

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **07/01, 2019**, and ending **06/30, 2020**

B Check if applicable:

<input type="checkbox"/>	Address change
<input type="checkbox"/>	Name change
<input type="checkbox"/>	Initial return
<input type="checkbox"/>	Terminated
<input type="checkbox"/>	Amended return
<input type="checkbox"/>	Application pending

C Name of organization: **YESHIVA UNIVERSITY**
 Doing Business As: _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: _____
500 WEST 185TH STREET
 City or town, state or province, country, and ZIP or foreign postal code: _____
NEW YORK, NY 10033

D Employer identification number: **13-1624225**

E Telephone number: **(646) 592-4005**

F Name and address of principal officer: **ALAN KLUGER**
500 WEST 185TH STREET, NEW YORK, NY 10033

G Gross receipts \$ **712,269,864.**

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.YU.EDU**

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: **1897** **M** State of legal domicile: **NY**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>THE UNIVERSITY IS COMPOSED OF SEVERAL COLLEGES AND SCHOOLS PROVIDING EDUCATION, TRAINING, RESEARCH AND CLINICAL PROGRAMS. SEE SCHEDULE O.</u>		
	2 Check this box <input type="checkbox"/> 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 35.		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 34.		
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 2,880.		
	6 Total number of volunteers (estimate if necessary) 6 34.		
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -544,092. 7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.		
Revenue	8 Contributions and grants (Part VIII, line 1h) 57,837,531. 9 Program service revenue (Part VIII, line 2g) 224,081,570. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 51,158,887. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,731,050. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 338,809,038.		
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 99,470,014. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 125,359,050. 16a Professional fundraising fees (Part IX, column (A), line 11e) 597,750. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,648,411. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 108,544,818. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 333,971,632. 19 Revenue less expenses. Subtract line 18 from line 12 4,837,406.	
		Net Assets or Fund Balances	20 Total assets (Part X, line 16) 917,053,743. 21 Total liabilities (Part X, line 26) 392,527,059. 22 Net assets or fund balances. Subtract line 21 from line 20 524,526,684.
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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

Signature of officer: _____ Date: _____

Type or print name and title: _____

Paid Preparer Use Only

Print/Type preparer's name: **MEREDITH MONROE** Preparer's signature: _____ Date: **05/13/2021** Check if self-employed PTIN: **P01441362**

Firm's name ▶ **PRICEWATERHOUSECOOPERS LLP** Firm's EIN ▶ **13-4008324**

Firm's address ▶ **300 MADISON AVENUE NEW YORK, NY 10017** Phone no. **646-471-3000**

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** (2019)

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:

THE UNIVERSITY IS COMPOSED OF SEVERAL COLLEGES AND SCHOOLS PROVIDING UNDERGRADUATE, GRADUATE, PROFESSIONAL AND POST-DOCTORAL EDUCATION AND TRAINING AND RESEARCH AND CLINICAL PROGRAMS. (SEE SCH 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 \$ 126,730,942. including grants of \$ 102,254,331.) (Revenue \$ 214,091,128.)
STUDENT INSTRUCTION. SEE SCHEDULE O.

4b (Code:) (Expenses \$ 87,186,899. including grants of \$ 0.) (Revenue \$ 16,456,401.)
ACADEMIC SUPPORT & STUDENT SERVICES. SEE SCHEDULE O.

4c (Code:) (Expenses \$ 91,585,074. including grants of \$ 0.) (Revenue \$ 6,270,684.)
INSTITUTIONAL SUPPORT, AUXILIARY SERVICES, RESEARCH & TRAINING.
SEE SCHEDULE O.

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 305,502,915.

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)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		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? <i>If "Yes," complete Schedule C, Part II.</i>	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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I.</i>		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? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII.</i>		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? <i>If "Yes," complete Schedule D, Part IX.</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?.	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		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 2,880		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	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? If "No" to line 3b, provide an explanation on Schedule O	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 ATTACHMENT 1 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? If "No," provide an explanation on Schedule O		
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 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

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

Table with 3 columns: Question, Yes, No. Rows include 1a (35), 1b (34), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA,
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.
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

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

Check if Schedule O contains a response or note to any line in this Part VII 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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See 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)	(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			
(1) ANDREW J. LAUER VP/SECTY/GENERAL COUNSEL	35.00 1.00			X				806,746.	0.	67,435.
(2) RABBI DR. ARI D. BERMAN TRUSTEE - PRESIDENT	35.00 1.00	X		X				593,051.	0.	152,632.
(3) RABBI JOSHUA JOSEPH SENIOR VP	35.00 1.00			X				633,136.	0.	73,444.
(4) JACOB HARMAN VP BUSINESS AFFAIRS - CFO	35.00 1.00			X				532,201.	0.	17,085.
(5) MELANIE LESLIE DEAN - CARDOZO LAW SCHOOL	35.00 0.				X			450,350.	0.	47,603.
(6) RICHARD JOEL FORMER PRESIDENT/PROFESSOR	35.00 0.					X		391,299.	0.	36,984.
(7) AHRON HERRING CHIEF INVESTMENT OFFICER	35.00 0.				X			393,082.	0.	26,680.
(8) SELMA BOTMAN PROVOST - VP ACADEMIC AFFAIRS	35.00 0.				X			403,048.	0.	12,068.
(9) DORON STERN VP MKTNG/COMMUNICATIONS	35.00 0.					X		345,975.	0.	62,080.
(10) DAVID RUDENSTINE PROFESSOR	35.00 0.					X		384,527.	0.	15,492.
(11) ADAM GERDTS VP INST. ADVANCEMENT (4/2019)	35.00 0.				X			343,626.	0.	38,038.
(12) MOSES PAVA PROFESSOR/DIRECTOR	35.00 0.					X		328,141.	0.	51,761.
(13) EDWARD D. STEIN PROFESSOR/DIRECTOR	35.00 0.					X		324,667.	0.	41,947.
(14) STEWART STERK PROFESSOR/DIRECTOR	35.00 0.					X		325,182.	0.	41,397.

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) HERBERT DOBRINSKY ----- VP UNIVERSITY AFFAIRS	35.00 ----- 0.				X			295,746.	0.	38,985.
(16) MOSHAEL J. STRAUS ----- BOARD CHAIRMAN/TRUSTEE	10.00 ----- 1.00	X						0.	0.	0.
(17) ROBERT M. BEREN ----- CHAIR EMERITUS/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(18) DAVID S. GOTTESMAN ----- CHAIR EMERITUS/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(19) HENRY KRESSEL ----- CHAIR EMERITUS/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(20) MORRY J. WEISS ----- CHAIR EMERITUS/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(21) LUDWIG BRAVMANN ----- VICE CHAIRMAN/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(22) PHILIP FRIEDMAN ----- VICE CHAIRMAN/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(23) MORDECAI D. KATZ ----- VICE CHAIRMAN/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(24) IRA M. MITZNER ----- VICE CHAIRMAN/TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(25) MICHAEL JESSELSON ----- TREASURER - TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
1b Sub-total								6,550,777.	0.	723,631.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								6,550,777.	0.	723,631.

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 ► 291

	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>	X	
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	(C) Compensation
ATTACHMENT 2		

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 ► 67

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) NAOMI AZRIELI ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(27) JULIUS BERMAN ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(28) MARVIN S. BIENENFELD ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(29) MARJORIE DIENER BLENDEN ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(30) SENDER Z. COHEN ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(31) IRA DIZENGOFF ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(32) MICHAEL GAMSON ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(33) ELLIOT GIBBER ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(34) DR. FELIX L. GLAUBACH ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(35) ALAN E. GOLDBERG ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
(36) ANDREW HERENSTEIN ----- TRUSTEE	1.00 ----- 0.	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
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 **▶** 291

	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>	X	
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	(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) MICHAEL D. KATZ ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(38) MATTHEW J. MARYLES ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(39) JOSHUA L. MUSS ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(40) J. PHILIP ROSEN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(41) DR. LEWIS RUBIN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(42) JAY SCHOTTENSTEIN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(43) DANIEL A. SCHWARTZ ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(44) IRWIN SHAPIRO ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(45) MARK SILBER ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(46) MARK WILF ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(47) ZYGMUNT WILF ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
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 **▶** 291

	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>	X	
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	(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 VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	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	5,632,844.				
	d	Related organizations	1d	1,296,131.				
	e	Government grants (contributions) . .	1e	4,412,641.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	32,766,997.				
	g	Noncash contributions included in lines 1a-1f.	1g	\$ 138,182.				
	h	Total. Add lines 1a-1f			44,108,613.			
	Program Service Revenue	2a	STUDENT TUITION	Business Code	900099	214,091,128.	214,091,128.	
b		STUDENT & FACULTY AUXILIARY SERVICES	900099	16,456,401.	16,456,401.			
c		OTHER EDUCATION RELATED REVENUE	900099	2,470,684.	2,470,684.			
d		AFFILIATE SERVICES	900099	3,800,000.	3,800,000.			
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f			236,818,213.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts).			6,473,553.		-544,092.
	4	Income from investment of tax-exempt bond proceeds .			0.			
	5	Royalties			48,869.			48,869.
	6a	Gross rents	6a	(i) Real				
				(ii) Personal				
					7,119,908.			
	b	Less: rental expenses	6b		2,830,179.			
	c	Rental income or (loss)	6c		4,289,729.			
	d	Net rental income or (loss)			4,289,729.			4,289,729.
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					414,918,028.			
	b	Less: cost or other basis and sales expenses . .	7b		394,896,416.			
	c	Gain or (loss)	7c		20,021,612.			
d	Net gain or (loss)			20,021,612.			20,021,612.	
8a	Gross income from fundraising events (not including \$ 5,632,844. of contributions reported on line 1c). See Part IV, line 18	8a						
				76,600.				
				569,172.				
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events.			-492,572.			-492,572.	
9a	Gross income from gaming activities. See Part IV, line 19	9a						
				0.				
				0.				
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities.			0.			0.	
10a	Gross sales of inventory, less returns and allowances	10a						
				0.				
				0.				
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory.			0.			0.	
Miscellaneous Revenue	11a	REVENUE FOR CAPITAL RENOVATION	Business Code	900099	2,706,080.		2,706,080.	
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			2,706,080.			
12	Total revenue. See instructions			313,974,097.	236,818,213.	-544,092.	33,591,363.	

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Pension, Advertising, and Total functional expenses.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,475,441.	1	1,219,756.
	2 Savings and temporary cash investments	13,022,171.	2	25,482,551.
	3 Pledges and grants receivable, net	63,661,974.	3	55,730,447.
	4 Accounts receivable, net.	0.	4	0.
	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	0.	5	0.
	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)	0.	6	0.
	7 Notes and loans receivable, net	1,005,573.	7	951,460.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	31,172,529.	9	37,574,571.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 444,063,859.		
	b Less: accumulated depreciation	10b 262,750,715.	186,040,627.	10c 181,313,144.
	11 Investments - publicly traded securities	144,406,649.	11	107,384,480.
	12 Investments - other securities. See Part IV, line 11	362,628,984.	12	359,040,390.
	13 Investments - program-related. See Part IV, line 11.	36,255,513.	13	38,018,303.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	77,384,282.	15	68,754,416.
16 Total assets. Add lines 1 through 15 (must equal line 33)	917,053,743.	16	875,469,518.	
Liabilities	17 Accounts payable and accrued expenses	30,675,121.	17	31,078,907.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	3,010,420.	19	5,074,115.
	20 Tax-exempt bond liabilities	145,565,000.	20	140,380,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
	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	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	140,055,379.	23	138,773,004.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	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	73,221,139.	25	68,795,749.
	26 Total liabilities. Add lines 17 through 25	392,527,059.	26	384,101,775.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-56,209,252.	27	-45,982,031.
	28 Net assets with donor restrictions	580,735,936.	28	537,349,774.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	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	524,526,684.	32	491,367,743.
33 Total liabilities and net assets/fund balances	917,053,743.	33	875,469,518.	

Part XI Reconciliation of Net Assets

Check 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	313,974,097.
2	Total expenses (must equal Part IX, column (A), line 25)	2	347,188,571.
3	Revenue less expenses. Subtract line 2 from line 1	3	-33,214,474.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	524,526,684.
5	Net unrealized gains (losses) on investments	5	74,922.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-19,389.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	491,367,743.

Part XII Financial Statements and Reporting

Check 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 in 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 Single Audit Act and OMB Circular A-133?
- 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	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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 or 990-EZ).)
- 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 in 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 or 990-EZ) 2019

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	72,001,712.	41,991,830.	37,936,478.	57,837,531.	44,108,613.	253,876,164.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	72,001,712.	41,991,830.	37,936,478.	57,837,531.	44,108,613.	253,876,164.
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).						0.
6 Public support. Subtract line 5 from line 4						253,876,164.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4.	72,001,712.	41,991,830.	37,936,478.	57,837,531.	44,108,613.	253,876,164.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	25,996,040.	12,461,941.	14,119,966.	15,100,700.	13,642,330.	81,320,977.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0.	0.	0.		0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,715,601.	5,161,927.	2,601,000.	2,653,019.	2,706,080.	15,837,627.
11 Total support. Add lines 7 through 10						351,034,768.
12 Gross receipts from related activities, etc. (see instructions)					12	1,083,817,881.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)).	14	72.32%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	81.39%
16a 33 1/3% support test - 2019. 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 - 2018. 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 - 2019. 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 - 2018. 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for 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 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. 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 - 2018. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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 in (b) and (c) below, the governing body of a supported organization?	11 a	
b A family member of a person described in (a) above?	11 b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	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? <i>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.</i>	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)? <i>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).</i>	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	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 government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	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 (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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 of Contributors

2019

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

Name of the organization
 YESHIVA UNIVERSITY

Employer identification number
 13-1624225

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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization **YESHIVA UNIVERSITY**

Employer identification number
13-1624225

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		\$ 18,099,450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 1,250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 1,161,317.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,000,000.	Person <input 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.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **YESHIVA UNIVERSITY**

Employer identification number

13-1624225

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization **YESHIVA UNIVERSITY**

Employer identification number
13-1624225

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
_____ _____	_____ _____

(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
_____ _____	_____ _____

(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
_____ _____	_____ _____

(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
_____ _____	_____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

▶ **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.**

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 YESHIVA UNIVERSITY	Employer identification number 13-1624225
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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 or 990-EZ) 2019

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.															
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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) 2016	(b) 2017	(c) 2018	(d) 2019	(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					

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)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; i Other activities?; j Total...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 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).

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

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."

Table with 2 main columns: Description and Amount. Rows include: 1 Dues, assessments and similar amounts from members; 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; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

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)

SCHEDULE C, PART II-B, LINE 1B AND 1G

MIRRAM GROUP LCC, PAUL MARCONE & ASSOCIATES AND CONVERGENT GOVERNMENT
AFFAIRS WERE AUTHORIZED TO ENGAGE IN LOBBYING ACTIVITIES WITH RESPECT TO
LEGISLATIVE, REGULATORY AND BUDGETARY ISSUES ON BEHALF OF YESHIVA
UNIVERSITY.

THE TOTAL SHOWN ALSO INCLUDES THE UNIVERSITY'S RELATED INTERNAL
COMPENSATION AND BENEFIT COSTS.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

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

Table with 3 columns: Line number, Description, Held at the End of the Tax Year. Includes rows for purpose(s) of easements, total number, acreage, and monitoring expenses.

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.

Table with 3 columns: Line number, Description, Amount. Includes rows for art collections, revenue included, and assets included.

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

Schedule D (Form 990) 2019

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
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 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

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	471,645,736.	481,708,396.	473,543,139.	445,422,370.	859,128,606.
b Contributions	4,741,205.	3,455,337.	4,686,051.	5,577,747.	3,353,243.
c Net investment earnings, gains, and losses	22,310,543.	10,764,843.	28,674,036.	42,232,032.	14,444,526.
d Grants or scholarships	12,459,404.	12,480,697.	12,579,153.	11,314,389.	13,139,676.
e Other expenditures for facilities and programs	44,072,742.	11,802,143.	12,615,677.	8,374,621.	418,364,329.
f Administrative expenses					
g End of year balance	442,165,338.	471,645,736.	481,708,396.	473,543,139.	445,422,370.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 5.5700 %
 - b** Permanent endowment ▶ 76.6400 %
 - c** Term endowment ▶ 17.7900 %
- 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:
- | | Yes | No |
|---|---------------|----|
| (i) Unrelated organizations | 3a(i) | X |
| (ii) Related organizations | 3a(ii) | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 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		13,552,086.		13,552,086.
b Buildings		398,703,972.	239,089,295.	159,614,677.
c Leasehold improvements				
d Equipment		31,807,801.	23,661,420.	8,146,381.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				181,313,144.

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) ALTERNATIVE/OTHER INVESTMENTS	359,040,390.	FMV
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	359,040,390.	

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) 457B PLAN ASSETS	13,585,561.
(2) INVESTMENTS HELD FOR AECOM INC	35,971,674.
(3) DONOR RELATED ASSETS	11,240,625.
(4) OTHER ASSETS	7,956,556.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	68,754,416.

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 ADVANCES FROM US GO	4,597,575.
(3) ASSET RETIREMENT OBLIGATION	9,121,816.
(4) LIFE INCOME AND OTHER LIABILITIES	488,955.
(5) DUE TO BCBS	1,245,900.
(6) 457B PLAN DFD COMPENSATION LIA	11,764,622.
(7) ASSETS HELD FOR AECOM, INC.	41,576,881.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	68,795,749.

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 XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1A & 4 - COLLECTIONS RARE BOOKS AND MANUSCRIPTS

YESHIVA UNIVERSITY'S MUSEUM'S COLLECTION INCLUDES MORE THAN 10,000 ARTIFACTS REFLECTING 5,000 YEARS OF JEWISH CULTURE, ART, AND HISTORY FROM AROUND THE WORLD. THE COLLECTIONS FEATURE FINE ARTS, ETHNOGRAPHIC AND ARCHEOLOGICAL ARTIFACTS, CLOTHING AND TEXTILES, CEREMONIAL AND RITUAL OBJECTS, MANUSCRIPTS, BOOKS, AND OTHER DOCUMENTS.

THE RARE AND UNIQUE TREASURES HELD BY YU CONSTITUTE THE LIBRARY'S SPECIAL COLLECTIONS. THE RARE BOOKS, MANUSCRIPTS AND ARCHIVAL RECORDS DOCUMENT THE JEWISH, RELIGIOUS, LITERARY AND CULTURAL HERITAGE. SCHOLARS AND VISITORS ARE WELCOME TO CONSULT THE SPECIAL COLLECTIONS. THE RARE BOOK ROOM, A GLASS-ENCLOSED ROOM ON THE FOURTH FLOOR OF THE YESHIVA UNIVERSITY MENDEL GOTTESMAN LIBRARY WITH A CONTROLLED ENVIRONMENT, HOUSES THE UNIVERSITY'S RARE BOOKS AND MANUSCRIPTS COLLECTIONS. APPROXIMATELY EIGHT THOUSAND PRINTED VOLUMES, MOST OF THEM IN HEBREW, ARE INCLUDED IN THE RARE COLLECTIONS. ALSO, A COLLECTION OF OVER ONE THOUSAND RABBINIC AND HISTORICAL MANUSCRIPTS IS HOUSED IN THE RARE BOOK ROOM. THE ARCHIVES HOLD ORGANIZATIONAL AND INSTITUTIONAL RECORDS AND PRIVATE PAPERS RELATING TO THE MODERN JEWISH HISTORY AND CULTURE IN THE US AND ABROAD.

SCHEDULE D, PART III, LINE 1A & 4 - EXHIBITIONS & PROGRAMS - EDUCATION

THE YESHIVA UNIVERSITY MUSEUM SHARES SPACE IN THE CENTER FOR JEWISH HISTORY, A STATE-OF-THE-ART FACILITY WITH FOUR INSTITUTIONS, THREE OF WHOM ARE RENOWNED RESEARCH AND ARCHIVAL INSTITUTIONS FOCUSING ON SPECIFIC ASPECTS OF JEWISH HISTORY AND CULTURE: THE YIVO INSTITUTE FOR JEWISH RESEARCH, THE AMERICAN JEWISH HISTORICAL SOCIETY, AMERICAN SEPHARDI FEDERATION, AND THE LEO BAECK INSTITUTE. THE MUSEUM HAS FOUR GALLERIES,

Part XIII Supplemental Information (continued)

AN EXHIBITION ARCADE, AN OUTDOOR SCULPTURE GARDEN, A DISCOVERY CENTER AND A CHILDREN'S WORKSHOP ROOM. THE MUSEUM HAS ACCESS TO A 250 SEAT, HANDICAPPED-ACCESSIBLE AUDITORIUM WITH A STATE-OF-THE-ART AV PROJECTION ROOM. THE YESHIVA UNIVERSITY MUSEUM PRESENTS EXHIBITIONS WITH AN INTERDISCIPLINARY FOCUS THAT REFLECT THE DIVERSITY OF THE MUSEUM'S COLLECTION. AS A RESOURCE FOR SCHOLARLY RESEARCH, YESHIVA UNIVERSITY MUSEUM'S EXHIBITIONS PROVIDE UNIQUE OPPORTUNITIES FOR ARTISTS, HISTORIANS, COLLECTORS, AND ETHNOGRAPHERS TO EXAMINE, COMPARE, AND RESEARCH OBJECTS, IDEAS, AND TECHNIQUES. ITS CONTEMPORARY ART SHOWS OFFER THE PUBLIC THE OPPORTUNITY TO SURVEY ART BEING CREATED BY LIVING JEWISH ARTISTS THROUGHOUT THE WORLD. YESHIVA UNIVERSITY MUSEUM'S PROGRAMS ARE DESIGNED TO EXPAND THE INTELLECTUAL AND CREATIVE IMAGINATION OF ITS DIVERSE AUDIENCES. THEY INCLUDE FAMILY CRAFT WORKSHOPS, LECTURES, FILMS, CONCERTS, AND MULTILINGUAL EXHIBITION TOURS IN ENGLISH, HEBREW, SPANISH, RUSSIAN, AND YIDDISH.

SCHEDULE D, PART V, LINE 4 - ENDOWMENTS

YESHIVA UNIVERSITY'S ENDOWMENT FUNDS ARE INTENDED FOR A VARIETY OF PURPOSES, INCLUDING STUDENT SCHOLARSHIPS AND LOANS, ACADEMIC CHAIRS, INSTRUCTION AND TRAINING, EDUCATIONAL PROGRAMS AND PROJECTS, RESEARCH, AND FELLOWSHIPS.

SCHEDULE D, PART XI, LINE 2D

OTHER REVENUE INCLUDED ON AUDITED FINANCIAL STATEMENTS BUT NOT ON FORM 990:

RECLASS OF SCHOLARSHIPS	\$-95,143,185
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Part XIII Supplemental Information (continued)

REVENUE FROM RELATED ENTITIES INCLUDED IN

CONSOLIDATED FINANCIAL STATEMENTS	1,645,048
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TOTAL	\$-93,498,137
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SCHEDULE D, PART XI, LINE 4B

OTHER REVENUE INCLUDED ON FORM 990 BUT NOT ON AUDITED FINANCIAL STATEMENTS:

RECLASS OF RENTAL EXPENSES	\$-2,830,179
----------------------------	--------------

RECLASS OF FUNDRAISING EVENT EXPENSES	-569,172
---------------------------------------	----------

RECLASS OF DISTRIBUTION FROM YESHIVA ENDOWMENT FDN	1,296,131
--	-----------

RECLASS OF AFFILIATE SERVICE ALLOCATION	3,800,000
---	-----------

	\$ 1,696,780
--	--------------

SCHEDULE D, PART XII, LINE 2D

OTHER EXPENSES INCLUDED ON AUDITED FINANCIAL STATEMENTS BUT NOT FORM 990:

RECLASS OF RENTAL EXPENSES	\$2,830,179
----------------------------	-------------

RECLASS OF FUNDRAISING EVENT EXPENSES	569,172
---------------------------------------	---------

EXPENSES FROM RELATED ENTITIES INCLUDED IN

CONSOLIDATED FINANCIAL STATEMENTS	424,701
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RECLASS OF AFFILIATE SERVICE ALLOCATION	-3,800,000
---	------------

	\$ 24,052
--	-----------

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XII, LINE 4B

OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT ON AUDITED FINANCIAL STATEMENT:

RECLASS OF SCHOLARSHIPS: \$95,143,185

FIN 48 POSITION

EFFECTIVE JULY 1, 2007, THE UNIVERSITY ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) INTERPRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, AN INTERPRETATION OF FASB STATEMENT NO. 109 (FIN 48). FIN 48 CLARIFIED THE ACCOUNTING FOR UNCERTAIN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. FIN 48 ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE, AND TRANSITION. THERE WAS NO MATERIAL IMPACT TO THE UNIVERSITY'S CONSOLIDATED FINANCIAL STATEMENTS AS A RESULT OF THE ADOPTION OF FIN 48 IN THE YEAR OF ADOPTION OR IN THIS REPORTING YEAR.

TEXT OF JUNE 30, 2020 FIN 48 (ASC 740) FOOTNOTE:

MANAGEMENT ASSESSES ITS INCOME TAX POSITION EACH YEAR TO DETERMINE WHETHER IT IS MORE LIKELY THAN NOT TO BE SUSTAINED BY AN APPLICABLE TAXING AUTHORITY. THIS REVIEW FOR FISCAL YEAR 2020 HAD NO MATERIAL IMPACT ON THE CONSOLIDATED FINANCIAL STATEMENTS.

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, ENDOWMENT FUNDS, LINE 1E

IN FY 2016, OTHER EXPENDITURES FOR FACILITIES AND PROGRAMS INCLUDES THE TRANSFER BY YESHIVA UNIVERSITY OF APPROXIMATELY \$371 MILLION OF EINSTEIN RELATED ENDOWMENT ASSETS TO THE ALBERT EINSTEIN COLLEGE OF MEDICINE, INC., THE NEWLY FORMED NONPROFIT TAX-EXEMPT ENTITY FORMED AS PART OF THE JOINT COLLABORATION AGREEMENT WITH MONTEFIORE MEDICINE ACADEMIC HEALTH SYSTEM. MONTEFIORE MEDICINE ACADEMIC HEALTH SYSTEM AND YESHIVA UNIVERSITY ARE THE SOLE MEMBERS OF THE ALBERT EINSTEIN COLLEGE OF MEDICINE.

**SCHEDULE E
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization
YESHIVA 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

2019

Open to Public Inspection

Employer identification number
13-1624225

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?	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?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	X	
<u>SEE SUPPLEMENTAL PAGE</u>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	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?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		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?	X	
b Has the organization's right to such aid ever been revoked or suspended?		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, covering racial nondiscrimination? If "No," explain on Part II	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).

SCHEDULE E - PART I LINE 3

THE UNIVERSITY'S WEBSITE, RECRUITMENT ADVERTISING AND HANDBOOK CONTAIN
YESHIVA UNIVERSITY'S NON-DISCRIMINATION POLICY.

SCHEDULE E - PART I LINE 6A

YESHIVA UNIVERSITY RECEIVES FUNDS FROM THE NEW YORK STATE EDUCATION
DEPARTMENT IN THE FORM OF GRANTS AND SCHOLARSHIPS, MOSTLY THROUGH THE
TUITION ASSISTANCE PROGRAM TO PROVIDE FINANCIAL AID ASSISTANCE TO
QUALIFYING STUDENTS AND RECEIVED BUNDY AID BASED ON DEGREES CONFERRED.
FROM THE U.S. FEDERAL GOVERNMENT, YESHIVA RECEIVES AID THROUGH TITLE IV
AND TITLE VII, INCLUDING PELL GRANTS, STAFFORD AND PLUS LOANS, SEOG, WORK
STUDY, AND PERKINS AND HEALTH PROFESSION STUDENT LOAN PROGRAMS. FUNDS ARE
USED 100% FOR FINANCIAL ASSISTANCE BY THE ELIGIBLE STUDENTS.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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	0.	0.	INVESTMENTS	N/A	137,097,462.
(2) EUROPE	0.	0.	INVESTMENTS	N/A	7,718,676.
(3) EUROPE	0.	0.	PROGRAM SERVICES	EDUCATION	41,221.
(4) MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	EDUCATION	805,433.
(5) MIDDLE EAST AND NORTH AFRICA	1.	10.	GRANTMAKING	N/A	3,083,994.
(6) NORTH AMERICA	1.	4.	GRANTMAKING	N/A	255,084.
(7) NORTH AMERICA	0.	0.	PROGRAM SERVICES	EDUCATION	48,806.
(8) SOUTH ASIA	0.	0.	PROGRAM SERVICES	EDUCATION	9,750.
(9) SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	RESEARCH & EDUCATION	6,000.
(10) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	EDUCATION	70,777.
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	2.	14.			149,137,203.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	2.	14.			149,137,203.

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

Schedule F (Form 990) 2019

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)			MIDDLE EAST/NORTH AFRICA	EDUCATION	3,083,994.	WIRE			
(2)			NORTH AMERICA	EDUCATION	255,084.	WIRE			
(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 tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **2.**

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**

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).

SCHEDULE F, PART I, LINE 2

YESHIVA UNIVERSITY MONITORS THE USE OF GRANT FUNDS OUTSIDE OF THE UNITED STATES BY A GRANTEE THROUGH REVIEW OF THE GRANTEE'S AUDITED FINANCIAL STATEMENTS, PERSONAL SITE VISITS AND DISCUSSIONS WITH THE GRANTEE'S SENIOR MANAGEMENT.

SCHEDULE F, PART I, LINE 3

1. UNDERGRADUATE AND GRADUATE SHORT AND LONG TERM STUDY ABROAD PROGRAMS AND INTERNATIONAL INTERNSHIPS, INCLUDING STUDENT EXCHANGE, PARTICIPATION IN STUDENT COMPETITIONS, SEMESTER ABROAD, INDEPENDENT STUDY, AND SUMMER STUDY PROGRAMS IN EUROPE, THE MIDDLE EAST, ASIA, AND THE PACIFIC. THE BENJAMIN CARDOZO SCHOOL OF LAW OFFERS EXCHANGE PROGRAMS IN THE NETHERLANDS, GERMANY, HUNGARY, HONG KONG, SPAIN, CHINA, ISRAEL, FRANCE, ITALY, AUSTRALIA, AND ENGLAND; AND A COMBINED JD/LLM INTERNATIONAL DUAL DEGREE PROGRAM AT A LAW SCHOOL IN FRANCE. THE CARDOZO FLOERSHEIMER CENTER FOR CONSTITUTION DEMOCRACY IN PARTNERSHIP WITH THE YU CENTER FOR JEWISH LAW OVERSEES THE ISRAEL SUPREME COURT PROJECT WHICH PROVIDES ENGLISH TRANSLATIONS OF IMPORTANT ISRAELI SUPREME COURT DECISIONS. THE WURZWEILER SCHOOL OF SOCIAL WORK BLOCK PROGRAM COMBINES THREE SUMMERS OF FORMAL CLASSROOM EDUCATION IN NEW YORK WITH TWO YEARS OF SUPERVISED FIELD EXPERIENCE IN ISRAEL. 2. ASSISTANCE TO STUDENT PARTICIPANTS IN THE S. DANIEL ABRAHAM ISRAEL PROGRAM, INCLUDING GUIDANCE, STRUCTURE AND SUPPORT. IN ADDITION, THE PROGRAM SPONSORS LECTURES AND ACTIVITIES WHERE THE STUDENTS CAN GATHER UNDER THE AUSPICES OF YESHIVA UNIVERSITY AND A GUIDANCE CENTER TO PROVIDE SUPPORT TO HELP EASE THE OCCASIONALLY

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).

CHALLENGING ADJUSTMENT TO A YEAR'S STUDY IN ISRAEL. 3. FUNDRAISING AND STUDENT RECRUITMENT. 4. ISRAEL MISSIONS - STUDENTS EXPERIENCE THE SOCIAL, CULTURAL, POLITICAL, AND SPIRITUAL MANIFESTATIONS OF ISRAELI SOCIETY. 5. HUMANITARIAN, TORAH AND LEARNING MISSIONS - STUDENTS TRAVEL TO INTERNATIONAL COUNTRIES LEARNING THE HISTORY, CULTURE, FOLKLORE AND TRADITIONS OF A COMMUNITY WHILE CONDUCTING AN ASSIGNED WORK PROJECT TO BENEFIT THAT COMMUNITY. STUDENTS ALSO TRAVELED TO ISRAEL TO PARTICIPATE IN EXPERIENTIAL EDUCATION PROGRAMS EXPLORING THE JEWISH SOCIAL JUSTICE SYSTEM. 6. ATTENDANCE BY YESHIVA UNIVERSITY FACULTY AT INTERNATIONAL EDUCATIONAL CONFERENCES.

SCHEDULE F, PART I, LINE 3

INVESTMENTS IN FOREIGN REGIONS - THE FORM 990 REQUIRES ORGANIZATIONS TO INCLUDE IN COLUMN (F) THE BOOK VALUE OF ITS PASSIVE INVESTMENTS IN FOREIGN REGIONS AS OF THE END OF THE YEAR. ACCORDINGLY, YESHIVA UNIVERSITY HAS INCLUDED THESE AMOUNTS IN THE REGIONS WHERE THE INVESTMENT VEHICLES ARE DOMICILED. YESHIVA UNIVERSITY'S GENERAL LEDGER AND FINANCE SYSTEM FUNCTIONALITY DOES NOT SPECIFICALLY TRACK TRAVEL EXPENSES BY COUNTRY OR REGION. HOWEVER, THE UNIVERSITY HAS, TO THE EXTENT POSSIBLE, ALLOCATED CERTAIN FOREIGN ACTIVITY EXPENSES TO THE APPROPRIATE REGION IN COLUMN (F). THE UNIVERSITY HAS PROVIDED DETAILED NARRATIVE DESCRIPTIONS OF ITS FOREIGN ACTIVITIES ABOVE.

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).

SCHEDULE F, PART IV, LINE 6 - FORM 5713

TO THE BEST OF ITS KNOWLEDGE, YESHIVA UNIVERSITY DOES NOT HAVE ANY OPERATIONS IN THE FORM OF BUSINESS AND COMMERCIAL ACTIVITIES OR TRANSACTIONS IN OR RELATED TO ANY OF THE "BOYCOTT COUNTRIES". HOWEVER, THE UNIVERSITY HAS HAD FOREIGN NATIONAL STUDENTS ENROLLED IN UNIVERSITY COURSES IN THE UNITED STATES WHO WERE CITIZENS AND/OR RESIDENTS OF KUWAIT, LEBANON, SYRIA AND THE UNITED ARAB EMIRATES. THE UNIVERSITY DOES NOT BELIEVE THAT THE ENROLLMENT OF THESE STUDENTS IN U.S.-BASED COURSES WOULD REQUIRE THE FILING OF FORM 5713.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2019

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization
YESHIVA UNIVERSITY

Employer identification number
13-1624225

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.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 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			
1 GRENZEBACHE GLIER & ASSOC	CONSULTANT		X		109,192.	
2 FAIRCOM NEW YORK	CONSULTANT		X		42,544.	
3 SRP CONSULTING	CONSULTING		X		16,177.	
4 EAS ADV SERVICES	CONSULTANT		X		160,983.	
5 CHARIDY	CONSULTANT		X		120,000.	
6						
7						
8						
9						
10						
Total					448,896.	

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.

AL, AZ, AR, CA, CT, FL, GA, HI, IL,
KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH,
OK, PA, RI, SC, TN, UT, VA, WV, WI,

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	(b) Event #2	(c) Other events	(d) Total events
		HANUKKAH DINNER (event type)	CSL EVENTS (event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	5,671,483.	37,961.		5,709,444.
	2 Less: Contributions	5,603,483.	29,361.		5,632,844.
	3 Gross income (line 1 minus line 2)	68,000.	8,600.		76,600.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	8,746.			8,746.
	6 Rent/facility costs	252,633.			252,633.
	7 Food and beverages	150,900.			150,900.
	8 Entertainment	10,580.			10,580.
	9 Other direct expenses	120,900.	25,413.		146,313.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				569,172.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-492,572.

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: _____

10a 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).

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

Part I General Information on Grants and Assistance

- 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
- 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) INNOCENCE PROJECT 40 WORTH STREET NEW YORK, NY 10013	32-0077563	501(C)(3)	160,076.				PUBLIC POLICY
(2) CENTER FOR INITIATIVES IN JEWISH EDUCATION 45 BROADWAY NEW YORK, NY 10006	77-0698155	501(C)(3)	10,000.				EDUCATION
(3) NEWARK PUBLIC SCHOOLS 765 BROAD STREET NEW YORK, NY 07102	22-6002140	115	13,500.				EDUCATION
(4) NEW ALTERNATIVES FOR CHILDREN 37 WEST 26TH STREET NEW YORK, NY 10010	13-3149298	501(C)(3)	29,882.				EDUCATION
(5) THE JEWISH EDUCATION PROJECT P.O. BOX 394 MAHWAH, NJ 07430	13-1632519	501(C)(3)	25,000.				EDUCATION
(6) THE CHILDRENS LAW CENTER 44 COURT STREET BROOKLYN, NY 11201	11-3392591	501(C)(3)	25,000.				EDUCATION
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 6.

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2019)

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 SCHOLARSHIPS & FELLOWSHIPS	3,921.	98,651,795.			
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.

SCHEDULE I, PART I, LINE 2

YESHIVA UNIVERSITY CONDUCTS SITE VISITS AND FOLLOW-UP DISCUSSIONS WITH THE MANAGEMENT OF GRANTEES TO ASSURE THAT GRANT FUNDS ARE USED FOR THE INTENDED TAX-EXEMPT PURPOSES. THE ACTIVITIES OF FELLOWSHIP RECIPIENTS ARE MONITORED TO ENSURE COMPLIANCE WITH THE INTENTIONS AND GUIDELINES OF THE FELLOWSHIP GRANT.

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.

SCHEDULE I, PART III

THE \$98,651,795 IN GRANTS AND ASSISTANCE REPRESENT STUDENT FINANCIAL AID, SCHOLARSHIPS AND FELLOWSHIPS, INCLUDING EMERGENCY STUDENT ASSISTANCE GRANTS. FINANCIAL AID IS AWARDED BASED UPON FINANCIAL NEED AND ACADEMIC ACHIEVEMENT. NEED BASED AID IS AWARDED BASED ON ELIGIBILITY DETERMINED BY THE US DEPARTMENT OF EDUCATION'S FREE APPLICATION FOR FEDERAL AID (FAFSA). ACADEMIC BASED AID IS AWARDED BY THE DISTINGUISHED SCHOLARS COMMITTEE. BOTH FACULTY AND ENROLLMENT SERVICES ADMINISTRATORS COMPRISE THE COMMITTEE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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 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 type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input 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

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?

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 checked="" 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.

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.

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.

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.

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.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
2	X	
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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 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 RABBI DR. ARI D. BERMAN TRUSTEE - PRESIDENT	(i)	590,665.	0.	2,386.	0.	152,632.	745,683.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 SELMA BOTMAN PROVOST - VP ACADEMIC AFFAIRS	(i)	400,000.	0.	3,048.	11,200.	868.	415,116.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 HERBERT DOBRINSKY VP UNIVERSITY AFFAIRS	(i)	281,596.	0.	14,150.	11,200.	27,785.	334,731.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 JACOB HARMAN VP BUSINESS AFFAIRS - CFO	(i)	521,570.	0.	10,631.	11,200.	5,885.	549,286.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 AHRON HERRING CHIEF INVESTMENT OFFICER	(i)	392,026.	0.	1,056.	11,200.	15,480.	419,762.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 RABBI JOSHUA JOSEPH SENIOR VP	(i)	375,723.	0.	257,413.	11,200.	62,244.	706,580.	250,000.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 ANDREW J. LAUER VP/SECTY/GENERAL COUNSEL	(i)	522,593.	0.	284,153.	11,200.	56,235.	874,181.	250,000.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 MELANIE LESLIE DEAN - CARDOZO LAW SCHOOL	(i)	448,502.	0.	1,848.	11,200.	36,403.	497,953.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 RICHARD JOEL FORMER PRESIDENT/PROFESSOR	(i)	288,363.	0.	102,936.	11,200.	25,784.	428,283.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 DORON STERN VP MKTNG/COMMUNICATIONS	(i)	338,502.	0.	7,473.	11,200.	50,880.	408,055.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 DAVID RUDENSTINE PROFESSOR	(i)	381,322.	0.	3,205.	11,200.	4,292.	400,019.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 EDWARD D. STEIN PROFESSOR/DIRECTOR	(i)	323,764.	0.	903.	11,200.	30,747.	366,614.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 STEWART STERK PROFESSOR/DIRECTOR	(i)	323,016.	0.	2,166.	11,200.	30,197.	366,579.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 MOSES PAVA PROFESSOR/DIRECTOR	(i)	327,349.	0.	792.	11,200.	40,561.	379,902.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 ADAM GERDTS VP INST. ADVANCEMENT (4/2019)	(i)	321,758.	0.	21,868.	11,200.	26,838.	381,664.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16	(i)							
	(ii)							

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.

SCHEDULE J, PART I, LINE 1A

PAYMENT OR REIMBURSEMENT OF EXPENSES FOR LISTED PERSON

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE: PRESIDENT RABBI DR. ARI
D. BERMAN IS PROVIDED WITH THE USE OF A HOME AS A PARSONAGE AND TO
PROPERLY DISCHARGE HIS REQUIRED DUTIES. THE PARSONAGE ALLOWANCE FOR RABBI
BERMAN IS INCLUDED IN SCHEDULE J, PART II, COLUMN D.

PERSONAL SERVICE AND COMPANION TRAVEL: THE UNIVERSITY BELIEVES IT IS
PRUDENT AND NECESSARY TO PROVIDE A MEASURE OF SECURITY TO THE PRESIDENT
AND UNIVERSITY RELATED INDIVIDUALS WHO TRAVEL WITH THEM. ACCORDINGLY, THE
UNIVERSITY PROVIDES THE PRESIDENT WITH A SECURITY GUARD DRIVER WHEN
TRAVELING ON UNIVERSITY BUSINESS. THE UNIVERSITY REIMBURSES COMPANION
TRAVEL FOR THE PRESIDENT WHEN THE COMPANION IS EXPECTED TO ATTEND AND
ACTIVELY PARTICIPATE IN FUNCTIONS RELATED TO THE UNIVERSITY'S MISSION AND
IS FOR A BONA FIDE BUSINESS PURPOSE.

SCHEDULE J, PART I, LINE 4

LINE 4B - IN CALENDAR YEAR 2019, THE FIVE-YEAR DEFERRED COMPENSATION

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.

AGREEMENTS OF ANDREW LAUER, UNIVERSITY VP & GENERAL COUNSEL AND RABBI JOSHUA JOSEPH, SENIOR VP, VESTED AND WERE PAID OUT. DURING THE PREVIOUS 5 YEARS, THE ANNUAL ACCRUALS OF THIS DEFERRED COMPENSATION WERE REPORTED AS COMPENSATION IN YESHIVA UNIVERSITY'S FORMS 990. IN THIS 990, THE VESTED BALANCES AND RELATED PAYOUTS ARE REPORTED AGAIN AS TAXABLE COMPENSATION INCOME AND REPORTED IN SCHEDULE J, PART II, COLUMN B(III). THE PRIOR YEAR ANNUAL ACCRUALS OF THE DEFERRED COMPENSATION WHICH WERE PREVIOUSLY REPORTED IN PRIOR YEARS FORM 990 IN SCHEDULE J, PART II, COLUMN C ARE NOW CUMULATIVELY REPORTED IN THIS YEARS FORM 990, SCHEDULE J, COLUMN F. CONSEQUENTLY, OF ANDREW LAUER'S AND RABBI JOSHUA JOSEPH'S TOTAL CALENDAR YEAR 2019 COMPENSATION AND BENEFITS REPORTED IN THIS FORM 990, \$250,000 WAS PREVIOUSLY REPORTED FOR EACH OF THEM IN PRIOR YEARS FORMS 990.

SCHEDULE J, PART II - DETAILS OF COMPENSATION & BENEFITS
IN ACCORDANCE WITH IRS GUIDELINES AND FORM 990 INSTRUCTIONS, THE COMPENSATION AND BENEFITS REPORTED IN THIS FORM 990 SCHEDULE J AND PART VII REPRESENT AMOUNTS EARNED DURING THE 2019 CALENDAR TAX YEAR.

PRESIDENT RABBI DR. ARI D. BERMAN - COLUMN B(III) INCLUDES TAXABLE LIFE

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.

INSURANCE AND TRANSPORTATION BENEFITS. COLUMN D INCLUDES NONTAXABLE PARSONAGE HOUSING, MEDICAL BENEFITS AND THE USE OF A UNIVERSITY PROVIDED CELLULAR PHONE FOR BUSINESS PURPOSES.

FORMER PRESIDENT RICHARD JOEL - COLUMN B(III) INCLUDES TAXABLE LIFE INSURANCE AND HEALTH RELATED BENEFITS, AND THE TAXABLE RENTAL VALUE OF HIS POST-PRESIDENCY USE OF THE HOME OWNED BY YESHIVA UNIVERSITY. THE POST-PRESIDIENCY USE OF THE HOME WAS PROVIDED FOR IN HIS CONTRACT AS PRESIDENT. COLUMN C INCLUDES THE UNIVERSITY'S CONTRIBUTIONS TO A SECTION 403(B) RETIREMENT PLAN. COLUMN D INCLUDES THE FOLLOWING NON-TAXABLE BENEFITS; MEDICAL AND THE USE OF A UNIVERSITY PROVIDED CELLULAR PHONE.

FOR THE REMAINING CURRENT AND FORMER OFFICERS, KEY EMPLOYEES, AND HIGHEST PAID EMPLOYEES LISTED IN PART VII/SCHEDULE J - COLUMN B(III) MAY INCLUDE THE FOLLOWING TAXABLE BENEFITS; TUITION, TRANSPORTATION, HOUSING AND/OR LIFE INSURANCE. COLUMN C GENERALLY INCLUDES THE UNIVERSITY'S CONTRIBUTION TO A SECTION 403(B) RETIREMENT PLAN. COLUMN D GENERALLY INCLUDES THE FOLLOWING NON-TAXABLE BENEFITS; MEDICAL, TUITION, AND THE USE OF A

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.

UNIVERSITY PROVIDED CELLULAR PHONE.

**SCHEDULE K
(Form 990)**

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
YESHIVA UNIVERSITY

Employer identification number
13-1624225

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 DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	649906KS2	07/23/2009	142,206,373.	REFUNDING OF 1998 AND CAP EXPENDIT	X			X		X
B DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	649906KS2	08/28/2011	93,390,365.	REFUNDING 2001 AND CAP EXPENDITURE	X			X		X
C											
D											

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired	12,820,000.		6,545,000.					
2 Amount of bonds legally defeased	29,325,000.		32,485,000.					
3 Total proceeds of issue	142,206,373.		93,390,365.					
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds	1,495,130.		1,568,989.					
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds	123,937,547.		46,793,860.					
11 Other spent proceeds	16,773,696.		45,027,516.					
12 Other unspent proceeds								
13 Year of substantial completion	2011		2014					
	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					
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				
16 Has the final allocation of proceeds been made?	X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

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

Schedule K (Form 990) 2019

		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				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	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?	X		X					
c	Are there any research agreements that may result in private business use of bond-financed property?	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?	X		X					
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				
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				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		2.7400 %		%		%		%
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?	X							
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					

		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				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X				
b	Exception to rebate?	X		X					
c	No rebate due?		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				

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

SCHEDULE K PART III - PRIVATE BUSINESS USE

THE UNIVERSITY HISTORICALLY DOES NOT INCUR ANY PRIVATE BUSINESS USE IN ITS BOND-FINANCED PROPERTIES BECAUSE THE UNIVERSITY'S POLICY IS TO USE ITS OWN EQUITY TO FUND ANY POTENTIAL PRIVATE USE AND CONTINUES TO MONITOR THE USE OF ITS BOND-FINANCED PROPERTY TO AVOID FUTURE PRIVATE USE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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	X	2 .	0 .	
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	11 .	138,182 .	FMV
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	X	5 .	0 .	
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
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 IV, 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.		

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

Schedule M (Form 990) 2019

JSA

9E1298 1.000

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, LINE 33

DURING FY 2020, THE YESHIVA UNIVERSITY MUSEUM RECEIVED A NUMBER OF
DONATIONS OF COLLECTIBLES, WORKS OF ART AND BOOKS RELATED TO EXHIBITIONS.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

YESHIVA 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

2019

**Open to Public
Inspection**

Employer identification number

13-1624225

CORE FORM 990, PART I, LINE 6 - VOLUNTEERS

IN ADDITION TO THE BOARD MEMBERS WHO SERVE WITHOUT COMPENSATION, THE
UNIVERSITY UTILIZES MANY VOLUNTEERS IN THE CONDUCT OF ITS ACTIVITIES.
HOWEVER, IT DOES NOT TRACK THE NUMBER OF THESE ADDITIONAL VOLUNTEERS.

CORE FORM 990, PART III, LINE 1 AND LINE 3

LINE 1 - ORGANIZATION VISION AND VALUES

VISION

YESHIVA UNIVERSITY IS A UNIQUE ECOSYSTEM OF EDUCATIONAL INSTITUTIONS AND
RESOURCES THAT PREPARES THE NEXT GENERATION OF LEADERS WITH JEWISH VALUES
AND MARKET-READY SKILLS TO ACHIEVE GREAT SUCCESS IN THEIR PERSONAL AND
PROFESSIONAL LIVES, ENDOWING THEM WITH BOTH THE WILL AND WHEREWITHAL TO
TRANSFORM THE JEWISH WORLD AND BROADER SOCIETY FOR THE BETTER.

VALUES - THE FIVE TOROT

TORAT EMET

WE BELIEVE IN TRUTH, AND HUMANITY'S ABILITY TO DISCOVER IT.

THE PURSUIT OF TRUTH HAS ALWAYS BEEN THE DRIVING FORCE BEHIND ADVANCES IN
HUMAN UNDERSTANDING, FROM SOCRATES' WANDERINGS THROUGH THE STREETS OF
ATHENS TO THE INNOVATIONS OF THE INDUSTRIAL REVOLUTION. PEOPLE OF FAITH,

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WHO BELIEVE IN A DIVINE AUTHOR OF CREATION, BELIEVE THAT THE ACT OF DISCOVERY IS SACRED, WHETHER IN THE REALM OF PHILOSOPHY, PHYSICS, ECONOMICS, OR THE STUDY OF THE HUMAN MIND. THE JEWISH PEOPLE IN PARTICULAR AFFIRM THAT, BEGINNING WITH THE REVELATION OF THE TORAH AT MOUNT SINAI, GOD ENTRUSTED ETERNAL TEACHINGS AND VALUES TO US THAT WE MUST CHERISH AND STUDY DILIGENTLY ABOVE ALL ELSE FOR THEY REPRESENT THE TERMS OF THE SPECIAL COVENANT THAT GOD MADE WITH US. ALL PEOPLE, REGARDLESS OF THEIR FAITH OR BACKGROUND, SHOULD VALUE THE ACCUMULATION OF KNOWLEDGE BECAUSE IT IS THE WAY TO TRUTH, AND A PREREQUISITE TO HUMAN GROWTH.

TORAT CHAIM

WE BELIEVE IN APPLYING OUR KNOWLEDGE TO IMPACT THE WORLD AROUND US. JEWISH THOUGHT ASSERTS THAT TRUTH IS MADE AVAILABLE TO HUMAN BEINGS NOT SIMPLY SO THEY CAN MARVEL AT IT, BUT SO THAT THEY CAN USE IT. STUDENTS STUDYING LITERATURE, COMPUTER SCIENCE, LAW, PSYCHOLOGY, OR ANYTHING ELSE, ARE EXPECTED TO TAKE WHAT THEY LEARN AND IMPLEMENT IT WITHIN THEIR OWN LIVES, AND APPLY IT TO THE REAL WORLD AROUND THEM. WHEN PEOPLE SEE A PROBLEM THAT NEEDS ADDRESSING, THEIR RESPONSIBILITY IS TO DRAW UPON THE TRUTHS THEY UNCOVERED DURING THEIR STUDIES IN FINDING A SOLUTION. THEY MUST LIVE TRUTH IN THE REAL WORLD, NOT SIMPLY STUDY IT IN THE CLASSROOM.

TORAT ADAM

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WE BELIEVE IN THE INFINITE WORTH OF EACH AND EVERY HUMAN BEING.

JUDAIC TRADITION FIRST INTRODUCED TO THE WORLD THE RADICAL PROPOSITION THAT EACH INDIVIDUAL IS CREATED IN THE DIVINE IMAGE, AND ACCORDINGLY POSSESSES INCALCULABLE WORTH AND VALUE. THE UNIQUE TALENTS AND SKILLS THAT EACH INDIVIDUAL POSSESSES ARE A REFLECTION OF THIS DIVINE IMAGE, AND IT IS THEREFORE A SACRED TASK TO HONE AND DEVELOP THEM. THE VAST, EXPANSIVE HUMAN DIVERSITY THAT RESULTS FROM THIS PROCESS IS NOT A CHALLENGE, BUT A BLESSING. EACH OF US HAS OUR OWN PATH TO GREATNESS.

TORAT CHESED

WE BELIEVE IN THE RESPONSIBILITY TO REACH OUT TO OTHERS IN COMPASSION. EVEN AS WE RECOGNIZE THE OPPORTUNITIES OF HUMAN DIVERSITY, JEWISH TRADITION EMPHASIZES THE IMPORTANCE OF COMMON OBLIGATIONS. IN PARTICULAR, EVERY HUMAN BEING IS GIVEN THE SAME RESPONSIBILITY TO USE THEIR UNIQUE GIFTS IN THE SERVICE OF OTHERS; TO CARE FOR OUR FELLOW HUMAN BEINGS; TO REACH OUT TO THEM IN THOUGHTFULNESS, KINDNESS AND SENSITIVITY, AND FORM A CONNECTED COMMUNITY.

TORAT ZION

WE BELIEVE THAT HUMANITY'S PURPOSE IS TO TRANSFORM OUR WORLD FOR THE BETTER AND MOVE HISTORY FORWARD. IN JEWISH THOUGHT, THE CONCEPT OF REDEMPTION REPRESENTS THE CONVICTION THAT WHILE WE LIVE IN AN IMPERFECT WORLD, WE HAVE A RESPONSIBILITY TO STRIVE TOWARDS ITS PERFECTION.

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REGARDLESS OF A PERSON'S PERSONAL CONVICTIONS ABOUT WHETHER SOCIAL PERFECTION IS ATTAINABLE OR EVEN DEFINABLE, IT IS THE ACT OF WORKING TOWARDS IT WHICH GIVES OUR LIFE MEANING AND PURPOSE. THIS COMMON STRIVING IS AN ENDEAVOR THAT BRINGS ALL OF HUMANITY TOGETHER. THE JEWISH PEOPLE'S TASK TO BUILD UP THE LAND OF ISRAEL INTO AN INSPIRING, MODEL SOCIETY REPRESENTS THIS EFFORT IN MICROCOSM. BUT IT IS PART OF A LARGER PROJECT THAT INCLUDES ALL OF HUMANKIND. IF THE ARC OF THE MORAL UNIVERSE BENDS TOWARDS JUSTICE, THEN REDEMPTION REPRESENTS OUR RESPONSIBILITY TO WORK TOGETHER IN THE SERVICE OF GOD TO MOVE HISTORY FORWARD.

YESHIVA UNIVERSITY IS THE WORLD'S PREMIER JEWISH INSTITUTION FOR HIGHER EDUCATION. ROOTED IN JEWISH THOUGHT AND TRADITION, IT SITS AT THE EDUCATIONAL, SPIRITUAL AND INTELLECTUAL EPICENTER OF A ROBUST GLOBAL MOVEMENT THAT IS DEDICATED TO ADVANCING THE MORAL AND MATERIAL BETTERMENT OF THE JEWISH COMMUNITY AND BROADER SOCIETY, IN THE SERVICE OF GOD.

CORE FORM 990, PART III, LINE 4 - PROGRAM SERVICES

FOUNDED IN THE LATE 19TH CENTURY, YESHIVA UNIVERSITY (YU) IS THE COUNTRY'S OLDEST AND MOST COMPREHENSIVE INSTITUTION COMBINING JEWISH SCHOLARSHIP WITH ACADEMIC EXCELLENCE AND ACHIEVEMENT IN THE LIBERAL ARTS AND SCIENCES, MEDICINE, LAW, BUSINESS, SOCIAL WORK, PSYCHOLOGY, JEWISH STUDIES, EDUCATION AND RESEARCH. YU REFLECTS A CENTURIES-OLD COMMITMENT TO THE ADVANCEMENT OF HUMAN KNOWLEDGE AND ETHICS. YU BRINGS TOGETHER THE HERITAGE OF WESTERN CIVILIZATION AND THE ANCIENT TRADITIONS OF JEWISH LAW AND LIFE. SINCE ITS INCEPTION, YU HAS BEEN DEDICATED TO MELDING THE ANCIENT TRADITIONS OF JEWISH LAW AND LIFE WITH THE HERITAGE OF WESTERN

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CIVILIZATION, AND EACH YEAR WE CELEBRATE AS FUTURE LEADERS MAKE YU THEIR HOME. MORE THAN 6,300 UNDERGRADUATE AND GRADUATE STUDENTS STUDY AT YU'S FOUR NEW YORK CITY CAMPUSES: THE WILF CAMPUS; ISRAEL HENRY BEREN CAMPUS; BROOKDALE CENTER; THE JACK AND PEARL RESNICK CAMPUS; AND IN ISRAEL. YU CURRENTLY ENROLLS APPROXIMATELY 3,000 UNDERGRADUATES AT YESHIVA COLLEGE, STERN COLLEGE FOR WOMEN, THE SY SYMS SCHOOL OF BUSINESS, AND IN THE S. DANIEL ABRAHAM PROGRAM IN ISRAEL. THESE SCHOOLS COMBINE RIGOROUS ACADEMICS, UNPARALLELED JEWISH STUDIES AND A NURTURING JEWISH ENVIRONMENT. HONORS AND LEADERSHIP PROGRAMS STRESS THE INTELLECTUAL DEVELOPMENT AND CULTURAL ENRICHMENT OF OUTSTANDING STUDENTS, AND THERE ARE MANY OPPORTUNITIES FOR INTERNSHIPS AND RESEARCH. JOINT AND COMBINED PROGRAMS OFFER ADVANCED DEGREES IN ENGINEERING, OCCUPATIONAL AND PHYSICAL THERAPY, JEWISH EDUCATION, JEWISH STUDIES, OPTOMETRY, NURSING, AND MATH AND SCIENCE AND EDUCATION. ABOUT 95 PERCENT OF FULL-TIME UNDERGRADUATE FACULTY HOLD DOCTORATES OR THE HIGHEST DEGREE WITHIN THEIR FIELDS.

SMALL CLASSES ENCOURAGE INTELLECTUAL INTIMACY AND CREATIVITY. DISTINGUISHED SCHOLARS, AUTHORS, ARTISTS, PUBLIC OFFICIALS AND BUSINESS LEADERS INTERACT WITH STUDENTS IN A VARIETY OF VENUES. ALL YU UNDERGRADUATES PURSUE A DUAL PROGRAM OF TORAH STUDIES AND COLLEGE ACADEMIC STUDIES. DEVOTED TEACHERS, LEADING SCHOLARS AND SPIRITUAL MENTORS OF THE HIGHEST QUALITY GUIDE YESHIVA UNIVERSITY STUDENTS IN THEIR STUDY OF TALMUD, BIBLE, HEBREW, JEWISH HISTORY, JEWISH PHILOSOPHY AND ETHICS AND HALACHA (JEWISH LAW). FORMAL CLASSROOM AND BEIT MEDRASH CHAVRUTA (PARTNERING IN STUDY HALL) STUDIES ARE AUGMENTED WITH SPECIAL

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PROGRAMS, OPTIONAL DAY AND NIGHT STUDY GROUPS, AND MENTORS, ALONG WITH COUNSELING AND GUIDANCE PROGRAMS FOCUSED ON GROWTH AND DEVELOPMENT.

UNDERGRADUATE STUDENTS ARE OFFERED FOUR UNIQUE PROGRAMS GROUNDED IN CLASSICAL TALMUD TORAH TO ACCOMODATE THEIR SPECIFIC BACKGROUND, GOALS, AND ASPIRATIONS. THE YESHIVA PROGRAM/MAZER SCHOOL OF TALMUDIC STUDIES, THE ISAAC BREUER COLLEGE OF HEBRAIC STUDIES, THE IRVING STONE BET MEDRASH PROGRAM AND THE JAMES STRIAR SCHOOL. THE UNDERGRADUATE WOMEN LEARN AT THE REBECCA IVRY DEPARTMENT OF JEWISH STUDIES, WHICH OFFERS THE COUNTRY'S LARGEST AND MOST DIVERSE UNDERGRADUATE JEWISH STUDIES PROGRAM FOR WOMEN. FOR MANY STUDENTS, THE S. DANIEL ABRAHAM ISRAEL PROGRAM IS A VALUABLE AND ENRICHING EXPERIENCE, WHERE LIVING AND LEARNING IN THE JEWISH HOMELAND, BEING IMMERSED IN THE WORLD OF YESHIVA AND SEMINARY, AND ENGAGING IN INTENSE JEWISH STUDIES ARE INTEGRAL PARTS OF DAILY LIFE. A FORMAL ARRANGEMENT BETWEEN YESHIVA UNIVERSITY AND MORE THAN 40 INSTUTIONS IN ISRAEL FOR MEN AND WOMEN, THE PROGRAM PROVIDES STRUCTURE, GUIDANCE AND ASSISTANCE FOR MORE THAN 600 YOUNG MEN AND WOMEN, ENABLING THEM TO INCORPORATE THEIR STUDIES IN ISRAEL INTO THEIR COLLEGE YEARS. ISRAEL'S LEADING EDUCATORS TEACH AN INTENSE PROGRAM OF JEWISH SUBJECTS AND THE EXPERIENCE INCREASES PROFICIENCY IN HEBREW AND ENABLES STUDENTS TO LEARN FIRST HAND ABOUT ISRAEL'S LAND, PEOPLE, HISTORY AND CULTURE. YESHIVA UNIVERSITY IN ISRAEL REPRESENTATIVES OFFER ACADEMIC GUIDANCE AND CAREER PLANNING ADVICE AND STUDENTS HAVE THE OPPORTUNITY TO MEET YU ROSHEI YESHIVA (PROFESSORS OF TALMUD AND TORAH), ADMINISTRATORS AND FACULTY.

Name of the organization YESHIVA UNIVERSITY	Employer identification number 13-1624225
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YESHIVA UNIVERSITY IS ALSO AFFILIATED WITH ONE OF THE NATION'S TOP MEDICAL SCHOOLS AND IS HOME TO A TOP-RANKED LAW SCHOOL, AS WELL AS HIGHLY REGARDED GRADUATE SCHOOLS OF SOCIAL WORK, PSYCHOLOGY, JEWISH STUDIES, JEWISH EDUCATION AND ADMINISTRATION, BUSINESS AND PROFESSIONAL STUDIES, INCLUDING GRADUATE PROGRAMS IN ACCOUNTING, TAXATION, REAL ESTATE, BUSINESS MBA, BIOTECHNOLOGY, DATA ANALYTICS, CYBERSECURITY, ARTIFICIAL INTELLIGENCE, ENTERPRISE RISK MANAGEMENT, DATA AND PRIVACY LAW, PHYSICS, QUANTITATIVE ECONOMICS AND FINANCE, MARKETING, MATH, MATHEMATICAL SCIENCES, OCCUPATIONAL THERAPY, SPEECH LANGUAGE PATHOLOGY AND PHYSICIAN ASSISTANT STUDIES. THE UNEQUALED RESOURCES OF NEW YORK CITY ENABLE YESHIVA TO MAKE PIONEERING ADVANCES AND PARTNERSHIPS IN CONJUNCTION WITH LEADING EDUCATIONAL, CULTURAL, HEALTH AND SOCIAL SERVICE INSTITUTIONS. ITS GRADUATE SCHOOLS INCLUDE THE BENJAMIN N. CARDOZO SCHOOL OF LAW, WURZWEILER SCHOOL OF SOCIAL WORK, FERKAUF GRADUATE SCHOOL OF PSYCHOLOGY, AZRIELI GRADUATE SCHOOL OF JEWISH EDUCATION AND ADMINISTRATION, BERNARD REVEL GRADUATE SCHOOL OF JEWISH STUDIES, THE SY SYMS SCHOOL OF BUSINESS, GRADUATE PROGRAMS IN ARTS AND SCIENCES, THE MASTERS OF ARTS PROGRAM IN BIBLICAL AND TALMUDIC INTERPRETATION AT STERN COLLEGE FOR WOMEN AND THE KATZ SCHOOL OF SCIENCE AND HEALTH. YESHIVA IS ALSO AFFILIATED WITH THE ALBERT EINSTEIN COLLEGE OF MEDICINE, THE RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY, THE PHIL AND SARH BELZ SCHOOL OF JEWISH MUSIC AND THE YESHIVA UNIVERSITY HIGH SCHOOLS. YESHIVA UNIVERSITY HAS MORE THAN 74,000 ALUMNI, MANY OF WHOM ARE LEADERS IN THE JEWISH COMMUNITY, THEIR PROFESSIONS, AND IN LOCAL COMMUNITIES IN THE U.S., ISRAEL AND AROUND THE WORLD.

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FOUNDED IN 1953 AS THE FIRST MEDICAL SCHOOL IN THE UNITED STATES UNDER JEWISH AUSPICES AND DESCRIBED BY ALBERT EINSTEIN AS "THE GREATEST CONTRIBUTION THE JEWISH COMMUNITY HAS UNDERTAKEN FOR THE COMMONWEALTH OF THE AMERICAN PEOPLE", THE ALBERT EINSTEIN COLLEGE OF MEDICINE IS A PREMIER, RESEARCH-INTENSIVE MEDICAL SCHOOL DEDICATED TO INNOVATIVE BIOMEDICAL INVESTIGATION AND TO THE DEVELOPMENT OF ETHICAL AND COMPASSIONATE PHYSICIANS AND SCIENTISTS. INSPIRED BY THE WORDS OF ITS NAMESAKE, EINSTEIN, FROM ITS INCEPTION, WELCOMED STUDENTS, FACULTY AND STAFF FROM DIVERSE BACKGROUNDS WHO STRIVE TO ENHANCE HUMAN HEALTH IN THE COMMUNITY AND BEYOND. AT THE CORE OF EINSTEIN'S MISSION IS THE PURSUIT OF SOCIAL JUSTICE IN MEETING THE HEALTHCARE NEEDS OF ALL INDIVIDUALS, INCLUDING THOSE FROM UNDERSERVED COMMUNITIES. LOCATED IN A RESIDENTIAL COMMUNITY IN THE NORTHEAST BRONX, EINSTEIN IS THE AFFILIATED MEDICAL SCHOOL FOR SEVERAL OF THE LEADING HOSPITALS IN NEW YORK, INCLUDING MONTEFIORE MEDICAL CENTER. THROUGH ITS AFFILIATION WITH THE ALBERT EINSTEIN COLLEGE OF MEDICINE, YESHIVA AWARDS THE DOCTOR OF MEDICINE DEGREE AS WELL AS THE PHD, COMBINED MD/PHD AND MS DEGREES. EINSTEIN ALSO SPONSORS ONE OF THE LARGEST POSTGRADUATE CLINICAL TRAINING PROGRAMS IN THE UNITED STATES. DURING THE 2019-2020 ACADEMIC YEAR, EINSTEIN IS HOME TO 721 M.D. STUDENTS, 178 PH.D STUDENTS (INCLUDING 109 STUDENTS IN THE COMBINED MD/PHD PROGRAM) AND 265 POST-DOCTORAL RESEARCH FELLOWS. MORE THAN 9,000 EINSTEIN ALUMNI ARE AMONG THE NATION'S FOREMOST CLINICIANS, BIOMEDICAL SCIENTISTS AND MEDICAL EDUCATORS. A FULL TIME FACULTY OF MORE THAN 1,900 TEACHES AND DELIVERS HEALTHCARE AND CONDUCTS STUDIES IN EVERY

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MAJOR MEDICAL SPECIALTY AND AREA OF BIOMEDICAL RESEARCH. YESHIVA UNIVERSITY'S BENJAMIN N. CARDOZO SCHOOL OF LAW, AWARDS THE JURIS DOCTOR DEGREE AND LL.M. DEGREES WITH CONCENTRATIONS IN INTELLECTUAL PROPERTY, GENERAL STUDIES, COMPARATIVE LEGAL THOUGHT AND DISPUTE RESOLUTION AND ADVOCACY, THE J.S.D. DEGREE AND DUAL J.D. AND M.A.S.T.E.R.S. IN BIOETHICS (M.B.E.) DEGREE. CARDOZO FACULTY ARE CONSISTENTLY RANKED IN THE TOP 30 IN THE COUNTRY FOR SCHOLARLY IMPACT AND THE SCHOOL IS KNOWN FOR HAVING ONE OF THE LARGEST FIELD PLACEMENT PROGRAMS IN THE NATION. THE SCHOOL OFFERS MORE THAN 15 INITIATIVES UNDER THE CENTER FOR RIGHTS AND JUSTICE AND SPONSORS DOZENS OF OTHER CLINICS, INCLUDING THE INDIE FILM CLINIC, THE TECH STRATUP CLINIC, THE CIVIL RIGHTS CLINIC, THE KATHRYN O. GREENBERG IMMIGRATION JUSTICE CLINIC AND THE BET TZEDEK LEGAL SERVICES CLINIC.

PROGRAM SERVICES (CONT'D)

THE AZRIELI GRADUATE SCHOOL OF JEWISH EDUCATION AND ADMINISTRATION IS THE PREMIER CENTER FOR ASPIRING JEWISH EDUCATORS AS EITHER TEACHERS, CURRICULUM DEVELOPERS OR EDUCATIONAL LEADERS, AND OFFERS AN INTERNATIONALLY RECOGNIZED FACULTY, INNOVATIVE COURSEWORK, COLLABORATIVE RESEARCH, INTENSIVE FIELD EXPERIENCE AND PROFESSIONAL MENTORING. THE SCHOOL AWARDS TWO M.A.S.T.E.R.S. OF SCIENCE DEGREES IN JEWISH EDUCATION IN EITHER TEACHING OR CURRICULUM DEVELOPMENT AND OFFERS SUBSTANTIAL FLEXIBILITY TO ALLOW ALL JEWISH EDUCATORS TO ADVANCE THEIR LEARNING EITHER AT THE NEW YORK CAMPUS OR IN A FULLY ONLINE PROGRAM. STUDENTS MAY ALSO PURSUE A DUAL M.A.S.T.E.R.S. DEGREE FROM AZRIELI AND THE BERNARD REVEL GRADUATE SCHOOL OF JEWISH STUDIES OR A M.A.S.T.E.R.S. COMBINED WITH SEMICHA (RABBINICAL ORDINATION). THROUGH ITS FANYA GOTTESFELD HELLER DIVISION OF

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DOCTORAL STUDIES, AZRIELI ALSO OFFERS THE EXECUTIVE DOCTORATE OF JEWISH EDUCATIONAL INNOVATION AND LEADERSHIP. AZRIELI ALUMNI SERVE AT THE HELM OF SCHOOLS, EDUCATIONAL AGENCIES, UNIVERSITIES AND COMMUNAL INSTITUTIONS ALL OVER THE WORLD.

THE BERNARD REVEL GRADUATE SCHOOL OF JEWISH STUDIES, NAMED AFTER THE FIRST PRESIDENT OF YU, EDUCATES TEACHERS, RESEARCHERS AND SCHOLARS IN JEWISH STUDIES AS WELL AS RABBIS, COMMUNAL PROFESSIONALS AND ANYONE WILLING TO ENRICH HIS OR HER KNOWLEDGE OF JUDAISM. IT OFFERS MASTERS AND DOCTORAL PROGRAMS WITH CONCENTRATIONS IN BIBLE, TALMUDIC STUDIES, ANCIENT JEWISH HISTORY, MEDIEVAL JEWISH HISTORY, MODERN JEWISH HISTORY, AND JEWISH PHILOSOPHY AND MYSTICISM. THE FERKAUF GRADUATE SCHOOL OF PSYCHOLOGY TRAINS HIGHLY QUALIFIED PSYCHOLOGISTS AND RESEARCHERS IN THE FIELDS OF CLINICAL PSYCHOLOGY, SCHOOL-CLINICAL CHILD PSYCHOLOGY, CLINICAL HEALTH PSYCHOLOGY AND MENTAL HEALTH COUNSELING. COLLABORATIONS WITH SCHOOLS, CLINICS, MENTAL HEALTH INSTITUTIONS AND MEDICAL CENTERS ALLOWS FOR A MYRIAD OF OPPORTUNITIES FOR FIELD PLACEMENTS, EXTERNSHIPS AND INTERNSHIPS. FERKAUF GRANTS AN MA IN MENTAL HEALTH COUNSELING, A PSYD IN CLINICAL AND SCHOOL-CLINICAL CHILD PSYCHOLOGY AND A PHD IN CLINICAL HEALTH PSYCHOLOGY. FERKAUF'S PROGRAMS INCLUDE THE ROSE F. KENNEDY CENTER FOR RESEARCH IN MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES, WHICH PROVIDES INTERDISCIPLINARY TRAINING, THE LEONARD AND MURIAL MARCUS FAMILY PROJECT FOR THE STUDY OF THE DISTURBED ADOLESCENT, WHICH SUPPORTS FELLOWSHIPS AND RESEARCH, THE MAX AND CELIA PARNES FAMILY PSYCHOLOGICAL AND PSYCHO-EDUCATIONAL SERVICES CLINIC, WHICH PROVIDES A WIDE RANGE OF

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ASSESSMENT AND THERAPEUTIC SERVICES FOR NEIGHBORING COMMUNITIES AND THE BEKER FAMILY PROJECT WHICH TRAINS SCHOOL PSYCHOLOGISTS TO WORK WITHIN HEBREW DAY SCHOOLS AND OTHER PRIVATE SCHOOLS TO DEVELOP STATE OF THE ART SCHOOL PSYCHOLOGICAL AND PSYCHO-EDUCATIONAL SERVICES FOR CHILDREN, TEACHERS AND FAMILIES.

THE WURZWEILER SCHOOL OF SOCIAL WORK GRANTS THE MSW DEGREE, THE PHD IN SOCIAL WELFARE AND CERTIFICATES IN CHILD WELFARE PRACTICE, SOCIAL WORK PRACTICE WITH THE MILITARY, SCHOOL SOCIAL WORK, CREATIVE ARTS AND HEALING, TRAUMA PRACTICE AND PALLIATIVE CARE AND GERONTOLOGY. IT OFFERS CONCENTRATIONS IN CLINICAL PRACTICE WITH INDIVIDUALS AND FAMILIES, SOCIAL GROUP WORK, AND COMMUNITY PRACTICE. WURZWEILER GRADUATES COMPRISE A NETWORK OF MORE THAN 7,000 LOCAL, NATIONAL AND INTERNATIONAL SERVICE PROVIDERS, LEADERS AND EDUCATORS. FIELDWORK IS AN INTEGRAL PART TO A WURZWEILER EDUCATION. AFFILIATED AGENCIES ARE SELECTED FOR THEIR EXPERTISE, DIVERSITY, SERVICE TO THE COMMUNITY AND OPPORTUNITIES FOR LEARNING. TOPICS SUCH AS EVIDENCE-BASED PRACTICE, HEALTHY AGING, TRAUMA AND INTERPERSONAL VIOLENCE, WORKING WITH VETERANS, COPING WITH LOSS, CHILD WELFARE, GERIATRIC AND PALLIATIVE CARE, CREATIVE ARTS AND HEALING, SCHOOL SOCIAL WORK AND SUBSTANCE ABUSE INFORM WURZWEILER'S NATIONALLY ACCREDITED CURRICULUM. WURZWEILER'S INTERNATIONALLY RECOGNIZED FACULTY IS COMMITTED TO EXCELLENCE IN TEACHING AND CONTRIBUTING TO THE BODY OF KNOWLEDGE IN PRACTICE RESEARCH.

STERN COLLEGE FOR WOMEN OFFERS A MASTER OF ARTS PROGRAM IN BIBLICAL AND

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TALMUDIC INTERPRETATION, WHICH IS OPEN TO STUDENTS WITH EXTENSIVE BACKGROUNDS IN ADVANCED JEWISH STUDIES. ADVANCED STUDENTS MAY CHOOSE TO STUDY IN THE FULL DAY TRADITIONAL BEIT MIDRASH ENVIRONMENT AS MEMBERS OF THE STERN COLLEGE GRADUATE PROGRAM IN ADVANCED TALMUDIC STUDIES. THE GRADUATE PROGRAM IN ARTS AND SCIENCES INCLUDES THE MASTER OF SCIENCE IN QUANTITATIVE ECONOMICS (MQE), WHICH TRAINS STUDENTS FOR ANALYTICAL OR RESEARCH BASED CAREERS IN ECONOMICS AND FINANCE, AS WELL AS AN MA IN MATHEMATICS AND A PHD IN MATHEMATICAL SCIENCE DESIGNED TO PRODUCE SPECIALISTS FOR ACADEMIA AND INDUSTRY AND TO SUPPORT STRONG UNDERGRADUATE PROGRAMS. THE SY SYMS SCHOOL OF BUSINESS OFFERS MASTERS OF SCIENCE PROGRAMS IN ACCOUNTING AND TAXATION AS WELL AS AN EXECUTIVE MBA PROGRAM THAT PROVIDES STUDENTS WITH STATE OF THE ART BUSINESS KNOWLEDGE IN THE CONTEXT OF THE HIGHEST ETHICAL IDEALS.

THE KATZ SCHOOL OF SCIENCE AND HEALTH AT YESHIVA UNIVERSITY GIVES STUDENTS THE OPPORTUNITY TO FURTHER THEIR INTELLECTUAL AND PROFESSIONAL PURSUITS AND BECOME A PART OF ONE OF U.S. NEWS AND WORLD REPORT'S TOP 100 UNIVERSITIES IN THE UNITED STATES. THE KATZ SCHOOL OF SCIENCE AND HEALTH IS COMMITTED TO DELIVERING A WORLD-CLASS EDUCATION IN EMERGING AND EXPANDING DISCIPLINES, TO CONNECTING STUDENTS WITH THOUGHT-LEADERS AND EMPLOYERS IN NEW YORK CITY AND BEYOND, AND TO CREATING AN EXEMPLARY STUDENT AND FACULTY EXPERIENCE. KATZ PROGRAMS FOCUS ON APPLIED SCIENCES AND MATHEMATICS; TECHNOLOGY, DATA, AND DESIGN; HEALTH SCIENCES; AND THOSE EMERGING AND EXPANDING PROFESSIONS THAT ARE BEING TRANSFORMED BY TECHNOLOGY INNOVATIONS. GRADUATE STUDENTS LOOKING FOR PROFESSIONAL

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ADVANCEMENT CAN EARN MASTER'S DEGREES IN BIOTECHNOLOGY MANAGEMENT AND ENTREPRENEURSHIP, CYBERSECURITY, DATA ANALYTICS AND VISUALIZATION, DATA AND PRIVACY LAW, ARTIFICIAL INTELLIGENCE, MARKETING, MATHEMATICS, QUANTITATIVE ECONOMICS, OCCUPATIONAL THERAPY OR SPEECH-LANGUAGE PATHOLOGY. IN EACH OF THESE HIGHLY SPECIALIZED PROGRAMS, THE CURRICULUM IS INFORMED BY INDUSTRY TO PROVIDE OUR GRADUATES WITH TOOLS THAT WILL SERVE THEM WELL IN THEIR CAREERS. UNDERGRADUATE STUDENTS AT THE KATZ SCHOOL OF SCIENCE AND HEALTH, WHETHER PART OF AN ASSOCIATE'S DEGREE, SUMMER SESSION, OR COLLEGENOW, SHARE IN THE SAME FORWARD-LOOKING COLLEGE EXPERIENCE AS OUR GRADUATE STUDENTS. THEY ALSO JOIN STUDENTS AT YESHIVA COLLEGE, STERN COLLEGE, AND THE SY SYMS SCHOOL OF BUSINESS IN THE CAMPUS LIFE THAT DEFINES YESHIVA UNIVERSITY.

YU'S NETWORK OF LIBRARIES OCCUPY A CENTRAL ROLE IN THE ACADEMIC ENTERPRISE BY NURTURING DISCOVERY, CRITICAL THINKING AND THE INTERDISCIPLINARY EXCHANGE OF INFORMATION TO HELP STUDENTS AND FACULTY COLLABORATE, GROW INTELLECTUALLY AND ACQUIRE SKILLS FOR LIFE LONG LEARNING. THE LIBRARIES PROVIDE ACCESS TO ACADEMIC AND CULTURAL RESOURCES IN PRINT, DIGITAL AND OTHER FORMATS, WHICH SPAN THE DISCIPLINES FROM BIOMEDICAL SCIENCES, SOCIAL SCIENCES, BUSINESS, AND LAW TO LITERATURE, LANGUAGES AND THE ARTS. SPECIAL COLLECTIONS INCLUDE JUDAIC RARE BOOKS AND MANUSCRIPTS, SEPHARDIC PUBLICATIONS AND EXTENSIVE ARCHIVAL RECORDS DOCUMENTING THE JEWISH EXPERIENCE OF THE PAST CENTURY. BASED AT THE CENTER FOR JEWISH HISTORY, THE YESHIVA UNIVERSITY MUSEUM IS A CREATIVE AND VITAL PRESENCE IN THE INTELLECTUAL AND EDUCATIONAL LIFE OF YU AND THE

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GENERAL COMMUNITY. THE MUSEUM PRESENTS INNOVATIVE EXHIBITIONS AND PROGRAMS ON THE JEWISH ART AND CULTURE IN A HISTORICAL AND CONTEMPORARY CONTEXT. SEE SCHEDULE D, SUPPLEMENTAL INFORMATION FOR A MORE DETAILED DISCUSSION OF THE YESHIVA UNIVERSITY LIBRARY AND MUSEUM'S COLLECTIONS.

PROGRAM SERVICES (CONT'D)

THE MUSEUM'S COLLECTION OF MORE THAN 10,000 ARTIFACTS, EXHIBITIONS, INSTALLATIONS AND PROGRAMS PROVIDE A WINDOW INTO JEWISH CULTURE AROUND THE WORLD AND THROUGHOUT HISTORY. SCHOOL GROUPS FROM ACROSS THE NEW YORK METROPOLITAN AREA VISIT THE MUSEUM TO TOUR THE EXHIBITIONS AND PARTICIPATE IN WORKSHOPS AND EDUCATIONAL PROGRAMS. THE MUSEUM SERVES AS A RESOURCE FOR EDUCATORS NATIONWIDE. AS A RESOURCE FOR SCHOLARLY RESEARCH, THE MUSEUM'S EXHIBITIONS EXAMINE JEWISH COMMUNITIES, CULTURE, AND HISTORY, AND PRESENT THE WORKS OF EMERGING AND ESTABLISHED ARTISTS. THE MUSEUM PARTNERS WITH YU FACULTY TO PROVIDE A WIDE RANGE OF PROGRAMS OPEN TO THE PUBLIC, INCLUDING CONFERENCES, WORKSHOPS AND LECTURES. AS A TEACHING MUSEUM, IT IS COMMITTED TO PROVIDING CREATIVE LEARNING OPPORTUNITIES.

IN ORDER TO FOSTER INTELLECTUAL EXCHANGE BOTH WITHIN YU, THE BROADER ACADEMIC COMMUNITY AND WITH THE GENERAL COMMUNITY, YU CREATED THE FOLLOWING CENTERS/INSTITUTES: THE CENTER FOR THE JEWISH FUTURE; THE RABBI ARTHUR SCHNEIER CENTER FOR INTERNATIONAL AFFAIRS; THE CENTER FOR ISRAEL STUDIES; THE CENTER FOR JEWISH LAW AND CONTEMPORARY CIVILIZATION; AND THE ZAHAVA AND MOSHAEL STRAUSS CENTER FOR TORAH AND WESTERN THOUGHT. THE CENTER FOR THE JEWISH FUTURE'S (CJF) MISSION IS TO SHAPE, ENRICH AND INSPIRE THE CONTEMPORARY JEWISH COMMUNITY BY CONVENING THE RESOURCES OF

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YESHIVA UNIVERSITY AND; INFUSING STUDENTS WITH A SPIRIT OF LEADERSHIP AND RESPONSIBILITY TO THE JEWISH PEOPLE AND SOCIETY IN GENERAL, BUILDING, CULTIVATING, AND SUPPORTING, COMMUNITIES AND THEIR LAY AND RABBINIC LEADERS, AND CREATING A GLOBAL MOVEMENT THAT PROMOTES THE VALUES OF YESHIVA UNIVERSITY.

THE CENTER FOR ISRAEL STUDIES IS AN EXPRESSION OF THE LONGSTANDING RELATIONSHIP BETWEEN YESHIVA UNIVERSITY AND THE LAND AND THE STATE OF ISRAEL. THE CENTER NURTURES EXCELLENCE IN INTERDISCIPLINARY SCHOLARSHIP AND THE TEACHING OF ISRAEL THROUGHOUT HISTORY AND ACROSS DISCIPLINES WITH A KEEN FOCUS ON THE MODERN STATE. THE ZAHAVA AND MOSHAEL STRAUSS CENTER FOR TORAH AND WESTERN THOUGHT THROUGH FELLOWSHIPS, PUBLIC EVENTS, SEMINARS AND TRAVEL ABROAD OPTIONS, OFFERS STUDENTS THE OPPORTUNITY TO ENGAGE WITH LEADING THINKERS IN THE U.S. AND ISRAEL, AND TO EXPLORE THE GREAT MORAL, PHILOSOPHICAL AND THEOLOGICAL QUESTIONS OF OUR AGE. THE CENTER IS DEDICATED TO BRIDGING A FORMATIVE ACADEMIC EXPERIENCE WITH AN IMMERSION IN TORAH STUDY, FURTHERING THE UNIVERSITY'S MISSION OF TORAH UMADDA AND SECURING YESHIVA UNIVERSITY'S CRITICAL ROLE IN THE FUTURE OF THE AMERICAN JEWISH COMMUNITY. THE RABBI ARTHUR SCHNEIER PROGRAM FOR INTERNATIONAL AFFAIRS PROVIDES AN EDUCATIONAL FORUM FOR THE EXCHANGE OF IDEAS RELATED TO DIVERSE GLOBAL ISSUES. THE CENTER FOR JEWISH LAW AND CONTEMPORARY CIVILIZATION EXAMINES CLASSICAL TEXTS THROUGH AN INNOVATIVE CURRICULUM IN JEWISH LAW AND LEGAL THEORY, AND PROVIDES WORKSHOPS, CONFERENCES AND FELLOWSHIP PROGRAMS FOR EMERGING SCHOLARS.

CORE FORM 990, PART VI, SECTION A, LINE 7A - MEMBERS
IN ACCORDANCE WITH ARTICLE I-3 OF THE YESHIVA UNIVERSITY BY-LAWS OF THE

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BOARD OF THE BOARD OF TRUSTEES, THE RESPECTIVE CHAIRS OF THE BOARDS OF THE RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY ("RIETS") AND THE BENJAMIN N. CARDOZO SCHOOL OF LAW ("CARDOZO") SERVE AS EX OFFICIO VOTING MEMBERS OF THE YESHIVA UNIVERSITY BOARD OF TRUSTEES. RIETS IS A SEPARATELY INCORPORATED SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION. CARDOZO IS A CONSTITUENT SCHOOL THAT OPERATES AS PART OF YESHIVA UNIVERSITY. SUCH INDIVIDUALS REMAIN ON THE YESHIVA UNIVERSITY BOARD OF TRUSTEES AS LONG AS THEY REMAIN AS CHAIR OF HIS OR HER RESPECTIVE BOARD.

CORE FORM 990, PART VI, SECTION A, LINE 11B - FORM 990 REVIEW
YESHIVA UNIVERSITY'S FORM 990 WAS REVIEWED AND SIGNED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON A DRAFT RETURN PREPARED BY THE UNIVERSITY'S FINANCE DEPARTMENT AND DIRECTOR OF TAX. THE DRAFT RETURN WAS REVIEWED BY THE UNIVERSITY'S CHIEF FINANCIAL OFFICER AND THE UNIVERSITY'S OFFICE OF GENERAL COUNSEL. THE FINAL VERSION OF THE FORM 990 WAS MADE AVAILABLE TO THE BOARD OF TRUSTEES VIA A SECURE WEB SITE PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THE FORM 990, AS FILED, IS MADE AVAILABLE TO THE PUBLIC IN ACCORDANCE WITH INTERNAL REVENUE SERVICE RULES AND REGULATIONS.

CORE FORM 990, PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY
THE UNIVERSITY'S CONFLICT OF INTEREST POLICY - WHICH WAS APPROVED BY THE BOARD OF TRUSTEES - APPLIES TO ALL MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES, ALL MEMBERS OF THE BOARDS OF OVERSEERS OF THE UNIVERSITY'S CONSTITUENT SCHOOLS, ALL PERSONS WHO SERVE ON A UNIVERSITY BOARD COMMITTEE OR A COMMITTEE OF A CONSTITUENT SCHOOL'S BOARD, AND TO OFFICERS

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AND SELECT EMPLOYEES OF THE UNIVERSITY, AS DESIGNATED BY THE GENERAL COUNSEL (COLLECTIVELY, THE "COVERED PERSONS"). THE POLICY PROVIDES THAT COVERED PERSONS ARE TO ACT AT ALL TIMES IN A MANNER CONSISTENT WITH THEIR RESPONSIBILITIES TO THE UNIVERSITY AND AVOID CIRCUMSTANCES IN WHICH THEIR FINANCIAL OR OTHER TIES TO OUTSIDE ENTITIES COULD PRESENT AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST OR IMPAIR THE UNIVERSITY'S REPUTATION. FURTHER, ALL COVERED PERSONS ARE NOT TO ENGAGE IN BUSINESS WITH THE UNIVERSITY. IN THE CASE OF A RARE EXCEPTION, THE GOVERNANCE COMMITTEE OF THE BOARD OF TRUSTEES WILL REVIEW THE FACTS AND, IF IT IS IN THE UNIVERSITY'S BEST INTERESTS, APPROVE SUCH EXCEPTIONS. CONFLICT WAIVER REQUESTS CONSIDERED BY THE COMMITTEE, WHETHER OR NOT APPROVED, ARE REPORTED TO THE BOARD OF TRUSTEES. QUESTIONS AS TO WHETHER A TRANSACTION CONSTITUTES A RELATED PARTY TRANSACTION WITH RESPECT TO COVERED PERSONS ARE RESOLVED BY THE UNIVERSITY'S GOVERNANCE COMMITTEE AND THE PRESIDENT IN CONSULTATION WITH THE GENERAL COUNSEL. COVERED PERSONS ARE REQUIRED TO COMPLETE, SIGN AND SUBMIT TO THE GENERAL COUNSEL AN ANNUAL DISCLOSURE STATEMENT; TO PROMPTLY NOTIFY THE GENERAL COUNSEL OF ANY CHANGE IN THE INFORMATION PREVIOUSLY REPORTED ON SUCH PERSON'S DISCLOSURE STATEMENT; AND TO FURNISH SUPPLEMENTAL INFORMATION AND/OR CONFIRM THE CONTINUED ACCURACY OF THE CURRENT DISCLOSURE STATEMENT, IF REQUESTED BY THE GENERAL COUNSEL. THE BOARD'S GOVERNANCE COMMITTEE, IN CONSULTATION WITH THE GENERAL COUNSEL, HAS THE AUTHORITY TO ADDRESS NON-COMPLIANCE WITH THE DISCLOSURE REQUIREMENTS OR ANY OTHER PROVISION OF THE CONFLICT OF INTEREST POLICY; AND MAY RECOMMEND THE REMOVAL OF SUCH NON-COMPLYING COVERED PERSON OR OTHER APPROPRIATE SANCTION.

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IN ADDITION, A COVERED PERSON WHO BELIEVES A CURRENT, PENDING OR PROPOSED TRANSACTION WOULD CONSTITUTE A RELATED PARTY TRANSACTION OR OTHERWISE CONSTITUTE AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST, IS REQUIRED TO PROMPTLY DISCLOSE TO THE GENERAL COUNSEL AND TO THE CHAIR OF EACH BOARD AND COMMITTEE OF WHICH THE COVERED PERSON IS A MEMBER, THE EXISTENCE OF THE CONFLICT (OR APPEARANCE OF CONFLICT) AND OTHER MATERIAL INFORMATION THAT THE COVERED PERSON MAY HAVE REGARDING THE TRANSACTION. NEW COVERED PERSONS ARE PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT. THE DETAILS OF THE POLICY AND ITS REQUIREMENTS ARE REVIEWED WITH THEM. THE GENERAL COUNSEL MAINTAINS A DATABASE OF DISCLOSURE STATEMENTS AND A SYSTEM FOR MONITORING CURRENT, PENDING AND PROPOSED TRANSACTIONS FOR POTENTIAL RELATED PARTY TRANSACTIONS BASED ON THE DISCLOSURES MADE IN EACH COVERED PERSON'S ANNUAL DISCLOSURE STATEMENT AND ANY PERIODIC UPDATES SUBMITTED PURSUANT TO THE POLICY. IN ADDITION TO THE CONFLICT OF INTEREST POLICY ABOVE FOR COVERED PERSONS, UNIVERSITY EMPLOYEES ARE ALSO SUBJECT TO ADDITIONAL CONFLICT OF INTEREST REPORTING REQUIREMENTS AS SET FORTH IN THE UNIVERSITY EMPLOYEE HANDBOOK.

CORE FORM 990, PART VI, SECTION B, LINE 15 - COMPENSATION DETERMINATION THE COMPENSATION OF ALL EMPLOYEES EARNING IN EXCESS OF A SPECIFIED THRESHOLD SALARY LEVEL, AS WELL AS ALL OF YESHIVA UNIVERSITY'S OFFICERS AND KEY EMPLOYEES, IS REVIEWED BY THE UNIVERSITY'S COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES. THE INDEPENDENT MEMBERS OF THE COMMITTEE CONDUCT A DETAILED REVIEW AND APPROVAL OF SUCH COMPENSATION UTILIZING

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COMPARABILITY DATA FROM THIRD PARTY SALARY SURVEYS, FORM 990 SALARY DISCLOSURES FROM OTHER ORGANIZATIONS, AND/OR COMPENSATION STUDIES PREPARED BY AN INDEPENDENT THIRD PARTY CONSULTING FIRM. CONTEMPORANEOUS DOCUMENTATION OF THE COMMITTEE'S DELIBERATIONS AND DECISIONS ARE MADE PART OF THE COMMITTEE'S WRITTEN MINUTES. IN ACCORDANCE WITH IRS RULES AND REGULATIONS, THE UNIVERSITY HAS ALSO RECEIVED OPINIONS FROM INDEPENDENT THIRD PARTY COMPENSATION CONSULTANTS THAT THE COMPENSATION AND BENEFITS OF ITS OFFICERS AND KEY EMPLOYEES ARE REASONABLE.

CORE FORM 990, PART VI, SECTION C, LINE 19 - PUBLIC DISCLOSURE YESHIVA UNIVERSITY DOES NOT CURRENTLY MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC. IT'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE UNIVERSITY'S WEBSITE AT WWW.YU.EDU. THE UNIVERSITY MAKES IT'S FORM 990 AND 990-T AVAILABLE TO THE PUBLIC IN ACCORDANCE WITH INTERNAL REVENUE SERVICE RULES AND REGULATIONS.

CORE FORM 990, PART VI, SECTION A, LINE 2 - BOARD MEMBER RELATIONSHIPS

NAME OF OFFICER, DIRECTOR, ETC: ZYGMUNT WILF

NAME OF RELATED PERSON: MARK WILF

RELATIONSHIP: FAMILY AND BUSINESS

FORM 990, PART XI, LINE 9 - RECONCILIATION OF NET ASSETS

ELIMINATION OF EXPENSES OF SEPARATELY

INCORPORATED REAL ESTATE ENTITIES \$-19,389

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FORM 990, PART VII - AVERAGE HOURS PER WEEK

THE AVERAGE HOURS PER WEEK LISTED FOR THE OFFICERS, KEY EMPLOYEES AND HIGHEST PAID EMPLOYEES REPRESENTS YESHIVA UNIVERSITY'S OFFICIAL WORK WEEK. HOWEVER, IN PRACTICE, SUCH INDIVIDUALS WORK SIGNIFICANTLY MORE HOURS PER WEEK AND ARE EXPECTED TO BE AVAILABLE FOR UNIVERSITY BUSINESS.

ATTACHMENT 1

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

ISRAEL

CANADA

ATTACHMENT 2

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
SECURITAS SECURITY SERVICES 1412 BROADWAY NEW YORK, NY 10018	SECURITY SERVICES	9,406,227.
DV GLOBAL CONSTRUCTION 439 WEST 126TH STREET NEW YORK, NY 10027	CONSTRUCTION	1,305,125.
ELLUCIAN COMPANY LLP 62578 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693	IT SERVICES	9,118,304.
MILLENIUUM CENTURY CONTRACTING 26-40 14TH STREET ASTORIA, NY 11102	CONSTRUCTION	1,337,545.
PRICEWATERHOUSECOOPERS LLP 3109 W DR MLK JR BLVD TAMPA, FL 33607	ACCOUNTING SERVICES	1,278,288.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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) 2479 AMSTERDAM AVENUE LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8424066	REAL ESTATE	NY	482,879.	7,869,405.	YU
(2) 2498 AMSTERDAM AVENUE LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8424135	REAL ESTATE	NY	59,219.	973,402.	YU
(3) 251 LEXINGTON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218298	REAL ESTATE	NY	376,781.	2,355,755.	YU
(4) 556 WEST 185TH I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218444	INACTIVE	NY	0.	0.	YU
(5) 551 REALTY I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218503	INACTIVE	NY	0.	0.	YU
(6) 501 WEST 184TH I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218560	INACTIVE	NY	0.	0.	YU

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) YESHIVA ENDOWMENT FOUNDATION INC 500 WEST 185TH STREET NEW YORK, NY 10033 13-1790758	FOUNDATION	NY	501(C)(3)	12A	YU	X	
(2) YESHIVA UNIVERSITY IN ISRAEL 40 DUVDEVANI STREET JERUSALEM, IS 96428 99-9999999	EDUCATION	IS	FOREIGN	FOREIGN	YU	X	
(3) CAROLINE JOSEPH GRUSS INST YU IN ISRAEL 40 DUVDEVANI STREET JERUSALEM, IS 96428 99-9999999	EDUCATION	IS	FOREIGN	FOREIGN	YU	X	
(4) CANADIAN FRIENDS OF YESHIVA UNIVERSITY 3101 BATHURST STREET TORONTO, ONTARIO CA M6A2A6 99-9999999	FUNDRAISING	CA	FOREIGN	FOREIGN	YU	X	
(5) YESHIVA UNIVERSITY WOMEN'S ORGANIZATION 500 WEST 185TH STREET NEW YORK, NY 10033 13-1837437	FUNDRAISING	NY	501(C)(3)	12A	N/A		X
(6)							
(7)							

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

Schedule R (Form 990) 2019

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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) COLONY MANAGEMENT I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218641	INACTIVE	NY	0.	0.	YU
(2) BRIDGEVIEW PROPERTIES I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218703	INACTIVE	NY	0.	0.	YU
(3) 407 AUDUBON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218835	INACTIVE	NY	0.	0.	YU
(4) 403 AUDUBON I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218928	INACTIVE	NY	0.	0.	YU
(5) 2461 AMSTERDAM AVENUE I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 20-8218987	REAL ESTATE	NY	0.	350,839.	YU
(6) 480 WEST 187 I LLC 500 WEST 185TH STREET NEW YORK, NY 10033 26-1607906	INACTIVE	NY	0.	0.	YU

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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

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) LAUREL HILL VENTURES LLC- SOLE MEMBER OF 13-4074163 90 LAUREL HILL ASSOC-500 W 185 NEW YORK, NY 10033	INACTIVE	NY	0.	0.	YU
(2) 90 LAUREL HILL ASSOCIATES LLC 11-3490957 500 WEST 185TH STREET NEW YORK, NY 10033	INACTIVE	NY	0.	0.	YU
(3) LAUREL HILL ESTATES I LLC 20-8218366 500 WEST 185TH STREET NEW YORK, NY 10033	INACTIVE	NY	0.	0.	YU
(4) 24 36 LAUREL HILL I LLC 20-8218753 500 WEST 185TH STREET NEW YORK, NY 10033	REAL ESTATE	NY	648,715.	4,606,203.	YU
(5) Y PROPERTIES HOLDINGS LLC 82-0914288 50 WEST 185TH STREET NEW YORK, NY 10033	R.E. HOLDINGS	DE	10,219,754.	47,914,678.	YU
(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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

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) CFIP CORPORATION 500 WEST 185TH STREET NEW YORK, NY 10033 13-3227195	REAL ESTATE	NY	YEF	C	0.	82,113.	100.0000	X	
(2) DEEGAN VIEW DEVELOPMENT CORPORATION 500 WEST 185TH STREET NEW YORK, NY 10033 13-3372640	REAL ESTATE	NY	YEF	C	0.	0.	100.0000	X	
(3) EASTCHESTER PROPERTIES INC 500 WEST 185TH STREET NEW YORK, NY 10033 06-1142985	REAL ESTATE	NY	YU	C	0.	256,171.	100.0000	X	
(4) HIGH BRIDGE PROPERTIES INC 500 WEST 185TH STREET NEW YORK, NY 10033 13-3247382	REAL ESTATE	NY	YEF	C	0.	35,106.	100.0000	X	
(5) LAUREL HILL DEVELOPMENT CORPORATION 500 WEST 185TH STREET NEW YORK, NY 10033 06-1158243	REAL ESTATE	NY	YU	C	0.	0.	100.0000	X	
(6) OBC CORP 500 WEST 185TH STREET NEW YORK, NY 10033 06-1142986	REAL ESTATE	NY	YU	C	0.	368,321.	100.0000	X	
(7) TREC PROPERTIES INC 500 WEST 185TH STREET NEW YORK, NY 10033 13-3244142	REAL ESTATE	NY	YEF	C	0.	0.	100.0000	X	

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) 557 WEST 185TH ST CORP 500 WEST 185TH STREET NEW YORK, NY 10033 13-3375637	REAL ESTATE	NY	YU	C	0.	58,450.	100.0000	X	
(2) BRIDGE PROPERTY INC 500 WEST 185TH STREET NEW YORK, NY 10033 13-3262638	REAL ESTATE	NY	YEF	C	0.	47,368.	100.0000	X	
(3) FACILITIES 2000 INC 500 WEST 185TH STREET NEW YORK, NY 10033 13-3955072	SAFETY SVCS	NY	YU	C	0.	0.	100.0000	X	
(4) VAN NEST CORP 500 WEST 185TH STREET NEW YORK, NY 10033 13-3421890	REAL ESTATE	NY	YU	C	0.	0.	100.0000	X	
(5) 55 FIFTH AVENUE CONDOMINIUM 500 WEST 185TH STREET NEW YORK, NY 10033 99-9999999	REAL ESTATE	NY	YU	C	0.	0.	60.0000		X
(6) 215 LEXINGTON AVENUE CONDOMINIUM 500 WEST 185TH STREET NEW YORK, NY 10033 13-4130536	REAL ESTATE	NY	YU	C	1,275,000.	1,777,424.	63.0000	X	
(7) CHARITABLE REMAINDER TRUSTS -14	FUNDRAISING	NY	N/A	T					X

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.

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

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) CAROLINE JOSEPH GRUSS INST YU IN ISRAEL	1B	3,083,994.	FMV
(2) YESHIVA UNIVERSITY ENDOWMENT FOUNDATION	1C	1,296,131.	FMV
(3) 215 LEXINGTON AVENUE CONDOMINIUM	1J	815,803.	FMV
(4) CANADIAN FRIENDS OF YESHIVA UNIVERSITY	1B	255,084.	FMV
(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.

Cumulative e-File History 2019

Federal

Locator:	5833BO
Taxpayer Name:	YESHIVA UNIVERSITY
Return Type:	990, 990 & 990T (Corp)
Submitted Date:	05/14/2021 13:38:13
Acknowledgement Date:	05/14/2021 14:00:36
Status:	Accepted
Submission ID:	13049920211345000102

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2019, or tax year beginning 07/01, 2019, and ending 06/30, 2020

2019

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization

YESHIVA UNIVERSITY

Employer identification number

13-1624225

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here [X] b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . 1b 313974097.
2a Form 990-EZ check here [] b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here [] b Total tax (Form 1120-POL, line 22). 3b
4a Form 990-PF check here [] b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here [] b Balance due (Form 8868, line 3c) 5b

Part II Declaration of Officer

6 [] I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
[] If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here

[Signature] Signature of officer

5-13-21 Date

DIR OF TAX + FINANCIAL COMPLIANCE Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only ERO's signature Eric M. McNeil Date 05/13/2021 Check if also paid preparer [X] Check if self-employed [] ERO's SSN or PTIN P00460263 Firm's name (or yours if self-employed), address, and ZIP code PRICEWATERHOUSECOOPERS LLP EIN 13-4008324 300 MADISON AVENUE NEW YORK NY 10017 Phone no. 646-471-3000

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check [] if self-employed PTIN Firm's name Firm's EIN Firm's address Phone no.