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# Form **990**

Department of the Treasury Internal Revenue Service

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

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

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

OMB No 1545-0047 2009

Open to Public Inspection

A Fo	r the 2	2009 са	lendar yea	r, or tax year beginning	07-01-2009 and ending 06-30-2010	)				
<b>B</b> Check if applicable			Please	C Name of organization STEVENS INSTITUTE OF T	ECHNOLOGY		D Employer i	dentification number		
Address change			use IRS label or				22-1487354 E Telephone number			
☐ Nar	ne chai	nge	print or type. See	Doing Business As						
┌ Inıt	ıal retui	rn	Specific	Number and street (or P (	5-8761					
┌ <sub>Ter</sub>	minated	d	Instruc- tions.	CASTLE POINT ON HUDSO	N		<b>G</b> Gross receip	ts \$ 237,032,555		
┌ Am	ended i	return		City or town, state or cou	ntry, and ZIP + 4		_			
┌ App	lication	pending		HOBOKEN, NJ 07030						
		ľ	<b>F</b> Nan	ne and address of princi	pal officer	H(a) Is t	<b>■■</b> his a group reti	ırn for		
			george	korfiatis			iates?	⊤Yes <b>▼</b> No		
				E POINT ON HUDSON (EN,NJ 07030						
				,,,,,			all affiliates inclu	uded? Yes No st (see instructions)		
I Ta	x-exem	pt status	<b>▽</b> 501(c)	(3) <b>◄</b> (insert no )	47(a)(1) or		oup exemption			
J W	ebsit e	: <b>:-</b> ww	W STEVEN	IS EDU		(-/				
				ion Trust Association	Other b	l Van af	formation 1070	M Chata of land democals N3		
	rt I			ion j Trust j Association j	Other -	L Year or	formation 1870	M State of legal domicile NJ		
				e organization's mission	or most significant activities					
		THEOR	GANIZAT	ION'S PRIMARY EXEM	PT PURPOSE IS TO PROVIDE EDU					
3		PURSUI	TOFANI	JNDERGRADUATE, MA	STERS AND/OR DOCTORATE DEG	REE, AND T	O conduct res	earch		
Œ										
<u>.</u>										
Governance	2	Check t	hıs box দ	- if the organization disc	continued its operations or disposed	of more tha	n 25% of its ne	t assets		
χŏ	3	Number	of voting r	nembers of the governin	g body (Part VI, line 1a)			323		
es es	4	Number	ofindepen	dent voting members of	the governing body (Part VI, line 1b	)		419		
Activities	5	Total nu	ımber of en	nployees (Part V, line 2	a)			53,200		
支	6	Total nu	ımber of vo	lunteers (estimate if ne	cessary)			6280		
•	7a	Total gr	oss unrela	ted business revenue fr	om Part VIII, column (C), line 12 .			<b>7a</b> 144,373		
	ь	Net unre	elated busi	ness taxable income fro			<b>7b</b> -41,688			
						Pr	ior Year	Current Year		
	8	Contrib	outions and	d grants (Part VIII, line		8,589,622	12,035,138			
를	9	Progra	m service	revenue (Part VIII, line		169,688,518	188,274,935			
Revent	10	Invest	ment incor	ne (Part VIII, column (A		-7,097,979	9,010,207			
ď	11	Other	revenue (P	art VIII, column (A), lın		3,428,384	2,211,915			
	12				nust equal Part VIII, column (A), line	9	174,608,545	211 522 105		
	13						32,906,588	211,532,195		
	14			r for members (Part IX,		0	37,496,518			
	15				benefits (Part IX, column (A), lines 5	:_				
8	15	10)	is, other co	impensacion, employee	benefits (Fart 1x, Column (x), mies 2	<u></u>	92,762,097	99,389,506		
Expenses	16a	Profes	sional fund	raising fees (Part IX, co	lumn (A), line 11e)		98,790	0		
ੜੇ	ь	Total fur	ndraising exp	enses (Part IX, column (D), l	ne 25) <b>►</b> 6,544,429					
	17	Other	expenses (	Part IX, column (A), line	es 11a-11d, 11f-24f)		60,697,955	66,129,919		
	18	Total e	xpenses A	Add lines 13–17 (must	equal Part IX, column (A), line 25)		186,465,430	203,015,943		
	19	Revenu	ue less exp	enses Subtract line 18	from line 12		-11,856,885	8,516,252		
<u>চ</u>						Beginni	ng of Current	End of Year		
Not Assets or Fund Balances		_		* V . I			Year			
Ass HBa	20						290,632,387	300,995,440		
₹ ₩	21						132,580,012	137,228,951		
	22 t III		ature Blo		e 21 from line 20		158,052,375	163,766,489		
Pal	ι 11	_			xamined this return, including accompanying	schedules and	statements and t	o the hest of my knowledge		
					ation of preparer (other than officer) is base					
C:										
Sign Here		**** Signa	** ature of office	·r		201 Date	1-05-16 e			
1101	•	[				Date				
			OY GREENE T or print nam							
		<b>       </b>	<u>.</u>		Data	hack if	Propagate id -	atifying number		
D. 1 1		Preparer' signature			S	Check If self-	(see instructio	ntifying number ns)		
Paid	- اء مور				Ε	mpolyed 🕨 🦵				
Prepa		Firm's na if self-em	me (or yours	GRANT THORNTON LLP			EIN Þ			
Use (	JIIIY		and ZIP + 4	666 THIRD AVENUE		-	(0.10) = 1 =			
			_	NEW YORK, NY 100174	011		Phone no 🕨	(212) 542-9609		
Mayt	he IR	S discus	s this retu	rn with the preparer sho	wn above? (see instructions)			┌Yes ┌No		

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

STEVENS INSTITUTE OF TECHNOLOGY was FOUNDED IN 1870 the institute is a non-profit research university offering more than 30 undergraduate majors including programs in engineering, the sciences, computer science, business, and the humanities, and graduate level courses in a range of disciplines leading to the master's and Phd degrees academic research is carried out at every level of the institute for more information please refer to www.stevens.edu

4e	Total program service e	vnenses <b>i</b>	178,188,03	11		
	(Expenses \$	ınc	luding grants o	f \$	) (Revenue \$	)
4d	Other program service:	s (Describe in Sch	nedule O )			
	WITH SUPPORTING ORGANIZ INSTITUTE HAS BEEN RECO	ZATIONS AND INFRAST GNIZED BY BOTH THE U OF SYSTEMS ENGINEE	RUCTURE CREAT US DEPARTMENT RING, PORT SECU	IVE AND ENTREPRENEURIA OF DEFENSE AND THE DEP RITY AND INFORMATION AS	CH CENTERS, AND CROSS-DISCIPLI L RESEARCH IS AN INTEGRAL PART ARTMENT OF HOMELAND SECURITY SURANCE THE FUNDAMENTAL PRI	OF THE STEVENS MISSION TH
4c	(Code	) (Expenses \$	27,963,813	ıncludıng grants of \$	0 ) (Revenue \$	34,472,810 )
	HOUSING AS WELL AS SEVER DEVELOPMENT THERE ARE BROADEN AND ENRICH THE:	RAL DINING FACILITIES OVER 120 CLUBS, ORG IR STUDENT LIFE THE	G CLOSE INTERACT GANIZATIONS AND ES C WILLIAMS LI	TIONS BETWEEN PROFESSO VARSITY SPORTS THAT OFF BRARY SERVES AS THE INST	AND PROVIDES STUDENTS WITH C RS AND STUDENTS ALLOW FOR GR FER THE STUDENTS AMPLE OPPORT TITUTE'S INTELLECTUAL, CULTURAL E ENVIRONMENT FOR TEACHING, LI	EATER ACADEMIC AND SOCIAL JNITY TO PARTICIPATE, AND SOCIAL CENTER
4b	(Code	) (Expenses \$	19,804,574	including grants of \$	0 ) (Revenue \$	18,489,641 )
	students graduated with bac arts phd and engineering de	helor of engineering, s egrees were also confe vide courses and traini	science or arts deg erred in addition, s ing to international	rees, and 1268 students rec stevens collaborated with nu I students stevens emphasi	aduate students and 3700 graduate served master's in Engineering, scier imerous domestic and international zes innovation and teaches entrepri	nce, business administration or universities and other
4a	(Code	) (Expenses \$	130,419,644	including grants of \$	37,496,518 ) (Revenue \$	135,312,484 )
4	·	01(c)(4) organiza	tions and secti	on 4947(a)(1) trusts a	largest program services by ire required to report the amo service reported	•
4	If "Yes," describe these	_				
3	Did the organization cea services?			nt changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these	new services on S	chedule O			
	Did the organization und the prior Form 990 or 99					┌ Yes ┌ No

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	
_	complete Schedule A	1		
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		Νο
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 similar funds or 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		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	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, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school 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 United States?	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 United States? 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 U S? 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 U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 line 25	24a	Yes	
b	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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	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	
35	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	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note: All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

			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			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors 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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶DR  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
ia	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).	_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	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			

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

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 23			
b	Enter the number of voting members that are independent 19			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	7a		No
	governing body?			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10b		
11				
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	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		Νο
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15a	Yes	
U	If "Yes" to line a or b, describe the process in Schedule O (See instructions )	130	162	
	These to line a of b, describe the process in schedule of (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its 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. Another's website. 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			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orda	nization	ı <b>)</b> -
	PANDY GREENE			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee										
<b>(A)</b> Name and Title	(B) Average hours	<b>(C)</b> Position (check all that apply)						(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b Total	 5,706,631	0	588,540
			i I

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►203

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

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

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

(A) Name and business address	(B) Description of services	(C) Compensation			
SODEXHO OPERATIONS BOX 83049 WOBURN, MA 018131049	FOOD SRVC MANAGEMENT	6,230,378			
gca service group po box 643823 PITTSBURGH, PA 15264	MAINTENANCE	1,722,647			
rencor inc 24 tannery road SOMERVILLE, NJ 08876	CONSTRUCTION	955,598			
GRANT THORNTON LLP 666 THIRD AVENUE NEW YORK, NY 10017	AUDIT/CONSULTING	641,293			
morgan stanley 522 5th avenue 11th floor NEW YORK, NY 10036	investment services	617,828			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►28					

Page 8

211,532,195

188,274,935

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501(c)(4) organizations mu			(D)	
	l other organizations must complete column (A) but are not required to		(B), (C), and (	(C)	(D)
	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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	37,467,368	37,467,368		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	29,150	29,150		
4	Benefits paid to or for members	0		]	
5	Compensation of current officers, directors, trustees, and key employees	5,257,959	4,469,265	578,376	210,318
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	79,166,563	67,291,579	8,708,321	3,166,663
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,060,316	3,451,268	446,635	162,413
9	Other employee benefits	6,397,389	5,437,780	703,713	255,896
10	Payroll taxes	4,507,279	3,831,187	495,801	180,291
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	2,030,974	1,726,328	223,407	81,239
c	Accounting	775,056	658,798	85,256	31,002
d	Lobbying	356,903	303,368	53,535	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	1,551,733	1,318,973	232,760	_
g	Other	4,478,777	3,806,961	492,665	179,151
12	Advertising and promotion	259,153	220,280	28,507	10,366
13	Office expenses	3,661,056	3,111,898	402,716	146,442
14	Information technology	2,290,265	1,946,725	251,929	91,611
15	Royalties	0			
16	Occupancy	11,163,707	9,489,151	1,228,008	446,548
17	Travel	4,575,307	3,889,011	503,284	183,012
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	31,750	26,988	3,492	1,270
20	Interest	3,394,029	2,884,925	373,343	135,761
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	7,225,436	6,141,621	794,798	289,017
23	Insurance	746,310	634,364	82,094	29,852
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	RESEARCH CONTRACTS	6,728,107	5,718,891	740,092	269,124
b	DINING ROOM FOOD PURCHASES	5,375,614	4,569,271	591,318	215,025
c	LABORATORY SUPPLIES	3,547,634	3,015,489	390,240	141,905
d	EQUIPMENT RENTAL	2,489,261	2,115,872	273,819	99,570
e	TELEPHONE	615,260	522,971	67,679	24,610
f	All other expenses	4,833,587	4,108,549	531,695	193,343
25	Total functional expenses. Add lines 1 through 24f	203,015,943	178,188,031	18,283,483	6,544,429
26	Joint costs. Check here ► ☐ 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				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			95,485	1	60,672
	2	Savings and temporary cash investments			31,424,304	2	35,653,236
	3	Pledges and grants receivable, net			4,011,550	3	6,751,601
	4	Accounts receivable, net			22,571,033	4	28,345,909
	5	Receivables from current and former officers, directors, trustee	s, key	employees, and			
		highest compensated employees Complete Part II of	, ,	. , ,			
		Schedule L			784,324	5	784,324
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
Assets		Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			296,976	8	281,401
	9	Prepaid expenses and deferred charges			811,966	9	604,470
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	226,461,398			
	ь	Less accumulated depreciation	10b	97,218,959	130,434,383	10c	129,242,439
	11	Investments—publicly traded securities			55,762,801	11	56,080,182
	12	Investments—other securities See Part IV, line 11	34,497,727	12	34,250,351		
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			9,941,838	15	8,940,855
	16	Total assets. Add lines 1 through 15 (must equal line 34) $$ .			290,632,387	16	300,995,440
	17	Accounts payable and accrued expenses .			13,569,206	17	16,827,832
	18	Grants payable				18	
.0	19	Deferred revenue			8,517,229	19	7,734,497
	20	Tax-exempt bond liabilities	79,592,355	20	79,063,915		
je	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	•				
ijΠ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			13,412,800	23	15,467,416
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			17,488,422	25	18,135,291
	26	Total liabilities. Add lines 17 through 25			132,580,012	26	137,228,951
Sá		Organizations that follow SFAS 117, check here $\blacktriangleright$ $\overline{\checkmark}$ and comp	olet e l	ines 27			
)CE		through 29, and lines 33 and 34.			0.054.540		0.500.004
<u> </u>	27	Unrestricted net assets			6,954,513		9,529,031
盗	28	Temporarily restricted net assets			44,228,856		46,194,336
Fund Balances	29	Permanently restricted net assets			106,869,006	29	108,043,122
FI		Organizations that do not follow SFAS 117, check here ► allines 30 through 34.	na con	npiete			
	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
45.5	32	Retained earnings, endowment, accumulated income, or other fu		•		32	
Net #	33	Total net assets or fund balances			158,052,375	33	163,766,489
Ž	34	Total liabilities and net assets/fund balances			290,632,387	34	300,995,440
ı ——					1 200,002,007	54	

#### Part XI Financial Statements and Reporting

			Yes	No
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 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

#### OMB No 1545 004

OMB No 1545-0047

2009

Open to Public
Inspection

#### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

Department of the Treasury Internal Revenue Service

h

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

**Public Charity Status and Public Support** 

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

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number

22-1487354 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i).  $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 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 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II ) A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II ) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other ┌ Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or

section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN		(iv)  Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?
			Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</b> 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</b> ) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV ) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and <b>stop here</b>						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
<b>_</b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						<b>▶</b> ┌
10	Deiveta Farmdation Ifthe averagest	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

**▶**□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(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						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

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

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493136073521

#### OMB No 1545-0047

Open to Public Inspection

#### **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 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

		t have filed Form 5768 (election under	•	, , ,	• •				
	, ,, ,	,	, ,,	•	•				
	, ,, , =	,	,	• •	•				
	_	•							
	ne of the organization			Employer ident	tification number				
JIL	VENS INSTITUTE OF TECHNOLOGY	Complete if the organization is exempt under section 501(c) or is ride a description of the organization's direct and indirect political campaign activities in tical expenditures in the complete if the organization is exempt under section 501(c)(3). The amount of any excise tax incurred by the organization under section 4955 or the amount of any excise tax incurred by organization managers under section 4955 or organization incurred a section 4955 tax, did it file Form 4720 for this year?  The accorrection made?  The amount directly expended by the filing organization for section 501(c) exces or the amount directly expended by the filing organization for section 527 exempt function or the filing organization's funds contributed to other organizations for section for the filing organization file Form 1120-POL, lied the filing organization file Form 1120-POL for this year?  The the names, addresses and employer identification number (EIN) of all section 527 political examples for each organization listed, enter the amount paid from the filing organization's funds or a political action committee (PAC) If additional space is needed, provide information  The provided information (a) Name (b) Address (c) EIN (d) Al filing filing the filing organization committee (PAC) If additional space is needed, provide information (d) Name (d) Address (e) EIN (d) Al filing the filing organization committee (PAC) and the filin	22-1487354						
Part	I-A Complete if the or	ganization is exempt under s	section 501(c		organization.				
1	Provide a description of the ord	ganization's direct and indirect politic	al campaign acti	vities in Part IV					
2	Political expenditures	·		<b>▶</b>	\$				
3	Volunteer hours								
Dar	T-B Complete if the or	ganization is evennt under (	section 501/c	.)(3)					
1	<u>-</u>			,)(3). <b>•</b>	¢				
2	·	•		4955 ▶	\$				
3	•		⊤ Yes						
4a	┌ Yes ┌ No								
ь									
Par	I-C Complete if the or	ganization is exempt under s	section 501(c	e) except section 501	.(c)(3).				
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities 🕨 \$								
2	<del>-</del>	rganızatıon's funds contributed to oth	ner organizations	for section 527					
	·			•	\$				
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	O-POL, line 17b ►	\$				
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes ☐ No				
5	were made For each organizat contributions received that we	ion listed, enter the amount paid from re promptly and directly delivered to	the filing organia a separate politic	zation's funds Also enter tl cal organization, such as a	he amount of political				
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's 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-				

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	)(3) and file	d Form 5768	(election
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Sche	edule C (Form 990 or 990-EZ) 2009					age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT fi	led F	orm	5768	3
	_	(a	1)	<del> </del>	(b)	
		Yes	No	/	Amour	it
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?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	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			35	6,903
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities? If "Yes," describe in Part IV		No			
j	Total lines 1c through 1i				35	6,903
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
Ь	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c	)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		Ī	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		Ī	3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 5	01(c	)(5),	or s	ectio	n
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".	Ί-À,	line 3	is		
1	Dues, assessments and similar amounts from members	1				
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				
С	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 expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information	<u>'</u>				
	implete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and so, complete this part for any additional information	Part I	I-B, lın	e 1ı		
AIS	Tidentifier Return Reference Explanat	ion				

DLN: 93493136073521

OMB No 1545-0047

### **SCHEDULE D**

(Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

**Supplemental Financial Statements** 

Open to Public

terna	al Revenue Service	► Attach to	Form 990. 🕨 See separate inst	ruct ions.		Inspec	tion _
		e of the organization ENSINSTITUTE OF TECHNOLOGY  Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advirtunds are the organization's property, subject to the foliation of the period of the organization inform all grantees, donors, and used only for charitable purposes and not for the beniconferring impermissible private benefit  Tonservation Easements. Complete Purpose(s) of conservation easements held by the oil Preservation of land for public use (e.g., recreating Protection of natural habitating Preservation of period of the tax year  Total number of conservation easements Total acreage restricted by conservation easements Number of conservation easements on a certified his Number of conservation easements modified, transfet the taxable year  Number of states where property subject to conservation easement of the conservation easements included in (c) and Number of states where property subject to conservation beasement of the conservation easements in thous?  Staff and volunteer hours devoted to monitoring, inspecting the foliation of the conservation easement reported on line 2 (170(h)(4)(B)(i)) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(h)(4)(B)(i)) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(h)(4)(B)(ii)) and 170(h)(4)(B)(iii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(h)(4)(B)(ii) and 170(h)(4)(B)(iii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(h)(4)(B)(iii) and 170(h)(4)(B)(iii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(h)(4)(B)(iii) and 170(h)(4)(B)(iii)?  In Part XIV, describe how the organization reports conservation easement reported on line 2 (170(		En	nployer identific	ation numb	er
STE	EVENS INSTITUTE OF	To programization of power identified in the programization of a certified historic structure included in (a) a certified historic structure included in (b) a certified historic structure included in (c) acquired after 8/17/06 and inconservation easements in conservation easements.					
Ρa	rt I Organ	izations Maintaining Donor	Advised Funds or Other			<b>s.</b> Comple	te if the
			990, Part IV, line 6.			•	
			(a) Donor advised fu	ınds	(b) Funds and	other accou	ınts
L		·					
2	55 5	, ,,					
3		, , ,					
•		•		- 1-1-1			
•	_		<del>-</del>		ivisea	☐ Yes	☐ No
5	Did the organiz	zation inform all grantees, donors, an	d donor advisors in writing that	t grant funds may	be		
	•		enefit of the donor or donor adv	ısor, or for any ot	her purpose	☐ Yes	┌ No
Da.		<u> </u>	e if the organization answe	red "Ves" to Fo	rm 990 Part I	•	, 140
لنک	·				illi 990, Pait I	v, iiie 7.	
L	_ ` ` ` `	·			orically importai	ntly land are	a
	_				• •	•	
	Preservati	ion of open space					
2	Complete lines	s 2a-2d if the organization held a qua	alıfıed conservatıon contributıo	n in the form of a	conservation		
	easement on th	he last day of the tax year					
	T - k - l l				Held at the	e End of the	Year
а			<b>.</b> .				
Ь	_	•		, <del>-</del>			
c			•	·			
d		• •					
3			ferred, released, extinguished,	or terminated by	the organization	during	
	the taxable yea	ar <b>-</b>					
1	Number of stat	tes where property subject to conser	vation easement is located 🛌				
5	_			pection, handling	of violations, an	d <b>Tyes</b>	┌ No
5	Staff and volun	iteer hours devoted to monitoring, in	specting and enforcing conserv	ation easements	during the year	<b>-</b>	
7	A mount of exp	enses incurred in monitoring, inspec	ting, and enforcing conservation	n easements dur	ing the year 🟲 \$		
3		•	2(d) above satisfy the require	ments of section		☐ Yes	┌ No
•	balance sheet,	and include, if applicable, the text o	f the footnote to the organization	•			
aı	t IIII Organ	izations Maintaining Collect	ions of Art, Historical Tr		ther Similar	Assets.	
La					nd balance sheet	: works of	
	art, historical t	treasures, or other similar assets he	ld for public exhibition, educati	on or research in			е,
b	historical treas	sures, or other similar assets held fo	r public exhibition, education, o			•	
	(i) Revenues i	ncluded in Form 990, Part VIII, line	1		<b>►</b> \$		
	(ii) Assets Inc	luded in Form 990. Part X			<b>►</b> \$	3	16,405
2	If the organiza	tion received or held works of art, his					

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	<b>Titl</b> Organizations Maintaining Co	ollections of Art	, His	torical Tre	eası	ures, or O	<u>the</u>	r Similar <i>i</i>	Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e following th	iat ai	re a significa	nt u	se of its coll	ectio	n	
а	Public exhibition		d	☐ Loan or	rexc	:hange progr	ams				
b	Scholarly research		e	C Other							
С	✓ Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	they further	the	organızatıon	's ex	empt purpos	e in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•				nılar	$\vdash$	Yes	√ No
Pai	t IV Escrow and Custodial Arrang					n answered	Y" b	es" to Form	າ 990	),	
	Part IV, line 9, or reported an ar		•	•							
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ions	or other ass	ets	not	Γ	Yes	Г No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table		Г			_		
							_	•	A mou	ınt	
C	Beginning balance					-	1c				
d	Additions during the year					-	1d				
e	Distributions during the year					-	1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F		e 21?						Г	Yes	No
	If "Yes," explain the arrangement in Part XI			1 1157				. =			
Pa	rt V Endowment Funds. Complete	(a)Current Year		wered "Yes' )Prior Year				t IV, line 10 Three Years Ba		••••••••••••••••••••••••••••••••••••••	ears Back
la	Beginning of year balance	129,122,256	(,,	155,485,695	+	TWO TCGTS BGCF		Jimee rears be	ick (c	. <b>,</b> 1 Out 10	cars back
b	Contributions	742,425		788,435							
c	Investment earnings or losses	8,926,018		-24,764,095							
d	Grants or scholarships	4,576,447		2,387,779							
e	Other expenditures for facilities										
	and programs						_				
f	Administrative expenses	424.244.252		100 100 055			_				
g	End of year balance	134,214,252		129,122,256							
2	Provide the estimated percentage of the year		as								
а	Board designated or quasi-endowment 🕨	3.720 %									
b	Permanent endowment F 96.280 %										
c	Term endowment 🕨										
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	hat are held a	anda	administered	lfor	the		Yes	No
	(i) unrelated organizations							3	3a(i)	Yes	
	(ii) related organizations							3	a(ii)		Νο
b	If "Yes" to 3a(II), are the related organization								3b		
4	Describe in Part XIV the intended uses of th										
Pai	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Form 99 I	0, P	art X, line	<u> 10.</u>				
	Description of investment			(a) Cost or ot basis (investme		(b)Cost or otl basis (other		(c) Accumulat depreciation		( <b>d</b> ) Boo	k value
1a	Land					1,763,	196				1,763,196
b	Buildings					188,026,	399	83,475,	581	104	1,550,818
c	Leasehold improvements										
d	Equipment					21,084,	514	13,743,	378	-	7,341,136
e	Other					15,587,	289			15	5,587,289

129,242,439

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other ALTERNATIVE INVESTMENTS	27,964,040	
TRUSTS HELD BY OTHERS	2,362,332	
SPLIT INTEREST AGREEMENTS	3,557,470	
OTHER	366,509	
	,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	0.72007001	
Part VIII Investments—Program Related. See	Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation 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 X, lin (a) Descrip		(b) Book value
(4) 2 6 6 6 1		(D) DOOK VALUE
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X	, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes  ACCRUED POSTRETIREMENT BENEFIT	5 043 277	
ANNUITIES PAYABLE	5,043,277 2,077,688	
CONDITIONAL ASSET RETIREMENT	5,883,270	
REFUNDABLE ADVANCES	5,131,056	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	18,135,291	

Sched	die D (1 01111 990) 2009						Page 4
Par	t XI Reconciliation of C	hange in Net Assets from For	m 990 t	to Fi	inancial Stateme	nts	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)				1	211,532,195
2	Total expenses (Form 990, Par	t IX, column (A), line 25)				2	203,015,943
3	Excess or (deficit) for the year	Subtract line 2 from line 1				3	8,516,252
4	Net unrealized gains (losses) o	n investments				4	1,445,295
5	Donated services and use of fa	cilities				5	
6	Investment expenses					6	
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	-4,247,433
9	Total adjustments (net) Add III	nes 4 - 8				9	-2,802,138
10	• , ,	per financial statements Combine line	s 3 and 9	a		10	5,714,114
		evenue per Audited Financial			s With Revenue i		
1		r support per audited financial stateme				1	174,791,361
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12					
а	Net unrealized gains on invest	ments	. 2	a	1,445,295		
ь	Donated services and use of fa	acılıtıes	. 21	ь			
c	Recoveries of prior year grants	5	. 2	c			
d	Other (Describe in Part XIV)		20	d			
e	Add lines <b>2a</b> through <b>2d .</b>			•		2e	1,445,295
3	Subtract line <b>2e</b> from line <b>1</b> .					3	173,346,066
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	. 4	a	1,551,733		
b	Other (Describe in Part XIV)		. 41	ь	36,634,396		
c	Add lines <b>4a</b> and <b>4b</b>					4c	38,186,129
5	Total Revenue Add lines <b>3</b> an	d <b>4c.</b> (This should equal Form 990, Par	t I, line 1	12)		5	211,532,195
Part	XIII Reconciliation of E	xpenses per Audited Financia	<b>I State</b>	<u>men</u>	ts With Expenses	per	Return
1	Total expenses and losses per statements	r audited financial				1	164,829,814
2		t not on Form 990, Part IX, line 25				F-	
a	Donated services and use of fa			2a			
b	Prior year adjustments		<del>-</del>	2b		1	
c	Other losses			2c		1	
d	Other (Describe in Part XIV)			2d	862,122	1	
e	Add lines 2a through 2d					2e	862,122
3	Subtract line <b>2e</b> from line <b>1</b> .					3	163,967,692
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4	4a	1,551,733		
b	Other (Describe in Part XIV)		. [	4b	37,496,518	1	
c	Add lines 4a and 4b					4c	39,048,251
5	Total expenses Add lines <b>3</b> ar	nd <b>4c.</b> (This should equal Form 990, Pa	rt I, line	18)		5	203,015,943
Par	t XIV Supplemental Inf	ormation					
Part		scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part XI					
	Ident if ier	Ret urn Reference			Explanat	ion	
HIST	ECTIONS OF ART, ORICAL TREASURES, OR ER SIMILAR ASSETS	FORM 990, SCHEDULE D, PART III			2		
	NAMENT FINDS	FORM OOD SCHEDIIIED BARTV	I TNE 4	the	Instituto's andowment	fundi	s intended to support

Ident if ier	Return Reference	Explanation
COLLECTIONS OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS	FORM 990, SCHEDULE D, PART III	
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V	LINE 4 - the Institute's endowment fund is intended to support scholarships for undergraduate and graduate students, and to provide financial assistance for programs and services conducted by the Institute
INCOMETAXES	FORM 990, SCHEDULE D, PART X	The Institute adopted ASC 740-10 as of July 1, 2007 ASC 740-10 clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This section provides that the tax effects from an uncertain tax position can be recognized in the financial statements only if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. The Institute has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and to review other matters that may be considered tax positions. Management of the Institute believes there are no uncertain tax positions. Therefore, the adoption of ASC 740-10 did not have any impact on the Institute's financial statements.
RECONCILIATION OF CHANGE IN NET ASSETS	FORM 990, SCHEDULE D, PART XI, LINE 8	post-retirement benefit changes other than periodic costs \$(1,698,540) change in value of split interest agreements 75,700 OTHER (2,624,593) TOTAL \$(4,247,433) =========
OTHER REVENUE INCLUDED ON RETURN BUT NOT ON BOOKS	FORM 990, SCHEDULE D, PART XII, LINE 4b	SCHOLARSHIPS NET ON Financial statements reclassed to expenses (Part IX, Line 2) \$37,496,518 Book store costs of goods sold, net of interdepartment sales, included in expenses on financial statements (\$862,122) Total \$36,634,396 ===========
OTHER EXPENSES INCLUDED ON RETURN BUT NOT ON BOOKS	FORM 990, SCHEDULE D, PART XIII, LINE 2d	Book store costs of goods sold, net of interdepartment sales, included in expenses on financial statements (\$862,122) ======== FORM 990, SCHEDULE D, PART XIII, LINE 4b SCHOLARSHIPS NET ON Financial statements reclassed to expenses (Part IX, Line 2) \$37,496,518 ==========

**Employer identification number** 

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY

### **Schools**

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public

	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?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3	Yes	
	THE STEVENS INSTITUTE OF TECHNOLOGY NONDISCRIMINATION POLICY IS DISTRIBUTED ANNUALLY AS WELL AS PRINTED IN STUDENT MATERIALS AND ON ITS WEBSITE			
4	Does the organization maintain the following?			
	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 basis?	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	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
6-	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)  Does the organization receive any financial aid or assistance from a governmental agency?	- - - 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b	163	Νo
	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form		Yes	
	990)	'		ı

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As Filed Data -

DLN: 93493136073521

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury

#### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection** 

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

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

Activities per Region (Ilse Schedule F-1 (Form 990) if additional space is peeded )

3 Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed )		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	for region
Central America and the Caribbean	1	2	Program Services	GRADUATE EDUCATION	227,387
East Asia and the Pacific	0	1	Program Services	continuing education	85,000
South Asia	0	1	Program Services	academic recruiting	26,260
Central America and the Caribbean	0	0	Grantmakıng		29,150
Central America and the Caribbean			Investments		
Totals ▶	1	4			367,797
For Privacy Act and Paperwork R	Reduction Act Notic	e, see the Instruc	tions for Form 990.	Cat No 50082W Sche	edule F (Form 990) 2009

Part IV	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Schedule F-1 (Form 990) if additional space is needed.								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►		
3 Enter total n	Enter total number of other organizations or entities								

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of cash grant disbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other) SCHOLARSHIPS Cent 22 29,150 other A merica/Caribbean

Schedule F (Form 990) 2009

Complete this part to	ormation  o provide the information required	d in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
STATEMENT OF ACTIVITIES OUTSIDE THE UNITED STATES	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 Student scholarships are applied to the students' bursar accounts, therefore, there are no cash transactions involving the students

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493136073521

**SCHEDULE G** (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities** 

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY

**Employer identification number** 

							22-1487354	l .			
Pā		<b>ctivities.</b> Comple ers are not require					to Form 990, Part IV	/, line 17.			
1	Indicate whether the org	janization raised fund	s through a	any of the	e follow	ing activities Ch	eck all that apply				
а	Mail solicitations			е	e Solicitation of non-government grants						
ь	Internet and e-mail	solicitations		f		Solicitation of go	5				
c	Phone solicitations			а		Special fundraisi	<del>-</del>				
d	☐ In-person solicitation	ons				•					
2a b	Did the organization hav or key employees listed If "Yes," list the ten high to be compensated at le	ın Form 990, Part VI nest paid individuals o	I) or entity or entities (	in conne (fundraise	ection v ers) pu	vith professional rsuant to agreem	fundraising activities? ents under which the fu				
	(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	1	Gross receipts om activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization			
			Yes	No							
SN/	AVELY ASSOCIATES	CAMPAIGN		No							
FF	RC INC	CAMPAIGN		No							
\ C	S SERVICES	CAMPAIGN		No							
ot	al			<b>.</b>							
_					•		•	·			

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

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					eport	:ed
		. ,	(a) Event #1  President Gala (event type)	(b) Event #2  Golf Outing (event type)	(c) O ther Events  1 (total number)	(d) Tot (Add col		
⊕ ¥	1	Gross receipts	104,698	78,881	17,180		20	0,759
Revenue	2	Less Charitable contributions	89,548	39,881	8,590		13	8,019
<u>~</u>	3	Gross income (line 1 minus line 2)	15,150	39,000	8,590		6.	2,740
	4	Cash prizes						
မွာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs	12,267	25,765	6,000		4	4,032
ğ	7	Food and beverages	30,097		2,000		3.	2,097
Direct	8	Entertainment	500					500
Δ	9	Other direct expenses .	34,348	539			3.	4,887
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	•		11	1,516
	11	Net income summary Combine III	nes 3, column d, and line	10			-4	8,776
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir	ganızatıon answered ' ne 6a.	'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more	e thar	1
Revenue			(a) Bingo	( <b>b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col col		
		Gross revenue						
Ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
Direct E	4	Rent/facility costs						
<u></u>	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes	│ Yes			
		Direct expense summary Add lines  Net gaming income summary Com						
		The gaming medice summary com	bille filles 1, column d, ar	id line 7			Yes	No
9 a b	Is t	er the state(s) in which the organiza he organization licensed to operate No," Explain			<del></del> .	· 9a		
_		,						
10a b		re any of the organization's gaming l Yes," Explain	icenses revoked, suspen	ded or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming a he organization a grantor, beneficia ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ıp or other entity	11		
					Schedule G (Form 9		EZ) 20	09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493136073521 OMB No 1545-0047

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

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

Open to Public Inspect ion

Internal Revenue Service Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable (book, FMV, appraisal, non-cash assistance or assistance grant cash other) or government assistance Enter total number of section 501(c)(3) and government organizations . . . . . . . . . . . . . . . .

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

(a)Type of grant or assistance	(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	4416	37,467,368			
See Additional Data Table					
			l		1

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

Ident if ier	Return Reference	Explanation
GRANTS AND OTHER ASSISTANCE IN THE US	FORM 990, SCHEDULE I, PART I, LINE 2	Scholarships and grants are awarded as financial assistance to students attending the Stevens Institute of Technology The distribution and application of the financial assistance are based on the specific criteria of each scholarship and grant and are administered consistent with federal, state, and institutional student aid policies. Administration of financial assistance is monitored on an on-going basis through a review of bi-weekly system-generated reports.
•		

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DLN: 93493136073521

**Employer identification number** 

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

JIL	PENSING INSTITUTE OF TECHNOLOGY		22-1487354			
Pa	rt I Questions Regarding Compensatio	n	=======================================			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	~	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision 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 organization's CEO/Executive Director Check all the contract of the	hat appl	y			
	Compensation committee		Written employment contract			
	Independent compensation consultant	<u>  -</u>	, ,			
	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 VII, Section A, line 1a with respect to the filing organization or a related organization					
а	eceive a severance payment or change-of-control payment?					Νo
b	articipate in, or receive payment from, a supplemental nonqualified retirement plan?				Yes	
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	plete lines 5-9.			
5	For persons listed in form $990$ , Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	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		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III					
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

#### 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 W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Harold J Raveche	(1) (11)	639,693 0	260,000 0	99,956 0	198,573 0	9,027 0	1,207,249 0	
Randy L Greene	(1) (11)	295,751 0	60,000	59,163 0	22,050 0	3,686 0	440,650 0	
Mark Samolewicz	(1) (11)	141,008 0	0	5,387 0	13,505 0	11,524 0	171,424 0	
FREDERICK REGAN	(1) (11)	251,076 0	10,000	13,388 0	22,050 0	11,396 0	307,910 0	
STUART TEWKSBURY	(ı) (ıı)	253,956 0	0	0	17,102 0	8,800 0	279,858 0	
Mıchael S Bruno	(ı) (ıı)	284,370 0	0	40,541 0	22,050	8,800 0	355,761 0	
Henry P Dobbelaar Jr	(I) (II)	247,680 0	30,000	2,050 0	20,600	0	300,330 0	
Lisa Dolling	(ı) (ıı)	154,787 0	0	0	11,469 0	0	166,256 0	
George P Korfiatis	(ı) (ıı)	403,264 0	90,000	74,018 0	22,050	5,856 0	595,188 0	
Maureen P Weatherall	(ı) (ıı)	305,719 0	75,000 0	80,165 0	22,050	3,856 0	486,790 0	
Dınesh Verma	(ı) (ıı)	335,813 0	0	<b>41,580</b> 0	19,600	11,524 0	408,517 0	
Lex McCusker	(ı) (ıı)	245,753 0	0	77,963 0	22,050	11,524 0	357,290 0	
Constantin Chassapis	(ı) (ıı)	285,451 0	0	0	20,412	11,524 0	317,387 0	
Souran Manoochehri	(ı) (ıı)	270,462 0	0	0	13,993 0	0	284,455 0	
Ralph Giffin	(ı) (ıı)	266,051 0	0	0	12,917 0	0	278,968 0	
Charles koeller	(1) (11)	155,432 0	- I	0	9,702	3,821		

#### 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 - 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
Schedule J, Part 1, Line 7	compensation	the stevens annual incentive plan provides a mechanism to reward faculty, administrative leaders, and key staff for extraordinary performance over a period of one academic year in contrast to merit-based salary increases, annual incentives do not increase base salary incentive compensation may be awarded upon a finding by management that an employee's work has been extraordinary and has clearly contributed toward the goals and mission of stevens incentive compensation, even in cases of extra ordinary performance, is not guaranteed, and decisions regarding incentive compensation will be subject to the board of trustees and others' determinations as to the financial results of the university and other factors not specified in this plan the following employee groups are eligible for participation in the plan faculty, staff, administration and executive leaders incentive compensation for faculty, staff and administration are recommended by managerial staff, are approved by the president and are within parameters established by the board of trustees incentive compensation for executive leaders is recommended by the human resources and compensation committee of the board of trustees and approved by the full board of trustees as part of its consideration of this group (and as further described in schedule O) each year, the board of trustees will approve a set of annual incentive performances metrics (performance measures) for the executive leaders and will review with the president the process for determining the metrics for each other group or sub-group of employees the metrics must be defined by the institutional performance metrics and the institutional core and strategic objectives levels of performance required for "minimum", "target" and "maximum" incentive compensation will be defined by group, sub-group or, where appropriate, at the level of individual employee performance
Deferred Compensation of President	II, Column C - Presidents Compensation	The Institute maintained a supplemental executive retirement plan (SERP) for the benefit of president Raveche who retired as of june 30, 2010. The plan provided 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 \$174,073 in the reported year and is therefore included in both schedules J-1 and J-2 of this return as deferred compensation. 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 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 \$174,073 and is reported in column C of this Form 990, as deferred compensation to the President.

Software ID: Software Version:

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

Form 990, Schedule J, Part		I - Officers, Direc	tors, Trustees, Ke	y Employees, and	l Highest Compen	sated Employees		
(A) Name	-	<b>(B)</b> Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(6)(1)-(0)	990 or Form 990-EZ
Harold J Raveche	(ı) (ıı)	639,693 0	260,000 0	99,956 0	198,573 0	9,027 0	1,207,249 0	0 0
Randy L Greene	(ı) (ıı)	295,751 0	60,000 0	59,163 0	22,050 0	3,686 0	440,650 0	0
Mark Samolewicz	(ı) (ıı)	141,008 0	0	5,387 0	13,505 0	11,524 0	171,424 0	0
FREDERICK REGAN	(ı) (ıı)	251,076 0	10,000 0	13,388 0	22,050 0	11,396 0	307,910 0	0 0
STUART TEWKSBURY	(ı) (ıı)	253,956 0	0	0 0	17,102 0	8,800 0	279,858 0	0 0
Michael S Bruno	(ı) (ıı)	284,370 0	0 0	40,541 0	22,050 0	8,800 0	355,761 0	0 0
Henry P Dobbelaar Jr	(ı) (ıı)	247,680 0	30,000 0	2,050 0	20,600 0	0	300,330	0 0
	(I) (II)	154,787 0	0 0	0 0	11,469 0	0	166,256 0	0 0
George P Korfiatis	(ı) (ıı)	403,264 0	90,000	74,018 0	22,050 0	5,856 0	595,188 0	0
Maureen P Weatherall	(ı) (ıı)	305,719 0	75,000 0	80,165 0	22,050 0	3,856 0	486,790 0	0
	(ı) (ıı)	335,813 0	0	<b>41</b> ,580 0	19,600 0	11,524 0	408,517 0	0
	(ı) (ıı)	245,753 0	0 0	77,963 0	22,050 0	11,524 0	357,290 0	0 0
	(ı) (ıı)	285,451 0	0 0	0	20,412 0	11,524 0	317,387 0	0 0
	(ı) (ıı)	270,462 0	0	0	13,993 0	0	284,455 0	0
Ralph Giffin	(ı) (ıı)	266,051 0	0	0	12,917 0	0	278,968 0	0
	(ı) (ıı)	155,432 0	0	0	9,702 0	3,821 0	168,955 0	0

**DLN: 93493136073521**OMB No 1545-0047

2000

2009

**Inspection** 

Open to Public

# **Supplemental Information on Tax Exempt Bonds**

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
 ★ Attach to Form 990.
 ★ See separate instructions.

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

Pa	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	<b>(f)</b> Des	cription of	Purpose	( <b>g</b> ) De	feased	Be	n) O n half of suer
											Yes	No	Yes	No
A	NJ Edu FAC Auth Capital IMP 2006A	22-1829511	64605LZ43	10-26-	2006	1	133,640	REFUNDING	REFUNDING OF PRIOR IS:			x		x
В	NJ EDU FAC AUTH CAPITAL IMP 2005 A 22-1829511 60605Lwwx		08-10-	2005	792,706 R		REFUNDING OF PRIOR ISSUES				×		×	
С	NJ EDU FAC AUTH DORM SAFETY 2003 A	22-1829511	64605NBU7	01-15-	2004	2	244,207	FINANCE D IMPROVEM		ΞΤΥ		×		х
D	NJ EDU FAC AUTH STEVENS ISSUE 2007 SERIES A	22-1829511	64605LZ43	08-02-	2007	71,6	33,268	REFUNDING	REFUNDING OF PRIOR ISSU			х		х
Pa	rt III Proceeds		•	•	•			•			•	•	•	
					A	ı	В		С		)		E	•
1	1 Total proceeds of issue			8	35,725,356					8.	5,725,35	6		
2	Gross proceeds in reserve funds				5,782,758						5,782,75	8		
3	Proceeds in refunding or defeasan	ice escrows		6	66,517,119					6	6,517,11	.9		
4	Other unspent proceeds													
5	Issuance costs from proceeds			1,535,969					1,535,96	9				
6	Working capital expenditures from	n proceeds												
7	Capital expenditures from proceed	ds												
8	Year of substantial completion			20	09			•		20	09			
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of a	a current refunding is	ssue?		Х		х		×		×			
10	Were the bonds issued as part of a	an advance refundinç	ıssue?		Х		Х		Х	Х				
11	Has the final allocation of proceed	ds been made?		х		х		Х		х				
12	Does the organization maintain ad the final allocation of proceeds?	dequate books and re	cords to support	Х		х		х		х				
Pa	rt IIII Private Business Use			_										
					<u> </u>		3		<u>c</u>	Г			E	-
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1 —	Was the organization a partner in which owned property financed by		ember of an LLC,		Х		Х		Х		Х			
				1	1	1	1	1	1	1		1	1	

Χ

which may result in private business use?

Are there any lease arrangements with respect to the financed property

Χ

Χ

Χ

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

		4	A		В	С		D			E
		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		Х		
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х		х		Х		х		
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?	х		х		x		х			
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		•				•				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х		х		х		х			
Da	rt IV Arbitrage	-		•	•	•	•	•	•	•	-

Part IV Arbitrage

		1	4	I	3		С	1	)	ı	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		x		х		x		
2	Is the bond issue a variable rate issue?		Х		х		Х		Х		
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		х		х		х		х		
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х		
ь	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		х		
6	Did the bond issue qualify for an exception to rebate?		х		Х		х		Х		
									Schedul	e K (Form 99(	1) 2009

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DLN: 93493136073521

# Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

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

1 (a) Name of disq	ualifiad	narcan		(1) 5		<b>.</b> .			(c) C	orrecte
1 (a) Name of disq	uaiiiieu	person		( <b>b)</b> Desc	ription (	of trans a	ection		Yes	No
										_
									_	
2 Enter the amount of tax impos	ed on th	ne organ	nızatıon managers or	disqualified perso	ns duri	ng the y	ear undei	-		
section 4958	• •							* \$ ——		
3 Enter the amount of tax, If any	, on line	2, abo	ve, reimbursed by the	e organization .				*		
Part III Loans to and/or										
Complete if the organiz	zation a T	nswere	d "Yes" on Form 990 T	, Part IV , line 26 , l	or Forn	n 990-E			a T	
- <b>. N</b>		oan to m the	(-)0		<b>(e)</b> In default?		(f) Approv	Approved		ten
(a) Name of interested person and		m the zation?	(c)O riginal	(d)Balance due			by board or committee?		agreeme	ent?
purpose	Julyann	Lation	principal amount	(-,				+ 2		
purpose		1	principal amount	(.,	Yes	No	commit		Yes	No
AROLD J RAVECHE	To	From	1		Yes	1	Yes	No No	Yes	No
AROLD J RAVECHE		1	928,314	784,324	Yes	1	commit		Yes	No
AROLD J RAVECHE		From	1		Yes	No	Yes			No
AROLD J RAVECHE		From	1		Yes	No	Yes			No
AROLD J RAVECHE		From	1		Yes	No	Yes			No
AROLD J RAVECHE ORTGAGE note	То	X X	928,314	784,324	Yes	No	Yes			No
AROLD J RAVECHE ORTGAGE note	То	From X	928,314	784,324	Yes	No	Yes			No
AROLD J RAVECHE ORTGAGE note	To	x X	928,314 928,314 <b>&gt;</b> \$	784,324 784,324 Persons.		No No	Yes			No
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No		
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314 * sing Interested Powered "Yes" on For	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No	Yes	
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No	Yes	
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No	Yes	
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No	Yes	
AROLD J RAVECHE ORTGAGE note  otal	To	X X	928,314 928,314	784,324 784,324 Persons. rm 990, Part IV en interested pers	, line 2	No No	Yes Yes	No	Yes	

(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
Lawrence T Babbio Jr	Chairman of the Board	795,172	See Schedule O		Νο
Vırgınıa P Ruesterholz	Board Trustee	255,103	See Schedule O		Νο
					<del>                                     </del>
				↓	<u> </u>

**NonCash Contributions** 

DLN: 93493136073521

OMB No 1545-0047

Open to Public Inspection

(Form 990)

**SCHEDULE M** 

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

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY

**Employer identification number** 

					22-1487354			
Pa	rt I Types of Property		T	T	T			
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of d rever	etermı	nıng	
1	Art—Works of art	аррпсавіс		19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
	Intellectual property							
	Securities—Publicly traded .	X	22	260,436	FM V			
	Securities—Closely held stock .			200,130	1117			
	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	SCIENTIFIC Other ► ( <u>EQUIPMENT</u> )	Х	1	20,000	FMV			
26	O ther ►()							
	O ther ►()							
	O ther ► ()							
29	Number of Forms 8283 received	by the org	anization during the tax yea	ar for contributions				
	for which the organization compl	eted Form 8	8283, Part IV, Donee Ackr	nowledgement	29			
							Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
ь	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	les or related organizations	to solicit, process, or sell	non-cash	32a	Yes	
ь 33	If "Yes," describe in Part II If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a	) is checked,			

#### 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.

Ident if ier	Return Reference	Explanation
NONCASH CONTRIBUTIONS	,	line 9 - To the extent that the Institute receives contributions of securities, the Institute's investment brokerage bank is tasked with selling those securities LINE 32 - The Institute uses various Galleries to facilitate the sale of art One piece of art was sold in fiscal year 2010 with a gross proceeds of \$80,000

Schedule M (Form 990) 2009

Software ID: **Software Version:** 

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

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**SCHEDULE 0** (Form 990)

Department of the Treasury

**Supplemental Information to Form 990** 

OMB No 1545-0047

DLN: 93493136073521

Inspection

Internal Revenue Service Name of the organization STEVENS INSTITUTE OF TECHNOLOGY  $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or to provide any additional information. ► Attach to Form 990.

Employer identification number

22-1487354

ldentifier	Return Reference	Explanation
GOVERNING BODY AND MANAGEMENT	FORM 990, PART VI, SECTION A	Line 2 - two of the institution's trustees, john a schepisi and stephen t boswell, disclosed in their respective annual conflict of interest disclosure statements that they jointly own a real estate holding company the institution has no business or other dealings with this company. Inne 4 - during the year, the board of trustees approved changes to the by-law's of the institution and adopted and/or modified charters of committees of the board of trustees these changes addressed. Iimits on board and committee the involvement of faculty trustees and participants in board activities, approval by the board of the annual form 990 and other matters relating to compensation of the president and senior officers, regular governance matters such as board assessment and training and committee duties and membership, and clarified that the president's role on the board is ex officio. all changes to the by-law's were fully reviewed by counsel to the institution and all current organizational documents of the institution are posted on the institution's website.

ldentifier	Return Reference	Explanation
POLICIES	FORM 990, PART VI, SECTION B	line 11a - this form 990 w as prepared by members of the finance and legal offices of the institution together with its outside tax and accounting firm specializing in higher education, the form 990 w as then presented to the audit committee of the board of trustees for review and approval following this process and any modifications recommended by the audit committee, the form 990 w as presented to a meeting of the full board of trustees of the institution and approved in accordance with the by-law's of the institution LINE 12c - the institution's conflict of interest policy requires ongoing compliance and self-reporting of conflicts it also provides for completion of an annual questionnaire by all trustees, officers and faculty, which questionnaire is reviewed by the office of compliance and internal audit and the general counsel and reported to the audit committee of the board and to the board of trustees information disclosed in the questionnaires which indicates the possible presence of a conflict is investigated, discussed with relevant personnel and, if necessary, the conflict is eliminated or managed pursuant to a conflict management plan or device supervised by the chair of the board of trustees or the chair of the audit committee, with advice from the office of audit, risk and compliance and the general counsel in addition, conflicts are identified by the officers of the institution and staff at other levels of the institution as they arise from time to time and are referred to office of audit, risk and compliance and the general counsel for further analysis and resolution certain conflicts relating solely to research activities may be managed by the director of the office sponsored programs, with advice from the office of audit, risk and compliance and the general counsel. LINE 15b - the total compensation of the persons occupying the following positions and any recommended adjustments were reviewed by the human resources committee of the board of trustees based on recommendations from the president

ldentifier	Return Reference	Explanation
DISCLOSURE	FORM 990, PART VI, SECTION C	LINE 19 - The Governing documents of the institution together with charters for committees of the board of trustees, the conflict of interest policy and the financial statements of the institution are all made available on the institutions website (www stevens edu) in addition, a variety of other documents and materials regarding the institution and its operations, as well as the other policies of the institution, are available on the website

ldentifier	Return Reference	Explanation
Schedule K		Part I Supplemental information 1 bond issue d - column (f) this issue advance refunded all of the outstanding principal amount of the revenue bonds, stevens institute of technology issue, 2004 series b issued on july 1, 2004 by the new jersey educational facilities authority ("njefa"), all of the revenue bonds, 2002 series c issued by njefa on december 1, 2002 and a portion of the revenue bonds, stevens institute of technology issue, 1998 series i issued by njefa on august 25, 1998 the refunded bonds financied capital improvements for the institute 2 bond issue b - columns (e) and (f) these bonds were issued in the par amount of \$15,077,352 to refund a portion of the njefa capital improvement fund (CFI) issues, series 2000 A, series 2000 b and series 2002 A CIF bonds were issued pursuant to a legislative program to finance capital improvements for new jersey colleges and universities eleven colleges received grants from the 2000 a, 2000 b and 2002 a bonds stevens received grants only from the 2000 a and 2000 b bonds the refunded bonds and the series 2005 a refunding bonds (bond issue b) are repayable in part by state appropriations the issue price shown on schedule k for the series 2005 a bonds is the approximate amount of the issue price allocable to the institute 3 bond issue a - columns (e) and (f) these bonds were issued in the par amount of \$155,460,000 to refund a portion of njefa's capital improvement fund issues, series 2000 a series 2000 b, series 2002 a and series 2004 a the 2000 a, 2000 b, 2002 a and 2004 a bonds were issued on july 1, 2000, december 30, 2000, november 21, 2002 and march 14, 2004 respectively at least eleven colleges received grants from these bonds stevens received grants only from 2000 a and 2000 b the refunded bonds and the series 2006 a refunding bonds (bond issue c) are repayable in part by state appropriations. The issue price shown on the schedule k for there funsing 2006 a bonds is the approximate amount of the allocable to the institute 4 bond issue c - columns (e) and (f)

ldentifier	Return Reference	Explanation
Schedule L, transactions With Interested Persons		Chairman of the Board, Law rence Babbio, also sits on the Board of Directors of Hew lett Packard Company. The Stevens Institute conducts business with Hew lett Packard Company (total fees of \$169,283) and with Hew lett Packard Financial Services (total fees of \$625,889). Board of Trustees Member, Virginia Ruesterholz, is the President of Verizon Telecom. The Stevens Institute conducts business with Verizon Wireless (total fees of \$168,007) and with Verizon Select Services (total fees of \$97,006).

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DLN: 93493136073521

**SCHEDULE R** (Form 990)

# **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

ame of the organization EVENS INSTITUTE OF TECHNOLOGY				Employer identi	fication number		
				22-1487354			
Part I Identification of Disregarded Entities (Complete	e if the organization	answered "Yes" on	Form 990, Part	(V, line 33.)			
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete if e tax year.)	the organization an	swered "Yes" on	Form 990, Part I	IV, line 34 because it had one		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu (if section 501(c)(3	(f) Is Direct controlling entity		
for Drivacy Act and Danorwork Poduction Act Notice, see the Instruction	<b>.</b>	Cat No 5013	<u> </u>		Schodulo P / Form 990\ 2009		

Part III	Identific	ation of Related (	Organi	zations Taxable as	s a Partnership (C	omplete if the orgar	nization answered "	Yes" on For	m 990, Part IV, line	34
	because it	t had one or more r	elated	organizations treated	d as a partnership di	uring the tax year.)				

(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, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j. Gener mana partr	gıng
							Yes	No		Yes	No				
											ŀ				

Part IV

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

					, ,		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) 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	NONE	C CORP	332,434	1,856,612	100 000 %
CASTLE POINT HOLDINGS INC ONE CASTLE POINT ON HUDSON HOBOKEN, NJ07030 20-4264786	tech transfer	NJ	None	C CORP	284	559,309	100 000 %

1j

11

1m

1n

10

1p Yes

1q Yes

Yes

1k Yes

No

No

No

No

No

Schedule R (Form 990) 2009								
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)							
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N				
<b>1</b> D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Yes					
b	Gift, grant, or capital contribution to other organization(s)	1b		N				
c	Gift, grant, or capital contribution from other organization(s)	1c		N				
d	Loans or loan guarantees to or for other organization(s)	1d	Yes					
е	Loans or loan guarantees by other organization(s)	1e		N				
f	Sale of assets to other organization(s)	1f		N				
g	Purchase of assets from other organization(s)	<b>1</b> g		N				
h	Exchange of assets	1h		N				
i	Lease of facilities, equipment, or other assets to other organization(s)	<b>1</b> i		N				
			T	$\vdash$				

j l	_ease of facilities,	equipment,	or other	assets	from	other	organization(s)	
-----	----------------------	------------	----------	--------	------	-------	-----------------	--

- **k** Performance of services or membership or fundraising solicitations for other organization(s)
- I Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- **p** Reimbursement paid by other organization for expenses
- **q** O ther transfer of cash or property to other organization(s)
- r O ther transfer of cash or property from other organization(s)

2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationsh	nips and transaction thres	holds
		4. \	

	•	
(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved
(1) CASTLE POINT HOLDINGS	А	43,501
(2) CASTLE POINT HOLDINGS	d	500,000
(3) Ravenswood Corporation	k,p	30,000
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	organizations?		(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General o managing partner?	
			Yes	No		Yes	No		Yes	N
										+
										t
										+
										t
									_	+
										t
										1
										$^{+}$
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										1

### Software ID: Software Version:

**EIN:** 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
<b>(A)</b> Name and Title	(B) Average hours	Posi t	tion ( hat a	che	')			(D)  Reportable compensation	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Lawrence T Babbio Jr Chairman/trustee	1 0	Х		х				0	0	0		
Kenneth W DeBaun Vıce Chaırman/trustee	1 0	Х		х				0	0	0		
Steven Shulman Vice Chairman/trustee	1 0	Х		х				0	0	0		
Harold J Raveche President (Retired 06/30/10)	60 0	Х		х				999,649	0	207,600		
Stephen T Boswell trustee	1 0	Х						0	0	0		
Thomas A Corcoran trustee	1 0	Х						0	0	0		
Edward C Eichhorn trustee	1 0	Х						0	0	0		
David J Farber trustee	1 0	Х						0	0	0		
Martin C Fliesler trustee	1 0	Х						0	0	0		
Katherine E Freed trustee	1 0	Х						0	0	0		
Mark LaRosa trustee	1 0	Х						0	0	0		
Richard S Magee trustee	1 0	Х						30,000	0	0		
Spyros Polemis trustee	1 0	Х						0	0	0		
Richard R Roscitt trustee	1 0	Х						0	0	0		
Vırgınıa P Ruesterholz trustee	1 0	Х						0	0	0		
John A Schepisi trustee	1 0	Х						0	0	0		
Frank S Sorrentino trustee	1 0	Х						0	0	0		
Richard F Spanier trustee	1 0	Х						0	0	0		
James M Walsh trustee	1 0	Х						0	0	0		
mary a doddy trustee	1 0	Х						0	0	0		
RONALD E SALLUZZO trustee	1 0	Х						45,548	0	0		
andrew g kaplan trustee	1 0	Х						0	0	0		
Philip P crowley trustee	1 0	Х						0	0	0		
frank j semcer sr trustee	1 0	Х						0	0	0		
Randy L Greene Treasurer	60 0			х				414,914	0	25,736		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

<b>(A)</b> Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Mark Samolewicz Secretary	60 0			х				146,395	0	25,029
Diana Colombo Assistant Secretary	60 0			х				75,606	0	17,029
FREDERICK REGAN vice president	60 0			х				274,464	0	33,446
Mıchael S Bruno Dean	60 0				х			324,911	0	30,850
Henry P Dobbelaar Jr Vice President	60 0				х			279,730	0	20,600
Lisa Dolling Dean	60 0				х			154,787	0	11,469
George P Korfiatis Provost	60 0				х			567,282	0	27,906
Maureen P Weatherall Vice President	60 0				х			460,884	0	25,906
Dinesh Verma Dean	60 0				х			377,393	0	31,124
Charles koeller Dean	60 0				х			155,432	0	13,523
STUART TEWKSBURY professor	60 0					Х		253,956	0	25,902
Lex McCusker associate Dean	60 0					х		323,716	0	33,574
Constantın Chassapıs Associate Dean	60 0					х		285,451	0	31,936
Souran Manoochehri Associate Dean	60 0					х		270,462	0	13,993
Ralph Gıffın Associate Provost	60 0					х		266,051	0	12,917

## Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
RESEARCH CONTRACTS	6,728,107	5,718,891	740,092	269,124
DINING ROOM FOOD PURCHASES	5,375,614	4,569,271	591,318	215,025
LABORATORY SUPPLIES	3,547,634	3,015,489	390,240	141,905
EQUIPMENT RENTAL	2,489,261	2,115,872	273,819	99,570
TELEPHONE	615,260	522,971	67,679	24,610