** PUBLIC DISCLOSURE COPY ** 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.

Department of the Treasury Internal Revenue Service

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



A	For the	e 2021 calendar year, or tax year beginning JUL 1, 2021 and e	ending JU	JN 30, 2022										
	Check if applicabl	e: C Name of organization		D Employer identif	ication number									
	Addre	ss e AMERICAN JEWISH UNIVERSITY												
	Name		95-1684064											
	Initial		E Telephone numbe											
	Final	15600 MULHOLLAND DRIVE	310-476-977											
	termir ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	35,764,302.										
	Amen return	ded LOG ANGELES CA 90077	return											
	Applic tion		for subordinate											
	pendi	SAME AS C ABOVE		H(b) Are all subordinates i										
1	Tax-ex	empt status: X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) o	or 527		a list. See instructions									
		te: WWW.AJU.EDU		H(c) Group exemption	on number 🕨									
		organization: X Corporation Trust Association Other ►	L Year (of formation: 1941	M State of legal domicile: CA									
Pa	art I	Summary		· · · · · ·										
	1	Briefly describe the organization's mission or most significant activities:	IONAL PRO	GRAMS TO CHILDRE	lN									
Governance		& ADULTS WITH PROGRAMS BASED ON JEWISH ETHICS & PRINCIPLES.												
'nai	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets.									
Nel	3	lumber of voting members of the governing body (Part VI, line 1a)												
		Number of independent voting members of the governing body (Part VI, line 1b)			31									
s So	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		482										
/itie	6	Total number of volunteers (estimate if necessary)		31										
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			-8,164.									
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.									
				Prior Year	Current Year									
ð	8	Contributions and grants (Part VIII, line 1h)		9,358,041.										
ňu	9	Program service revenue (Part VIII, line 2g)		4,919,157.	9,823,138.									
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,099,889.										
Ξ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	316,548.	816,530.										
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		16,693,635.	30,365,086.									
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,872,206.	2,148,587.									
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.									
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		11,221,527.	11,938,311.									
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.									
Expenses	. b	Total fundraising expenses (Part IX, column (D), line 25)	928.											
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		10,842,604.	12,086,944.									
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		23,936,337.	26,173,842.									
	19	Revenue less expenses. Subtract line 18 from line 12		-7,242,702.	4,191,244.									
or	9		Be	ginning of Current Year	End of Year									
sets	20	Total assets (Part X, line 16)		141,817,355.	125,132,947.									
AS	21	Total liabilities (Part X, line 26)		44,326,462.	41,401,734.									
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		97,490,893.	83,731,213.									
	art II	Signature Block												
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the best of m	y 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	Signature of officer	Date					
Here	ADRIAN BREITFELD, VICE PRESIDENT						
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN			
Paid	LAUREN A. HAVERLOCK	LAUREN A. HAVERLOCK	05/04/23	self-employed P00545829			
Preparer	Firm's name MOSS ADAMS LLP	irm's name NOSS ADAMS LLP					
Use Only	Firm's address 🕨 21700 OXNARD ST. STE 30	0					
	WOODLAND HILLS, CA 91367	e no.818-577-1900					
May the IF	RS discuss this return with the preparer shown above	/e? See instructions		X Yes No			
				000			

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2021) AMERICAN JEWISH UNIVERSITY	95-1684064	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	. <u></u>	X
1	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes X 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? If "Yes," describe these changes on Schedule O.	L	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	easured by expe	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	, , , , , , , , , , , , , , , , , , ,	
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$10,115,300. including grants of \$1,878,687.) (Revenue ACADEMIC:	\$	2,997,292.
	- COLLEGE OF ARTS AND SCIENCES: THE COLLEGE HAS TRADITIONALLY PROVIDED		
	A SMALL NUMBER OF STUDENTS WITH AN INTENSIVE INTRODUCTION TO SELECT		
	LIBERAL ARTS MAJORS. THE BOARD OF DIRECTORS VOTED IN OCTOBER 2018 TO		
	SUSPEND ADMISSION TO THE COLLEGE.		
	- NONPROFIT MANAGEMENT PROGRAM (MBA)		
	- CENTER FOR JEWISH EDUCATION - MASTER OF ARTS IN EDUCATION		
	- ZIEGLER SCHOOL OF RABBINIC STUDIES - TRAINING OF CONSERVATIVE RABBIS		
4b	(Code:) (Expenses \$ 749,208. including grants of \$ 0.) (Revenue	\$	2,763,811.
15	CONFERENCE CENTER:	Ψ	, , - ,
	THE AMERICAN JEWISH UNIVERSITY CONFERENCE PROGRAM CONSISTS OF TWO		
	CONFERENCE CENTERS; ONE AT THE FAMILIAN CAMPUS AND THE OTHER AT THE		
	BRANDEIS-BARDIN CAMPUS.		
	THE CONFERENCE CENTER AT THE FAMILIAN CAMPUS CAN ACCOMMODATE		
	FACILITATES, CONVENTIONS, SEMINARS AND OTHER EDUCATIONAL AND CULTURAL		
	MEETINGS.		
	THE CONFERENCE CENTER AT THE BRANDEIS-BARDIN CAMPUS IS NATIONALLY		
	RECOGNIZED AS A CENTER DEVOTED TO JEWISH LEARNING AND CULTURE. THIS		
	LOCATION IS EQUIPPED FOR CELEBRATING JEWISH LIFECYCLE EVENTS AND AN		
	IDEAL ENVIRONMENT FOR CREATIVE THINKING AND PRODUCTIVE COLLABORATION.		
-			2 257 920
4c		\$	5,257,820.
	CAMP ALONIM:		
	CAMP ALONIM STRIVES TO SPARK A LOVE FOR JEWISH CULTURE, TRADITION, AND		
	COMMUNITY IN OUR CAMPERS BY EXPOSING THEM TO A MULTITUDE OF WAYS TO BE JEWISH. WE SEE EVERY ACTIVITY WE OFFER AS A "GATEWAY"- A MEANS BY WHICH		
	THEY MIGHT ENGAGE WITH BEING JEWISH. JEWISH CAMPING HAS BEEN FOUND TO		
	BE ONE OF THE MOST EFFECTIVE METHODS OF JEWISH EDUCATION, ENSURING A		
	JEWISH IDENTITY IN ADULTHOOD.		
	GAN ALONIM- DESIGNED FOR CHILDREN ENTERING KINDERGARTEN THROUGH 6TH		
	GRADE. IT IS A NURTURING AND LOVING ENVIRONMENT WHERE CHILDREN FEEL		
	FREE TO EXPLORE THEIR WORLD AND BE ADVENTUROUS IN A SAFE SETTING.		
_			
4d			
	(Expenses \$ 1,834,178. including grants of \$ 269,900.) (Revenue \$	486,817.)	
4e	Total program service expenses 15,065,048.		
		F	orm 990 (2021)
132002	2 12-09-21		

Form	990	(2021)

Part IV Checklist of Required Schedules

AMERICAN JEWISH UNIVERSITY

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
•	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
8		8	x	
0	Schedule D, Part III	•		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X QQA	(2021)
132003	12-09-21	⊢orm	330	(2021)

Eorm	000	(2021
гопп	990	(2021

AMERICAN JEWISH UNIVERSITY

Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease С any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete Х Schedule I Part I 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% х controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 27 creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If а "Yes." complete Schedule L, Part IV 28a x b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If x 28c "Yes," complete Schedule L, Part IV х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or gualified conservation x contributions? If "Yes," complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Х 34 Part V line 1 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 98 **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable h 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming С Х (gambling) winnings to prize winners? **1**c Form 990 (2021) 132004 12-09-21

14580504 146892 721639

5 2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

95-1684064

Page **4**

Form	990 (2021) AMERICAN JEWISH UNIVERSITY 95-168406	4	P	age 5			
Par	t 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 482						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X	<u> </u>			
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)?	4a		X			
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b		-			
7	Organizations that may receive deductible contributions under section 170(c).	_	77				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_					
	to file Form 8282?	7c		X			
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		x			
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X			
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
-	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
8	 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 						
U	sponsoring organization have excess business holdings at any time during the year?						
9	Sponsoring organizations maintaining donor advised funds.	8					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1					
11	Section 501(c)(12) organizations. Enter:	1					
а	Gross income from members or shareholders 11a						
	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans 13b						
	Enter the amount of reserves on hand			<u> </u>			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>			
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?	15		X			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X			
_	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17					
	If "Yes," complete Form 6069.		000	(000 1)			
132005	12-09-21 0	Form	リココロ	(2021)			

14580504 146892 721639

Form	990 (2021) AMERICAN JEWISH UNIVERSITY 95	-1684064	Р	age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,	and for a "No"	respor	ise
	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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	32		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	31		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio	n		
	of officers, directors, trustees, or key employees to a management company or other person?			x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			х
6	Did the organization have members or stockholders?			x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?		х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
-	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u></u>		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form? 11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?		Х	
14	Did the organization have a written document retention and destruction policy?		Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization		Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion 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)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	()()		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	olicy, and finar	icial	
	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	►		
-	ADRIAN BREITFELD - 310-476-9777	-		
	15600 MULHOLLAND DRIVE, LOS ANGELES, CA 90077			
132006	12-09-21	Forr	n 990	(2021)
	7			. ,
805	04 146892 721639 2021.05080 AMERICAN JEWISH U	NIVERSI	r 72	163

145

⁹_1

Form 990 (2	2021) AMERICAN JEWISH UNIVERSITY	95-1684064	Page 7						
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								
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.									

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)		
Name and title	Average	(do	Position					Reportable	Reportable	Estimated	
	hours per	box	(do not check more t box, unless person is		s both	n an	compensation	compensation	amount of		
	week		officer and a		irecto	r/trus T	tee)	from	from from related		
	(list any	ector						the	organizations	compensation	
	hours for	or dir	96			ated		organization	(W-2/1099-MISC/	from the	
	related	ustee	truste		e	bens		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations below	ual tr	tional		voldu	t con		1099-NEC)		and related organizations	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) JEFFREY HERBST	35.00		_		-		-				
PRESIDENT	1.00	х		х				435,643.	0.	22,061.	
(2) ROBERT WEXLER	35.00										
PRESIDENT EMERITUS/PROFESSOR							х	186,236.	0.	94,137.	
(3) CATHERINE S SCHNEIDER	35.00										
VP OF ADVANCEMENT/CDO				Х				268,786.	0.	1,669.	
(4) ADRIAN BREITFELD BEDER	35.00										
VP OF FINANCE & ADMIN/CFO				х				247,464.	0.	7,314.	
(5) SHERRE HIRSCH	35.00										
CHIEF INNOVATION OFFICER				х				86,958.	0.	154,894.	
(6) BRADLEY S ARTSON	35.00										
DEAN OF ZIEGLER SCHOOL				х				146,668.	0.	77,096.	
(7) DAVID A GROSHOFF	35.00										
PROFESSOR OF BUSINESS AND LAW						X		205,017.	0.	3,226.	
(8) ADAM R GREENWALD	35.00										
PROGRAM DIRECTOR						X		97,481.	0.	65,197.	
(9) JUDITH DIANE FELDMAN	35.00										
SR DIRECTOR OF ADVANCEMENT						X		143,298.	0.	3,150.	
(10) RUSSELL DION	35.00										
DIRECTOR OF FACILITIES						X		137,774.	0.	1,520.	
(11) RACHEL A LERNER	35.00										
DEAN						X		136,929.	0.	2,086.	
(12) ROBBIE TROTTEN	35.00										
CHIEF ACADEMIC OFFICER				Х				128,883.	0.	2,472.	
(13) HAROLD MASOR	0.50										
CHAIR		Х		Х				0.	0.	0.	
(14) VIRGINIA MAAS	0.50										
PAST CHAIR		Х		Х				0.	0.	0.	
(15) LAWRENCE PLATT	0.50										
VICE CHAIR		Х		Х				0.	0.	0.	
(16) MELISSA BORDY	0.50										
TREASURER		х		х				0.	0.	0.	
(17) DAVID WEINER	0.50										
SECRETARY		Х		Х				0.	0.	0.	
132007 12-00-21										Form 990 (2021)	

8

132007 12-09-21

Form 990 (2021)

14580504 146892 721639

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

Form 990 (2021) AMERICAN JEWI	ISH UNIVERS	ITY							95-16	8406	4	Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Average	Position						Reportable	Reportable)	Es	timate	ed
	hours per	(do not check more than one box, unless person is both an officer and a director/trustee)				s both	n an	compensation	compensatio	tion amount of			of
	week		cer ar	nd a di	irecto	r/trus T	tee)	from	from related	Ľ		other	
	(list any	director						the	organization	IS	com	pensa	tion
	hours for	or dir	e			ated		organization	(W-2/1099-MIS			om th	
	related	istee	trustee		æ	bensi		(W-2/1099-MISC/	1099-NEC)		Ĭ	anizat	
	organizations below	ual tru	ional		ploye	t com		1099-NEC)		l		d relat	
	line)	Individual trustee or	In stit utional	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
(18) BENJAMIN BRESLAUER	0.50		-		×	1 0	<u> </u>						
BOARD MEMBER		х						0.		Ο.			٥.
(19) JEROME COHEN	0.50												
BOARD MEMBER		x						0.		٥.			Ο.
(20) LIANA KADISHA COHN	0.50												
BOARD MEMBER		х						0.		0.			٥.
(21) ABNER GOLDSTINE	0.50												
BOARD MEMBER		х						0.		٥.			0.
(22) LISA HOFHEIMER	0.50												
BOARD MEMBER		х						0.		0.			٥.
(23) KENNETH KAHAN	0.50												
BOARD MEMBER	0.50	X						0.		0.			0.
(24) MARK LAINER	0.50							0		0.			0
BOARD MEMBER (25) JEFFREY LEVINE	0.50	х	-			-	-	0.		0.			0.
BOARD MEMBER	0.50	x						0.		٥.			٥.
(26) NORM LEVINE	0.50												
BOARD MEMBER		x						0.		Ο.			٥.
1b Subtotal								2,221,137.		0.		434,	822.
c Total from continuation sheets to Part VII, Section A								0.		0.			٥.
d Total (add lines 1b and 1c)								2,221,137.		٥.	434,822		822.
2 Total number of individuals (including but no							o re	eceived more than \$100,	000 of reportable	е			
compensation from the organization													26
												Yes	No
3 Did the organization list any former officer,													
line 1a? If "Yes," complete Schedule J for su											3	X	
4 For any individual listed on line 1a, is the su												v	
and related organizations greater than \$150			•								4	X	
5 Did any person listed on line 1a receive or a											_		v
rendered to the organization? <i>If "Yes." com</i> Section B. Independent Contractors	plete Schedule	e J f	or sı	ıch r	bers	on .				<u></u>	5		Х
1 Complete this table for your five highest con	mpensated inc	lone	nde	nt cc	ntra	acto	re th	nat received more than \$	100 000 of com	nensa	tion fro	m	
the organization. Report compensation for t										Jensa			
(A)	,			5				(B)			(0)	
Name and business	address							Description of s	ervices	Compensation		n	
ADVANCED CENTRIFUGAL SYSTEMS													
81 N ALTADENA DRIVE, PASADENA, CA 911								REPAIRS AND ADDITI	ONS - HVAC			820,	917.
AEGIS SECURITY & INVESTIGATIONS INC,													
WASHINGTON BLVD, CULVER CITY, CA 9023								SECURITY				390,	721.
BASE8 INC, 12725 VENTURA BLVD, SUITE	J,												
STUDIO CITY, CA 91604							-	INFORMATION TECHNO	LOGY			360,	117.
GENESIS CHARITABLE CONSULTING, 39033	551							CONSULTING				300	025
PACIFIC HIGHLAND ST, PALMDALE, CA 93: A TEAM SECURITY INC, 11454 SAN VINCEN							_	CONSULTING				500,	025.
BLVD, 1ST FLOOR, LOS ANGELES, CA 9004								SECURITY				292	815.
2 Total number of independent contractors (ir		ot lir	nited	d to t	thos	e lis	-		ore than			,	
\$100,000 of compensation from the organiz	•				18			,					
SEE PART VII, SECTION A CONTINU		TS									Form	990 ()	2021)

132008 12-09-21

rustees, Key Er (B) Average	nplo	yee			ligh	est (Compensated Employe	` '	
	1		- (((F)
Average	(C) pe Position						(D)	(E)	(F)
hours	(c	heck				Iv)	Reportable compensation	Reportable compensation	Estimated amount of
per	(0					'y)	from	from related	other
week					/ee		the	organizations	compensation
(list any	ector				uplo)		organization	(W-2/1099-MISC)	from the
hours for	or dir	e.			ated e		(W-2/1099-MISC)		organization
	ustee	truste		e	pens				and related
l v	ual tri	tional		ploye	t com	_			organizations
	ndivid	nstitut	Officer	(ey en	Highes	ormei			
0.50	_	-		_	-	_			
	х						0.	0.	0.
0.50									
0.50	х						0.	0.	0.
0.50									
	х						0.	0.	0.
0.50									
_	х						0.	0.	0.
0.50	1								
	Х						0.	0.	0.
0.50									
	Х						0.	0.	0.
0.50									
	х						0.	0.	0.
0.50								0	0
0.50	X						0.	U.	0.
0.50							0	0	0.
0.50	^						<u>.</u>	0.	0.
0.50	v						0	0	0.
0 50							°.		••
	x						0.	0.	0.
0,50							·	- •	•
	x						٥.	0.	0.
0.50									
	x						0.	0.	0.
0.50									
	х						0.	0.	0.
0.50									
	х						0.	0.	0.
0.50									
	х						0.	0.	0.
0.50									
0.50	Х						٥.	0.	0.
	4								
1						•			
	(list any hours for related organizations below line) 0.50 0.50 0.50 0.50 0.50 0.50 0.50 0.5	(list any hours for related organizations below line) Josephene serve x 0.50 x 0.50 x	(list any hours for related organizations below line) page property below line) 0.500 x 0.500 x <td< td=""><td>(list any hours for related organizations below line) one possible served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served</td><td>(list any hours for related organizations below line) in in in in in in in in</td><td></td><td>(list any hours for related organizations below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below li</td><td></td><td>$\begin{array}{c$</td></td<>	(list any hours for related organizations below line) one possible served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served served	(list any hours for related organizations below line) in in in in in in in in		(list any hours for related organizations below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below line) ion applied below li		$ \begin{array}{c $

132201 04-01-21

rm 990 (2 Part VIII			N JEWISH UNI UC				95-168406	4 Pa
	Check if Schedule O			or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excl from tax un sections 512
<u> </u>	Federated campaigns		1a					
C	Membership dues							
c M	Fundraising events		1c	485,392.				
b ar	Related organizations							
e mil	Government grants (contr	ibuti	ons) 1e	2,000,000.				
Ω f	All other contributions, gifts,	gran	s, and					
the	similar amounts not included	abov	/e 1f	9,004,569.				
မီ ရ	Noncash contributions included in	lines [·]	a-1f 1g \$	356,643.				
h a	Total. Add lines 1a-1f			►	11,489,961.			
				Business Code				
2 a	CAMP FEES			611710	3,257,820.	3,257,820.		
a p	TUITION			611710	2,997,292.	2,997,292.		
2 a b c d e f	CONFERENCE CENTER			611710	2,763,811.	2,763,811.		
b gé	WHIZIN CENTER INCOM	E		611710	486,817.	486,817.		
е	STUDENT HOUSING			611710	317,398.	317,398.		
f	All other program service	reve	nue					
					9,823,138.			
3	Investment income (inclue	0	,	, ,	1 000 075			1 000
	other similar amounts)				1,020,875.			1,020,
4	Income from investment o		• •					
5	Royalties							
	a		(i) Real	(ii) Personal				
	Gross rents	6a	864,419. 0.					
	Less: rental expenses	6b	864,419.					
	Rental income or (loss)	6c	004,419.		864,419.		-8,164.	872,
	Net rental income or (loss Gross amount from sales of) <u></u>	(i) Securities	(ii) Other	004,415.		0,104.	072,
<i>1</i> a	assets other than inventory	7-	11,739,770.	. ,				
h	Less: cost or other basis	10	,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	and sales expenses	7b	5,172,479.	60,147.				
	Gain or (loss)	7c						
d	Net gain or (loss)		, ,	,	7,214,582.			7,214,
-	Gross income from fundraisi				, , -			, ,
	including \$	•	· ·					
	contributions reported on							
	Part IV, line 18		· ·	78,400.				
b	Less: direct expenses			166,590.				
	Net income or (loss) from				-88,190.			-88,
	Gross income from gamin							
	Part IV, line 19							
b	Less: direct expenses							
с	Net income or (loss) from	gam	ing activities	►				
10 a	Gross sales of inventory, I	ess	returns					
	and allowances			a				
b	Less: cost of goods sold		10	o l				
с	Net income or (loss) from	sale	s of inventory .	►				
				Business Code				
11 a b c d	OTHER INCOME			900099	40,301.			40,
evenue o d p				ļl				
c eve				ļļ				
ď	All other revenue							
е	Total. Add lines 11a-11d			🕨	40,301.			
-					30,365,086.	9,823,138.	-8,164.	9,060

132009 12-09-21

11

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

Form **990** (2021)

AMERICAN JEWISH UNIVERSITY

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

95-1684064 Page 10

Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) (A) Do not include amounts reported on lines 6b. Total expenses Program service Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 1 269,900 269,900. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 1,878,687 1,878,687 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 Compensation of current officers, directors, 5 764,512. trustees, and key employees 1,655,388 613,956. 276,920. Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and 119,946. 119,946. persons described in section 4958(c)(3)(B) Other salaries and wages 8,334,959 5,578,182. 2,087,589 669,188. 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,197,714 639,248, 534,759 23,707. Other employee benefits 9 630,304 378,351 188,949 63,004. 10 Payroll taxes Fees for services (nonemployees): 11 Management а 316,313 49,049. 267,264 b Legal 96,686. 96,686 С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees 238,609. 238,609 f Other. (If line 11g amount exceeds 10% of line 25, g 2,324,822 875,547 1,036,903 412,372. column (A), amount, list line 11g expenses on Sch 0.) 228,915 191,546 36,820 549. Advertising and promotion 12 137,862 143,121 81,138. 362,121 13 Office expenses 541,457, 30,016. 466,830 44,611. Information technology 14 Royalties 15 2,453,206 397,947 2,053,712 1,547. 16 Occupancy 152,738 49,877, 101,693 1,168. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,264,903 693,885, 441,636 129,382. 20 Interest Payments to affiliates 21 1,424,855 1,373,629 43,265 7,961. 22 Depreciation, depletion, and amortization 375,104 589,352. 109,891. 1,074,347. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) FOOD SERVICES 727,143. 680,306, 38,897 7,940. а 0. EDUCATIONAL ACTIVITY 144,506 134,762. 9,744 b TAXES & LICENSES 76,723. 12,447, 64,228, 48. С DUES & SUBSCRIPTIONS 25,407 0. 68,770. 43,363. d 590,830 327,190 179,138 84,502. All other expenses е 26,173,842, 15,065,048 9,194,866 1,913,928. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

132010 12-09-21

14580504 146892 721639

if following SOP 98-2 (ASC 958-720)

Check here

12 2021.05080 AMERICAN JEWISH UNIVERSIT 721639 1

Form 990 (2021)

14580504 146892 721639

Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 29,299. 7 7 Notes and loans receivable, net 101,514. 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 443,890. 9 **10a** Land, buildings, and equipment: cost or other 33,730,064. basis. Complete Part VI of Schedule D _____ 10a 21,597,144. 33,238,939. b Less: accumulated depreciation 10b 10c 71,124,524. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 28,638,227. 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets Ο. Other assets. See Part IV, line 11 15 15 141,817,355. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 5,235,543. Accounts payable and accrued expenses 17 17 18 18 Grants payable 2,368,185. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 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 22 36,696,378. Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 26,356. 25 of Schedule D 44,326,462. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🗵 and complete lines 27, 28, 32, and 33. 15,157,616. 27 Net assets without donor restrictions 27 Net assets with donor restrictions 82,333,277. 28 28

AMERICAN JEWISH UNIVERSITY

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

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Organizations that do not follow FASB ASC 958, check here

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

and complete lines 29 through 33.

Total liabilities and net assets/fund balances

95-1684064

1

2

3

4

(A)

Beginning of year

1,208,694.

4,155,082.

2,165,694.

711,492.

Page **11**

(B)

End of year

1,869,276.

7,517,237.

2,366,296.

775,686.

19,317.

115,721.

768,113.

12,132,920.

50,908,595.

27,783,240.

20,876,546.

4,824,977.

2,506,487.

34,043,914.

26,356.

41,401,734.

5,706,066.

78,025,147.

83,731,213.

125,132,947.

Form 990 (2021)

29

30

31

32

33

97,490,893.

141,817,355.

125,132,947.

Form 990 (2021) Part X | Balance Sheet

1

2

3

4

Assets

Liabilities

Net Assets or Fund Balances

29

30

31

32

33

Form	1990 (2021) AMERICAN JEWISH UNIVERSITY	95-1684064	ŀ	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				-
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	30,	365,	086.
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,	173,	842.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,	191,	244.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	97,	490,	893.
5	Net unrealized gains (losses) on investments	5	-17,	838,	463.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		112,	461.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	83,	731,	213.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		T		
		r		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a			2a		X
	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?		2b	Х	
	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				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
_	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit		v	1
-	Act and OMB Circular A-133?	·····	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require			v	1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X 000	L

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

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

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

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

OMB No. 1545-0047
2021
Onen te Dublie

Open to Public Inspection

Name of the organization							identification number
	CAN JEWISH UNIVE				<u> </u>		95-1684064
		(All organizations must o			ee instructions	3.	
The organization is not a private four 1 A church, convention of c 2 X A school described in sec 3 A hospital or a cooperative	churches, or associatic ction 170(b)(1)(A)(ii).(n of churches described Attach Schedule E (Forn	l in sectio n 990).)	n 170(b)(1			
4 A medical research organ city, and state:	ization operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
5 An organization operated section 170(b)(1)(A)(iv).		llege or university owned	l or operat	ed by a go	overnmental ur	iit describe	ed in
6 A federal, state, or local g		nental unit described in	section 17	70(b)(1)(A)	(v).		
7 An organization that norm		ntial part of its support f	rom a gove	ernmental	unit or from th	e general p	public described in
 section 170(b)(1)(A)(vi). (A community trust described as a community trus		(1)(A)(vi) (Complete Par	+ 11 \				
9 An agricultural research o				ed in coniu	inction with a	and-grant	college
or university or a non-land	-			-		-	-
university:							
10 An organization that norm activities related to its exe income and unrelated bus See section 509(a)(2). (C	empt functions, subject siness taxable income	t to certain exceptions;	and (2) no	more than	33 1/3% of its	support f	rom gross investment
11 An organization organized		velv to test for public sa	fetv. See	section 50)9(a)(4).		
12 An organization organized		, ,				ry out the	purposes of one or
more publicly supported of	organizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section 5	09(a)(3).	Check the box on
lines 12a through 12d tha	t describes the type o	f supporting organization	n and com	plete lines	12e, 12f, and	12g.	
a D Type I. A supporting or	ganization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
the supported organiza	tion(s) the power to re	gularly appoint or elect a	majority o	f the direc	tors or trustee	s of the su	Ipporting
organization. You must	t complete Part IV, Se	ections A and B.					
b Type II. A supporting of	rganization supervised	or controlled in connec	tion with its	s supporte	d organizatior	ı(s), by hav	ving
-		anization vested in the s	ame perso	ns that co	ntrol or manag	e the supp	ported
organization(s). You mu	• •						
		g organization operated				y integrate	d with,
		 You must complete l porting organization oper 				od organi-	ration(a)
		ation generally must sat				Ũ	
•	v	nplete Part IV, Sections			•	anattentiv	
		written determination fro				. Type III	
		nally integrated supporti			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·, · / · - ···	
f Enter the number of supported	l organizations						
g Provide the following informati							
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your governi Yes	nization listed ng document? No	(v) Amount of support (see in		(vi) Amount of other support (see instructions)
Total							1

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6,977,619.	6,605,781.	6,755,927.	9,358,041.	11,469,961.	41,167,329.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6,977,619.	6,605,781.	6,755,927.	9,358,041.	11,469,961.	41,167,329.
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)						4,864,884.
	Public support. Subtract line 5 from line 4.						36,302,445.
	ction B. Total Support					,	
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	6,977,619.	6,605,781.	6,755,927.	9,358,041.	11,469,961.	41,167,329.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,295,473.	2,482,565.	2,240,483.	1,473,003.	1,885,294.	10,376,818.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	76,819.	25,033.	2,574.	2,872.	40,301.	147,599.
	Total support. Add lines 7 through 10						51,691,746.
	Gross receipts from related activities,		,			12	48,472,625.
13	First 5 years. If the Form 990 is for the	-	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	. —
<u> </u>	organization, check this box and stop						
	ction C. Computation of Publi						70.02
	Public support percentage for 2021 (li		•			14	70.23 %
	Public support percentage from 2020					15	67.46 %
16a	33 1/3% support test - 2021. If the c			line 13, and line 1	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2020. If the c	-					
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts			-	-	VI how the organiz	ation
	meets the facts-and-circumstances te	-					
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets th						
40	organization meets the facts-and-circu		-		•••••		
18	Private foundation. If the organizatio	n did not check a t	oox on line 13, 16a	, 100, 17a, 0r 17b,	, check this box a		
						Schedule A	(Form 990) 2021

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 per- formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization'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	1					
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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for	•			•		
check this box and stop here						
Section C. Computation of Pub	lic Support Per	rcentage				
15 Public support percentage for 2021			column (f))		15	%
16 Public support percentage from 202 Section D. Computation of Inve					16	%
17 Investment income percentage for 2	2021 (line 10c, colu	mn (f), divided by	ine 13, column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2021. If th	e organization did r				33 1/3%, and l	ine 17 is not
more than 33 1/3%, check this box						
b 33 1/3% support tests - 2020. If th	e organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3	3%, and
line 18 is not more than 33 1/3%, ch	eck this box and s	top here. The org	anization qualifies	as a publicly supp	orted organiza	tion ►
20 Private foundation. If the organizat						
132023 01-04-22					Sched	ule A (Form 990) 2021
		17	7			

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

1

2

3a

3b

3c

4a

4b

4c

5a

5b

<u>5c</u>

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

18

132024 01-04-21

Schedule A (Form 990) 2021

	edule A (Form 990) 2021 AMERICAN JEWISH UNIVERSITY	95-1684064	Pa	age (
Ра	rt IV Supporting Organizations (continued)		-	
			Yes	N
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	N
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of on			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	cers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	rtod		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among t			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	N
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
ec	tion D. All Type III Supporting Organizations			
			Yes	N
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organization(s).	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
Ū				
Ū				
Ū	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		

- 1 <u>Check</u> the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** ____ The organization is the parent of each of its supported organizations. *Complete* line 3 *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction <u>s).</u>
---	--	---------------------------------------------------	------------------------------------------------------------------------------------------------

19

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

3b | | Schedule A (Form 990) 2021

2a

2b

За

Yes No

132025 01-04-22

14580504 146892 721639

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

Sche	dule A (Form 990) 2021 AMERICAN JEWISH UNIVERSITY			95-1684064	Page 6
_	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations		·
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 (explain in	Part VI). See inst	ructions.
	All other Type III non-functionally integrated supporting organizations mu			,	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
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			
е	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 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	/ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting org	anization (see	

Schedule A (Form 990) 2021

132026 01-04-22

instructions).

Sche	dule A (Form 990) 2021 AMERICAN JEWISH UNIV	VERSITY			95-1684064	Page 7
Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)		
Sect	ion D - Distributions				Current Y	/ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
_3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributa Amount for	
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
а	From 2016					
b	From 2017					
с	From 2018					
d	From 2019					
е	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
с	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					

Schedule A (Form 990) 2021

132027 01-04-22

95-1684064 Page **8**

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME			
2017 AMOUNT: \$ 7	76,819.		
2018 AMOUNT: \$ 2	25,033.		
2019 AMOUNT: \$ 2	2,574.		
2020 AMOUNT: \$ 2	2,872.		
	40,301.		
132028 01-04-22			Schedule A (Form 990) 2021
132020 01-04-22		2.2	Schedule A (FUIII 330) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

. ..

Name of

. ..

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

202⁻

Employer identification number

95-1684064

the organization		

AMERICAN JEWISH UNIVERSITY

Organization type (check of	le).
Filers of:	Section:
Form 990 or 990-EZ	X 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

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

	3 (Form 990) (2021)			Page 2
Name of or	rganization		Emplo	yer identification number
AMERICAN	JEWISH UNIVERSITY		9	5-1684064
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
1		\$2,691	<u>,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
2		\$2,000	<u>,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
3		\$1,200	,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
4		\$626	, <u>499.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5		\$519	<u>,300.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
6		\$350	,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

123452 11-11-21

14580504 146892 721639

25 2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

Name of organization			Employ	er identification number
AMERICAN	I JEWISH UNIVERSITY		95	-1684064
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed	ł.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
	PUBLICLY TRADED SECURITIES			
4		\$250,	505.	12/20/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		(d) Date received
		\$		

26

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Schedule B	3 (Form 990) (2021)		Page 4
Name of or	ganization		Employer identification number
AMERICAN	JEWISH UNIVERSITY		95-1684064
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a)		tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	ss for the year. (Enter this info. once.) \$\$
	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
F		(e) Transfer of gift	
-	Transferee's name, address, ar	nd 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
F		(e) Transfer of gift	
-	Transferee's name, address, ar	nd 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, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

Schedule B (Form 990) (2021)

14580504 146892 721639

27 2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

(Forr	HEDULE D m 990) Imment of the Treasury al Revenue Service	► Complete if th Part IV, line 6, 7, 8,	e organization answered "Yes" on Form 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, c ▶ Attach to Form 990. form990 for instructions and the latest inf	990, or 12b.		OMB No. 1545 202 Open to Pol Inspection	1 ublic
Nam	e of the organizati				Empl	oyer identification r	umber
D.		AMERICAN JEWISH UNIVERS				95-1684064	
Pa		ations Maintaining Donor Ad	Ivised Funds or Other Similar Fur	ids or Acc	count	S. Complete if the	
	organizatio	Tanswered Tes OffForm 990, Fait	(a) Donor advised funds	(1) Eurod	s and other accounts	
	T . i . i i			(L	y Fund		5
1		nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4 5	Aggregate value a	,	L	dvisod funde			
5	0		tion's exclusive legal control?			Yes	No
6			onor advisors in writing that grant funds car				
Ŭ	0	0, ,	onor or donor advisor, or for any other purp		,		
	impermissible priv				•	Yes	No
Pa							
r al		ation Easements. Complete if t	the organization answered "Yes" on Form 9	90. Part IV. I	ine 7.		
1			the organization answered "Yes" on Form 9 unization (check all that apply).	90, Part IV, I	ine 7.		
	Purpose(s) of cons	servation easements held by the orga	nization (check all that apply).			mportant land area	
	Purpose(s) of cons		nization (check all that apply). recreation or education) Preservatio	on of a histor	ically ir	mportant land area	
	Purpose(s) of cons	servation easements held by the orga n of land for public use (for example, r of natural habitat	nization (check all that apply). recreation or education) Preservatio	on of a histor	ically ir	nportant land area oric structure	
1	Purpose(s) of cons Preservation Protection of Preservation	servation easements held by the orga n of land for public use (for example, r of natural habitat n of open space	nization (check all that apply). recreation or education) Preservation Preservation	on of a histor on of a certifi	ically ir ed histe	oric structure	
	Purpose(s) of cons Preservation Protection of Preservation	servation easements held by the orga n of land for public use (for example, r of natural habitat n of open space through 2d if the organization held a	nization (check all that apply). recreation or education) Preservatio	on of a histor on of a certifi	ically ir ed histo servatio	oric structure	ast
1	Purpose(s) of cons Preservation Protection of Protection of Preservation Complete lines 2a day of the tax yea	servation easements held by the orga n of land for public use (for example, r of natural habitat n of open space through 2d if the organization held a r.	nization (check all that apply). recreation or education) Preservatio Preservatio qualified conservation contribution in the fo	on of a histor on of a certifi orm of a con	ically ir ed histo servatio	oric structure	ast
1	Purpose(s) of cons Preservation Protection of Preservation Complete lines 2a day of the tax yea Total number of co	servation easements held by the orga of land for public use (for example, r of natural habitat of open space through 2d if the organization held a r.	nization (check all that apply). recreation or education) Preservatio Preservatio qualified conservation contribution in the fo	on of a histor on of a certifi orm of a con	ically ir ed histo servatio	oric structure	ast
1 2 a	Purpose(s) of cons Preservation Protection of Preservation Complete lines 2a day of the tax yea Total number of co Total acreage rest	servation easements held by the orga of land for public use (for example, r of natural habitat of open space through 2d if the organization held a r.	nization (check all that apply). recreation or education) Preservatio Preservatio qualified conservation contribution in the fo	on of a histor on of a certifi orm of a con	ically ir ed histe servatio	oric structure	ast
1 2 a b c	Purpose(s) of cons Preservation Protection of Preservation Complete lines 2a day of the tax yea Total number of co Total acreage rest Number of conserv	servation easements held by the orga of land for public use (for example, r of natural habitat of open space through 2d if the organization held a r. onservation easements ricted by conservation easements vation easements on a certified histor	nization (check all that apply). recreation or education) Preservatio Preservatio qualified conservation contribution in the fo	on of a histor on of a certifi orm of a con	ically ir ed histr servatio 2a 2b	oric structure	ast
1 2 a b c	Purpose(s) of cons Preservation Protection of Preservation Complete lines 2a day of the tax yea Total number of conser Number of conser Number of conser	servation easements held by the orga of land for public use (for example, r of natural habitat of open space through 2d if the organization held a r. onservation easements ricted by conservation easements vation easements on a certified histor vation easements included in (c) acqu	Inization (check all that apply). recreation or education) Preservation qualified conservation contribution in the form ric structure included in (a) Lired after 7/25/06, and not on a historic str	on of a histor on of a certifi orm of a con	ically ir ed histr servatio 2a 2b	oric structure	ast
1 2 a b c	Purpose(s) of cons Preservation Protection of Preservation Complete lines 2a day of the tax yea Total number of co Total acreage rest Number of conser Number of conser listed in the Nation	servation easements held by the orga of land for public use (for example, r of natural habitat of open space through 2d if the organization held a r. onservation easements ricted by conservation easements vation easements on a certified histor vation easements included in (c) acquinal Register	nization (check all that apply). recreation or education) Preservation Preservation qualified conservation contribution in the for ric structure included in (a)	on of a histor on of a certifi orm of a con ucture	ically ir ed histring servation 2a 2b 2c 2d	oric structure on easement on the I Held at the End of the T	ast

4 Number of states where property subject to conservation easement is located

5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	10
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
	▶	

7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
	▶\$

8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	
۵	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and	

	organization's accounting for conservation easements.
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and

	Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.
4 16.11	

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance s	heet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	of public service,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990. Part VIII. line 1	▶ \$

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2021
b	Assets included in Form 990, Part X		\$
а	Revenue included on Form 990, Part VIII, line 1		\$
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro	ovid	e
	(ii) Assets included in Form 990, Part X		\$
			Ψ

132051 10-28-21

28

🗌 No

b Contributions 11,532. 7,650. 2,784. 316,774. 46,488. c Net investment earnings, gains, and losses -2,386,875. 4,623,971. 388,952. 722,920. 513,819. d Grants or scholarships -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities -2,386,815. -2,351,878. 22,521,050. 22,105,188. g End of year balance -2,3186,841. 26,306,540. 22,351,878. 22,521,050. 22,105,188. g End of year balance -0000 % % % % % h Porvide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a % % % % <	Sche		EWISH UNIVERSITY				1684064	Pa	_{age} 2
collection time (check all that apply): d Loan or exchange program b Scholarly research e Other	Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Similar Ass	sets _{(contil}	nued)	
collection time (check all that apply): d Loan or exchange program b Scholarly research e Other	3	Using the organization's acquisition, accessi	on, and other records	, check any of the f	ollowing that make	significant use of	its		
a ■ Public exhibition d □ can or exchange program b □ Other □ Other □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □									
b Scholarly reasorch e Other c Prevention for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 9 Using the year, did the organization solicit or receive donations of at, historical treasures, or other similar assets to the solicit or received an anount on form 990, Part X, line 21. Yes No. 1a Is the organization an agent, trustee, custodial or other intermediaty for contributions or other assets not included on form 890, Part X, line 21. Amount 10 1a Is the organization and gent, trustee, custodial or other intermediaty for contributions or other assets not included on form 890, Part X, line 21. Amount 10 1a Bedginning balance Amount 10 11 11 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 <t< td=""><td>а</td><td>X Public exhibition</td><td>d</td><td>Loan or exc</td><td>hange program</td><td></td><td></td><td></td><td></td></t<>	а	X Public exhibition	d	Loan or exc	hange program				
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they three 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	b								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purgoes 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 inter than to be maintained as part of the organization's collection? Part IV Forcow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 980, Part X, line 9, or reported an anount on Form 980, PARt X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, PARt X (line 21. Segmining balance Complete if the organization answered "Yes" on Form 980, Part X (line 41. Distributions during the year Id Id Id to organize the answered 'Iss' on Form 980, Part X (line 21. Part V Endowment Funds. Complete if the explanation has been provided on Part XIII Beginning of year balance 26, 396, 540, 22, 351, 878, 22, 521, 050, 22, 105, 188, 222, 193, 784, Car, 550, 22, 714, 456, 468, 488, Net investment earnings, gains, and losses -2, 386, 875, 4, 623, 971, 388, 952, 722, 920, 513, 819, Grants or scholarships Contributions -20, 396, 540, 22, 351, 878, 22, 521, 050, 22, 105, 188, 22, 105, 188, Provide the estimated percentages on the current year end balance (line 19, column (a)) held as: Board designates or qualitation and (line 19, column (a)) held as: Board designates or qualitation and the organization sectored 'Yes' on the organization yes (l) Unrelated organization sectored the organization sectored 'Perture the organization sectored for the organization yes (l) Unrelated organization sectored the organization sectored for the organization yes (l) Unrelated organization yes yes yes yes yes yes yes yes									
5 During the year, did the organization solicit or require donations of art, historical ressures, or other similar assets Image: The organization and the organization solection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Image: The organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, tores, "explain the arrangement in Part XIII and complete the following table: Image: Complete if the organization angent, trustee, custodian or other intermediary for contributions or outpet of the organization angent, trustee, custodian or other intermediary for contributions or outpet of the organization angent, trustee, custodian or other intermediary for contributions or outpet of the organization angent in Part XIII and complete the following table: Amount Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrew or custodial account liability? Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrew or custodial account liability? Image: Complete if the organization answe	4		ollections and explain	how they further th	e organization's exe	empt purpose in F	Part XIII.		
to be sold to raise funds: rather than to be maintained as part of the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Yes X No. Tail Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes No. Tail Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes No. Tail Is the organization include an amount on Form 990, Part X, line 21. Amount To Amount To diditions during the year 1d Int Amount To Int 20 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No Part V Endowment Funds. Complete if the organization naswered "Yes" on Form 990, Part IV, line 10. Int Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Int 532. 7, 650. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188. 22, 105, 188.	5								
Part W 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 (Part XIII and complete the following table: Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Amount Additions during the year Ending balance Id Ending balance If "Image: Part XIII and complete the regarization answered "Yes" on Form 990, Part IV, line 10. If "Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment earnings, gains, and losses 2, 366, 540. 22, 319, 778. 22, 21, 050, 188. 22, 193, 178. 22, 521, 050. 22, 105, 188. Part we balance 23, 186, 875. 4, 623, 971. 388, 952. 722, 920. 513, 813. Grants or scholarships Permanet earnings, gains, and losses 23, 186, 875. 4, 623, 971. <l< td=""><td>•</td><td></td><td></td><td>•</td><td></td><td></td><td>Yes</td><td>X</td><td>No</td></l<>	•			•			Yes	X	No
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 800, Part X2 No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d 1d 1d 1d 1d 1d 1d 2 Distributions during the year 1d 1d 2a Distributions during the year 1d 1d 1d 2a Ostimize and ance 1d 1d 1d <	Par								
1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 390, Part X ///				to in the organizatio					
on Form 990, Part X?	1a			ary for contribution	s or other assets no	t included			
b If "Yes," explain the arrangement in Part XIII and complete the following table:	ia								No
c Beginning balance Id d Additions during the year Id e Distributions during the year Id 2 Distributions during the year If 2 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 nasweed "Yes" on Form 990, Part X, line 10. Image: Check here if the explanation answered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image: Check here if the explanation naswered "Yes" on Form 990, Part XIII. Image:	h								
c Beginning balance ic id d Additions during the year id id e Distributions during the year id id f Ending balance if id id 2a Did the organization include an amount on Form 990, Part X. line 21, for escrow or custodial accountilability? Ves No b ft "yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII in No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. in years back (a) Current year (b) Poir year (c) Two years back (c) Four years back 1a Beginning of year balance iz 2, 135, 27, 550. 2, 105, 188, iz 2, 103, 128, iz 2, 105, 188, iz 2, 103, 139, iz 2, 200, 513, 819, iz 2, 200, 510, 510, 510, 510, 510, 510, 510, 5	U		and complete the lon	owing table.			Amoun	t	
d Additions during the year id e Distributions during the year id if if 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 X, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. (e) Four years back (e) Three years back (e) Four	•	Paginning balance				10	7411041		
e Distributions during the year 1e f Ending balance 1f 20 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 20 Did the organization include an amount on Form 990, Part X, line 10. 1e 1e 1e Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a 26,306,540, 22,31,878, 22,521,050, 22,105,188, 22,133,737, 46,488. 1a Beginning of year balance 26,306,540, 22,31,878, 22,521,050, 22,105,188, 22,133,737, 46,488. 1e,4,488. 1a Contributions 11,532, 7,650, 2,774, 44,488. 1e,6,774, 46,488. 1b Other expenditures for facilities 744,356, 676,959, 560,908, 623,832, 648,856. 1c Administrative expenses 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasiendowment ▶ 25,000									
f Ending balance 17 2a Did the organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability? No b If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII No Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. (a) Current year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 26 (306,540, 22,351,878, 22,521,050, 22,105,188, 22,193,737, 388,952, 722,920, 513,819, 22,193,737, 388,952, 722,920, 513,819, 22,351,878, 22,521,050, 22,105,188, 22,193,737, 388,952, 722,920, 513,819, 468,856, 466,676,959, 560,908, 623,832, 648,856, 446,856, 446,856, 576,959, 560,908, 623,832, 648,856, 540, 22,351,878, 22,521,050, 22,105,188, 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188, 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188, 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188, 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188, 23,186,841, 26,306,540, 22,351,878, 22,521,050, 22,105,188, 24,25,251,050, 22,105,188, 24,25,251,050, 22,105,188, 24,25,251,050, 26,21,050, 96, 56,56,540, 22,351,878, 22,521,050, 22,105,188, 24,25,250,00, 96, 56,540, 22,351,878, 22,551,050, 22,105,188, 24,25,250,00, 96, 56,540, 22,351,878, 22,521,050, 22,105,188, 24,25,250,00,96, 56,540, 22,351,878, 22,551,050, 22,105,188, 24,25,250,00,96, 56,550,550,550,550,550,550,550,550,550,5									
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custocial account lability? Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four year									
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. 1a Beginning of year balance (a) Current year (b) Prior years (c) Two years back (c) Four years back						···· ·			
Part V Endowment Funds. Complete if the organization answered "Ves" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (d) Four years back (d) Four years back (e) Four years backe (f) Four years back		-				• • • • • • • • • • • • • • • • • • • •	L Yes		JINO T
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 26,306,540,22,351,878,22,521,050,22,105,188,22,103,737, 46,488, b Contributions 11,532,7,650,2,784,316,774,46,488, 46,488, c Mit investment earnings, gains, and losses -2,386,875,4,623,971,388,952,722,920,513,819, 722,920,513,819, c Grants or scholarships -2,386,875,4,623,971,388,952,722,920,513,819, -22,251,878,22,521,050,22,9513,819, c Other expenditures for facilities 744,355,676,959,560,908,623,832,648,856, 648,856, f Administrative expenses -2,3166,841,26,306,540,22,351,878,22,521,050,22,105,188, 22,105,188, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasiendowment ▶ _0000_% b Permanent endowment ▶ _25,0000_% - - - y: 0.000_% - - - - b Permanent endowment ▶ _25,0000_% - - - - y: 0.000_% - - - - - - b Permanent endowment ▶ _25,0000_% - - -									
1a Beginning of year balance 26,306,540. 22,351,878. 22,21,050. 22,105,188. 22,193,737. b Contributions 11,532. 7,650. 2,784. 316,774. 46,488. c Net investment earnings, gains, and losses -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities and programs -2,386,875. 4,623,971. 388,952. 722,920. 513,819. g End of year balance -2,386,875. 4,623,971. 388,952. 722,920. 513,819. g End of year balance -2,386,875. 4,623,971. 388,952. 722,920. 513,819. g End of year balance -2 -2 386,951. 4,23,51,878. 22,521,050. 22,105,188. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a a a a a a a a a a a a a a a a a a a a a a a a a a a	1 4							r voare	back
b Contributions 11,532. 7,650. 2,784. 316,774. 46,488. c Net investment earnings, gains, and losses -2,386,875. 4,623,971. 388,952. 722,920. 513,819. d Grants or scholarships - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <									
c Net investment earnings, gains, and losses -2,386,875. 4,623,971. 388,952. 722,920. 513,819. d Grants or scholarships -2,386,875. 4,623,971. 388,952. 722,920. 513,819. e Other expenditures for facilities and programs -2,386,875. 4,623,971. 388,952. 722,920. 513,819. g Chder expenditures for facilities -2,386,875. 4,623,971. 388,952. 722,920. 513,819. g Chder expenditures for facilities									
d Grants or scholarships			-						
e Other expenditures for facilities and programs 744,356. 676,959. 560,908. 623,832. 648,856. f Administrative expenses			-2,380,875.	4,623,971.	388,952.	. 122,9.	20.	513,	819.
and programs 744,356. 676,959. 560,908. 623,832. 648,856. f Administrative expenses 23,186,841. 26,306,540. 22,351,878. 22,521,050. 22,105,188. g End of year balance 23,186,841. 26,306,540. 22,351,878. 22,521,050. 22,105,188. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶									
f Administrative expenses 23,186,841. 26,306,540. 22,351,878. 22,521,050. 22,105,188. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ .0000 % b Permanent endowment ▶ _25,0000 % % % c Term endowment ▶ _25,0000 % % b Permanent endowment ▶ _25,0000 % c Term endowment ▶ _75,0000 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment ▶ _26,000 (i) Unrelated organizations	е	Other expenditures for facilities			5 6 9 9 9 9	500 0		<i></i>	0.5.6
g End of year balance 23,186,841. 26,306,540. 22,351,878. 22,521,050. 22,105,188. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶			744,356.	676,959.	560,908.	. 623,8	32.	648,	856.
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	f	Administrative expenses							
a Board designated or quasi-endowment ▶ .0000 % b Permanent endowment ▶ 25.0000 % c Term endowment ▶ 75.0000 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations 3a(i) x (ii) Related organizations 3a(ii) x 4 Describe in Part XIII the intended uses of the organization's endowment funds. Sa(ii) x 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. (d) Book value 1a Land 1,375,919. 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must egual Form 990, Part X, column (B), line 10c.) 12,132,920. 12,132,920.	g	,				. 22,521,0	50. 22	,105,	188.
b Permanent endowment ▶	2		•	(line 1g, column (a)) held as:				
c Term endowment ▶	а	U	.0000	_%					
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations listed as required on Schedule R? (iii) 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 (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Equipment (e) Cost or 0. (f) Book value (f) Book value (f) Book value (f) Soft or 0. (f) Book value 	b	· · · · · · · · · · · · · · · · · · ·							
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 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. (d) Book value 1a Land 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.	С	Term endowment Term endowment	%						
by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 Buildings c Leasehold improvements d Equipment d Equipment e Other. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) Version (C) Accumulated basis (attempt and the state of th									
(i) Unrelated organizations 3a(i) x (ii) Related organizations 3a(ii) x (ii) Related organizations 3a(ii) x 3a(ii) x 3a(ii) x 3a(ii) x 3a(ii) x 3a(ii) x 3a(ii) x 3b - - - 4 Describe in Part XIII the intended uses of the organization's endowment funds. - - Part VI Land, Buildings, and Equipment. - - Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. - - 1a Land 1,375,919. 1,375,919. - 1a Land 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements - - - d Equipment 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B). line 10c.) 12,132,920.	3a	Are there endowment funds not in the posse	ssion of the organization	tion that are held ar	nd administered for	the organization			
(ii) Related organizations 3a(ii) x (iii) Related organizations 3a(ii) x 3b 1 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b 3b Part VI Land, Buildings, and Equipment. 3b 3b 3b 3b Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value 4b Bosis (other) (c) Accumulated depreciation (d) Book value 1a Land 1,375,919. 1,375,919. 1,375,919. 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920. 12,132,920.		by:						Yes	No
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3c		(i) Unrelated organizations					3a(i)	$ \square$	X
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 1a Land 1,375,919. 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883.		(ii) Related organizations					3a(ii)		х
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 1a Land 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883.	b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Schedule R?			3b		
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 1,375,919. 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 46,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. 840,883.	4			vment funds.					
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land1,375,919.1,375,919.1,375,919.b Buildings25,369,065.15,799,614.9,569,451.c Leasehold improvements6,144,197.5,797,530.346,667.d Equipment840,883.840,883.840,883.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)12,132,920.	Par	t VI Land, Buildings, and Equipm	ient.						
basis (investment) basis (other) depreciation 1a Land 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 4 d Equipment 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920. 12,132,920.		Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part >	K, line 10.	_		
1a Land 1,375,919. 1,375,919. b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. d Equipment 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.		Description of property	(a) Cost or of	her (b) Cost	or other (c)	Accumulated	(d) Boo	k value	е
b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.		-	basis (investm	nent) basis	(other) d	lepreciation			
b Buildings 25,369,065. 15,799,614. 9,569,451. c Leasehold improvements 6,144,197. 5,797,530. 346,667. d Equipment 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.	1a	Land		1	,375,919.		1	,375,	919.
c Leasehold improvements 6,144,197. 5,797,530. 346,667. d Equipment 840,883. 840,883. e Other 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.				25	,369,065.	15,799,614.	9	,569,	451.
d Equipment 6,144,197. 5,797,530. 346,667. e Other 840,883. 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.									
e Other 840,883. 840,883. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,132,920.				6	,144,197.	5,797,530.		346,	667.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						-		840,	883.
				(column (R) line 1	· · ·	•	12		
			gaar on oou, rall/		~~./				

132052 10-28-21

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 STRATEGIES	17,227,804.	END-OF-YEAR MARKET VALUE
(B) MUTUAL WATER COMPANY	75,000.	END-OF-YEAR MARKET VALUE
(C) INVESTMENT IN ZSRS	10,480,436.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must equal Form 000 Part X col (B) line 12)	27 783 240	

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► 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. (Col. (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) ASSETS HELD FOR SALE	20,876,546.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	20,876,546.
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) Enderal income taxos	

(2) LIABILITY UNDER GIFT ANNUITIES	26,356.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	26,356.

Total. (Column (b) must equal Form 390, Fart A, cor. (b) mile 25.)

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 ... X

14580504 146892 721639

Sche	dule D (Form 990) 2021 AMERICAN JEWISH UNIVERSITY		95-1684064 Page 4		
Pa	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemer		Return.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d	·	2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b	<u></u>	4c		
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 18.</i>)		5		
_	rt XIII Supplemental Information.				
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/. lines 1b and 2b: Part V. line 4	: Part X. line 2: Part XI.		
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi		, ·		
PART	III, LINE 1A:				
	'				
THE	UNIVERSITY'S LIBRARY COLLECTION, FINE ART WORKS AND SCULPTURE				
	,				
COLI	ECTION, WHICH WERE ACQUIRED THROUGH CONTRIBUTIONS AND PURCHASES	5, ARE			
	,	,			
NOT	RECOGNIZED AS ASSETS ON THE CONSOLIDATED STATEMENT OF FINANCIAN				
POSI	TION. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES	IN			
	•				
UNRE	STRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED	O OR AS			
TEME	ORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USEI	о то			
PURC	HASE THE ITEMS ARE RESTRICTED BY DONORS. CONTRIBUTED COLLECTION	J TTEMS			
ARE	NOT REFLECTED ON THE CONSOLIDATED FINANCIAL STATEMENTS. PROCEEN	DS FROM			
DEAC	DEACCESSIONS OR INSURANCE RECOVERIES ARE REFLECTED AS INCREASES IN THE				

31

APPROPRIATE NET ASSET CLASSES. EACH OF THE ITEMS IS CATALOGED, PRESERVED,

AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING

132054 10-28-21

Schedule D (Form 990) 2021

Part XIII Supplemental Information (continued)

THEIR CONDITION ARE PERFORMED CONTINUOUSLY. THE COLLECTIONS ARE SUBJECT TO

A POLICY THAT REQUIRES DEACCESSIONING PROCEEDS TO BE USED TO ACQUIRE OTHER

ITEMS FOR COLLECTIONS.

PART III, LINE 4:

AMERICAN JEWISH UNIVERSITY HOLDS SEVERAL ART PIECES AND SCULPTURES THAT

ARE PLACED ALL THROUGHOUT THE UNIVERSITY CAMPUS. THE DISPLAYS OF ART WORK

COHERE WITH OUR MISSION FOR SERVING THE COMMUNITY AND PROVIDE A VALUABLE

AND NECESSARY AESTHETIC COMPONENT TO THE EDUCATIONAL GOALS OF AMERICAN

JEWISH UNIVERSITY.

PART V, LINE 4:

THE UNIVERSITY'S ENDOWMENTS ARE ESTABLISHED DONOR-RESTRICTED GIFTS FOR A

VARIETY OF PURPOSES.

PART X, LINE 2:

THE UNIVERSITY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE AND THE CORRESPONDING CALIFORNIA PROVISIONS.

AS OF JUNE 30, 2022 AND 2021, THE UNIVERSITY HAD NO UNCERTAIN TAX

POSITIONS REQUIRING ACCRUAL.

Schedule D (Form 990) 2021

132055 10-28-21

(Form 990)

Schools

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.	2021
Attach to Form 990 or Form 990-EZ.	Open to Public
Go to www.irs.gov/Form990 for the latest information.	Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

	AMERICAN JEWISH UNIVERSITY	95-16	58406	4			
Pa	rt 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?						
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brock						
	catalogues, and other written communications with the public dealing with student admissions, programs, and		2	х			
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet						
	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the						
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the	ie					
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the gene						
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	х			
	SEE PART II						
4	Does the organization maintain the following?						
а	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	х			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminat	tory basis?	4b	Х			
с	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	,					
	with student admissions, programs, and scholarships?		4c	х			
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	х			
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.						
5	Does the organization discriminate by race in any way with respect to:						
а	Students' rights or privileges?		5a		х		
	Admissions policies?		5b		Х		
	Employment of faculty or administrative staff?		5c		Х		
	Scholarships or other financial assistance?		5d		Х		
	Educational policies?		5e		Х		
	Use of facilities?		5f		Х		
	Athletic programs?		5g		X		
	Other extracurricular activities?		5h		Х		
	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?	<u> </u>	6a	х			
	Has the organization's right to such aid ever been revoked or suspended?		6b		х		
	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		7	х			
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule	E (Foi) 2021		

Schedule E (Form 990) 2021

132061 10-18-21

Chedule E (Form 990) 2021 AMERICAN JEWISH UNIVERSITY Part II Supplemental Information. Provide the explanations required by Part L lines 3, 4d, 5h, 6h, and 7, as	95-1684064	Page
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.		
INE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:		
HE UNIVERSITY HAS A DOCUMENTED RACIAL NONDISCRIMINATION		
OLICY IN ITS CATALOGUE AND FINANCIAL AID POLICIES AND		
DHERES TO THIS POLICY AT ALL TIMES. THE UNIVERSITY		
DVERTISES FROM TIME TO TIME USING NEWSPAPERS AND BROCHURES		
ND ALWAYS PRINTS ITS RACIAL NONDISCRIMINATION POLICY ON		
HESE ADVERTISEMENTS.		
INE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:		
HE AMERICAN JEWISH UNIVERSITY RECEIVES STUDENT FINANCIAL AID AWARDS FROM		
HE U.S. DEPARTMENT OF EDUCATION AND THE CALIFORNIA STATE DEPARTMENT OF		
DUCATION.		

14580504 146892 721639

F0111 990, Fait 1	v, iii e 140.				
			ds to substantiate the amount of its grar		
the grantees' eligibility f	or the grants or a	assistance, and t	the selection criteria used to award the g	grants or assistance?	Yes 🗌 No
	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and other assistance outs	ide the
United States.					
3 Activities per Region. (T (a) Region	he following Part (b) Number of		an be duplicated if additional space is ne (d) Activities conducted in the region	eeded.) (e) If activity listed in (d)	(f) Total
	offices	emplovees.	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to	describe specific type	for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
		in the region			
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS		7,742,000.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	INVESTMENTS		74,000.
0 - Outbackel	0	0			7 816 000
3 a Subtotal	0				7,816,000.
b Total from continuation	0	0			0.
sheets to Part I					0.
c Totals (add lines 3a and 3b)	0	0			7,816,000.
LHA For Paperwork Reduct		1		Schedule E	(Form 990) 2021
				Scheddle F	1 JIII JJUJ 202 I

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE F (Form 990)

AMERICAN JEWISH UNIVERSITY

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

L

132071 12-20-21

14580504 146892 721639

Statement of Activities Outside the United States

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

Attach to Form 990.

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



Employer identification number

95-1684064

AMERICAN JEWISH UNIVERSITY

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

Schedule F (Form 990) 2021

AMERICAN JEWISH UNIVERSITY Schedule F (Form 990) 2021 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.

(h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region cash disbursement recipients cash grant noncash noncash assistance assistance

Schedule F (Form 990) 2021

95-1684064

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No 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	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see</i> <i>Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2021

	95-1684064	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting m		
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); an (estimated number of recipients), as applicable. Also complete this part to provide any additional information		
PART IV, LINE 1:		
FORM 926 FOREIGN FILING		
THE ORGANIZATION DOES NOT OWN 10% OR GREATER TOTAL VOTING POWER OR		
VALUE OF THE FOREIGN CORPORATIONS AND THEREFORE DOES NOT HAVE A FORM		
926 FILING REQUIREMENT.		
PART IV, LINE 3:		
FORM 5471 FOREIGN FILING		
THE ORGANIZATION DOES NOT OWN A 10% OR GREATER INTEREST IN THE FOREIGN		
CORPORATIONS AND THEREFORE DOES NOT HAVE A FORM 5471 FILING		
REQUIREMENT.		
PART IV, LINE 5:		
FORM 8865 FOREIGN FILING		
THE ORGANIZATION DOES NOT OWN A 10% OR GREATER INTEREST IN THE FOREIGN		
PARTNERSHIPS AND THEREFORE DOES NOT HAVE A FORM 8865 FILING		
REQUIREMENT.		

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	raisi	ing or Gaming A	ctiv	vities	OMB No. 1545-0047
(Form 990)	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.							2021
Department of the Treasury			Open to Public Inspection					
Internal Revenue Service Name of the organization	n 🕨 🕨	Employer ide	entification number					
		EWISH UNIVERSITY					95-168406	
	sing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	tions I email solicitations itations olicitations on have a written o ted in Form 990, P 0 highest paid indiv	f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover ising ing of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have ci or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (Amount paid or retained by) fundraiser sted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total	ich the ergenizatio		ontrib	▶ .	or boo boon potified	it io	overat from re	eistration
or licensing.	ich the organizatio	n is registered or licensed to solicit o		LIONS	or has been notified			
	eduction Act Not	ice see the Instructions for Form (00 ~~	000 5	7		Sabadul	e G (Form 990) 2021
	Sauction ACL NOL	ice, see the Instructions for Form 9	50 01	530-E			Schedule	5 G (1 0111 330) 202 1

132081 10-21-21

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-FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
0			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	563,792.			563,792.
	2	Less: Contributions	485,392.			485,392
	3	Gross income (line 1 minus line 2)	78,400.			78,400
	4	Cash prizes				
	5	Noncash prizes				
oenses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	75,810.			75,810
ā	8	Entertainment				
_ I	~	Other direct expenses	90,780.			90,780
	9		·	•		1.6.6 . 50.0
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		•	· · · · · ·
_	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	n 9 in column (d) ine 3, column (d)		►	,
_	10	Net income summary. Add lines 4 through Net income summary. Subtract line 10 from li Gaming. Complete if the organization	n 9 in column (d) ine 3, column (d)		►	,
Pa	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	n 9 in column (d) ine 3, column (d)		►	-88,190
Pa	10 11	Net income summary. Add lines 4 through Net income summary. Subtract line 10 from li Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	166,590 -88,190 (d) Total gaming (add col. (a) through col. (c)
Revenue	10 <u>11</u> rt I	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	-88,190
Bevenue	10 11 rt I 1 2	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	-88,190
_	10 11 rt I 1 2	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	-88,190
Bevenue	10 <u>11</u> rt I 2 3	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from line Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	-88,190
Bevenue	10 <u>11</u> rt I 2 3 4	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from line Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	- 88,190

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

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

a Is the organization licensed to conduct gaming activities in each of these states? _____ Yes b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
 Image: Second Se

132082 10-21-21

Schedule G (Form 990) 2021

No

No

Sch	edule G (Form 990) 2021	AMERICAN JEWISH UNIV	VERSITY	95-16	584064	Page 3
11	Does the organization conduct ga	aming activities with nonmer	nbers?		Yes	No
	Is the organization a grantor, ben	eficiary or trustee of a trust, o	or a member of a partnership or other entity forme	d		
					Yes	No
	Indicate the percentage of gamin					
					13a	%
					13b	%
14	Enter the name and address of the	e person who prepares the c	organization's gaming/special events books and re	cords:		
	Name					
	Name					
	Address					
15a	Does the organization have a cor	tract with a third party from	whom the organization receives gaming revenue?		Yes	No No
b			organization > \$ and the	amount		
	of gaming revenue retained by th					
C	If "Yes," enter name and address	of the third party:				
	Name					
	-					
	Address 🕨					
16	Gaming manager information:					
	Namo 🕨					
	Gaming manager compensation	▶ \$				
	Description of services provided	▶				
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions:					
a	Is the organization required unde	r state law to make charitable	e distributions from the gaming proceeds to			
	retain the state gaming license?				Yes	🗌 No
b		•	be distributed to other exempt organizations or sp	ent in the		
Pa	organization's own exempt activitient of the second		<u></u> Ճnations required by Part I, line 2b, columns (iii) and	d (v): and Pad		0h 10h
			y additional information. See instructions.	u (v), anu ran	. 111, 111105 9,	30, 100,
1320	33 10-21-21		40	Schedu	lle G (Form	990) 2021
			42			

Schedule (G (Form 990) AMERICAN SEWISH UNIVERSITY	95-1664064	Page 4
Part IV	Supplemental Information (continued)		
	(on and od)		
		0	
		Schedule G (F	orm 990)
132084 11-18-	21		

43

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

14580504 146892 721639

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury	•	-	Attach to For	m 990.			Open to Public		
Internal Revenue Service		Go to www.i	rs.gov/Form990 fo	r the latest inforn	nation.		Inspection		
Name of the organization	ISH UNIVERSITY						Employer identification number 95-1684064		
Part I General Information on Grants	and Assistance								
1 Does the organization maintain records									
criteria used to award the grants or as 2 Describe in Part IV the organization's p		oring the use of grant	funds in the United	l Statos					
Part II Grants and Other Assistance to					anization answered "Y	/es" on Form 990, Parl	: IV, line 21, for any		
recipient that received more that	1 \$5,000. Part II can	be duplicated if addit	ional space is need	ed.					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
AMERICAN SOCIETY FOR TECHNION - ISRAEL INSTITUTE OF TECHNOLOGY IN - 55 EAST 59TH STREET - NEW YORK,									
NY 10022	13-0434195	501(C)(3)	100,000.	0.			EDUCATIONAL ASSISTANCE		
ADAT ARI EL 12020 BURBANK BOULEVARD VALLEY VILLAGE, CA 91607	23-7366318	501(C)(3)	50,000.	0.			EDUCATIONAL ASSISTANCE		
JEWISH FREE LOAN ASSOCIATION 6505 WILSHIRE BLVD, SUITE 715 LOS ANGELES, CA 90048	95-1691014	501(C)(3)	10,000.	0.			EDUCATIONAL ASSISTANCE		
THE SCHECHTER INSTITUTES INC BOX #3566, PO BOX 8500 PHILADEPHIA, PA 19178	22-3342043	501(C)(3)	6,800.	0.			EDUCATIONAL ASSISTANCE		
2 Enter total number of section 501(c)(3)	and government or	ganizations listed in th	ne line 1 table	1	1	1	4.		
3 Enter total number of other organization							0.		

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

Schedule I (Form 990) 2021

Page 2

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 noncash assistance
CHOLARSHIPS / FINANCIAL AID	83	1,878,687.	0.		

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

PART I, LINE 2:

SCHOLARSHIPS ARE AWARDED TO THE STUDENTS BASED ON DIFFERENT CRITERIA. THE

UNIVERSITY FOLLOWS ALL POLICIES AND REGULATIONS OF FEDERAL AID PROGRAMS

WHEN IT AWARDS FINANCIAL AID TO STUDENTS. THE UNIVERSITY REQUIRES THE

GRANTEE ORGANIZATIONS TO SUBMIT REPORTS TO SUPPORT THE USE OF GRANT FUNDS.

SCH I PART II:

GRANTS ARE MADE FROM A DONOR-DESIGNATED FUND TO PROMOTE JEWISH

EDUCATION AND OTHER CHARITABLE PURPOSES COMPATIBLE WITH THE MISSION OF

THE AJU AS DIRECTED BY A PHILANTHROPIC PROGRAM CONSULTANT AND SUBJECT

TO AJU'S REVIEW TO DETERMINE THAT THE GRANTS ARE CONSISTENT WITH AJU'S

MISSION.

Schedule I (Form 990)

14580504 146892 721639

SC	HEDULE J	Compe	ensation Information	1	OMB No. 1	1545-004	47	
(Fo	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest				2021			
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.				20		I	
Depa	tment of the Treasury		Attach to Form 990.		Open to		ic	
	al Revenue Service		m990 for instructions and the latest information.		Inspe			
Nam	e of the organization		T m 1/	Employer ide		on nui	nber	
Da	rt I Question	AMERICAN JEWISH UNIVERS s Regarding Compensation	111	95-16	84064			
Га		s negariting compensation				Vee		
10	Chock the appropri	ato box(op) if the organization provided	any of the following to or for a person listed on Form	000		Yes	No	
1a			relevant information regarding these items.	990,				
	First-class or d		X Housing allowance or residence for perso	معبياهم				
	Travel for com		Payments for business use of personal re-					
		ation and gross-up payments	Health or social club dues or initiation fee					
		spending account	Personal services (such as maid, chauffel					
b	If any of the boxes	on line 1a are checked, did the organiza	tion follow a written policy regarding payment or					
~	•				1b	х		
2			sing or allowing expenses incurred by all directors,					
			r, regarding the items checked on line 1a?		2	х		
	,							
3	Indicate which, if a	ny, of the following the organization use	d to establish the compensation of the organization's	i				
	CEO/Executive Dire	ector. Check all that apply. Do not check	any boxes for methods used by a related organization	on to				
	establish compensation	ation of the CEO/Executive Director, but	explain in Part III.					
	X Compensation	n committee	Written employment contract					
	X Independent of	compensation consultant	X Compensation survey or study					
		ther organizations	X Approval by the board or compensation c	ommittee				
4	During the year, did	l any person listed on Form 990, Part VI	I, Section A, line 1a, with respect to the filing					
	organization or a re	lated organization:						
а	Receive a severance	e payment or change-of-control paymer	nt?		. 4a	X	<u> </u>	
b	Participate in or rec	eive payment from a supplemental non-	qualified retirement plan?		. 4 b		X	
С	Participate in or rec	eive payment from an equity-based con	npensation arrangement?		. 4c		X	
	If "Yes" to any of lir	nes 4a-c, list the persons and provide th	e applicable amounts for each item in Part III.					
_		(3), 501(c)(4), and 501(c)(29) organiza	-					
5			, did the organization pay or accrue any compensatio	n				
	contingent on the r				_		v	
					<u>5a</u>		X X	
a					5b			
~		or 5b, describe in Part III.	did the exercitation new exercite any companyatio					
6	contingent on the r		, did the organization pay or accrue any compensatio	n				
•	-	-			6a		x	
							x	
D		or 6b, describe in Part III.			00			
7			, did the organization provide any nonfixed payments					
'	-		, did the organization provide any nonlined payments		7		x	
8			accrued pursuant to a contract that was subject to th					
5					8		x	
9			table presumption procedure described in					
5					9			
LHA		eduction Act Notice, see the Instruction			le J (Forn	n 990)	2021	

132111 11-02-21

95-1684064

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.

	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JEFFREY HERBST	(i)	435,643.	0.	0.	0.	22,061.	457,704.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ROBERT WEXLER	(i)	186,236.	0.	0.	0.	94,137.	280,373.	0.
PRESIDENT EMERITUS/PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CATHERINE S SCHNEIDER	(i)	268,786.	0.	0.	0.	1,669.	270,455.	0.
VP OF ADVANCEMENT/CDO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ADRIAN BREITFELD BEDER	(i)	247,464.	0.	0.	0.	7,314.	254,778.	0.
VP OF FINANCE & ADMIN/CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SHERRE HIRSCH	(i)	86,958.	0.	0.	0.	154,894.	241,852.	0.
CHIEF INNOVATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) BRADLEY S ARTSON	(i)	146,668.	0.	0.	0.	77,096.	223,764.	0.
DEAN OF ZIEGLER SCHOOL	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DAVID A GROSHOFF	(i)	205,017.	0.	0.	0.	3,226.	208,243.	0.
PROFESSOR OF BUSINESS AND LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ADAM R GREENWALD	(i)	97,481.	0.	0.	0.	65,197.	162,678.	0.
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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.

PART I, LINE 1A:

ROBERT WEXLER, PRESIDENT EMERITUS, BRADLEY ARTSON, VP-ZSRS, SHERRE HIRSCH,

CHIEF INNVATION OFFICER AND ADAM GREENWALD, DIRECTOR OF THE MILLER INTRO TO

JUDAISM PROGRAM RECEIVED A PARSONAGE ALLOWANCE. PARSONAGE IS EXEMPT FROM

TAXABLE WAGES AND IS INCLUDED UNDER THE NONTAXABLE BENEFITS SECTION.

PART I, LINE 3:

AS OF AUGUST 29, 2017, THE UNIVERSITY ENTERED INTO AN AGREEMENT WITH ROBERT

WEXLER, THE FORMER PRESIDENT OF THE UNIVERSITY, TO COMPENSATE HIM FOR

STEPPING DOWN FROM HIS POSITION EFFECTIVE JUNE 30, 2018. THE UNIVERSITY

WILL MAKE POST-EMPLOYMENT PAYMENTS TO HIM EACH PAY PERIOD BEGINNING JULY

1,2018 AND ENDING JUNE 30, 2021. EACH PAYMENT WILL APPROXIMATE HIS SALARY

PLUS BENEFITS. THE UNIVERSITY HAS NO LIABILITY AS OF JUNE 30, 2022 AS IT

FULLY SATISFIED THE AGREEMENT AS OF JUNE 30, 2021.

Schedule J (Form 990) 2021

SCHEDULE I	
------------	--

(Form 990)

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

OME	3 No.	154	5-004	47
	0	n	9	4

	<u> </u>	2	
Open	To	Publ	ic

Department of the Treasury Internal Revenue Service

Internal Revenue Service	F Go to	www.irs.gov/Fo	orm99	U for in	istructions and the	latest information.			In	spect	ion	
Name of the organization							Em	oloyer	[,] ident	ificati	on nui	nber
	AMERICAN JEWI	SH UNIVERSIT	Ϋ́				9	5-168	4064			
Part I Excess Be	nefit Transacti	ions (section 5	01(c)(3), secti	on 501(c)(4), and sec	ction 501(c)(29) orga	nizatio	ns on	ly).			
					rt IV, line 25a or 25b							
1	(b)	Relationship bet			ified					(d)	Corre	cted?
(a) Name of disqualified	d person	person and o			(c	c) Description of tran	Isactio	n			es	No
										<u> </u>		
										-		
										-		
										-		
										-		
										+		
2 Enter the amount of ta	ix incurred by the c	organization man	agers	or disq	ualified persons duri	ng the year under						
section 4958								▶ \$				
3 Enter the amount of ta	x, if any, on line 2,	above, reimburs	sed by	the org	ganization			▶ \$				
	.,											
Part II Loans to a	nd/or From Int	terested Per	sons.									
Complete if th	e organization ans	wered "Yes" on	Form 9	990-EZ,	Part V, line 38a or F	orm 990, Part IV, lin	e 26; d	or if th	e orga	nizatic	n	
reported an ar	nount on Form 990), Part X, line 5, (- i									
(a) Name of	(b) Relationship			oan to or n the	(e) Original	(f) Balance due		In	(h) Ap by bo	proved ard or	(1) **	ritten
interested person	with organization	l of loan		zation?	principal amount		defa	ult?	comm	nittee?	agree	ment?
			То	From			Yes	No	Yes	No	Yes	No
ADRIAN BREITFEL	OFFICER	PERSONAL		Х	40,000.	19,317.		Х	X		Х	

Total ..

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990) 2021

SEE PART V FOR CONTINUATIONS

19,317.

▶ \$

Schedule L (F	orm 990) 202'
---------------	---------	--------

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (d) Description of (c) Amount of organization's person and the organization transaction transaction revenues? Yes No Part V Supplemental Information. Provide additional information for responses to questions on Schedule L (see instructions). SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: ADRIAN BREITFELD

Schedule L (Form 990) 2021

132132 11-02-21

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

ſ

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.

2021 **Open to Public** . Inspection

Name of the	organization
-------------	--------------

Employer	i	deı	nt	ti1	fic	Cá	at	ic	on	number

95	-1	68	40	64

	AMERICAN JEWISH UN	IVERSITY			95-1	684064		
Par	t 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 de noncash contribu		•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications	Х		3.	ESTIMATE			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	5	356,638.	AVERAGE HIGH/LOW	QUOTE		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (INSTRUMENTS)	Х	2	2.	ESTIMATE			
26	Other ()							
27	Other ()							
28	Other ► ()							
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement			0	
							Yes	No
30a	During the year, did the organization receive by	, contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	I contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31	х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?		•	· · ·		32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is cheo	ked,			
	describe in Part II.							

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

Schedule M (Form 990) 2021

132141 11-17-21

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, LINE 30B:

Part II

THE AMOUNT REPRESENTS THE NUMBER OF ACTUAL CONTIBUTIONS RECEIVED AND

NOT THE NUMBER OF ITEMS RECEIVED FOR EACH CONTRIBUTION.

Schedule M (Form 990) 2021

132142 11-17-21

Page **2**

SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047
(Form 990)	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.		2021
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Public Inspection
Name of the organization	AMERICAN JEWISH UNIVERSITY		identification number 84064
FORM 990, PART III	, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
AMERICAN JEWISH UN	IVERSITY ADVANCES AND ELEVATES THE JEWISH JOURNEY OF		
INDIVIDUALS, ORGAN	IZATIONS AND OUR COMMUNITY THROUGH EXCELLENCE IN		
SCHOLARSHIP, TEACH	ING, ENGAGED CONVERSATION, AND OUTREACH. AMERICAN		
JEWISH UNIVERSITY	(AJU) IS A THRIVING CENTER OF JEWISH RESOURCES AND		
TALENT THAT SERVES	THE JEWISH COMMUNITY OF THE TWENTYFIRST CENTURY. A		
PORTAL FOR JEWISH	BELONGING, AJU EQUIPS STUDENTS, FACULTY, CAMPERS, AND		
LEARNERS OF ALL AG	ES WITH THE TOOLS TO CREATE THE IDEAS, BUILD THE		
STRUCTURES, AND DE	VELOP THE PROGRAMS TO ADVANCE JEWISH WISDOM AND		
ELEVATE JEWISH LIV	ING.		
FORM 990, PART III	, LINE 4D, OTHER PROGRAM SERVICES:		
WHIZIN CENTER:			
WHIZIN CENTER IS D	EDICATED TO CREATING PROGRAMS TO EXPAND THE BOUNDS OF		
INTELLECT, PASSION	S, CREATIVITY, SKILLS, SENSE OF CONNECTION AND		
COMMUNITY. THROUGH	CLASSES, SEMINARS, LECTURES, WORKSHOPS, TOURS,		
EXCITING GUEST SPE	AKERS AND THRILLING PERFORMANCES, THE WHIZIN CENTER		
OFFERS PROVOCATIVE	PROGRAMMING FOR EVERY INTEREST. SERVING OUR		
COMMUNITY IS OUR M	ISSION, PASSION AND PRIVILEGE. OUR PROGRAMS ENRICH SO		
MANY LIVES, MEET S	O MANY NEEDS, AND TOUCH SO MANY DIFFERENT COMMUNITIES		
WITHIN OUR CITY.			
THE PLATT AND BORS	TEIN GALLERIES:		
PRESENT EXHIBITION	S AND EDUCATIONAL PROGRAMS IN THE VISUAL ARTS.		
SELECTED JEWISH AN	D NON JEWISH ARTISTS BRING INSIGHT INTO CURRENT		
TRENDS AS WELL AS	AN HISTORICAL PERSPECTIVE TO COMMUNITY LIFE. THE		
LHA For Paperwork Ro	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Sched	dule O (Form 990) 2021

Name of the organization AMERICAN JEWISH UNIVERSITY		Employer identification number 95–1684064
GALLERIES PROVIDE A VALUABLE AND NECESSARY AESTHETI	C COMPONENT TO THE	
EDUCATIONAL GOALS OF AMERICAN JEWISH UNIVERSITY.		
SUNDAYS IN THE PARK:		
SUNDAYS IN THE PARK IS A MONTHLY PROGRAM WHERE THE	BRANDEIS-BARDIN	
CAMPUS IS OPENED TO THE COMMUNITY TO EXPERIENCE ALL	OF THE WONDERFUL	
EDUCATIONAL OPPORTUNITIES WE OFFER. HIGHLIGHTS INCL	UDE NATURE	
PROGRAMMING SUCH AS HIKES AND AQUAPONICS, ANIMAL ED	UCATION	
HIGHLIGHTINGTHE CAMPUS' REPTILES, GOATS, CHICKENS A	ND FISH,	
HORSEBACKRIDING, OUTDOOR COOKING, ART, DANCE, SPORT	S, CAMPUS TOURS AND	
MUCH MORE.		
MIKVEH:		
THE AJU MIKVEH IS A BATH USED FOR THE PURPOSE OF AC	HIEVING RITUAL	
PURITY IN JUDAISM. THE UNIVERSITY'S MIKVEH OFFERS T	HE OPPORTUNITIES FOR	
MONTHLY PURITY VISITS, CONVERSIONS, VISITS PRIOR TO	RELIGIOUS	
CEREMONIES SUCH AS WEDDINGS AND EDUCATIONAL OPPORTU	NITIES AROUND	
THEPURPOSE AND ASPECTS OF THE MIKVEH.		
EXPENSES \$ 1,834,178. INCLUDING GRANTS OF \$ 269,9	00. REVENUE \$ 486,817.	
FORM 990, PART VI, SECTION A, LINE 1A:		
THE EXECUTIVE COMMITTEE INCLUDES THE BOARD CHAIR ,	PRESIDENT, SECRETARY,	
TREASURER, VICE-CHAIRS, VICE PRESDIENT OF FINANCE,		
BOARD MEMBERS.	· · · · · ·	
IN GENERAL, THE EXECUTIVE COMMITTEE SHALL:		
A. SERVE AS A VEHICLE FOR LONG RANGE PLANNING FOR T	HE CORPORATION;	
B. PROVIDE A SOUNDING BOARD AND SOURCE OF COUNSEL F	OR THE PRESIDENT;	
132212 11-11-21	55	Schedule O (Form 990) 202
80504 146892 721639	2021.05080 AMERICAN JEW	ISH UNIVERSIT 72163

14580504 146892 721639

2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1

Name of the organization AMERICAN JEWISH UNIVERSITY	Employer identification number 95-1684064
C. ACT ON BEHALF OF THE BOARD ON ALL DAY-TO-DAY FINANCIAL MATTERS;	
D. UNDER CIRCUMSTANCES WHERE, IN THE DISCRETION OF THE PRESIDENT OR THE	
CHAIRPERSON, IT IS NOT POSSIBLE OR PRACTICAL TO CONVENE AN IMMEDIATE	
MEETING OF A QUORUM OF THE BOARD, TO APPROVE EXPENDITURES OR CONTRACTS, OR	
SERIES OF EXPENDITURES OR CONTRACTS, WHICH, IN THE AGGREGATE, INVOLVE	
UNBUDGETED EXPENDITURES OF NOT MORE THAN \$500,000;	
FORM 990, PART VI, SECTION A, LINE 2:	
THE FOLLOWING BOARD MEMBERS HAVE A FAMILY RELATIONSHIP:	
FRANCIS S. MAAS AND VIRGINIA MAAS ARE HUSBAND AND WIFE	
FORM 990, PART VI, SECTION A, LINE 4:	
AMENDED BYLAWS AS ADOPTED OCTOBER 18, 2021 ADDED ADDITIONAL POWERS, AS	
FOLLOWS -	
UNDER CIRCUMSTANCES WHERE, IN THE DISCRETION OF THE PRESIDENT OR THE	
CHAIRPERSON, IT IS NOT POSSIBLE OR PRACTICAL TO CONVENE AN IMMEDIATE	
MEETING OF A QUORUM OF THE BOARD OR OF THE EXECUTIVE COMMITTEE, THE	
PRESIDENT, AND IN THE ABSENCE OF THE PRESIDENT, THE CHAIRPERSON, SHALL HAVE	
THE POWER TO APPROVE EXPENDITURES OR CONTRACTS, OR SERIES OF EXPENDITURES	
OR CONTRACTS, WHICH, IN THE AGGREGATE, INVOLVE UNBUDGETED EXPENDITURES OF	
NOT MORE THAN \$100,000.	
FORM 990, PART VI, SECTION B, LINE 11B:	
CONTROLLER AND CFO REVIEW THE 990 FORM ONCE READY. ALL BOARD MEMBERS	
RECEIVE ACCESS TO A COPY OF THE 990 BEFORE IT IS FILED. IN ADDITION, THE	
AUDIT COMMITTEE REVIEWS AND APPROVES THE 990 BEFORE FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	

132212 11-11-21

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page 2
Name of the organization AMERICAN JEWISH UNIVERSITY	Employer identification number 95-1684064
THE ORGANIZATION REQUIRES THE OFFICERS/DIRECTORS TO COMPLETE ANNUAL	
STATEMENTS TO INFORM THE ORGANIZATION OF ANY CONFLICT OF INTERESTS THAT MAY	
EXIST. THE VICE PRESIDENT MONITORS THE COMPLIANCE OF THE POLICY. THE	
ADMINISTRATIVE ASSISTANT OF THE PRESIDENT KEEPS TRACK OF ALL ANNUAL	
STATEMENTS RECEIVED.	
FORM 990, PART VI, SECTION B, LINE 15:	
COMPENSATION FOR THE PRESIDENT AND OFFICERS IS REVIEWED BY THE EXECUTIVE	
COMPENSATION COMMITTEE. INDEPENDENT CONSULTING FIRM PARTICIPATES IN THE	
EXECUTIVE COMPENSATION COMMITTEE MEETING, PERFORMS RESEARCHES AND PROVIDES	
RECOMMEDATION TO THE COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST	
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON THEIR WEBSITE	
AND UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BAD DEBT EXPENSE -112,461.	
132212 11-11-21	Schedule O (Form 990) 2021

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R (Form 990)

AMERICAN JEWISH UNIVERSITY

Employer identification number 95-1684064

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
AJU BBI HOLDINGS LLC					
15600 MULHOLLAND DRIVE					AMERICAN JEWISH
LOS ANGELES, CA 90077	TITLE HOLDING	CALIFORNIA	٥.	10,484,856.	UNIVERSITY
AJU PEPPERTREE HOLDINGS LLC					
15600 MULHOLLAND DRIVE	1				AMERICAN JEWISH
LOS ANGELES, CA 90077	TITLE HOLDING	CALIFORNIA	0.	1,770,000.	UNIVERSITY
	-				

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 Part II 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	(f) Direct controlling entity	cont	(g) n 512(b)(13) ontrolled entity?	
				501(c)(3))		Yes	No	
JEWISH TELEVISION NETWORK - 95-3556298	TO PROVIDE CULTURAL AND							
15600 MULHOLLAND DRIVE	EDUCATIONAL INFORMATION TO				AMERICAN JEWISH			
LOS ANGELES, CA 90077	THE JEWISH COMMUNITY	CALIFORNIA	501(C)(3)	LINE 7	UNIVERSITY	х		
UNIVERSITY OF JUDAISM FOUNDATION -								
95-3637239, 15600 MULHOLLAND DRIVE, LOS	TO SUPPORT AMERICAN JEWISH				AMERICAN JEWISH			
ANGELES, CA 90077	UNIVERSITY	CALIFORNIA	501(C)(3)	PF	UNIVERSITY	х		
EJ GINDI UNIVERSITY OF JUDAISM FOUNDATION -								
95-2744661, 15600 MULHOLLAND DRIVE, LOS	TO SUPPORT AMERICAN JEWISH				AMERICAN JEWISH			
ANGELES, CA 90077	UNIVERSITY	CALIFORNIA	501(C)(3)	LINE 12A, I	UNIVERSITY	х		
THE BRANDEIS-BARDIN INSTITUTE - 95-2030208	TO PROVIDE CULTURAL AND							
15600 MULHOLLAND DRIVE	EDUCATIONAL INFORMATION TO				AMERICAN JEWISH			
LOS ANGELES, CA 90077	THE JEWISH COMMUNITY	CALIFORNIA	501(C)(3)	LINE 10	UNIVERSITY	x		

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

Schedule R (Form 990) 2021

OMB No. 1545-0047

21 20 Open to Public Inspection 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.

		, <u>, , , , , , , , , , , , , , , , , , </u>	1						r	-	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yesl	lo
ZSRS FUND LLC - 20-2587256			AMERICAN								
15760 VENTURA BLVD, SUITE 801	REAL ESTATE		JEWISH								
ENCINO, CA 91436	INVESTMENTS	CA	UNIVERSITY	EXCLUDED	1,220,444.	269,063.		x	160,678.	x	100%
	1										
	-										
	1										
						1	L	L			1

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) (c) Primary activity (state or foreign		(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	512(cont	tion b)(13) rolled tity?
		country)		,				Yes	No
BRANDEIS MUTUAL WATER CO - 95-2565383	1								
15600 MULHOLLAND DRIVE			AJU BBI						
LOS ANGELES, CA 90077	WATER FACILITY	CA	HOLDINGS LLC	C CORP	0.	75,000.	100%	х	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
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	1a		2
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)	_		
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1 h		
Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		+
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
Sharing of paid employees with related organization(s)	-	X	╉
Reimbursement paid to related organization(s) for expenses	<u>1p</u>		
Reimbursement paid by related organization(s) for expenses			╉
Other transfer of cash or property to related organization(s)	<u>1r</u>		
s Other transfer of cash or property from related organization(s)	1s	X	

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ZSRS LLC	S	850,000.	BOOK VALUE
<u>(2)</u>			
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2021 AMERICAN JEWISH UNIVERSITY

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners se 501(c)(3 orgs.? Yes No	(g) Share of end-of-year assets	n) opor- nate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managin partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2021

AMERICAN JEWISH UNIVERSITY

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

SCH R, PART III, COL (I):

THE PARTNERSHIP REPORTS DEBT FINANCED RENTAL INCOME FROM PROPERTIES

HELD IN BOX 20V OF THE K-1. THE FOOTNOTES TO THE K-1 REPORT THAT

QUALIFYING ORGANIZATIONS HAVE A DIFFERENT AMOUNT OF UNRELATED BUSINESS

TAXABLE INCOME, WHICH THE ORGANIZATION REPORTS AS UNRELATED BUSINESS

INCOME ON THE FORM 990-T.

Schedule R (Form 990) 2021

132165 11-17-21

62 2021.05080 AMERICAN JEWISH UNIVERSIT 721639_1