/2016	20,805,115.	SEE PART VI		X		X		X

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1	Amount of bonds retired							
2	Amount of bonds legally defeased							
3	Total proceeds of issue							
4	Gross proceeds in reserve funds							
5	Capitalized interest from proceeds							
6	Proceeds in refunding escrows							
7	Issuance costs from proceeds							
8	Credit enhancement from proceeds							
9	Working capital expenditures from proceeds							
10	Capital expenditures from proceeds							
11	Other spent proceeds							
12	Other unspent proceeds							
13	Year of substantial completion							
	Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?							
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?							
16	Has the final allocation of proceeds been made?							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							

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

Schedule K (Form 990) 2022

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.

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

Employer identification number

22-1500645

Part III Private Business Use

I I

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X				X		X
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X				X		X
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X				X		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?		X				X		X
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		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X				X		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?		X				X		X
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				X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?	X		X		X		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		X		X

Schedule K (Form 990) 2022

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

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A NUEFA - SETON HALL - CIF 2016 B	221829511	646066F54	12/20/2016	30,676,062.	SEE PART VI		X		X		X
B											
C											
D											

Employer identification number

22-1500645

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

Open to Public
Inspection

2022

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.

Part II Proceeds

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Amount of bonds retired		145,911.						
2	Amount of bonds legally defeased								
3	Total proceeds of issue		30,676,062.						
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds		246,539.						
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds		733,252.						
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion		2019						
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

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

Schedule K (Form 990) 2022

Part III Private Business Use**III**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		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?		X						
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		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		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?		X						
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							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?		X						
c No rebate due?	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						

Schedule K (Form 990) 2022

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

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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.

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

OMB No. 1545-0047

2022

**Open To Public
Inspection**

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	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) TOTAL OF 7		129,524.	SCHOLAR/TUITIO REMISSION	EDUCATION
(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) 2022

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(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).

PART II - LOANS TO AND/OR FROM INTERESTED PERSONS

AS DISCLOSED IN THE FORM 990 FILING FOR THE UNIVERSITY'S FISCAL YEARS ENDED JUNE 30, 2022 AND 2021, AND IN SCHEDULE J, PART III OF THIS FORM 990, THE PRESIDENT, AS A CONDITION OF EMPLOYMENT, IS REQUIRED TO LIVE IN A BOARD OF REGENTS (BOARD) APPROVED RESIDENCE SUITABLE FOR ENTERTAINING GROUPS LARGE AND SMALL AND CONDUCTING UNIVERSITY BUSINESS. RATHER THAN THE UNIVERSITY INITIALLY PURCHASING A RESIDENCE SUITABLE FOR CONDUCTING UNIVERSITY BUSINESS, THE EMPLOYMENT AGREEMENT REQUIRED THE PRESIDENT TO PURCHASE A BOARD APPROVED RESIDENCE WITH A LOAN FROM THE UNIVERSITY. THE 2019 LOAN, WHICH WAS SECURED BY THE RESIDENCE, WAS FOR 30 YEARS IN THE AMOUNT OF \$2,894,000. IT FULLY FINANCED THE PURCHASE OF THE RESIDENCE. LOAN PRINCIPAL WAS TO BE PAID UPON MATURITY OR TERMINATION OF EMPLOYMENT. ANNUAL PAYMENTS WERE TO BE FOR INTEREST ONLY, UNLESS INTEREST WAS FORGIVEN BY THE BOARD, WHICH WAS THE CASE BASED ON ITS DETERMINATION THAT THE RESIDENCE WAS USED FOR SUBSTANTIAL OFFICIAL UNIVERSITY FUNCTIONS AND BUSINESS ON A CONTINUOUS BASIS. INTEREST FORGIVENESS WAS IMPUTED INTO HIS TAXABLE INCOME IN 2020 WITH GROSS-UP PAYMENTS MADE TO HIM TO COVER THE TAX WITHHOLDING IMPACT OF THE IMPUTED INCOME.

ON AUGUST 6, 2021, DR. NYRE CONVEYED THE RESIDENCE TO THE UNIVERSITY FOR \$1.00 FOR THE REASONS NOTED IN SCHEDULE J, PART III. IN CONNECTION WITH THE CONVEYANCE, THE LOAN OF \$2,894,000 WAS DISCHARGED IN ITS ENTIRETY. REMAINING INTEREST ON THE LOAN WAS FORGIVEN BY THE BOARD IN 2022 AND WAS IMPUTED INTO HIS TAXABLE INCOME IN 2022 WITH GROSS-UP PAYMENTS MADE TO HIM TO COVER THE TAX WITHHOLDING IMPACT OF THE IMPUTED INCOME.

PART III - GRANTS OR ASSISTANCE BENEFITING INTERESTED PERSONS

SETON HALL UNIVERSITY IS NOT REQUIRED TO IDENTIFY INTERESTED PERSONS TO WHOM ASSISTANCE WAS PROVIDED UNDER THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA).

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	26	681,000.	SELLING PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	5	12,000.	COST
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SEE SUPP PAGE)		2.	4,000.	
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

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, IT'S
INVESTMENT BROKER IS ENGAGED TO SELL THOSE SECURITIES.

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

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
YOGA COACH SERV	X	1	1,000.	APPRAISAL
RECEPTION EXPEN	X	1	3,000.	APPRAISAL
TOTALS		2.	4,000.	

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

FORM 990, PART III, LINE 1

SETON HALL UNIVERSITY (THE "UNIVERSITY") IS THE NATION'S OLDEST DIOCESAN CATHOLIC UNIVERSITY. IN A DIVERSE AND COLLABORATIVE ENVIRONMENT, IT FOCUSES ON ACADEMIC, ETHICAL, AND 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, A TECHNOLOGICALLY ADVANCED SETTING, AND VALUES-CENTERED CURRICULA. THE UNIVERSITY IS HOME TO NINE NATIONALLY RECOGNIZED AND ACCREDITED SCHOOLS LOCATED ON THREE CAMPUSES, ALL WITHIN 15 MILES OF NEW YORK CITY. ITS MAIN CAMPUS IS IN SOUTH ORANGE, NEW JERSEY, ITS NATIONALLY RANKED LAW SCHOOL IS IN NEWARK, NEW JERSEY, AND ITS INTERPROFESSIONAL HEALTH SCIENCES ("IHS") CAMPUS IS IN THE CITY OF CLIFTON AND THE TOWNSHIP OF NUTLEY, NEW JERSEY. WITHIN THESE TEN SCHOOLS, THE PROFESSORS OF SETON HALL EDUCATE, SHAPE AND DEVELOP APPROXIMATELY 6,000 UNDERGRADUATE AND 3,600 GRADUATE STUDENTS, WHO ARE ENROLLED IN MORE THAN 137 RIGOROUS MAJORS. THIS HAS LED TO THE UNIVERSITY BEING NATIONALLY RECOGNIZED FOR ACADEMIC EXCELLENCE BY THE PRINCETON REVIEW, U.S. NEWS AND WORLD REPORT, AND BLOOMBERG BUSINESSWEEK. THE UNIVERSITY REMAINS A PIONEER IN CATHOLIC EDUCATION.

THE UNIVERSITY HAS A LONG-TERM RELATIONSHIP WITH HACKENSACK MERIDIAN HEALTH AT ITS IHS CAMPUS. THE UNIVERSITY AND HMH WERE PARTNERS IN AN AGREEMENT TO RENOVATE THE IHS PREMISES FOR THE UNIVERSITY'S CON AND SHMS COLLEGES AND THE HACKENSACK MERIDIAN SCHOOL OF MEDICINE (HMSOM). HMH IS LESSOR TO THE LEASE FOR THIS PREMISES (KINGSLAND LEASE) AND THE UNIVERSITY SUBLEASES SPACE FROM HMH. THE UNIVERSITY AND HMH WILL CO-OWN

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

THE IHS CAMPUS WHEN THE KINGSLAND LEASE AND UNIVERSITY'S SUBLEASE EXPIRE.

IN ADDITION, THE UNIVERSITY AND HMH MAINTAIN A STRATEGIC ACADEMIC
PARTNERSHIP AGREEMENT WHEREBY THE UNIVERSITY AND THE HMSOM HAVE AN
INTEGRATED CURRICULUM, WITH 25% OF THE SEATS IN EACH CLASS OF THE MD
PROGRAM RESERVED FOR UNIVERSITY GRADUATES WHO RESIDE IN NEW JERSEY,
PROVIDED THEY MEET THE STANDARDS OF ADMISSION SET BY THE HMSOM, AND THE
UNIVERSITY'S CON AND SHMS STUDENTS HAVING BROAD ACCESS TO TRAIN AT HMH
HOSPITALS.

ROBERT C. GARRETT, REGENT, IS THE CEO AT HMH, AND ALSO ON THE BOARD OF
GOVERNORS OF THE HMSOM. THE UNIVERSITY, HMSOM AND HMH ARE STRATEGIC
ACADEMIC PARTNERS. NEITHER HMH NOR THE HMSOM ARE CONSIDERED RELATED
PARTIES OF THE UNIVERSITY.

FORM 990, PART VI

PART VI, SECTION A, LINE 5:

AS PART OF AN INTERNAL REVIEW OF THE UNIVERSITY'S PURCHASE CARDS PROGRAM
("P-CARDS"), IRREGULAR TRANSACTIONS WITHIN A LAW SCHOOL ADMINISTRATIVE
UNIT WERE DISCOVERED. IN COMPLIANCE WITH ESTABLISHED UNIVERSITY
PROTOCOLS, THIS DISCOVERY TRIGGERED A SERIES OF GOVERNANCE ACTIONS
RESULTING IN AN INDEPENDENT THIRD-PARTY INVESTIGATION INTO FINANCIAL
TRANSACTIONS AND RELATED ACTIVITIES. THE INVESTIGATION YIELDED A VARIETY
OF FINDINGS REGARDING FINANCIAL IMPROPRIETIES AT THE LAW SCHOOL INCLUDING
THE MISAPPROPRIATION OF FUNDS IN EXCESS OF \$975,000, MISUSE OF P-CARDS
AND RELATED POLICY VIOLATIONS. THE UNIVERSITY HAS IMPLEMENTED CONTROL
MEASURES TO ENSURE APPLICABLE INTERNAL CONTROLS ARE DESIGNED AND

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

OPERATING EFFECTIVELY, INCLUDING A REVIEW OF THE P-CARD PROGRAM WITH A
REDUCTION IN BOTH THE NUMBER OF CARDS ISSUED AND LIMITS ALLOWED, AND A
CONSISTENT COLLECTION AND REVIEW OF SUBSTANTIATING DOCUMENTATION AND
RECEIPTS.

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 A, LINE 9:

KEVIN H. MARINO CAN BE REACHED AT THE BELOW ADDRESS:

KEVIN H. MARINO, ESQ.

MARINO, TORTORELLA & BOYLE, P.C.

437 SOUTHERN BOULEVARD,

CHATHAM, NEW JERSEY 07928

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

PART VI, SECTION B, LINE 11: THE BOARD OF REGENTS HAS CHARGED THE AUDIT COMMITTEE WITH THE RESPONSIBILITY TO CONDUCT, REVIEW, AND APPROVE ANNUALLY THE UNIVERSITY'S FORM 990 AND FORM 990-T FOR FILING WITH INTERNAL REVENUE SERVICE. FOLLOWING REVIEW AND RECOMMENDATION BY THE AUDIT COMMITTEE, FORMS 990 AND 990-T ARE SUBMITTED TO THE FULL BOARD OF REGENTS FOR ITS REVIEW AND APPROVAL FOR FILING WITH THE INTERNAL REVENUE SERVICE.

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

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.

FORM 990, PART VII, SECTION A

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SETON HALL UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

22-1500645

ROBERT MCLAUGHLIN, BECAME INTERIM VP FOR FINANCE AND CFO IN SEPTEMBER 25, 2021 AND WAS IN THAT POSITION UP UNTIL MARCH 27, 2022. ROBERT MCLAUGHLIN CONTINUED WORKING FOR THE UNIVERSITY FROM MARCH 28, 2022 THROUGH DECEMBER 31, 2022. THE COMPENSATION REPORTED ON PART VII-A AND/OR SCHEDULE J FOR HIM IS NOT THE COMPENSATION EARNED FOR SERVICES RENDERED IN HIS CAPACITY AS OFFICER. INSTEAD, IT IS EARNED FOR SERVICES RENDERED IN HIS CAPACITY AS A FULL-TIME EMPLOYEE.

DONNA M. MCMONAGLE, BECAME VP FOR FINANCE AND CFO ON MARCH 28, 2022.

KATHLEEN BOOZANG, J.D., LL.M., WAS DEAN, SCHOOL OF LAW UNTIL DECEMBER 31, 2022.

JOHN KIP CORNWELL, J.D., M. PHIL., BECAME INTERIM DEAN, SCHOOL OF LAW ON JANUARY 1, 2023.

GEORITA M. FRIERSON, PH.D., WAS DEAN COLLEGE OF ARTS & SCIENCES UNTIL MAY 31, 2023.

JONATHAN FARINA, PH.D., BECAME INTERIM DEAN COLLEGE OF ARTS & SCIENCES ON JUNE 1, 2023.

KEVIN WILLARD WAS HEAD MEN'S BASKETBALL COACH THROUGH MARCH 21, 2022.

SHAHEEN HOLLOWAY BEGAN AS HEAD MEN'S BASKETBALL COACH ON APRIL 1, 2022.

FORM 990, PART XI, LINE 9

PROVISION FOR UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE OF \$1,784,000 LESS
THE CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS OF \$202,000.

Name of the organization

Employer identification number

SETON HALL UNIVERSITY

22-1500645

FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS -----	DESCRIPTION OF SERVICES -----	COMPENSATION -----
TORCON, INC. 328 NEWMAN SPRINGS ROAD, STE 5 RED BANK, NJ 07701-5685	GENERAL CONTRACTING	25,374,483.
GOURMET DINING LLC 400 SOUTH ORANGE AVE SOUTH ORANGE, NJ 07079	FOOD SERVICES	10,025,865.
J.R. PRISCO INC 44 MIDDLE AVENUE SUMMIT, NJ 07901-4028	GENERAL CONTRACTING	5,757,732.
ATALIAN GLOBAL SERVICES 417 FIFTH AVENUE, 9TH FLOOR NEW YORK, NY 10016	HOUSEKEEPING	5,408,490.
JOSEPH A NATOLI CONSTRUCTION CORPORATION 293 CHANGE BRIDGE RD. PINE BROOK, NJ 07058-9513	GENERAL CONTRACTING	2,696,219.

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
PREPAID EXPENSES	18,935,000.	17,257,000.
 TOTALS	 ----- 18,935,000. =====	 ----- 17,257,000. =====

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----	COST OR FMV -----
CORPORATE EQUITY	80,106,000.	80,581,000.	FMV
CORPORATE BONDS	7,879,000.	7,637,000.	FMV
CASH AND TEMPORARY INVESTMENTS	6,750,000.	5,264,000.	FMV
 TOTALS	 ----- 94,735,000. =====	 ----- 93,482,000. =====	

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

SETON HALL UNIVERSITY

Employer identification number

22-1500645

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

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

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

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

Schedule R (Form 990) 2022

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(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)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Schedule R (Form 990) 2022

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a	<input type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s).	1b	<input type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s).	1c	<input type="checkbox"/>
d Loans or loan guarantees to or for related organization(s).	1d	<input type="checkbox"/>
e Loans or loan guarantees by related organization(s).	1e	<input type="checkbox"/>
f Dividends from related organization(s).	1f	<input type="checkbox"/>
g Sale of assets to related organization(s).	1g	<input type="checkbox"/>
h Purchase of assets from related organization(s).	1h	<input type="checkbox"/>
i Exchange of assets with related organization(s).	1i	<input type="checkbox"/>
j Lease of facilities, equipment, or other assets to related organization(s).	1j	<input type="checkbox"/>
k Lease of facilities, equipment, or other assets from related organization(s).	1k	<input type="checkbox"/>
l Performance of services or membership or fundraising solicitations for related organization(s).	1l	<input type="checkbox"/>
m Performance of services or membership or fundraising solicitations by related organization(s).	1m	<input type="checkbox"/>
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).	1n	<input type="checkbox"/>
o Sharing of paid employees with related organization(s).	1o	<input type="checkbox"/>
p Reimbursement paid to related organization(s) for expenses.	1p	<input checked="" type="checkbox"/>
q Reimbursement paid by related organization(s) for expenses.	1q	<input checked="" type="checkbox"/>
r Other transfer of cash or property to related organization(s).	1r	<input type="checkbox"/>
s Other transfer of cash or property from related organization(s).	1s	<input type="checkbox"/>

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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 sections 512 - 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

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.