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C Name of organization

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

D Employer identification number

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2008

OMB No 1545-0047

Open to Public Inspection

Address chan Name chan Initial return Termination Amended re	ange use IRS	STEVENS INSTITUTE OF TECHNOLOGY			22-1487354	<u> </u>
Initial returi  Terminatior	label or	Doing Business As			E Telephone nui	
_ Terminatior _	type. See				(201) 216-8	761
_	Instruc-	Number and street (or P O box if mail is not or CASTLE POINT ON HUDSON	delivered to street addres	ss) Room/suite	G Gross receipts	\$ \$ 314,154,751
Amended 14		1770				
_		City or town, state or country, and ZIP + 4 HOBOKEN, NJ 07030				
Application	pending					
		ne and address of Principal Officer JRAVACHE			s a group return 1	
		E POINT ON HUDSON		affilia	tes?	ΓYes <b>Γ</b> Nο
	•	(EN,NJ 07030		H(b) Are all	affiliates included	1?
Tax-exem <sub>l</sub>	pt status 🔽 501(c)	(3) ◀ (Insert no)	7	(If"N	o," attach a lıst	See instructions )
Web site	e: ► WWW STEVEN	IS EDU		H(c) Grou	p Exemption Nun	nber <b>►</b>
Type of orga	anization 🔽 Corporat	on trust association other F		<b>L</b> Year of Fo	rmation 1870 M S	itate of legal domicile NJ
Part I	Summary					
		e organization's mission or most signific	ant activities			
_   ,	THE ORGANIZAT	ION'S PRIMARY EXEMPT PURPOSE IS	TO PROVIDE EDU	CATIONAL S	SERVICES TO II	NDIVIDUALS IN
• I		JNDERGRADUATE, MASTERS AND/OF	R DOCTORATE DEG	REE, AND TO	PROVIDE CON	ITINUING
	EDUCATION COL	JRSES				
2	Check this hov -	ıf the organizatıon discontinued its oper	ations or disposed of	f more than ?	5% of its assets	
	,	n the organization discontinued its oper nembers of the governing body (Part VI,				21
4		dent voting members of the governing b				20
		aployees (Part V, line 2a)		,		2,903
6		lunteers (estimate if necessary)			5 <u> </u>	160
7a		ted business revenue from Part VIII, lin		_	7a	91,364
		ness taxable income from Form 990-T,		•	76 <u> </u>	-47,939
				Prio	or Year	Current Year
8	Contributions and	grants (Part VIII, line 1h)			6,730,839	8,589,622
<u> 9</u>		revenue (Part VIII, line 2g)			148,901,933	169,688,518
9 10		ne (Part VIII, column (A), lines 3, 4, an		3,428,046	-7,097,979	
Ë   11		art VIII, column (A), lines 5, 6d, 8c, 9c		9,114,001	3,428,384	
12	Total revenue—a	dd lines 8 through 11 (must equal Part \	/III, column (A), line			
	12)				168,174,819	174,608,545
13		r amounts paid (Part IX, column (A), lin			29,090,874	32,906,588
14		r for members (Part IX, column (A), line				0
g   15	Salaries, other co	empensation, employee benefits (Part IX	, column (A), lines 5	-	82,279,021	92,762,097
9 6 16a 16a	•	raising fees (Part IX, column (A), line 1:	1e)			98,790
ž b	(Total fundraising ex	penses, Part IX, column (D), line 25 6,170,420	)			
<sup>⊔</sup>   <sub>17</sub>		Part IX, column (A), lines 11a-11d, 11			58,609,512	60,697,955
18		add lines 13–17 (must equal Part IX, lii			169,979,407	186,465,430
19		penses Subtract line 18 from line 12	,		-1,804,588	-11,856,885
				Beginni	ng of Year	End of Year
; 🁸	Total assets (Par	t X, line 16)			319,364,738	290,632,387
နှစ် ရေး 20	•	Part X, line 26)			131,069,558	132,580,012
20 21	Total liabilities (F	,	0		188,295,180	158,052,375
20 21 21 22	•	d balances. Subtract line 21 from line 21			,,	,,_
_	Net assets or fun	d balances Subtract line 21 from line 2				
Part II	Net assets or fun  Signature Blo  Under penalties of pe					
Part III lease	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true,	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (o		d on all informat 2010-		
Part II lease ign	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true, of  ****** Signature of office	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (o		d on all informat I	ion of which prepare	
Part II lease ign	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true, or  ****** Signature of office  RANDY L GREENE	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (o		d on all informat 2010-	ion of which prepare	
21	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true, of  ****** Signature of office	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (or CFO/VICE PRESIDENT OF FINANCE e and title	ther than officer) is based	d on all informat 2010- Date	ion of which prepare	r has any knowledge
Part II lease ign ere	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true, or  ****** Signature of office  RANDY L GREENE Type or print nam  Preparer's	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (o	ther than officer) is based	d on all informat 2010-	ion of which prepare	r has any knowledge
Part II lease ign ere	Net assets or fun  Signature Blo  Under penalties of pe and belief, it is true, of  ******  Signature of office  RANDY L GREENE Type or print name	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (or CFO/VICE PRESIDENT OF FINANCE e and title	ther than officer) is based	d on all informat 2010- Date Check if	ion of which prepare	r has any knowledge
Part II lease ign ere aid reparer's	Net assets or fun  Signature Blo  Under penalties of period and belief, it is true, or signature of office and belief, it is true, or signature of office and belief, it is true, or signature of office and belief.  RANDY L GREENE Type or print name.  Preparer's signature	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (or CFO/VICE PRESIDENT OF FINANCE e and title	ther than officer) is based	d on all informat  2010-  Date  Check if elf-	ion of which prepare	r has any knowledge
Part II lease ign ere	Net assets or fun  Signature Blo  Under penalties of period and belief, it is true, or signature of office and belief, it is true, or signature of office and belief, it is true, or signature of office and belief.  RANDY L GREENE Type or print name of preparer's signature	rjury, I declare that I have examined this return, correct, and complete Declaration of preparer (or CFO/VICE PRESIDENT OF FINANCE e and title	ther than officer) is based	d on all informat  2010-  Date  Check if elf-	Preparer's PTIN (S	r has any knowledge

May the IRS discuss this return with the preparer shown above? (See instructions)  $\,$  .

Cat No 11282Y

## Part III Statement of Program Service Accomplishments (See the instructions.)

<b>1</b> See Ad	Briefly describe the organization's mission dditional Data Table
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting or make significant changes in how it conducts any program services?
4	If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses  Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 118,028,481 including grants of \$ 32,906,588) (Revenue \$ 123,741,775)  INSTRUCTION STEVENS IS ONE OF THE LEADING TECHNOLOGICAL UNIVERSITIES IN THE WORLD INSTRUCTION IS PROVIDED TO APPROXIMATELY 2,234  UNDERGRADUATE STUDENTS AND 3,700 GRADUATE STUDENTS STEVENS IS DEDICATED TO EDUCATING STUDENTS TO HAVE THE BREADTH AND DEPTH REQUIRED  TO LEAD IN THEIR CHOSEN PROFESSIONS IN AN ENVIRONMENT REPLETE WITH THE EXCITEMENT OF NEW KNOWLEDGE AND TECHNOLOGY CREATION INHERENT  IN THIS CONCEPT IS THE REQUIREMENT THAT THE EDUCATIONAL STRUCTURE AND RESEARCH EFFORT BE MULTIDISCIPLINARY AND INTERDISCIPLINARY STEVENS  OFFERS MORE THAN 30 UNDERGRADUTE MAJORS, INCLUDING CUTTING-EDGE PROGRAMS IN ENGINEERING, THE SCIENCES, COMPUTER SCIENCE, BUSINESS AND  THE HUMANITITES THE GRADUATE OFFERINGS INCLUDE 40 MASTERS AND 17 DOCTORAL DEGREES WHICH EDUCATE PROFESSIONALS TO ADVANCE IN INDUSTRIES  INCREASINGLY INFLUENCED BY TECHNOLOGY AND ENABLE SCHOLARS TO EXPLORE THE FRONTIERS OF THEIR DISCIPLINES
4b	(Code ) (Expenses \$ 22,533,382 including grants of \$ ) (Revenue \$ 18,856,943 )  STUDENT LIFE STEVENS INSTITUTE MAINTAINS A 55 ACRE CAMPUS IN HOBOKEN, NEW JERSEY AND PROVIDES STUDENTS WITH ON CAMPUS AND OFF CAMPUS HOUSING AS WELL AS SEVERAL DINING FACILITIES CLOSE INTERACTIONS BETWEEN PROFESSORS AND STUDENTS ALLOW FOR GREATER ACADEMIC AND SOCIAL DEVELOPMENT THERE ARE OVER 120 CLUBS, ORGANIZATIONS AND VARSITY SPORTS THAT OFFER THE STUDENTS AMPLE OPPORTUNITY TO PARTICIPATE, BROADEN AND ENRICH THEIR STUDENT LIFE THE S C WILLIAMS LIBRARY SERVES AS THE INSTITUTE'S INTELLECTUAL, CULTURAL AND SOCIAL CENTER CAPITALIZING ON A RESOURCEFUL STAFF AND NEW TECHNOLOGIES TO FOSTER A STIMULATING ENVIRONMENT FOR TEACHING, LEARNING, AND SCIENTIFIC DISCOVERY
4c	(Code ) (Expenses \$ 21,366,853 including grants of \$ ) (Revenue \$ 27,089,800)  RESEARCH THE RESEARCH ENTERPRISE INCLUDES ACADEMIC RESEARCH, NATIONAL RESEARCH CENTERS, AND CROSS-DISCIPLINARY RESEARCH INITIATIVES, WITH SUPPORTING ORGANIZATIONS AND INFRASTRUCTURE CREATIVE AND ENTREPRENEURIAL RESEARCH IS AN INTEGRAL PART OF THE STEVENS MISSION THE INSTITUTE HAS BEEN RECOGNIZED BY BOTH THE U S DEPARTMENT OF DEFENSE AND THE DEPARTMENT OF HOMELAND SECURITY AS A NATIONAL CENTER OF EXCELLENCE IN THE AREAS OF SYSTEMS ENGINEERING, PORT SECURITY AND INFORMATION ASSURANCE THE FUNDAMENTAL PRINCIPLES GOVERNING THE RESEARCH ENVIRONMENT ARE INNOVATION, CREATIVITY AND ENTREPRENEURSHIP
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses \$ 161,928,716 Must equal Part IX Line 25 column (B)

Form **990** (2008)

Part IV	Checkli	st of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part 🕬	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$ .	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	20-		N.o.
	28a		No
Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		No
	collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance	e				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	401			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t	o ven	dors and reportable			
	gaming (gambling) winnings to prize winners?			<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return	2a	2,903			
b	If at least one is reported in 2a, did the organization file all required federal employn  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this	nent t	ax returns?	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin					
	return?	• •		3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in School.			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities ac account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country DR					
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Re Financial Accounts.	port o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp Tax Shelter Transaction?	t Entit	ry Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
ь	If "Yes," did the organization include with every solicitation an express statement th					
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbutı	on of \$75 or	7a	Yes	
ь	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	d?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal proper	rty for	which it was required to			
	file Form 8282?			7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?	prem	nums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person	onal b	enefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization fi					
	required?			7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a sexcess business holdings at any time during the			8		
9	year?					_ <b></b>
				92		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person			9a 9b		
b		•		90		
10	Section 501(c)(7) organizations. Enter	ــــــــــــــــــــــــــــــــــــــ	I			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

#### Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and M	lanagement	

			Yes	No					
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.								
1a	Enter the number of voting members of the governing body 1a 21								
Ь	Enter the number of voting members that are independent 1b 20								
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		Νο					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a material diversion of the organization's assets?								
6	Does the organization have members or stockholders?								
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?								
Ь	<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	the governing body?	8a	Yes						
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes						
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νο					
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b							
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes						
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Νo					

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		Νo
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	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website  $\overline{\mbox{\em \colored}}$  another's website  $\overline{\mbox{\em \colored}}$  upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

RANDY GREENE CASTLE POINT ON HUDSON HOBOKEN, NJ 07030 (201) 216-8761

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	(B) Average hours per week	<b>(C)</b> Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	(E) Reportable compensation from the organizations (W-2/1099MISC)  (E) Reportable compensation from related organizations (W-2/1099-MISC)	Reportable compensation from the organization (W-	Estimated amount of other compensation from the organization and related organizations			
							-			

### Part VII Continued

		<b>(C)</b> Position (check all that apply)							(F)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Отпов	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
				$\vdash$						
1b Total							<b>&gt;</b>	6,641,692	2 (	1,673,945

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶197

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

### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	( <b>B</b> ) Description of services	(C) Compensation
SODEXHO OPERATIONS BOX 83049 WOBURN, MA 018131049	FOOD SRVC MANAGEMENT	7,116,311
TECHNICAL BUILDING SERVICES 1 PARK AVENUE NEW YORK, NY 10016	MAINTENANCE	1,783,923
DONNELLY CONSTRUCTION 26 NORTH CENTER STREET ORANGE, NJ 07050	CONSTRUCTION	1,123,401
GRANT THORNTON LLP 666 THIRD AVENUE NEW YORK, NY 10017	AUDIT/CONSULTING	666,862
WINDELS MARX LANE MITTENDORF 120 ALBANY STREET NEW BRUNSWICK, NJ 08901	LEGAL SERVICES	404,293
2 Total number of independent contractors (including those in 1) from the organization	. ,	19

## Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1a					
nts nts	ь	Membership dues					
gra	c	<b>1b</b> Fundraising events	52,924				
Contributions, gifts, grants and other similar amounts	`	1c	·				
je jar	d	Related organizations1d					
ns, sim	e	Government grants (contributions) <b>1e</b>	853,236				
utio er:	f	All other contributions, gifts, grants, and similar amounts not included above	7,683,462				
흔들		1f					
팔	g	Noncash contributions included in lines 1a-1f \$					
O m	h	Total (Add lines 1a-1f)		8,589,622			
			Business Code				
anı	2a	TUITION & FEES	611,600	127,826,298	127,826,298		
эме	ь	RESEARCH GRANTS	541,700	24,995,793	24,995,793		
a Ea	с	ROOM AND BOARD	611,710	10,355,968	10,355,968		
7.4G	d	STUDENT DINING	611,710	6,510,459	6,510,459		
33	e						
ranı	f	All other program service revenue					
Program Service Revenue	g	Total. Add lines 2a-2f					
		<b>&gt;</b> \$ 169,688,518					
	3	Investment income (including divi	· •	4.040.070		0.530	1.040.405
		other similar amounts)	▶	1,949,978		9,573	1,940,405
	4	Income from investment of tax-exempt b	ond proceeds	68,165			68,165
	5	Royalties		0			
		(ı) Real	(11) Personal				
	6a	Gross Rents 568,975					
	ь	Less rental expenses					
	С	Rental income 568,975 or (loss)					
	d	Net rental income or (loss)		568,975		16,964	552,011
		(ı) Securities	(II) O ther				
	7a	Gross amount 129,156,904 from sales of					
		assets other than inventory					
	ь	Less cost or 138,273,026					
		other basis and sales expenses					
	С	Gain or (loss) -9,116,122		0.446.422			0.446.423
	d	Net gain or (loss)	. ▶	-9,116,122			-9,116,122
	8a	Gross income from fundraising					
		events (not including \$ 27,896					
шe		of contributions reported on line					
≺		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
Re		\$15,000 a	52,924				
Other Revenue	b	Less direct expensesb	53,036				
₹	С	Net income or (loss) from fundrais	ıng events ►	-25,140			-25,140
	9a	Gross income from gaming					
		activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000					
	ь	Less direct expensesb					
	С	Net income or (loss) from gaming	activities	0			
	10-	Connection	<b>▶</b>				
	10a	Gross sales of inventory, less returns and allowances					
		а	1,825,833				
	b	Less cost of goods sold b					500 500
	С	Net income or (loss) from sales of Miscellaneous Revenue		605,689		3,043	602,646
	11a		Business Code 611,710	815,852		61,784	754,068
	ь	OTHER AUXILIARY REVENUE	722,210	161,846		31,704	161,846
	c	DINING SERVICES REC CENTER FEES	713,940	110,043			110,043
			,	1,191,119			1,191,119
	d e	All other revenue  Total. Add lines 11a-11d					,
	_		\$ 2,278,860				
	12	<b>Total Revenue.</b> Add lines 1h, 2g, 38c,	3, 4, 5, 6d, 7d,	174,608,545	169,688,518	91,364	-3,760,959
	]	9c, 10c, and 11e	. ▶				
							Form <b>990</b> (2008)

### Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgalised by the section 501(c)(3) and 501(c)(4) orgalised by the section 501(c)(4) organizations must complete column (A) but are not reference to the section of the se				
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	32,894,588	32,894,588		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	12,000	12,000		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,656,779	5,658,262	732,246	266,271
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	71,993,829	61,194,755		2,879,753
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,096,262	3,481,823	450,589	163,850
9	Other employee benefits	5,886,751	5,003,738	647,543	235,470
10	Payroll taxes	4,128,476	3,509,205	454,132	165,139
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	583,105	495,639	64,142	23,324
c	Accounting	1,180,264	1,003,224	129,829	47,211
d	Lobbying	289,183	245,806	31,810	11,567
е	Professional fundraising See Part IV, line 17	98,790			98,790
f	Investment management fees	935,040		935,040	
g	Other	5,551,127	4,718,458	610,624	222,045
12	Advertising and promotion	346,272	294,331	38,090	13,851
13	Office expenses	3,363,067	2,858,607	369,937	134,523
14	Information technology	2,594,860	2,205,631	285,435	103,794
15	Royalties	0			
16	Occupancy	10,002,701	8,502,296	1,100,297	400,108
17	Travel	4,428,618	3,764,325	487,148	177,145
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	17,085	14,523	1,879	683
20	Interest	3,340,518	2,839,440	367,457	133,621
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	7,229,264	6,144,874	795,219	289,171
23 24	Insurance	884,325	751,676	97,276	35,373
	grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	DINING ROOM FOOD PURCHASES	5,041,564	4,285,329	554,572	201,663
ь	RESEARCH CONTRACTS	4,187,218	3,559,135	460,594	167,489
c	EQUIPMENT RENTAL	2,725,539	2,316,708	299,809	109,022
d	LABORATORY SUPPLIES	1,875,197	1,593,917	206,272	75,008
e	TELEPHONE	699,552	594,619	76,951	27,982
f	All other expenses	5,423,456	3,985,807	1,250,082	187,567
25	Total functional expenses. Add lines 1 through 24f	186,465,430	161,928,716	18,366,294	6,170,420
26	Joint Costs. Check I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				<b>000</b> (2009)

Part X	Balance	Sheet

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				61,379	1	95,485
	2	Savings and temporary cash investments	13,499,636	2	31,424,304			
	3	Pledges and grants receivable, net				4,770,463	3	4,011,550
	4	Accounts receivable, net				19,479,166	4	22,571,033
	5	Receivables from current and former officers, directors, truster other related parties Complete Part II of Schedule L			loyees or	862,687	5	784,324
	6	Receivables from other disqualified persons (as defined under persons described in section 4958(c)(3)(B) Complete Part II of					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use				209,438	8	296,976
20	9	Prepaid expenses and deferred charges				48,628	9	811,966
Assets	10a	Land, buildings, and equipment cost basis	<sub>10a</sub>	1	220,720,761			
-4	b	Less accumulated depreciation Complete Part VI of			, ,			
		Schedule D	10b		90,286,378	131,039,236	<b>10</b> c	130,434,383
	11	Investments—publicly traded securities			•	61,498,195	11	55,762,801
	12	Investments—other securities See Part IV, line 11 $\it Complete Schedule D$	Part VI	I of		77,660,194	12	34,497,727
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D .			13			
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule	e			10,235,716		9,941,838
		D		15				
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)				319,364,738	16	290,632,387
	17	Accounts payable and accrued expenses .		14,741,095	17	13,569,206		
	18	Grants payable				0.544.054	18	2.517.000
	19	Deferred revenue				6,541,651	19	8,517,229
Ø	20	Tax-exempt bond liabilities	•			80,095,721	20	79,592,355
Œje	21	Escrow account liability Complete Part IV of Schedule D		•			21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					1	
		persons Complete Part II of Schedule L				10 105 010	22	12 112 222
	23	Secured mortgages and notes payable to unrelated third partie	es .	•		12,485,913	23	13,412,800
	24	Unsecured notes and loans payable					24	17 100 100
	25	Other liabilities Complete Part X of Schedule D		17,205,178	25	17,488,422		
	26	Total liabilities. Add lines 17 through 25				131,069,558	26	132,580,012
ce s		Organizations that follow SFAS 117, check here ▶ ▽ and conthrough 29, and lines 33 and 34.	nplete	lines ?	27			
Balance	27	Unrestricted net assets				69,899,372	27	15,004,948
<u>е</u>	28	Temporarily restricted net assets				12,388,652	28	43,196,468
Fund	29	Permanently restricted net assets		106,007,156	29	99,850,959		
Fu		Organizations that do not follow SFAS 117, check here ► □ a	and cor	nplet	е			
9		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds					30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
	32	Retained earnings, endowment, accumulated income, or other		100 227 177	32	150 555 555		
Net	33	Total net assets or fund balances				188,295,180	33	158,052,375
	34	Total liabilities and net assets/fund balances	•			319,364,738	34	290,632,387
Pa	rt XI	Financial Statements and Reporting						

Dart VI	Einancial	Statements	and D	oporting
7. 1 4 2 . 1 2	FINANCIAL	Statements	ann R	emmetiliki.

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

### **Public Charity Status and Public Support**

(Form 990 or 990EZ)

**SCHEDULE A** 

Department of the Treasury Internal Revenue Service

Name of the organization

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

STEVE	NS INS	TITUTE OF TEC	HNOLOGY							_	
Do		I Reason for Public Charity Status (to be completed by all organizations							-1487354		
	rt I			ation because it is (Please					111Sti uct	10115)	
1	/ ga	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>									
2	,  -	•		•			Section 1	., (()(1)(	A )(1).		
3	,	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)									
4	<u>'</u>	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)									
4	ı	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the									
_	_	hospital's name, city, and state  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
5	ļ				university	y owned o	roperated	by a gove	ernmentai	unit desc	ribed in
_	_			(Complete Part II )			-1: 170/	/L.\/d\/A\/	/X		
6	<u> </u>	•	· -	overnment or governmental			-				
7	1			ally receives a substantial p <b>o)(1)(A)(vi)</b> (Complete Par		support fro	om a gover	rnmentai t	init or fron	n the gene	тат ривпс
8	$\vdash$		-	ed in <b>Section 170(b)(1)(A)</b>	•	nnlete Pari	+ II )				
9	<u></u>		•	ally receives (1) more than		•	•	ontribution	ıs. membe	rship fees	and gross
-	•	_		ated to its exempt functions					•		, <u> </u>
		•		estment income and unrelate	-				•		
				on after June 30, 1975 See						.,	
10	$\vdash$		_	and operated exclusively to			•		•	e instruc	tions )
11	<u></u>			and operated exclusively fo							
	'		•	orted organizations describe		, ,			,		
				type of supporting organiza					h	_	
	_	а Г⊤	• •				nally Integ		d		III - Other
e	ı	•		rtify that the organization is			•			•	
		section 50		agers and other than one or	more pubi	icly suppo	orted organ	nizations (	uescribed	in section	1509(a)(1) or
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organization,
		check this									
g				as the organization accepted	d any gift (	or contrib	utıon from	any of the	!		
		following pe		r indirectly controls, either a	alone or to	aether wi	th nersons	describe	d in (ii)		Yes No
			•	ng body of the the supported		_	роло от		~ ( <i>)</i>	11g	
			· -	erson described in (i) above	_					11g(	
			•	ty of a person described in (		nove?				11g(	
h		. ,		nation about the organizatio			supports			[9(	/
					<b>3</b>	,					
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of
	Supp	supported (described on lines 1 - 9 organization in the organiza				nızatıon	organiz	atıon ın	support?		
	O rgan	nization		above or IRC section	col (i)			) of your	col (i) o		
	(See Instructio		(See Instructions))	your go docur	-	supp	orty	In the	US?		
					Yes	No	Yes	No	Yes	No	1
					103	110	165	110	1.03	110	

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		·					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	monutation of Dublic Compant Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)					
	Facts and Circumstances Test					

Schedule A (Form 990 or 990-EZ) 2008

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

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

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

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

	ction 501(c)(4), (5), or (6) organi me of the organization			Employer iden	tification number
	VENS INSTITUTE OF TECHNOLOGY				
ar	t I-A To be completed b	22-1487354 n <b>501(c) and section</b>	527		
		e the instructions for Schedule			
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	tıcal campaıgn act	tivities in Part IV	
2	Political expenditures				\$
3	Volunteer hours				
Par	t I-B To be completed I for Schedule C for d	oy all organizations exempetails.)	t under sectio	<b>n 501(c)(3).</b> (See the	instructions
1	Enter the amount of any excis	e tax incurred by the organization u	nder section 4955	5	\$
2	Enter the amount of any excis	e tax incurred by organization mana	agers under section	n 4955	\$
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this year	٠,	┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
Par		by all organizations exempts for Schedule C for details.)	t under section	n 501(c), except sect	ion 501(c)(3).
1	Enter the amount directly exp	ended by the filing organization for s	section 527 exemp	pt function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contrib	uted to other orga	nızatıons for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add lin	es 1 and 2 and ent	ter here and on Form	\$
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the amount political contributions receive	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly deliver action committee (PAC) If additior	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
For F	Paperwork Reduction Act Notice	e, see the instructions for Form 990	. Cat No 5	00845 <b>Schedule C (</b>	Form 990 or 990-l

	(election under sec	organizations exempt under section 501( tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns—  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is:  20% of the amount on line 1e  \$100,000 plus 15% of the excess over \$500,000  \$175,000 plus 10% of the excess over \$1,000,000  \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	<b>(e)</b> Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line d, column (e))								
f	Grassroots lobbying expenditures								

1100010 0 (1	51111 55 61 55 6 EE, E666		i age
art II-B	To be completed by organizations exempt under section 501(c)(3) that I	nave NOT file	ed Form
	5768 (election under section 501(h)). (See the instructions for Schedule C fo	r details.)	
		(a)	(b)

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		281,18	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo		
i	Other activities If "Yes," describe in Part IV		Νo		
j	Total lines 1c through			281,18	
2a	1) Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		l No l		
c	The state of the s		ŀ		
			l No		

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

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

Part III-B
To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	4.4	
	expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation					
LOBBYING ACTIVITIES		The President may on occasion meet with legislative staff members while in Washington on business. The vast majority the Institute's lobbying efforts are through registered lobby organizations. For state and federal lobbying efforts three firm are used.					

1 \$

Part IV Supplemental Information									
Ident if ier	Return Reference	Explanation							

Schedule C (Form 990 or 990EZ) 2008

**b** Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Intructions for Form 990

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

#### **SCHEDULE D** (Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Internal Revenue Service Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY

							22-1487			
Pa	organizations Maintaining Donor A			Othe	r Simi	lar Fun	ds or A	ccoun	<b>ts.</b> Comple	ete if the
	organization answered "Yes" to Form 99	90, Part IV, line (a) Don		visad	funds		(b) Fu	nds and	l other accou	ınts
	Total number at end of year	(4) 5011		V15Cu	Tullus		(5) 1 4	nus unu	Tother deco	41105
	Aggregate Contributions to (during year)									
	Aggregate Grants from (during year)									
	Aggregate value at end of year									
	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	_					advised		☐ Yes	┌ No
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber impermissible private benefit?			_	-		ay be		☐ Yes	┌ No
Ī	t II Conservation Easements. Complete	ıf the organiza	ation	ansv	vered "	Yes" to F	orm 990	), Part	IV. line 7.	
	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat	organization (che	ck all	that a	apply) servatio		storically	ımporta	intly land are	ea
	Preservation of open space									
	Complete lines 2a-2d if the organization held a qual on the last day of the tax year	lified conservatio	n con	tribut	tion in th	e form of	a conserv	ation e	asement	
	,							Held a	at the End of	the Ye
	Total number of conservation easements						2a			
	Total acreage restricted by conservation easement	ts					2b			
	Number of conservation easements on a certified h	listoric structure	ıncluc	ded ır	n (a)		2c			
	Number of conservation easements included in (c)	acquired after 8/	/17/06	6			2d			
	Number of conservation easements modified, transfe the taxable year ►	erred, released, e	extingi	uıshe	d, or ter	mınated b	y the org	anızatıo	n during	
	Number of states where property subject to conserv	ation easement i	ıs loca	ated	•					
	Does the organization have a written policy regardin enforcement of the conservation easements it holds		onitori	ıng, ır	nspectio	n, violatio	ons, and		☐ Yes	┌ No
	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforc	ing ea	sem	ents dur	ng the ye	ar ►			
	A mount of expenses incurred in monitoring, inspecti	ıng, and enforcınç	g ease	ement	ts during	the year	<b>►</b> \$			
	Does each conservation easement reported on line 2 170(h)(4)(B)(I) and 170(h)(4)(B)(II)?	2(d) above satisf	fy the	requi	rements	ofsectio	n		☐ Yes	┌ No
	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to th					•		•	
li	Complete if the organization answered	"Yes" to Form	990,	Part	IV, line	8.				
	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fil	d for public exhibi	ition, e	educa	ation or r	esearch i	n furthera			e,
	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition							•	
	(i) Revenues included in Form 990, Part VIII, line 1	1						<b>&gt;</b> \$		
	(ii) Assets included in Form 990, Part X						ı	<b>►</b> \$	3	96,405
	If the organization received or held works of art, hist following amounts required to be reported under SFA					sets for fı		7	vide the	
	Revenues included in Form 990, Part VIII, line 1						ı	<b>-</b> \$		
	, , , , , , , , , , , , , , , , , , , ,							•		

Cat No 52283D

Part	•••• Organizations Maintaining Co	llections of Art,	, His	tori	cal 1	reas	ures, or O	<u>the</u>	r Simila	r Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	ne foll	lowing	; that a	ire a significa	nt u	ise of its co	ollection	1	
а	Public exhibition		d	Γ	Loar	norex	change progra	ams				
b	Scholarly research		e	Γ	O th	er						
c	✓ Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n hov	w the	v furtl	ner the	organization	's ex	cemnt nurn	ose in		
•	Part XIV	meetions and explai	11 110	, the	y iditi	ici tiic	organization	3 67	cempt purp	030 111		
5	During the year, did the organization solicit			,					nılar	_	Yes	√ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an ar	Arrangements.	Com	plete	e ıf th	ne org			ered "Ye			,
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?						or other ass	etsı	not	Г	Yes	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following tabl	е				_		ı			
							_			A mou	ınt	
С	Beginning balance						_	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?							Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV	1										
Pai	rt V Endowment Funds. Complete											
		(a)Current Year	(E	)Prior	Year	(c)	Two Years Back	(d)	Three Years	Back   <b>(e</b>	)Four Y	ears Back
1a	Beginning of year balance	155,485,695										
Ь	Contributions	788,435										
С	Investment earnings or losses	-24,764,095										
d	Grants or scholarships	2,387,779										
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	129,122,256										
2	Provide the estimated percentage of the yea	r end balance held a	s									
а	Board designated or quasi-endowment 🕨	27 982 %										
ь	Permanent endowment F 72 018 %											
с	Term endowment ▶											
3a	Are there endowment funds not in the posse	ssion of the organiza	ition	thata	are he	ld and	admınıstered	lfor	the			
	organization by										Yes	No
	(i) unrelated organizations				•			٠		3a(i)	Yes	
_	(ii) related organizations							•		3a(ii)	Yes	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•				•		•		3b		<u> </u>
4 Dar	Describe in Part XIV the intended uses of the tVI Investments—Land, Building:					000 [	Dart V June	10				
rai	Tilvestillents—Land, Building	s, and Equipmen	IL. J				T '					
	Description of investment					r other stment)	(b)Cost or other		(c) Deprec	ation	( <b>d</b> ) Bo	ok value
1a	Land						1,763,	196	•			1,763,196
Ь	Buildings						182,796,	864	77,83	30,863	10	4,966,001
c I	Leasehold improvements											
d I	Equipment						20,027,	765	12,4	55,515		7,572,250
e (	Other						16,132,					6,132,936
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colum	ın (B,	), line	10(c)	1.)			►			0,434,383
	· · · · · · · · · · · · · · · · · · ·	·							Sched	ule D (F	orm 9	90) 200

Part VII Investments—Other Securities.	See Form 990, Part X, line 12.	
<ul><li>(a) Description of security or cateory (including name of security)</li></ul>	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		Joseph Charles Transcription
Closely-held equity interests		
Other ALTERNATIVE INVESTMENTS	28,454,578	F
Other TRUSTS HELD BY OTHERS	1,811,342	F
Other TRUSTS	4,034,452	F
Other OTHER	197,355	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12	34,497,727	
Part VIII Investments—Program Related.	See Form 990, Part X, line 13.	
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 Part IX Other Assets. See Form 990, Part >		
·	scription	(b) Book value
DEPOSITS WITH BOND TRUSTEES	•	6,997,014
IMPERATORE ARTWORK		396,405
BOND RESERVES		1,163,584
OTHER ASSETS		960,307
PERKINS LOANS CASH		424,528
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) l		
Part X Other Liabilities. See Form 990, Pa		
(a) Description of Liability	(b) A mount	
Federal Income Taxes		
ACCRUED POSTRETIREMENT BENEFIT	4,426,195	
ANNUITIES PAYABLE	2,387,251	
CONDITIONAL ASSET RETIREMENT	5,543,920	
REFUNDABLE ADVANCES	5,131,056	
Total (Column (h) chould asset France 2000, Bart V, and (B) 1, and	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25	<i>)</i> ▶ 17,488,422	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	174,608,545
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	186,465,430
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-11,856,885
4	Net unrealized gains (losses) on investments	4	-17,494,969
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-890,951
9	Total adjustments (net) Add lines 4 - 8	9	-18,385,920
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-30,242,805
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	eturn
1	Total revenue, gains, and other support per audited financial		123,271,948
	statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-17,494,969
3	Subtract line 2e from line 1	3	140,766,917
4	A mounts 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 935,040		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	33,841,628
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	174,608,545
	Reconciliation of Expenses per Audited Financial Statements With Expenses	Г	
1	Total expenses and losses per audited financial statements	1	152,623,802
2	Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities		
a		1 1	
b	Prior year adjustments	1 1	
d		1 1	
		_ 	
e		3	152622802
3	Subtract line <b>2e</b> from line <b>1</b>	-	152,623,802
4			
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 935,040  Other (Describe in Part XIV) 4b 32,906,588	- I	
b		1 1	22 041 620
C E	Add lines <b>4a</b> and <b>4b</b>	4c	33,841,628
5 Dat	rt XIV Supplemental Information	5	186,465,430

Ident if ier	Return Reference	Explanation
COLLECTIONS OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS	FORM 990, SCHEDULE D, PART III	LINE 4 - Various pieces of art that have been donated are on Public Display for the enrichment and enjoyment of visitors, faculty, staff and students
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V	LINE 4 - Support scholarships for undergraduate and graduate students, provide financial assistance for program and services conducted by the Institute
INCOME TAXES	FORM 990, SCHEDULE D, PART X	In July 2006, the FASB issued FASB Interpretation Number 48, "Accounting for Uncertainty in Income Taxes," ("FIN48") an Interpretation of SFAS No 109, "Accounting for Income Taxes" The Institute adopted the provisions of FIN48 on July 1, 2007 Previously, the Institute had accounted for tax contingencies in accordance SFAS No 5, "Accounting for Contingencies" As required by FIN48, the Institute recognizes the financial statement benefit of a tax position only after determining that the relevant tax authority would more likely than not sustain the position following an audit For tax positions meeting the more-likely-than-not threshold, the amount recognized in the financial statements is the largest benefit that has a greater than 50 percent likelihood of being realized upon ultimate settlement with the relevant tax authority. At July 1, 2007, the Institute applied FIN48 to all tax positions for which the statute of limitations remained open and determined there were no material unrecognized tax benefits as of that date. In addition, there have been no material changes in unrecognized benefits since July 1, 2007. As a result, the adoption of FIN48 did not have an effect on the Institute's consolidated financial statements.
	FORM 990, SCHEDULE D, PART XI, LINE 8	CHANGE IN FAS 158 \$(1,047,010) PV ON ANNUITIES PAYABLE (412,442) OTHER 568,501 TOTAL (890,951) ==========
OTHER REVENUE INCLUDED ON RETURN BUT NOT ON BOOKS	FORM 990, SCHEDULE D, PART XII, LINE 4	SCHOLARSHIPS NET ON F/S \$32,906,588
OTHER EXPENSES INCLUDED ON RETURN BUT NOT ON BOOKS	FORM 990, SCHEDULE D, PART XIII, LINE 4	SCHOLARSHIPS NET ON F/S \$32,906,588

### OMB No 1545-0047

2008

Open to Public Inspection

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 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? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain Yes THE STEVENS INSTITUTE OF TECHNOLOGY NONDISCRIMINATORY POLICY IS DISTRIBUTED ANNUALLY AS WELL AS PRINTED IN STUDENT MATERIALS AND ON ITS WEBSITE 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **h** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 🧈

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," attach an explanation

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As Filed Data -

DLN: 93493134005400

OMB No 1545-0047

2008

(Form 990)

SCHEDULE F

Department of the Treasury

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Open to Public Inspection

intern	al Revenue Service						Inspection
	ne of the organization					Employer ide	ntification number
STE	EVENS INSTITUTE OF T	ECHNOLOGY				22 442725	
						22-148735	
		ormation on Ac n 990, Part IV, lin		de the United States	<b>5.</b> Complete	if the organ	nization answered
1	For grantmakers. D	oes the organiza	ition maintain r	ecords to substantiate	the amount	of the grant	s or
	assistance, the gran	ntees' eligibility fo	or the grants or	assistance, and the se	lection criter	na used to a	ward
	the grants or assista	ance					✓ Yes
2	<b>For grant makers.</b> Desc United States	cribe in Part IV the	organization's pr	ocedures for monitoring th	ne use of gran	t funds outsıd	e the
3	Activites per Region (	(Use Schedule F-1	(Form 990) if add	ditional space is needed )			
_	, , other participation ,			(d) Activities conducted in	(e) If activit	y listed in (d)	
	(=) Design	( <b>b</b> ) Number of offices in the	(c) Number of	region (by type) (i e , fundraising, program services,			(f) Total expenditures in
	(a) Region	region	employees or agents in region			ecıfıc type of	region
				the region)	+	) in region	
	itral America and the ibbean	1		Program Services	GRADUATE	EDUCATION	,
Eas	t Asıa and the Pacıfic	0	1	Program Services	BUSINESS DEVELOPME	≣NT	15,000
Sou	th Asıa	0	1	Program Services	ACADEMIC RECRUITING	G	10,000

Totals .

298,113

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

	Other Assistance ( F-1 (Form 990) if a			ted States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	( <b>g)</b> Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	Cent A merica/Caribbean	4	12,000	OTHER			CASH
		1			1		1

Schedule F (Form 990) 2008

Part IV Sup	plemental Infor	mation	on Book I has 2 and any other additional information
Con	npiete this part to Intifier	ReturnReference	In Part I, line 2, and any other additional information.  Explanation
STATEMENT OF OUTSIDE THE U	ACTIVITIES	FORM 990, SCHEDULE F, PART I	LINE 2 - Central America Scholarships equal up to 10% of program tuition (\$3,000 per student) are awarded to students enrolled in a graduate program conducted in the Dominican Republic Recipients are selected on the basis of academic performance and demonstrated finanical need

Software ID:

**Software Version:** 

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
--------------------------	---	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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DLN: 93493134005400

OMB No 1545-0047

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

Department of the Treasury

Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Name of the orga	anızatıon		
STEVENS INST	ITUTE OF	TECHNOLO	) GY

**Employer identification number** 

22-1487354

- Indicate whether the organization raised funds through any of the following activities Check all that apply
- Mail solicitations
- Email solicitations
- Phone solicitations
- In-person solicitations

- e 🗸 Solicitation of non-government grants
- Solicitation of government grants
- g 🔽 Special fundraising events
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) A ctivity	(iii) Did fundraiser have custody or control of contributions?  Yes No		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
SNAVELY ASSOCIATES	CAMPAIGN	Yes	No																																											
			No	0	43,140	0																																								
AFRC INC	CAMPAIGN		No	0	22,650	0																																								
ACS SERVICES	CAMPAIGN		No	0	33,000	0																																								
Total			<u> </u> ▶																																											

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensina

Pai	rt II	Fundraising Events. Comp more than \$15,000 on Form					or r	eport	ed
		' '	(a) Event #1	( <b>b</b> ) Event #2	(c) O ther Events	(d)		al Eve	
			GOLF OUTING	WINE TASTING	0	(Add		(a) th (c))	rough
			(event type)	(event type)	(total number)				
Ē	1	Gross receipts	65,520	15,300				80	0,820
Revenue	2	Less Charitable contributions	44,074	8,850				5.	2,924
	3	Gross revenue (line 1 minus line 2)	21,446	6,450				2	7,896
	4	Cash Prizes							
8 9 8	5	Non-cash Prizes	7,156					•	7,156
pen	6	Rent/Facility costs	38,481	6,450				4	4,931
Direct Expenses	7	Other direct expenses	949						949
<u>§</u>	8	Direct expense summary Add line	s 4 through 7 in column	(d)				5	3,036
	9	Net income summary Combine lin						-2!	5,140
Par	t II		ganızatıon answered '		art IV, line 19, or repo	rted r	nore	e than	1
		\$15,000 OH FORM 990-EZ, IIII	e 6a. (a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) -	Total (	gaming	(Add
Revenue			(a) Billigo	bingo/progressive bingo	(c) o their gaining			ough co	
<u> </u>	1	Gross revenue							
	2	Cash prizes							
bens	3	Non-cash prizes							
Direct Expenses	4	Rent/facility costs							
ᆵ	5	Other direct expenses							
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes				
	7	Direct expense summary Add lines	2 through 5 in column (	d)					
	8	Net gaming income summary Comb	oine lines 1 and 7 in colu	ımn (d)					
								Yes	No
9 a		ter the state(s) in which the organizat the organization licensed to operate (				.	9a		
Ь		No," Explain	5				Эа		
10a b		re any of the organization's gaming li Yes," Explain	censes revoked, suspen	ded or terminated during	g the tax year?	<u>:</u>	10a		
11		es the organization operate gaming a				L	11		 
12		the organization a grantor, beneficiar med to administer charitable gaming?		a member of a partnersh	ip or other entity				

			 <del></del>
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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DLN: 93493134005400 OMB No 1545-0047

Schedule I (Form 990)

### **Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

2008

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public Inspect ion

Employer identification number

STEVENS INSTITUTE OF TEA	CHNOLOGY								
STEVENS INSTITUTE OF TECHNOLOGY						22-1487354	22-1487354		
Part I General Infor	mation on Grai	nts and Assistance	1			•			
<ul><li>Does the organization mathematics the selection criteria use</li><li>Describe in Part IV the organization</li></ul>	ed to award the gran	nts or assistance?					√ Yes ┌ I		
Form 990, Part Part IV and Sch	IV, line 21 for ar iedule I-1 if addi	ny recipient that rece tional space is	ived more than \$5,0	00. Check this box	tes. Complete if the call if no one recipient rec	eived more than \$5,			
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
2 Enter total number of seconganizations					•				
3 Enter total number of oth	ier organizations .						•		
For Paperwork Reduction Act Not	tice, see the Instruct	tions for Form 990.		Cat No 500551	P	Sc	hedule I (Form 990) 2008		

Schedule I	(Form 990) 2008
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS AND GRANTS	4085	32,894,588		CASH	

### **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
GRANTS AND OTHER ASSISTANCE IN THE US	FORM 990, SCHEDULE I, PART I, LINE 2	All budgets for grant and contract awards are entered into the Stevens accounting system in individual project accounts and checked for accuracy. Expenses against the individual accounts are analyzed monthly and billed to appropriate sponsors after the monthly accounting close. Stevens funds the expenses in advance and is remunerated on a cost reimbursement basis. Student scholarships are credited directly against their student accounts. The analysis safeguards against over-billing since amounts over budget, if any, are segregated and unbilled. All updates to budgets are entered and re-checked.

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As Filed Data -

DLN: 93493134005400

OMB No. 1545-0047

#### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY **Employer identification number** 

22-1487354

Pa	rt I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization property 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form /ide any relevant information regarding these items			
	First class or charter travel	<b>▽</b>	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all		·			
	✓ Compensation committee	<u> </u>				
	☑ Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990	, Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control payment?					
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
С	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	orovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
Ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	•	·	8		No

## Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
COMPENSATION INFORMATION	FORM 990, SCHEDULE J, PART I	LINE 1 - The Travel Policy requires the Dean or Vice President approval for companion travel and is considered income to the employee if there is not a business purpose. First/Business class may only be used for foreign travel greater than six hours, unless special circumstances warrant an upgrade and these must be approved by senior management. No prior approval is required for the President, however his expenses are reviewed by the CFO. Certain employees are housed in Institute owned housing. LINE 4 - SEVERANCE TO HELENA WISNIEWSKI 456,000 - SEVERANCE TO MARJORIE EVERITT 161,557.
Deferred Compensation of President	Schedule J - Presidents Compensation	The Institute maintains a supplemental executive retirement plan (SERP) for the benefit of president Raveche. The plan provides for a payment of a pension benefit, for life and ten-year certain, upon the retirement of the president. The actuarial value of the SERP increased by \$572,718 in the reported year and is therefore included in both schedules J-1 and J-2 of this return as deferred compensation.
Deferred Compensation - column C	Schedule J, COlumn C	Included in this column are 1) current-year deferrals of compensation under the Institute's TIAA-CREF retirement plan, including both the employee and the employer contributions and, 2) for President Raveche, the actuarially determined change in the value of the liability of a deferred, defined-compensation retirement plan, which is accrued in the current year with actual payments deferred to future years. The terms of this retirement plan, and the absolute amounts to be paid to the President in the future, did not increase or change during the current year. But there were significant declines in the value of underlying investments of the defined compensation retirement plan, as well as changes in the interest rates used by the actuary to determine a liability value to Stevens. The increase in the value of that liability because of the change in interest rates and the declining value of the underlying investments was \$572,718 and is reported in column C of this Form 990, as deferred compensation to the President.
Compensation reported on a prior 990	Schedule J, Column F	This IRS Form 990 for the period July 1, 2008 through June 30, 2009, is the first time that the IRS is requiring that all officer and director compensation amounts be reported based on the 2008 calendar year W2/1099-MISC compensation information. This change allows the IRS to relate compensation reported on the Form 990 to an individual's calendar year tax returns. In this year of transition though, the change in IRS rules creates an anomaly because the Form 990 from the prior year reported compensation on a fiscal year basis and there is a period of time that overlaps. Because this is a transition year for the IRS rules, column F identifies the amount reported in column B (Compensation) that was already reported as compensation on a prior year Form 990.

Software ID: Software Version:

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

Form 990, Schedule J, F	Part I	I - Officers, Direc	tors, Trustees, Ke	y Employees, and	l Highest Compen	sated Employees		
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Deferred	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Harold J Raveche	(I) (II)	601,465 0	285,000 0	29,003 0	606,468 0	59,530 0	1,581,466 0	804,500 0
Randy L Greene	(I) (II)	234,574 0	25,000 0	37,270 0	32,658 0	4,572 0	334,074 0	119,333 0
Mark Samolewicz	(I) (II)	135,092 0	6,000 0	7,185 0	20,160 0	22,330 0	190,767 0	72,004 0
Michael S Bruno	(I) (II)	270,404 0	45,000 0	0 0	34,450 0	29,950 0	379,804 0	137,500 0
Henry P Dobbelaar Jr	(I) (II)	2 <b>41</b> ,000 0	30,000 0	1,485 0	40,504 0	802 0	313,791 0	150,000 0
Lisa Dolling	(ı) (ıı)	136,423 0	6,000 0	0 0	20,245 0	613 0	163,281 0	69,198 0
George P Korfiatis	(I) (II)	373,416 0	75,000 0	5,550 0	41,200 0	59,150 0	554,316 0	265,000 0
Frederick E Regan	(I) (II)	218,080 0	0 0	816 0	31,117 0	19,197 0	269,210 0	97,756 0
Maureen P Weatherall	(I) (II)	295,365 0	60,000 0	0 0	41,200 0	69,648 0	466,213 0	207,500 0
Dinesh Verma	(I) (II)	326,149 0	65,000 0	8,325 0	33,896 0	32,530 0	465,900 0	183,500 0
Helena Wisniewski former O fficer	(I) (II)	195,487 0	0 0	463,458 0	26,488 0	7,242 0	692,675 0	125,500 0
Majorie Everitt former Officer	(I) (II)	0	15,000 0	161,557 0	21,316 0	11,826 0	209,699	97,000 0
Lex McCusker former Dean	(I) (II)	237,396 0	10,000 0	0 0	<b>41</b> ,200 0	54,730 0	343,326 0	121,500 0
James McClellan former Dean	(I) (II)	153,479 0	10,000 0	0 0	34,213 0	3,826 0	201,518	77,250 0
Chris Booth	(ı) (ıı)	152,700 0	18,000 0	0 0	23,328 0	3,826 0	197,854 0	77,745 0
Constantin Chassapis	(ı) (ıı)	270,151 0	30,000 0	0 0	36,520 0	11,536 0	348,207 0	144,637 0
Souran Manoochehri	(I) (II)	268,420 0	6,000 0	0 0	22,072 0	4,302 0	300,794 0	140,210 0
Jerry Luftman	(I) (II)	197,648 0	187,300 0	0	34,675 0	802 0	420,425 0	112,649
Alan Blumberg	(ı) (ıı)	238,105 0	12,000 0	0	36,664 0	3,826 0	290,595	119,738
Victor Lawrence	(ı) (ıı)	236,848 0	0	0	26,134 0	8,530 0	271,512 0	123,166
Stefano Falconi	(I) (II)	143,468 0	0	0	17,488 0	14,309 0	175,265 0	146,269

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation		
	(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	benefits (B)(ı)-(D)		pensation benefits (B)(i)-(D)		reported in prior Form 990 or Form 990-EZ
See Addıtıonal Data Table (i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									
(i)									
(ii)									

DLN: 93493134005400

2008

OMB No 1545-0047

# **Supplemental Information on Tax Exempt Bonds**

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0.

Open to Public Inspect ion

Employer identification number Name of the organization STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 **Bond Issues** (Required for 2008) Part I (h) O n Behalf of (g) Defeased (c) CUSIP # (a) Issuer Name (b) Issuer EIN (d) Date Issued (e) Issue Price (f) Description of Purpose Issuer Yes Yes NJ EDU FAC AUTHORITY ISSUE CAPITAL IMPROV FUND 22-1829511 64605LZ43 10-26-2006 133,640 REFUNDING OF PRIOR ISSUES Χ Χ NJ EDU FAC AUTHORITY ISSUE CAPITAL IMPROV FUND 22-1829511 64605LWWX 08-10-2005 792.706 REFUNDING OF PRIOR ISSUES Х Х NJ EDU FAC AUTHORITY DORMITORY SAFETY TRUST FINANCE DORM SAFETY 22-1829511 64605NBU7 10-09-2003 244,207 Χ Χ 2003 IMPROVEMENTS NJ EDU FAC AUTHORITY ISSUE 22-1829511 646065LPS 08-02-2007 71.633.268 REFUNDING OF PRIOR ISSUES Χ Χ 2007 Part II Proceeds (Optional for 2008) В C D Ε Α Total Proceeds of Issue Gross Proceeds in Reserve Funds 2 Proceeds in Refunding or Defeasance Escrows 3 Other Unspent Proceeds Issuance Costs from Proceeds 5 Working Capital Expenditures from Proceeds 6 7 Capital Expenditures from Proceeds Year of Substantial Completion 8 Yes No Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х Х Х Were the bonds issued as part of an advance refunding issue? Х Х Χ 10 Has the final allocation of proceeds been made? Χ Χ 11 Χ Does the organization maintain adequate books and records to support the Х Х Х final allocation of proceeds? **Private Business Use** (Optional for 2008) Part III C Ε D Yes No Yes No Yes No Yes No Yes No

which may result in private business use?

which owned property financed by tax-exempt bonds?

Was the organization a partner in a partnership, or a member of an LLC,

Are there any lease arrangements with respect to the financed property

Χ

Х

Χ

Х

Χ

Х

Schedule K (Form 990) 2008

Part III Private Business Use (Continued)

			A		В	1 '	С	[	)		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х		Х		Х				
3b	Are there any research agreements with respect to the financed property which may result in private business use?		х		х		X				
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		x		x		x				
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х		х		×				
Pai	t IV Arbitrage (Optional for 2008)					T					
			<u> </u>		В		<u>c</u>		)		E
	ļ	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?		Х		X		Х				
2	Is the bond issue a variable rate issue?		X		X		Х				
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?		х		х		Х				
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		Х		Х				
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х				
6	Did the bond issue qualify for an exception to rebate?		х		Х		Х				

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DLN: 93493134005400

OMB No 1545-0047

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#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

**Transactions with Interested Persons** 

	of the organization S INSTITUTE OF TECHNOLOGY						n <b>ploy</b>		ntificat 4	ion nu	ımber		
Part I						1) organız	ation	ıs on	ıly).				
	To be completed by organization		swered "Ye	es" on Form 990, Part IV	, line :	25a or 25b	, or Fo	orm 9	90-EZ				
1	(a) Name of disqualifie	d person		<b>(b)</b> Des	crıptıo	n of transa	ction			<u> </u> -	(c) Corrected		
s e	nter the amount of tax imposed on ection 4958							F	\$ —— \$	•	•		
Part :		Interes	sted Pers	sons					<u> </u>	V , lıne	38a		
(a)	Name of interested person and purpose	( <b>b</b> ) Loan from t	n to or the	(c)O riginal principal amount		lance due	(e) In App		(f Appr	f) oved (g)W ard or agree		Written	
		То	From				Yes	No	Yes	No	Yes	No	
IAROLI 10RTG	D J RAVECHE GAGE		х	928,314		784,324		Νο	Yes		Yes		
		<u> </u>											
		<del>                                     </del>											
otal						784,324							
Part I	Grants or Assistance B To be completed by organ				90, P	art IV, lın	e 27.						
	(a) Name of interested person	(b)		ip between interested pe d the organization	rson	( <b>c)</b> A mo	ount o	fgrar	nt or ty	pe of a	ssista	nce	

#### **Business Transactions Involving Interested Persons**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

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

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DLN: 93493134005400

OMB No 1545-0047

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SCHEDULE M (Form 990)

Department of the Treasury

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

**Non-Cash Contributions** 

Internal Revenue Service Name of the organization STEVENS INSTITUTE OF TECHNOLOGY **Employer identification number** 22-1487354

Pa	rt I Types of Property			•			
		(a) Check ıf applıcable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of deter revenues	_	
1	Art—Works of art	аррисавіс		19			
	Art—Historical treasures .						
3	Art—Fractional Interests						
4	Books and publications						
-	Clothing and household						
_	goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded .						
10	Securities—Closely held stock $\ .$						
11	Securities—Partnership, LLC, or trust interests						
	Securities—Miscellaneous						
13	Qualified conservation contribution (historic structures)						
14	Qualified conservation contribution (other)						
15	Real estate—Residential .	Х	2	959,000	SALE OF SIMILAR PRO	) P	
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies .						
21	Taxıdermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
	SCIENTIFIC						
	Other (describe <u>EQUIPMENT</u> )	X	1	150,000	OPINIONS OF EXPER	15	
	Other (describe)						
	,						
28	Other (describe)						
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828	3, Part IV, Donee	ar for contributions for	29		2
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must	Yes	No
	least three years from the date o	of the initial	contribution, and which is	not required to be used for e	exempt purposes		
	for the entire holding period? .				30	а	No
	If "Yes", describe the arrangeme			_	_	.	
31	Does the organization have a gif	t acceptano	ce policy that requires the i	eview of any non-standard	contributions? 3	1. Yes	<u> </u>
32a	Does the organization hire or use contributions?	e third part • • •	es or related organizations	to solicit, process, or sell r		a Yes	
ь	If "Yes", describe in Part II						
	If the organization did not report checked, describe in Part II	revenues i	n Column (c) for a type of p	roperty for which Column (a	a) is		

Schedule M (Form 990) 2008 Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Identifier Explanation NONCASH CONTRIBUTIONS FORM 990, SCHEDULE M, PART I LINE 32 - The Institute uses various Galleries to facilitate the sale of art. One piece of art was sold in fiscal year 2009 with a gross proceeds of \$10,000

## **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

ldentifier	Return Reference	Explanation
GOVERNING BODY AND MANAGEMENT	1 ' '	LINE 10 - The Form 990 w as presented at the February, 2010 Board Meeting and w as review ed by the Audit Committee prior to filing

Identifier	Return Reference	Explanation
POLICIES	FORM 990, PART VI, SECTION B	LINE 12 - A committee meets to review the disclosed conflicts. A mediation plan is determined for those disclosures deemed to be true conflicts. LINE 15 - Excerpts from the Charter of Human Resource Committee dated October 6, 2005. The Committee has responsibility for the development of performance standards and the evaluation of the President as well as the development of a succession plan for the President's position and for the other senior administrative positions. The committee shall be comprised of at least three Board of Trustee members, members shall be annually and be 'independent' as defined in the bylaw's of the Board. The Committee shall meet at least twice annually. Responsibilities - Review and approve goals and objectives of the Institute relative to its management compensation - Review the wage, salary, and benefit goals for the Institute, including such matters as salary increases - If a compensation consultant is to assist in the evaluation of the President's or other executive officer's compensation, the Committee shall make the request to the Executive Committee - Produce an annual review of management compensation for presentation to the Board.

ldentifier	Return Reference	Explanation
DISCLOSURE	FORM 990, PART VI, SECTION C	LINE 19 - The Governing documents are not currently available on the Stevens' website, but there is a plan to identity those documents that should be available on the website

DLN: 93493134005400

2008

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# **Related Organizations and Unrelated Partnerships**

**SCHEDULE R** (Form 990)

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY				Employer ident	ification number
Part I Identification of Disregarded Entities				7 22-1407334	
(A) Name, address, and EIN of disregarded entity	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Total income	<b>(E)</b> End-of-year assets	<b>(F)</b> Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions				
(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	( <b>D)</b> Exempt Code section	(E) Public chanty state (if section 501(c)(	us Direct controlling 3)) entity

(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Direct controlling entity	(E) Predominant income(related, investment, unrelated)	<b>(F)</b> Share of total income	<b>(G)</b> Share of end-of-year assets	(H Disprop allocat	ortionate	(I) Code V—UBI amount on Box 20 of K-1	Gen mar par	( <b>J)</b> eral or naging tner?
							Yes	No		Yes	No
TECHNOLOGY HOLDINGS LLC  ONE CASTLE POINT ON HUDSON HOBOKEN, NJ07030 22-3522455	TECHNOLOGY TRNSFR	NJ	STEVENS INST	RELATED	257,906	0		No			No

## Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	<b>(D)</b> Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	<b>(F)</b> Share of total income	<b>(G)</b> Share of end-of-year assets	<b>(H)</b> Percentage ownership
RAVENSWOOD CORPORATION ONE CASTLE POINT ON HUDSON HOBOKEN, NJ07030 22-1854071	real estate	NJ	STEVENS INST	C CORP	316,988	1,771,745	100 %
STEVENS TECHNOLOGY INC ONE CASTLE POINT ON HUDSON HOBOKEN, NJ07030 22-3522452	TECH TRANSFER	NJ	STEVENS INST	C CORP	257,906	0	100 %
CASTLE POINT HOLDINGS INC ONE CASTLE POINT ON HUDSON HOBOKEN, NJ07030 20-4264786	tech transfer	NJ	STEVENS INST	C CORP	6,285	556,837	100 %
							2 /Form 000\ 2009

Part V	Transactions	with Related	Organizations
--------	--------------	--------------	---------------

LC	Transactions with Related Organizations					
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		_	7	Yes	No
1 [	During the tax year, did the orgranization engage in any of the following transactions with one	e or more related organizations listed in Parts II-IV 7	,			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		12	а '	Yes	
b	Gift, grant, or capital contribution to other organization(s)		11	ь		No
c	Gift, grant, or capital contribution from other organization(s)		10	c		No
d	Loans or loan guarantees to or for other organization(s)		10	d '	Yes	
e	Loans or loan guarantees by other organization(s)		16	e		No
f	Sale of assets to other organization(s)			<u>+</u>		No
g			19	g		No
h	Exchange of assets		11	h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		11	1		No
i	Lease of facilities, equipment, or other assets from other organization(s)		1			No
-	Performance of services or membership or fundraising solicitations for other organization	(s)	11	_		No
ı	Performance of services or membership or fundraising solicitations by other organization(	•	11	,1		No
n	1 Sharing of facilities, equipment, mailing lists, or other assets	,	11	m		No
	Sharing of paid employees		11	n		No
0	Reimbursement paid to other organization for expenses		10	$\perp$		No
	Reimbursement paid by other organization for expenses			_	Yes	
P	Remibulsement paid by other organization for expenses		<u> </u>	+		
q	O ther transfer of cash or property to other organization(s)		10	q		No
r	O ther transfer of cash or property from other organization(s)		1	r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who mus	st complete this line, including covered relationships	and transaction thresholds			
	(A) Name of other organization(s)	<b>(B)</b> Transaction	(C) Amount Involved			

	(A) Name of other organization(s)	<b>(B)</b> Transaction type(a-r)	<b>(C)</b> Amount Involved
(1)	CASTLE POINT HOLDINGS	Α	24,207
(2)	Castle Point Holdings	D	560,000
(3)	RAVENSWOOD CORPORATION	Р	30,000
(4)			
(5)			
(6)			

## Part VI Unrelated Organizations Taxable as a Partnership

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

									_	
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organization	s?	<b>(E)</b> Share of end-of-year assets	(F) Disproprtionate allocations?		( <b>G)</b> Code V—UBI amount on Box 20 of K-1		r J
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	

Software ID: Software Version:

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

## Form 990, Part VII - Section Aaa

Pormi 990, Part VII - Section Aaa		Posit t	(C lon ( hat a	chec		I			(5)	(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Lawrence T Babbio Jr , Chairman	1 0	Х		Х				0	0	0
Kenneth W DeBaun , Vice Chairman	1 0	Х		Х				0	0	0
Steven Shulman , Vice Chairman	1 0	Х		Х				0	0	0
Harold J Raveche , President	80 0	Х		Х				915,468	0	665,998
Stephen T Boswell , Director	10	Х						0	0	0
Thomas A Corcoran , Director	10	Х						0	0	0
Edward C Eichhorn , Director	10	Х						0	0	0
David J Farber , Director	10	Х						0	0	0
Martın C Fliesler , Director	10	Х						0	0	0
Katherine E Freed , Director	10	Х						0	0	0
Katherine C Hegmann , Director	10	Х						0	0	0
Mark LaRosa , Director	10	Х						0	0	0
Richard S Magee , Director	10	Х						30,000	0	0
Syros Polemis , Director	10	Х						0	0	0
Richard R Roscitt , Director	1 0	Х						0	0	0
Vırgınıa P Ruesterholz , Dırector	10	Х						0	0	0
John A Schepisi , Director	10	Х						0	0	0
Frank S Sorrentino , Director	1 0	Х						0	0	0
Richard F Spanier , Director	10	Х						0	0	0
James M Walsh , Director	10	Х						0	0	0
Chloe Beth Weck , Director	10	Х						0	0	0
mary a doddy , director	10	Х						0	0	0
andrew g kaplan , director	10	Х						0	0	0
Philip P crowley , director	10	Х						0	0	0
Randy L Greene , Treasurer	60 0			Х				296,844	0	37,230
Mark Samolewicz , Secretary	60 0			Х				148,277	0	42,490
Diana Colombo , Assistant Secretary	60 0			Х				86,073	0	28,872
Mıchael S Bruno , Dean	60 0				Х			315,404	0	64,400
Henry P Dobbelaar Jr , Vice President	60 0				Х			272,485	0	41,306
Lısa Dollıng , Dean	60 0				Х			142,423	0	20,858

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
		check all pply)					(=)	(F)		
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
George P Korfiatis , Provost	60 0				Х			453,966	0	100,350
Frederick E Regan , Vice President	60 0				Х			218,896	0	50,314
Maureen P Weatherall , Vice President	60 0				Х			355,365	0	110,848
Dınesh Verma , Dean	60 0				Х			399,474	0	66,426
Chrıs Booth , Controller	60 0				Х			170,700	0	27,154
Constantin Chassapis , Associate Director	60 0					×		300,151	0	48,056
Souran Manoochehri , Associate Dean	60 0					Х		274,420	0	26,374
Jerry Luftman , Professor	60 0					Х		384,948	0	35,477
Alan Blumberg , Program Director	60 0					Х		250,105	0	40,490
Victor Lawrence , Professor	60 0					Х		236,848	0	34,664
Helena Wısnıewskı former O fficer , V ice President	60 0						х	658,945	0	33,730
Majorie Everitt former Officer , Vice President	60 0						х	176,557	0	33,142
Lex McCusker former Dean , Dean	60 0						Х	247,396	0	95,930
James McClellan former Dean , Dean	60 0						Х	163,479	0	38,039
Stefano Falconi , FORMER Vice president	1 0						х	143,468	0	31,797

#### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

STEVENS INSTITUTE OF TECHNOLOGY, FOUNDED IN 1870, CREATES NEW KNOWLEDGE AND EDUCATES AND INSPIRES STUDENTS TO ACQUIRE THE COMPETENCIES NEEDED TO LEAD IN SCIENTIFIC DISCOVERY. STUDENTS GRADUATE FROM STEVENS WITH THE SKILLS TO DEVELOP AND MANAGE INNOVATIVE TECHNOLOGY TO SOLVE COMPLEX PROBLEMS AND TO BUILD NEW ENTERPRISES. STEVENS BELIEVES THAT SOLUTIONS TO MANY OF THE CRITICAL PROBLEMS THAT FACE HUMANITY CAN BE FOUND IN IMPROVED USE AND UNDERSTANDING OF TECHNOLOGY, AND THAT IT IS THE DUTY OF THE INSTITUTE TO PRODUCE ENGINEERS, SCIENTISTS AND BUSINESS LEADERS PREPARED FOR THIS CHALLENGE.