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DLN: 93493020003194

Form **990**

Department of the Treasury

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)

2011

OMB No 1545-0047

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

Open to Public

ntemal	Revenue	Service Prince organization may have to use a copy or the	this recurr to satisfy .	state reporting	requirements	Inspection			
A Fo	r the 2	2011 calendar year, or tax year beginning 07-01-2011	and ending 06-30-201	.2	D Employer ide	ntification number			
		pplicable C Name of organization RIDER UNIVERSITY				ntification number			
_	dress ch	Doing Business As		_	21-065067 E Telephone nu				
_	me cha	nge			-				
Ini	tıal retu	Number and street (or P O box it mail is not delivered to	o street address) Room/s	uite	(609) 896-5 G Gross receipts				
Te	rmınate	d 2083 LAWRENCEVILLE ROAD		-	G Gloss receipts	\$ 230,329,330 			
✓ Am	nended	return City or town, state or country, and ZIP + 4 LAWRENCEVILLE, NJ 086483099	•						
— Ap	plication	n pending							
		F Name and address of principal officer		H(a) Is thu	s a group returr	for			
		DR MORDECHAI ROZANSKI 2083 LAWRENCEVILLE ROAD		affiliat		⊤Yes ▽ No			
		LAWRENCEVILLE, NJ 086483099		H(h) Are all	affiliates include	ed?			
				1 ''		(see instructions)			
[Ta	ıx-exem	npt status \checkmark 501(c)(3) \checkmark 501(c) () \blacktriangleleft (insert no) \checkmark 494	7(a)(1) or 527		, p exemption nu				
ı w	ebsite	www.rider.edu		1					
€ For	m of or	ganization ✓ Corporation ┌ Trust ┌ Association ┌ Other ►		I Vear of for	mation 1865 M	State of legal domicile N			
	rt I	Summary		L fear of for	mation 1865 P	state of legal dofficile. No			
		<u> </u>							
		Briefly describe the organization's mission or most signific RIDER UNIVERSITY IS A PRIVATE, NOT-FOR-PROFIT		NDED IN 186	5				
3									
<u> </u>	-								
<u>.</u>									
aovemance	1	Check this box 🛏 if the organization discontinued its op			1 1				
ø		Number of voting members of the governing body (Part VI			3	3(
<u> </u>		Number of independent voting members of the governing by			4	29			
Acuvines &		Total number of individuals employed in calendar year 20			5	3,491			
ş		Total number of volunteers (estimate if necessary)			6	466			
•		Total unrelated business revenue from Part VIII, column	,		7a	1,018,925			
	Ь	Net unrelated business taxable income from Form 990-T,	, line 34		7b	-178,414			
				Prior	Year	Current Year			
a)	8	Contributions and grants (Part VIII, line 1h)			9,980,783	14,076,574			
žμ	9		rogram service revenue (Part VIII, line 2g)						
Ravenue	10	Investment income (Part VIII, column (A), lines 3, 4, a		7,358,667 2,464,526	2,250,746 1,808,183				
_	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						
	12	Total revenue—add lines 8 through 11 (must equal Part 12)			03,651,211	210,418,259			
	13	Grants and similar amounts paid (Part IX, column (A), I			47,465,753	49,414,605			
	14	Benefits paid to or for members (Part IX, column (A), lir			0	0			
	15	Salaries, other compensation, employee benefits (Part 1							
8		5-10)	, , , , , ,		94,408,951	96,741,654			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line	11e)		0	0			
ੜ	Ь	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 1,726,36$	69						
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 1	.1f-24e)		59,715,454				
	18	Total expenses Add lines 13-17 (must equal Part IX,	column (A), line 25)	1	95,810,205	205,871,713			
	19	Revenue less expenses Subtract line 18 from line 12			7,841,006	4,546,546			
8 68					of Current	End of Year			
9 4 4 4 4 4		Tabel access (Don't V. Inc. 45)			ear				
ASS HBs	20	Total assets (Part X, line 16)			19,164,022	228,544,406			
Net Assets of Fund Balances	21	Total liabilities (Part X, line 26)			96,344,798	105,020,433			
	22 11 1	Net assets or fund balances Subtract line 21 from line Signature Block	20		22,819,224	123,523,973			
		_	luding pecomposition	shadulaa	atomonto	the best of me			
now		Ities of perjury, I declare that I have examined this return, inc and belief, it is true, correct, and complete. Declaration of pre		er) is based on a	all information of				
	_	****** Signature of officer		20: Da	14-01-15 te				
Sigr Her				54					
	_	JULIE A KARNS TREASURER AND VP FINANCE Type or print name and title							
			ate	Check If	Dranarara taun-	ver identification number			
) _!_!		I Pleualei S L	014-01-15	self- (see instructions)					
Paid		Signature		employed 🕨 🦳	P00543209				
	arer's	Firm's name (or yours o'CONNOR DAVIES LLP if self-employed),		EIN ▶ 27-1728945					
JS6 (Only	address, and ZIP + 4 665 FIFTH AVENUE							
		NEW YORK, NY 10022			Phone no 🕨 (2	12) 286-2600			
					<u> </u>				

May the IRS discuss this return with the preparer shown above? (see instructions) . .

	2011)					r age 2
Par		t of Program Ser edule O contains a re			ı	
1	Briefly describe the	organization's mission	n			
SEE	SCHEDULE O FOR C	CONTINUATION				
2	Did the organization the prior Form 990		cant program se	ervices during the yea	r which were not listed or	☐ Yes 🔽 No
	If "Yes," describe th	iese new services on	Schedule O			
3	Did the organization services?	i cease conducting, o	make significar	nt changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Yes," describe th	iese changes on Sche	dule O			
4	expenses Section 5	501(c)(3) and 501(c)	(4) organizations	s and section 4947(a	nree largest program serv)(1) trusts are required to ch program service repor	report the amount of
	(Code) (Expenses \$	110,191,527	ıncludıng grants of \$	49,414,605) (Revenue	82,691,419)
	CURRENTLY ORGANIZE COLLEGE OF CONTINUI UNDERGRADUATES STI NUMBER 250, WITH 96 COLLEGES AND SCHOO ASSOCIATION TO ADVA THE ONLY SCHOOL IN I PROGRAMS AND THEIR TEACHER EDUCATION ASSOCIATION OF SCHO ACCREDITATION FROM IN THE SCHOOL OF ED	ED INTO FOUR COLLEGES - ING STUDIES, AND THE W UDENTS AND APPROXIMAT SM HOLDING A DOCTORAT ILS AND ALSO HOLDS SPEC INCE COLLEGIATE SCHOOL NEW JERSEY TO HOLD THE R APPLICABLE GRADUATE P - NASM - THE UNDERGRA DOLS OF MUSIC - CACREF I THE COUNCIL FOR ACCR	THE COLLEGE OF L ESTMINSTER COLLE- ELY 1,100 GRADUAT IALIZED ACCREDITA S OF BUSINESS) - R E SPECIALIZED AACS ROGRAMS ON BOTH DUATE AND GRADUA - RIDER'S GRADUA EDITATION OF COU BY THE NATIONAL A	IBERAL ARTS, EDUCATION GE OF THE ARTS THE PRI TE STUDENTS IN 69 UNDER DEGREE IN THEIR FIELD FATION WITH THESE PRESTILLIER IS AMONG THE SELES ACCREDITATION IN ACCIONAMENTO FOR THE SELES ARE ACCREDITATION IN ACCIONAMENTO FOR THE PROGRAM OF THE PROGRAM IN COUNSEIN SELING AND RELATED ED CCREDITATION OF SCHOOL	, AND SCIENCES, THE COLLEGINATE UNIVERSITY CURRENTLY GRADUATE AND 25 GRADUATE RIDER IS ACCREDITED BY THE I GIOUS EDUCATIONAL ORGANIZ OT BUSINESS SCHOOLS TO HAVE COUNTING - NCATE - ELEMENTA THE NATIONAL COUNCE TWESTMINSTER CHOIR COLLECT OUNCATION PROGRAMS - NASPICATION OF THE NATIONAL - NASPICATION OF THE SCHOOL OUCATION PROGRAMS - NASPICATION OF THE SCHOOL	DY PROGRAMS RIDER UNIVERSITY IS E OF BUSINESS ADMINISTRATION, THE SERVES APPROXIMATELY 4,700 E PROGRAMS FULL-TIME FACULTY MIDDLE STATES ASSOCIATION OF ATIONS - AACSB INTERNATIONAL (THISE ATTAINED THIS DISTINCTION AND ARY AND SECONDARY EDUCATION IL FOR THE ACCREDITATION OF GEARE ACCREDITED BY THE NATIONAL OF EDUCATION HOLDS NATIONAL THE SCHOOL PSYCHOLOGY PROGRAM CHEMICAL SOCIETY - RIDER'S
4b	(Code) (Expenses \$	29,117,140	including grants of \$) (Revenue	\$ 37,908,083)
	CAMPUS HOUSES APPR FOR DINING AND SNAC EXPRESS AND THE C-S	OXIMATELY 2,400 STUDEN CKING FOR STUDENTS, FA	BOARD RIDER UNIV ITS IN THIRTEEN RE CULTY, STAFF AND O MPUS HOUSES APPE	ESIDENCE HALLS AND SIX (GUESTS AT DALY'S DINING ROXIMATELY 200 STUDENT	GREEK HOUSES THE LAWRENC HALL, THE CRANBERRY CAFE, S IN THREE RESIDENCE HALLS	ON CAMPUS THE LAWRENCEVILLE EVILLE CAMPUS OFFERS FACILITIES THE BRONC DINER, STARBUCKS, POD THE PRINCETON CAMPUS OFFERS
 4с	(Code) (Expenses \$	24,298,547	ıncludıng grants of \$) (Revenue	\$ 33,059,939)
	STUDENT SERVICES R SOCIAL TALENTS OF IT	RIDER UNIVERSITY PROVID	ES THESE SERVICES	S TO THE ENTIRE STUDEN		O DEVELOP THE INTELLECTUAL AND
	(6-1-) (F::	47 704 05:			24.205.400.
	ACADEMIC INFORMATI	ON TECHNOLOGY, DEAN'S	OFFICES, LIBRARIE	s, thèater, art gallery		THE STUDENTS THESE INCLUDE LAR ACADEMIC ACTIVITIES RESEARCH
4d	Other program ser	vices (Describe in Sc	hedule O)			_
4d	Other program ser (Expenses \$	•	chedule O)	of \$) (Revenue \$	24,206,400)

art IV	Checklist o	f Reauired	Schedules

			V	N.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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 and IV.	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 and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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 $\textcircled{\textbf{5}}$	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		Νo
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		No
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
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
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? <i>If</i> "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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
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	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V \cdot . \cdot . \cdot . \cdot . \cdot . \cdot . $$	•		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 358			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4 a	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 or securities account)?	4a		No
b	,			
_	If "Yes," enter the name of the foreign country \(\blacktriangle \) See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Coc moductions for minig requirements for Form FB F 50 22 1, Report of Foreign Bunk and Financial Freedomics			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
r	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
•		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			N. a
	file Form 8282?	7 c		No
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization 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		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
h	required?	/y		
	Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	12d		
ט	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b		

<u> </u>	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶AK,AZ,CO,KY,ME,MD,MA,MI,NOR,MI	NH , N'	Ү,ОН,	ОΚ,

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 made these available. Check all that apply

Own website 🔽 Another's website 🔽 Upon request

(609)896-5009

- Describe in Schedule O whether (and if so, how), the organization made 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 organization > JENNIFER POTTER
 2083 LAWRENCEVILLE RD
 LAWRENCEVILLE, NJ 086483099

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

- 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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

(a) Name and Title A verage hours par week (describe hours for related organizations in Schedule O) See Additional Data Table (b) Position (do not check more than one box, unless person is both an officer and a director/trustee) (c) Position (do not check more than one box, unless person is both an officer and a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (de	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a				(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		
See Additional Data Table		for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	I
	See Additional Data Table										

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

	(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Rep comp fro organi:	(D) ortable ensation om the zation (W-	(E) Reportable compensatior from related organizations (W- 2/1099-		(F) Estimated amount of othe compensation from the organization ar related	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	
See A	Additional Data Table			+								\dashv		
				\vdash			+					\dashv		
				<u> </u>								\dashv		
				<u> </u>								_		
												_		
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				<u> </u>								\dashv		
							-					\dashv		
				<u> </u>	_			-				_		
												_		
1b	Sub-Total	'			٠.	٠.	1	<u> </u>				十		
	Total from continuation sheets					•		P						
d	Total (add lines 1b and 1c) .			•			•	•		3,310,616		0		791,012
2	Total number of individuals (incl \$100,000 of reportable compen						above) who	o receive	ed more tha	an			
													Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci	•			•	•			_			3		N.a
4	For any individual listed on line													No
•	organization and related organiz													
_	individual			•		•		•				4	Yes	<u> </u>
5	Did any person listed on line 1a services rendered to the organiz								-	ganization (or individual for	5		No
	ection B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	n the organizatio												
	Nai	(A) me and business ad	dress							Desc	(B) ription of services		Compe	
848 Y	KOVSKY MARK YARDVILLE-ALLENTOWN ROAD TON, NJ 08618	me ana basiness da									TION SERVICES		oompo.	891,329
THE 9	SPIEZLE ARCHITECTURAL GROUP SANHICAN DRIVE TON, NJ 08618									ARCHITECT	JRAL SERVICES			554,259
UNIV 385 (ERSITY ATHLETIC MANAGEMENT DXFORD VALLEY ROAD DLEY, PA 19067									MGMT FEE F	FOR SRC			507,268
PEPP 301 (CET HAMILTON LLP CARNEGIE CENTER SUITE 400 CETON, NJ 08543									LEGAL SERV	ICES			378,002
BRIAI 174 L	N'S TREE SERVICE INDBERGH ROAD WELL, NJ 08525									LANDSCAPIN	IG SERVICES			347,682

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \blacktriangleright 10

Part V	/##1	Statement o	f Revenue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
# #	1a	Federated cam	paigns 1a					
듄	ь	Membership du	es 1b					
ಕ್ಷ	c	Fundraising eve	ents 1c	180,518				
e <u>#</u>	d	_	zations 1d					
<u> </u>	e	Government grants		3,242,896				
쭚		_		10,653,160				
美量	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
会も	g		butions included in					
Contributions, gifts, grants and other similar amounts	١.		89,160	h.	14,076,574			
ပြဲက	h	iotal. Add lines	s 1a-1f		14,070,374			
<u>e</u>				Business Code				
e E	2a	TUITION AND FEES	5	611310	150,789,146	150,789,146		
<u> 8</u>	ь	ROOM AND BOARD)	611310	30,578,275	30,578,275		
- O	c	OTHER FEES		611130	5,553,788	5,553,788		
5 10	d	STUDY TOURS		611310	5,361,547	5,361,547		
ğ	e							
Program Service Revenue	f	All other progra	am service revenue					
ξ	_	Total Add lines	- 2- 2f	<u> </u>	102 202 756			
	g 3		ome (including dividen		192,282,756			
			ar amounts)		1,659,352		-22,927	1,682,279
	4		stment of tax-exempt bond	F			·	, ,
	· 5			· · · · · · · · · · · · · · · · · · ·				
		,	(ı) Real	(II) Personal				
	6a	Gross rents	267,909	44,603				
	ь	Less rental	0	0				
	c	expenses Rental income	267,909	44,603				
		or (loss)	·	·	242 542		44.500	267.000
	d	Net rental inco	me or (loss)		312,512		44,603	267,909
		Gross amount	(ı) Securities 46,596,647	(II) Other				
	7a	from sales of	40,330,047					
		assets other than inventory						
	ь	Less cost or other basis and	46,005,253					
		sales expenses						
	C	Gain or (loss)	591,394					
	d	Net gain or (los			591,394			591,394
As.	8a	Gross income f events (not inc	rom fundraising Luding					
ňu			,518					
च >-			reported on line 1c)					
쮼		See Part IV, III	ne 18 a l	0.4 570				
Other Revenue	ь	less directer	penses b	94,578 106,026				
툿	_ c		(loss) from fundraising	·	-11,448			-11,448
_	9a		rom gaming activities		·			
		See Part IV, lin						
			а					
	Ь		penses b					
	C		loss) from gamıng actı) I	vities				
	10a	Gross sales of returns and allo						
		and and	a a					
	ь	Less cost of g	oods sold b					
	c		ا loss) from sales of inve(entory 🟲				
		Miscellaneous	s Revenue	Business Code				
	11a	BUSINESS CO	NF CENTER	721000	1,376,428		935,823	440,605
	ь	VENDING MAC	CHINE COMMIS	722210	35,521			35,521
	c	SCIENTIFIC R	-	541700	33,678		33,678	
	d		ue		61,492		27,748	33,744
	e		s 11a-11d					
				▶-	1,507,119			
İ	12	Total revenue.	See Instructions .	►	210,418,259	192,282,756	1,018,925	3,040,004
					_10,.10,200			orm 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	heck if Schedule O contains a response to any question in this Part IX			<u>) </u>	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	49,414,605	49,414,605		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,434,788	1,201,570	846,178	387,040
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	72,378,292	63,383,311	8,157,276	837,705
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,460,190	2,930,592	493,112	36,486
9	Other employee benefits	12,751,010	10,799,409	1,817,148	134,453
10	Payroll taxes	5,717,374	4,842,303	814,784	60,287
11	Fees for services (non-employees)				
а	Management				
b	Legal	264,760		264,760	
C	Accounting	120,274		120,274	
d	Lobbying	6,474		6,474	
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	165,686		165,686	
g	Other	6,130,627	5,157,221	942,285	31,121
12	Advertising and promotion	1,080,359	443,138	607,629	29,592
13	Office expenses	5,046,510	2,977,638	2,003,707	65,165
14	Information technology	4,666,782	4,374,175	243,139	49,468
15	Royalties				
16	Occupancy	10,614,146	10,057,592	552,856	3,698
17	Travel	5,046,068	4,658,993	348,326	38,749
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,060,927	883,540	155,773	21,614
20	Interest	2,508,375	2,371,290	137,085	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,297,595	8,998,212	299,383	
23	Insurance	923,136	150,642	772,494	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	FOOD SERVICE	6,901,545	6,901,545		
b	LOSS DEFEASANCE OF DEBT	3,420,313		3,420,313	
С	MISCELLANEOUS	1,081,510	980,938	73,039	27,533
d	ALLOCATION AND BAD DEBT	689,895	184,817	505,078	
е					
f	All other expenses	690,472	687,014		3,458
25	Total functional expenses. Add lines 1 through 24f	205,871,713	181,398,545	22,746,799	1,726,369
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 31,838 25,966 1 1 19,213,762 20.282.054 2 2 Savings and temporary cash investments 3 13,445,313 17,657,292 5.493.501 3,492,158 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 8,120,422 7,646,200 7 8 9 4,130,707 9 2,505,464 Prepaid expenses and deferred charges 10a 219,344,764 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 105,376,910 b Less accumulated depreciation 106,632,128 10c 113,967,854 47,064,897 11 49, 157, 326 11 12,722,237 10,717,618 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 2,309,217 15 3,092,474 15 219, 164, 022 228,544,406 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 19, 149, 767 17 21,836,631 17 Accounts payable and accrued expenses . 18 18 19 4,973,414 19 9,773,485 20 53.938.010 20 54.986.046 21 177,257 21 57.851 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 2.013.863 23 1,878,717 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 16,092,487 25 16,487,703 D 26 96,344,798 26 105,020,433 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 66,886,679 27 61,730,630 Unrestricted net assets 21,915,644 28 27,349,201 28 Temporarily restricted net assets Fund 29 34,016,901 29 34,444,142 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 122.819.224 33 123.523.973 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 219.164.022 34 228.544.406

FG	Check if Schedule O contains a response to any question in this Part XI	-		. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2104	118,259
2	Total expenses (must equal Part IX, column (A), line 25)	2			371,713
3	Revenue less expenses Subtract line 2 from line 1	3		4,5	546,546
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		122,8	319,224
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-3,8	341,797
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		123,5	523,973
Pa	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		•	৮	
1	Accounting method used to prepare the Form 990			Yes	No
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 taudit, 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 is on a separate basis, consolidated basis, or both	ssued			
2-	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 reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Additional Data

Software ID:

Software Version: EIN: 21-0650678

Name: RIDER UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 17,791,331 including grants of \$) (Revenue \$ 24,206,400)

ACADEMIC SUPPORT (EXPENSES \$15,889,690 INCLUDING GRANTS OF \$0)(REVENUE \$21,619,078) - GENERAL SUPPORT TO THE STUDENTS THESE INCLUDE ACADEMIC INFORMATION TECHNOLOGY, DEAN'S OFFICES, LIBRARIES, THEATER, ART GALLERY, TV STUDIO, AND OTHER SIMILAR ACADEMIC ACTIVITIES RESEARCH (EXPENSES \$1,901,641 INCLUDING GRANTS OF \$0)(REVENUE \$2,587,322) - RESEARCH PERFORMED BY FACULTY AND STUDENTS Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and	Independe	ent Co	ntr	acto	ors			Г		
(A) Name and Title	(B) Average hours		(ition that		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
RALPH ANDERSON JR TRUSTEE	1 00	Х						0	0	0
ALBERTO BAPTISTE TRUSTEE	1 00	Х						0	0	0
NANCY H BECKER TRUSTEE	1 00	Х						0	0	0
ROBERT CHRISTIE TRUSTEE	1 00	Х						0	0	0
GREGORY A CHURCH TRUSTEE	1 00	Х						0	0	0
MARK C DEMAREO TRUSTEE	1 00	Х						0	0	0
E BRUCE DIDONATO TRUSTEE	1 00	Х						0	0	0
BONNIE S DIMUN TRUSTEE	1 00	Х						0	0	0
MOLLY O'NEIL FRANK TRUSTEE	1 00	X						0	0	0
HARRY T GAMBLE TRUSTEE	1 00	Х						0	0	0
ERNESTINE LAZENBY GAST TRUSTEE	1 00	Х						0	0	0
MICHAEL HENNESSY TRUSTEE	1 00	Х						0	0	0
PETER INVERSO TRUSTEE	1 00	Х						0	0	0
MICHAEL B KENNEDY TRUSTEE/ADJUNCT LECTURER	19 00	Х						19,817	0	316
THOMAS J LYNCH TRUSTEE	1 00	Х						0	0	0
THOMAS MARINO TRUSTEE	1 00	Х						0	0	0
TERRY K MCEWEN TRUSTEE/ADJUNCT LECTURER	19 00	Х						4,140	0	66
DONALD MONKS TRUSTEE	1 00	Х						0	0	0
ELI MORDECHAI TRUSTEE	1 00	Х						0	0	0
GERRY NAGY TRUSTEE	1 00	Х						0	0	0
CHRISTOPHER NIKOLICH TRUSTEE	1 00	Х						0	0	0
LEWIS PEPPERMAN TRUSTEE	1 00	Х						0	0	0
GARY PRUDEN TRUSTEE	1 00	Х						0	0	0
CARL REICHEL TRUSTEE	1 00	Х						0	0	0
WILLIAM M RUE TRUSTEE	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours		(tion that a	•	y)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustae 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
MIKA RYAN SECRETARY	1 00	Х		x				0	0	0
ASHOK B SHAH TRUSTEE	1 00	Х						0	0	0
GARY SHAPIRO VICE CHAIR	1 00	Х		х				0	0	0
ARTHUR J STAINMAN TRUSTEE	1 00	Х						0	0	0
HOWARD B STOECKEL CHAIR	1 00	Х		х				0	0	0
MORDECHAI ROZANSKI PRESIDENT	50 00			х				535,538	0	193,052
JULIE A KARNS VP FINANCE & TREASURER	50 00			х				295,231	0	24,421
DONALD A STEVEN PROVOST AND VP ACADEMIC AFFAIRS	50 00			х				252,425	0	33,765
JONATHAN MEER VP UNIVERSITY ADVANCEMENT	50 00			х				226,750	0	99,690
JAMES O'HARA VP ENROLLMENT MANAGEMENT	50 00				х			217,094	0	26,451
LARRY M NEWMAN DEAN COLLEGE OF BUSINESS ADMINISTRATION	37 50				х			193,096	0	30,210
WILLIAM N ROELL SR ASSOCIATE VP FINANCE AND CONTROLLER	37 50				х			180,550	0	18,261
ROBERT L ANNIS DEAN AND DIRECTOR WCA	37 50				х			179,836	0	91,238
PATRICIA MOSTO DEAN COLLEGE OF LIBERAL ARTS, EDUCATION, SCIENCE	37 50				х			165,907	0	22,535
ANTHONY CAMPBELL ASSOC VP STUDENT AFFAIRS/DEAN STUDENTS	37 50				х			160,510	0	44,015
IRA B SPROTZER CHAIR, MARKETING, ADVERTISING LEGAL STUDIES	37 50					х		181,876	0	70,645
MARGARET O'REILLY-ALLEN CHAIR, ACCOUNTING	37 50					х		179,685	0	31,603
JAMES E RIGGS PROFESSOR, BIOLOGY	37 50					х		175,035	0	37,928
BORIS VILIC DEAN COLLEGE OF CONTINUING STUDIES	37 50					х		171,743	0	34,410
MAURY R RANDALL CHAIR, FINANCE AND ECONOMICS	37 50					x		171,383	0	32,406

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

RIDER UNIVERSITY

Name of the organization

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

4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Inspection **Employer identification number**

Pai	+ T	Poss	on for De	ıblic Charity Sta	tue (All or	nanizationo	must com	nlata thic r	21-0650		nc.		
				te foundation becaus		_				nstructio	פות		
1	- gain			ion of churches, or a					~				
2	<u> </u>			d in section 170(b)(1				')(±)(A)(')·					
	ļ*							- 170(b)(1)	(A)(:::)				
3	<u> </u>			perative hospital se						(4)(4)(
4	ı			h organızatıon opera ıty, and state	ted in conjun	ction with a	hospital des	cribed in se	ction 170(b)	(1)(A)(III	i). Entei	r the	
5	Γ	=	•	erated for the benefi	_	or universi	ty owned or o	perated by	a governmer	ital unit d	escribe	- d ın	
	_			(A)(iv). (Complete P	•								
6	<u> </u>			local government o									
7	ı	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ental unit or i	from the <u>c</u>	jeneral	public	
8	\sqcap	A com	munity trust	: described in sect ioi	n 170(b)(1)(A)(vi) (Cor	nplete Part II	[)					
9 An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gros					SS								
		receipt	s from activ	rities related to its e	xempt function	ons—subjec	t to certain e	xceptions, a	and (2) no m	ore than 3	3 3 1/3%	of	
				oss investment inco									
				ganızatıon after June						,			
10	Γ			ganized and operate	•			•	•				
11	,			ganized and operate						to carry o	out the r	ournos	ses of
	•	one or the box	more public	ly supported organiz ibes the type of supp b Type I	ations descr porting organ	ibed in sect ization and (ion 509(a)(1) or section s 11e throu	509(a)(2) S gh 11h	ee sectio		a)(3).	Check
e	Γ	other the section	han foundat n 509(a)(2)	ox, I certify that the ion managers and ot	her than one	or more pub	olicly support	ed organiza	tions describ	ed in sec	tion 50	9(a)(1) or
f g		check	this box	received a written d 2006, has the organ						III suppo	orting o	rganız	ation,
			ng persons?		,	, 3		,			_		
		(i) a pe	erson who di	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)	_		Yes	No
		and (111) below, the	governing body of th	ne the suppor	ted organiza	atıon?				11g(i)		
		(ii) a fa	amily memb	er of a person descrı	bed in (i) abo	ve?					11g(ii)		
		(iii) a 3	35% contro	lled entity of a perso	n described i	ın (ı) or (ıı) a	above?			1	.1g(iii)		
h		Provide	e the followi	ng information about	the supporte	ed organızat	ion(s)						
(i) Name suppo organiz		e of rted	(ii) EIN	Ines 1- 9 above your governing document?			(v) Did you not organizat col (i) of suppor	notify the Is the zation in organization ir) of your col (i) organize				(vii) A mount of support?	
				(see instructions))	Yes	No	Yes	No	Yes	No			
				· · ·									
							1						
							1						
Total							1						

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

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. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493020003194

OMB No 1545-0047

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 V, 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

Se Se Se	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 ection 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part III ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line	A Dor Part⊪B	not co 3 Do i	mplet not co	e Part II-B Implete Part		
	ection 501(c)(4), (5), or (6) organizations. Complete Part III			- + · £ ·	.		_
	me of the organization EDER UNIVERSITY	mpioye	:r idei	ntifica	ition numb	er	
		1-065					
Par	t I-A Complete if the organization is exempt under section 501(c) or is a se	ction	527	7 org	anizatio	n.	_
1	Provide a description of the organization's direct and indirect political campaign activities on behavin opposition to candidates for public office in Part IV	ılf of or					
2	Political expenditures	Þ	p -	\$			
3	Volunteer hours						
							_
Par	t I-B Complete if the organization is exempt under section 501(c)(3).						_
1	Enter the amount of any excise tax incurred by the organization under section 4955		•	\$			_
2	Enter the amount of any excise tax incurred by organization managers under section 4955		►	\$			_
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				┌ Yes	┌ No	
4a	Was a correction made?				☐ Yes	┌ No	
ь	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	n 50	1(c)	(3).		_
1	Enter the amount directly expended by the filing organization for section 527 exempt function acti	vities	F	\$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5 accepts funding activities	27	F	\$ <u></u>			
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	•	\$			
4	Did the filing organization file Form 1120-POL for this year?			T —	☐ Yes	┌ No	_
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing or amount of political contributions received that were promptly and directly delivered to a separate	ganızat politica	ion's al orga	funds anızat	Also ente ion, such a	er the	

(a) Name	(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-

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
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(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
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Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	Over \$1,500,000 but not over \$17,000,000 \$22.			\$225,000 plus 5% of the	excess over \$1,500,			
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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

		(a)		(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
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		3,696	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		9,700	
i	Other activities? If "Yes," describe in Part IV	Yes		6,049	
j	Total lines 1c through 1:			19,445	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

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

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

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

- 1 Dues, assessments and similar amounts from members
- 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).
- Current year
- b Carryover from last year
- c
- 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 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?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING	PART II-B, LINE 1	PART II-B, LINE 1(B) AND LINE 1(G) - PAID STAFF AND
ACTIVITIES	,	DIRECT CONTACT THE PRESIDENT MET WITH KEY
		LEGISLATORS AND POLICYMAKERS IN AN EFFORT TO
		ADVOCATE ON BEHALF OF THE STUDENTS AT RIDER
		UNIVERSITY WHO RECEIVE FINANCIAL SUPPORT FROM
		THE STATE AND FEDERAL GOVERNMENT PART II-B, LINE 1
		(H) - SPEECHES, LECTURES THE ASSOCIATION OF
		INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW
		JERSEY (AICUNJ) IS COMMITTED TO THE ADVANCEMENT
		OF INDEPENDENT HIGHER EDUCATION IN NEW JERSEY IT
		SERVES AS A LIAISON WITH THE STATE AND FEDERAL
		GOVERNMENT ON BEHALF OF THE INDEPENDENT SECTOR
		THE PRESIDENT OF RIDER UNIVERSITY ATTENDED AICUNJ
		MEETINGS THROUGHOUT FISCAL YEAR 2012 AND
		SUPPORTED ITS EFFORTS TO ADVOCATE ON BEHALF OF
		RIDER AND THE INDEPENDENT SECTOR PART II-B, LINE 1
		(I) - OTHER LOBBYING ACTIVITIES THE UNIVERSITY
		PAYS ANNUAL ASSOCIATION DUES TO THE ASSOCIATION
		OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW
		JERSEY (AICUNJ) AND TO THE NATIONAL ASSOCIATION
		OF INDEPENDENT COLLEGES AND UNIVERSITIES AMONG
		OTHER SERVICES, THESE ASSOCIATIONS LOBBY ON
		BEHALF OF SECTOR NEEDS

2a

2b

2c 3

4

5

DLN: 93493020003194

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

			Emp	loyer identification number
KIL	ZER ONIVERSITI		21-0	0650678
Pa	Employer identif kation number ### UNMPRISTIT Coganizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, Ime 6. Total number at end of year Aggregate contributions to (during year) Aggregate contributions to (during year) Aggregate actin from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organizations property, subject to the organizations exclusive legal control? Pyes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Pyes No ### If Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Protection of severation easements Done seament on the last day of the tax year Total number of conservation easements Number of conservation easements and certified historic structure included in (a) Number of conservation easements and certified historic structure included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxbile year P Number of states where property subject to conservation easement is located P Does the organization have a written policy			
	organization answered Yes to Form 99		Τ ,	(h) Funds and other accounts
L	Total number at end of year	(a) bonor davised fands	<u> </u>	(c), and and coner decounts
2	·			
3			 	
ļ				
5	Did the organization inform all donors and donor advi		nor advi	
5	Did the organization inform all grantees, donors, and	donor advisors in writing that grant funds		e
			,	
Pa	rt III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	to Forn	n 990, Part IV, line 7.
L 2	Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation of ar Preservation of a	certifie	d historic structure
	easement on the last day of the tax year			Hold at the Fud of the Year
а	Total number of conservation easements		22	neid at the End of the Year
a b				
	•			
d		• •		
u 3				
1 5	Number of states where property subject to conserva	the periodic monitoring, inspection, han	 Idling of	
5	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easen	nents d	uring the year 🛌
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement	s durin	g the year
	▶ \$			
3		(d) above satisfy the requirements of sec	ction	┌ Yes
•	balance sheet, and include, if applicable, the text of t	he footnote to the organization's financia		
aı			or Ot	her Similar Assets.
La	art, historical treasures, or other similar assets held	for public exhibition, education or resear	ch in fu	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research		
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X			► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		or finan	
а	Revenues included in Form 990, Part VIII, line 1			▶ \$
ь				<u></u>

Part	•••• Organizations Maintaining Co	llections of Art,	<u>His</u>	tori	<u>cal Tre</u>	easures, or C)the	<u>r Similar A</u>	ssets	(cor	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne foll	lowing th	nat are a signific	ant u	ise of its colle	ction		
а	Public exhibition		d	\sqcap	Loan o	r exchange prog	rams	i e			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	allections and evolar	n hov	w the	v further	the organization	ח'כ בי	zemnt nurnose	ın		
7	Part XIV					_			. 111		
5	During the year, did the organization solicit assets to be sold to raise funds rather than	o be maintained as	part c	of the	organız	atıon's collectıo	n?		┌ Ye	:s	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						ed "Y	es" to Form	990,		
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	dıary	for c	ontribut	ions or other as:	sets	not	┌ Ye	:s	√ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the f	follow	/ıng ta	able	Γ			mount		
_	Dammung balanca					-	1.0		mount		
q C	Beginning balance					}	1c				
d	Additions during the year					}	1d				
e •	Distributions during the year					}	1e			—	
f	Ending balance					L	1f				
2a	Did the organization include an amount on Fo		21?						✓ Ye	:S	│ No
	If "Yes," explain the arrangement in Part XI\				1 1157						
Pa	rt V Endowment Funds. Complete	f the organization (a)Current Year		were Prior		to Form 990 (c)Two Years Back		<u>rt IV, line 10</u> I)Three Years Bad		our V	ears Back
1a	Beginning of year balance	54,217,784	(0)		,854,412	46,094,7	_	58,413,1	_	Jul 16	cars back
b	Contributions	393,521			991,104	814,0	_	1,240,5	_		
c	Investment earnings or losses	-1,173,168		7	,435,943	3,745,2		-11,078,4			
d	Grants or scholarships	1,251,792			,199,947	1,036,6		1,645,6			
e e	Other expenditures for facilities	690,559			,863,728	763,0	_	834,7	_		
-	and programs			_	, ,	,-		,-			
f	Administrative expenses										
g	End of year balance	51,495,786		54	,217,784	48,854,4	12	46,094,7	54		
2	Provide the estimated percentage of the yea	r end balance held a	ıs								
а	Board designated or quasi-endowment 🕨	23 600 %									
b	Permanent endowment ► 76 400 %										
c	Term endowment ► 0 %										
3a	Are there endowment funds not in the posse	ssion of the organiza	ition 1	that a	are held	and administere	d for	the			
	organization by								Y	/es	No
	(i) unrelated organizations							3	1(i)		Νo
	(ii) related organizations						•	· · · -	(ii)	ļ	No
	If "Yes" to 3a(II), are the related organizatio	•					•	🗀	3b	$_{\perp}$	
4	Describe in Part XIV the intended uses of th										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	irt X	, line 10	<u>0.</u>		I			
	Description of property				Cost or ot s (investm			(c) Accumulate depreciation	d (d) Boo	k value
1a	Land				3,325	,000 25	3,359			3	3,578,359
b	Buildings					153,01	3,693	70,569,9	62	82	,448,731
c	Leasehold improvements					-		,	\top		-
d	Equipment					14,788	3,575	11,370,3	36		3,418,239
	Other					47,959		23,436,6	_		,522,525
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colun	nn (B)), line	10(c).)						3,967,854
	, , , , , , , , , , , , , , , , , , , ,	. ,	. ,		. , , ,			Schedule	D (For		
								Scheaule	D (FOR	m 95	JU) ZUI

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	, ,	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
(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) 2000	NATO II	(5) 500 (14)
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	16,487,703	
2 Fin 48 (ASC 740) Footpote In Part VIV provide the tax		nization's financial statements that reports the

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	210,418,259
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	205,871,713
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,546,546
4	Net unrealized gains (losses) on investments	4	-2,710,045
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,131,752
9	Total adjustments (net) Add lines 4 - 8	9	-3,841,797
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	704,749
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	158,127,923
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-2,710,045
3	Subtract line 2e from line 1	3	160,837,968
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 165,686		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4 c	49,580,291
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	210,418,259
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	157,423,174
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,131,752
3	Subtract line 2e from line 1	3	156,291,422
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 165,686		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	49,580,291
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	205,871,713

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	THE UNIVERSITY IS A CUSTODIAN OF SEVERAL AGENCY ACCOUNTS TOTALING \$57,851 THE AGENCY ACCOUNTS PRIMARILY RELATE TO STUDENT ORGANIZATIONS FOR WHICH THE UNIVERSITY HOLDS THE FUNDS FOR EACH ORGANIZATION UNTIL SUCH TIME AS A CHECK REQUEST IS SUBMITTED BY THE ORGANIZATION FOR REIMBURSEMENT THIS AMOUNT IS RECORDED AS A LIABILITY ON THE UNIVERSITY'S BALANCE SHEET
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT SPENDING POLICY SUPPORTS SCHOLARSHIPS, GRANTS, FACILITIES, AND PROGRAMS, IN ACCORDANCE WITH THE UNIVERSITY'S MISSION AND DONOR'S RESTRICTIONS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF PENSION -1,131,752
		PART X - OTHER LIABILITIES - UNCERTAIN TAX POSITIONS UNDER FIN 48 THE UNIVERSITY IS AN ORGANIZATION DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND THEREFORE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE CODE ACCORDINGLY, THE UNIVERSITY IS NOT SUBJECT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE THE UNIVERSITY RECOGNIZES THE EFFECTS OF INCOME TAX PROVISIONS ONLY IF THOSE PROVISIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED NO PROVISION FOR INCOME TAXES WAS REQUIRED IN 2012 AND 2011 PART XII, LINE 4B - OTHER AMOUNTS INCLUDED ON FORM 990, PART VIII, LINE 12, BUT NOT ON LINE 1 SCHOLARSHIP ALLOWANCE - TUITION AND FEES \$49,124,621 SCHOLARSHIP ALLOWANCE - AUXILIARIES \$289,984 PART XIII, LINE 2D - OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25 CHANGE IN VALUE OF PENSION <\$1,131,752> PART XIII, LINE 4B - OTHER AMOUNTS INCLUDED ON FORM 990, PART IX, LINE 25, BUT NOT ON LINE 1 SCHOLARSHIP ALLOWANCE - TUITION AND FEES \$49,124,621 SCHOLARSHIP ALLOWANCE - AUXILIARIES \$289,984

Additional Data

Software ID: Software Version:

EIN: 21-0650678

Name: RIDER UNIVERSITY

Form 990, Schedule D, Part X, - Other Liabilities (a) Description of Liability

1 (a) Description of Elability	(b) Amount
US GOVERNMENT GRANTS REFUNDABLE	5,160,622
ASSET RETIREMENT OBLIGATION	3,976,371
EMPLOYEE AND RETIREE MEDICAL SELF-INSURED LIABILITY	3,493,527
STUDENT DEPOSITS AND CREDIT BALANCES	1,143,460
ANNUITIES PAYABLE	1,363,993
BUSINESS CONFERENCE DEPOSITS	371,253
UNCLAIMED CHECKS	35,676
NJ SALES TAX PAYABLE	21,553
CAPITAL LEASE	894,431
OTHER LIABILITIES	26,817

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493020003194

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

▶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.

Schools

Name of the organization RIDER UNIVERSITY

Employer identification number

	21-0650678			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	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 If you need more space use Part II	3	Yes	
		- - -		
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
d	with student admissions, programs, and scholarships? I Copies of all material used by the organization or on its behalf to solicit contributions?	4c 4d	Yes Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II		103	
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	o Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b	Yes	No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II		Vos	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY PUBLICIZED ITS RACIALLY NONDISCRIMINATORY POLICY IN ALL OF THE UNIVERSITY'S STUDENT APPLICATIONS, STUDENT CATALOGS, AND THE SOURCE (STUDENT HANDBOOK) THE POLICY IS ALSO LISTED ON THE UNIVERSITY'S WEB PAGE (WWW RIDER EDU)
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVED THE FOLLOWING FEDERAL AND STATE OF NEW JERSEY STUDENT FINANCIAL ASSISTANCE FEDERAL FEDERAL DIRECT STUDENT LOAN PROGRAM \$39,245,382 FEDERAL PELL GRANT PROGRAM \$4,931,861 FEDERAL PERKINS LOAN PROGRAM \$780,530 FEDERAL WORK-STUDY \$606,571 FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM \$420,573 FEDERAL STUDENT SUPPORT SERVICES \$43,395 TOTAL FEDERAL STUDENT FINANCIAL ASSISTANCE \$46,028,312 STATE OF NEW JERSEY NJ - COLLEGE LOANS TO ASSIST STATE STUDENTS \$5,990,091 NJ - TUITION AID GRANT \$6,033,302 NJ - DISTINGUISHED SCHOLARS \$28,365 NJ - EDUCATIONAL OPPORTUNITY FUND \$647,360 TOTAL STATE OF NEW JERSEY STUDENT FINANCIAL ASISTANCE \$12,699,118 TOTAL STUDENT FINANCIAL ASSISTANCE \$58,727,430

Schedule E (Form 990 or 990-EZ) 2011

DLN: 93493020003194

OMB No 1545-0047

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

ntema	Il Revenue Service					Inspection
	ne of the organization				Employer ident	ification number
RID	ER UNIVERSITY				21-0650678	
Pa	rt I General Informatio	n on Activiti	es Outside tl	he United States. Co		ation answered
	"Yes" to Form 990, Pa					
1	For grantmakers. Does the					
	assistance, the grantees' eli					
	the grants or assistance?					│ Yes │ No
2	For grantmakers. Describe in Pa United States	art V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	CENTRAL AMERICA AND THE CARIBBEAN -	0	0	region) INVESTMENTS		6,995,000
_	- Sub-total					6 995 000

0

b Total from continuation sheets

c Totals (add lines 3a and 3b)

to Part I

6,995,000

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
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 nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011

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 Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earry 000) 2011

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	굣	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	⊽	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	ত	Yes	Г	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	F	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ল	Νo

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE US		SCHEDULE F, PART I, LINE 2 INVESTMENTS ARE REVIEWED BY THE INVESTMENT COMMITTEE OF THE BOARD OF TRUSTEES, AS WELL AS BY RIDER'S INVESTMENT MANAGER

Schedule F (Form 990) 2010

Page **5**

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As Filed Data -

DLN: 93493020003194

OMB No 1545-0047

Inspection

Open to Public

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization RIDER UNIVERSITY

Mail solicitations

Phone solicitations

In-person solicitations

Internet and e-mail solicitations

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, Department of the Treasury Internal Revenue Service

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.

Employer identification number 21-0650678 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants Solicitation of government grants □ Special fundraising events Did the organization have a written or oral agreement with any individual (including officers) directors, trustees

 If "Yes," list the ten highes to be compensated at leas (i) Name and address of 		ganızatıon				
individual or entity (fundraiser)	(,	fundraiser have custody or control of contributions? Yes No		from activity	(or retained by) fundraiser listed in col (i)	(or retained by) organization
		Tes	140			
otal			▶			
List all states in which the licensing	organization is reg	istered or l	icensed t	o solicit funds or has b	een notified it is exempt	from registration or

	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 RACQUET AND TENNIS	(b) Event #2 ATHLETICS GOLF GALA	(c) O ther Events 7 (total number)	(d) Total Events (Add col (a) through col (c))
			(event type)	(event type)	(**************************************	
Ē	1	Gross receipts	81,885	55,885	137,326	275,096
Revenue	2 Less Charitable contributions		63,935	36,670	79,913	180,518
	3	Gross income (line 1 minus line 2)	17,950	19,215	57,413	94,578
	4	Cash prizes				
မာ	5	Non-cash prizes		4,962	1,416	6,378
Expenses	6	Rent/facility costs			2,212	2,212
ă	7	Food and beverages	25,710	16,632	37,899	80,241
Direct	8	Entertainment			2,400	2,400
₫	9	Other direct expenses .	3,214	3,201	8,380	14,795
	10	LO Direct expense summary Add lines 4 through 9 in column (d)				
	11	Net income summary Combine li	nes 3 and 10 ın column (d)	•	-11,448
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
<u>.</u>		\$15,000 on Form 990-EZ, lii		(1) 5 11 1 (7 1 1	() 011	() 7
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 (Gross revenue				
S e	2 (Cash prizes				
:penses	ε ε	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
<u>D</u>	5 (Other direct expenses				
	6 \	Volunteer labor	Г Yes Г No	Г Yes	┌ Yes	
	7 [Direct expense summary Add line:	s 2 through 5 ın column (d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)		
9 a b	Is th	er the state(s) in which the organization or the organization licensed to operate lo," Explain	gaming activities in eac	h of these states?		· Fyes FNo
10a b	 Were	e any of the organization's gaming es," Explain	licenses revoked, susper	nded or terminated during	the tax year?	· · Fyes FNo

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3	
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No	
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity			
	formed to administer charitable (gamıng?		· · · · F Yes F	- No	
13	Indicate the percentage of gamii	ag activity operated in		1 1		
a				13a		
b						
14		f the person who prepares the organiza		<u> </u>		
	Name ►					
	Address ►					
	revenue?	ntract with a third party from whom the			- No	
		ed by the third party 🟲 \$				
С	If "Yes," enter name and address	S				
	Name 🟲					
	Address ►					
16	Gaming manager information					
	Name 🟲					
	Gaming manager compensation I	\$ \$				
	Description of services provided	>				
17 a		Employee er state law to make charitable distribu		· · ·	- No	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent						
_		activities during the tax year > \$		hadala C /		
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see		
	Identifier	ReturnReference	Explana	tion		
		•	•			

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493020003194 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

Inspection

Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
the selection criteria used to award the grants or assistance?	
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, Part IV and Schedule I-1 (Form 990) if additional space is needed	
organization section grant cash valuation non-cash assista or government if applicable assistance (book, FMV, appraisal,	000. Use
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	

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
See Additional Data Table					
			•		

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

Identifier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE UNIVERSITY HAS ESTABLISHED POLICIES, PROCEDURES AND CONTROLS OVER
MONITORING GRANTS		THE AWARDING, DISBURSING AND MONITORING OF STUDENT FINANCIAL AID OR ASSISTANCE TO INDIVIDUAL
IN THE U S		STUDENTS IN COMPLIANCE WITH FEDERAL AND STATE OF NEW JERSEY REGULATIONS AND REQUIREMENTS IN
		ADDITION, THE UNIVERSITY HAS AN ANNUAL EXTERNAL AUDIT PERFORMED IN ACCORDANCE WITH U.S. OFFICE
		OF MANAGEMENT AND BUDGET CIRCULAR A-133 AND NEW JERSEY OFFICE OF MANAGEMENT AND BUDGET
		CIRCULAR 04-04

Software ID: Software Version:

EIN: 21-0650678

Name: RIDER UNIVERSITY

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
FEDERAL DIRECT STUDENT LOAN PROGRAM	3596	39,245,382	0		
FEDERAL PELL GRANT PROGRAM	1271	4,931,861	0		
FEDERAL PERKINS LOAN PROGRAM	1206	780,530	0		
FEDERAL WORK-STUDY	776	606,571	0		
FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT	737	420,573	0		
FEDERAL STUDENT SUPPORT SERVICES	37	43,395	0		
N J - COLLEGE LOANS TO ASSIST STATE STUDENTS	330	5,990,091	0		
N J - TUITION AID GRANT	899	6,033,302	0		
N J - DISTINGUISHED SCHOLARS	24	28,365	0		
N J - EDUCATIONAL OPPORTUNITY FUND	202	647,360	0		
RIDER UNIVERSITY ATHLETIC, MERIT AND NEED BASED FINANCIAL AID	4182	48,410,088	0		

DLN: 93493020003194

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

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

KID	EK UNIVERSITY	21-0	650678		
Pa	rt I Questions Regarding Compensation	<u> </u>		_	
				Yes	Νo
1a	Check the appropriate box(es) if the organization provided an 990, Part VII, Section A, line 1a Complete Part III to provi				
		Housing allowance or residence for person			
	Travel for companions	Payments for business use of personal r			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fe			
	Discretionary spending account	Personal services (e g , maid, chauffeur,	chef)		
b	If any of the boxes in line 1a are checked, did the organization reimbursement orprovision of all the expenses described above.			Yes	
2	Did the organization require substantiation prior to reimburs officers, directors, trustees, and the CEO/Executive Directo		2	Yes	
3	Indicate which, if any, of the following the organization uses organization's CEO/Executive Director Check all that apply Compensation committee				
	✓ Independent compensation consultant	Compensation survey or study			
	<u> </u>	Approval by the board or compensation	committee		
4	During the year, did any person listed in Form 990, Part VII or a related organization	, Section A , line 1a with respect to the fil	ng organization		
а	Receive a severance payment or change-of-control payment	t?	4a		No
b	Participate in, or receive payment from, a supplemental none	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based cor		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the	e applicable amounts for each item in Par	tIII		
5	Only 501(c)(3) and 501(c)(4) organizations only must comp For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the revenues of				
а	The organization?		5a		No
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, line 1a, compensation contingent on the net earnings of	did the organization pay or accrue any			
а	The organization?		6a		No
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, payments not described in lines 5 and 6? If "Yes," describe		ed 7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or as subject to the initial contract exception described in Regs in Part III		ıbe 8		No
9	If "Yes" to line 8, did the organization also follow the rebutta	ible presumption procedure described in l			

section 53 4958-6(c)?

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC 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
(1) MORDECHAI ROZANSKI	(I) (II)	417,342 0	97,100 0	21,096 0	126,660 0	66,392 0	728,590 0	
(2) JULIE A KARNS	(I) (II)	261,313 0	26,100 0	7,818 0	21,659 0	2,762 0	319,652 0	(
(3) DONALD A STEVEN	(I) (II)	229,706 0	11,679 0	11,040 0	19,383 0	14,382 0	286,190 0	(
(4) JONATHAN MEER	(I) (II)	207,229 0	12,764 0	6,757 0	17,653 0	82,037 0	326,440 0	(
(5) JAMES O'HARA	(I) (II)	205,239 0	10,055 0	1,800 0	17,045 0	9,406 0	243,545 0	(
(6) LARRY M NEWMAN	(I) (II)	193,096 0	0	0	16,401 0	13,809 0	223,306 0	(
(7) WILLIAM N ROELL	(I) (II)	180,550 0	0	0	15,017 0	3,244 0	198,811 0	(
(8) ROBERT L ANNIS	(I)	179,136 0	0	700 0	14,611 0	76,627 0	271,074 0	(
(9) PATRICIA MOSTO	(I)	165,907 0	0	0	13,532 0	9,003 0	188,442 0	(
(10)ANTHONY CAMPBELL	(I)	160,510 0	0	0	12,315 0	31,700 0	204,525 0	(
(11) IRA B SPROTZER	(I)	181,876 0	0	0	9,785 0	60,860 0	252,521 0	(
(12) MARGARET O'REILLY-ALLEN	(I) (II)	179,685 0	0	0	11,648 0	19,955 0	211,288	(
(13) JAMES E RIGGS	(I) (II)	175,035 0	0	0	10,130	27,798 0	212,963 0	(
(14) BORIS VILIC	(I) (II)	171,743 0	0	0	14,139 0	20,271 0	206,153 0	(
(15) MAURY R RANDALL	(I) (II)	171,383 0	0	0	12,564 0	19,842	203,789	(

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

Identifier	Return Reference	Explanation
	7	THE PRESIDENT IS CONSIDERED ANNUALLY FOR A PERFORMANCE INCENTIVE AWARD RANGING FROM 0% TO 30% UNDER THE UNIVERSITY'S FORMAL INCENTIVE PLAN THE CHAIR OF THE BOARD OF TRUSTEES DEVELOPS A RECOMMENDATION BASED ON THE PRESIDENT'S PERFORMANCE RELATIVE TO PRE-ESTABLISHED GOALS AND THE UNIVERSITY'S FINANCIAL AND OPERATING PERFORMANCE THE RECOMMENDATION IS REVIEWED BY THE SENIOR COMPENSATION COMMITTEE AND VOTED ON BY THE FULL BOARD OF TRUSTEES, WHICH IN ITS SOLE DISCRETION MAY DETERMINE NOT TO MAKE AN AWARD IN ANY GIVEN YEAR IN ADDITION, THE AMOUNT REPORTED INCLUDES \$12,500, WHICH 1/6 OF A RE-SIGNING BONUS PURSUANT TO THE PRESIDENT'S EMPLOYMENT CONTRACT PERFORMANCE INCENTIVE AWARDS FOR THE VICE PRESIDENTS ARE BASED ON THE PRESIDENT'S RECOMMENDATIONS, BASED ON HIS ASSESSMENT OF PERFORMANCE RELATIVE TO GOALS PREVIOUSLY ESTABLISHED FOR THE YEAR THE ESTABLISHED RANGE FOR VICE PRESIDENTIAL AWARDS IS 0% TO 15% THE RECOMMENDATIONS REQUIRE ACTION BY THE SENIOR COMPENSATION COMMITTEE OF THE BOARD, WHICH AT ITS SOLE DISCRETION MAY DETERMINE NOT TO MAKE AWARDS, AND ARE COMMUNICATED TO THE FULL BOARD OF TRUSTEES
SUPPLEMENTAL INFORMATION		PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$66,392 OF PRESIDENT MORDECHAI ROZANSKI INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 57% OF NONTAXABLE BENEFITS THE PRESIDENT OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 57% OF NONTAXABLE BENEFITS THE PRESIDENT OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE LAWRENCEVILLE CAMPUS AS A CONDITION OF HIS EMPLOYMENT PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$1,963 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF MORDECHAI ROZANSKI PART I, LINE 48, PART II, COLUMN (D) RIDER (F) PLAN) DEFERRED COMPENSATION CONTRIBUTIONS OF \$91,784 WERE MADE DURING THIS COMPENSATION PERIOD AND WILL VEST AND BE DISTRIBUTED AT HIS RETIREMENT PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$76,627 OF ROBERT L ANNIS INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 63% OF NONTAXABLE BENEFITS THE DEAN & DIRECTOR OF THE WESTMINSTER COLLEGE OF THE ARTS OF THE UNIVERSITY TO ACCEPT LODGING AND LIVE ADJACENT TO THE PRINCETON CAMPUS AS A CONDITION OF HIS EMPLOYMENT PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$1,070 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF ROBERT L ANNIS PART II, COLUMN (D) APPROXIMATELY 33% OF ROBERT L ANNIS' NONTAXABLE BENEFITS AMOUNT OF \$31,700 OF ANTHONY CAMPBELL INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 91% OF ROBERT L ANNIS' NONTAXABLE BENEFITS AMOUNT OF \$31,700 OF ANTHONY CAMPBELL INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 91% OF NONTAXABLE BENEFITS THE ASSOCIATE VP STUDENT AFFAIRS/DEAN OF STUDENTS THE MARKET VALUE OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE LAWRENCEVILLE CAMPUS AS A CONDITION OF HIS EMPLOYMENT PART II, LINE 1A, PART II, COLUMN (D) APPROXIMATELY 91% OF NONTAXABLE BENEFITS THE ASSOCIATE VP STUDENT AFFAIRS/DEAN OF STUDENTS OF THE UNIVERSITY BUSINESS PURPOSES

Schedule K (Form 990)

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 O (Form 990).

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

DLN: 93493020003194

Open to Public Inspection

Internal Revenue Service
Name of the organization
RIDER UNIVERSITY

Department of the Treasury

Employer identification number

21-0650678

	21-0650678														
Pa	art I Bond Issues														
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pi	rıce	(f) Description of Purpose			(g) Defeased		(h) On Behalf of Issuer			Pool incing
										Yes	No	Yes	No	Yes	No
Α	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	6460652M3	04-14-2012	55,203	,833 R	CAPITAL IMPROVEMENTS UNIVERSITY FACILTIES, REFUND PRIOR BONDS, ISSUANCE COST				Х		х		х
В	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605NBU7	10-09-2003	1,525	3231.		SUPPRESSI ALLATION	ON SYSTEM		X		X	X	
С	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LWX2	08-10-2005	1,648			ND PRIOR P ICING OF T	OOLED HE ISSUER		Х		X	Х	
D	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LZ84	10-26-2006	1,482			ND PRIOR P	OOLED HE ISSUER		Х		х	Х	
Pa	rt III Proceeds					•				•					•
					Α			В	3		С			D	
1	A mount of bonds retired														
2	A mount of bonds defeased														
3	Total proceeds of issue				5	55,208,	08,754 1,525,353		1,648,393			1,482,18			
4	Gross proceeds in reserve fun														
_5	Capitalized interest from proce														
6	Proceeds in refunding escrow				4	4,612,				3	80,308		1	,233,665	
7	Issuance costs from proceeds					517,	,383								
8	Credit enhancement from proc														
9	Working capital expenditures	•													
10	Capital expenditures from pro-	ceeds				439,	,468		1,525,353						
11	Other spent proceeds						\perp				1,2	68,085			248,521
12	Other unspent proceeds		9,639,72		7										
13	Year of substantial completion	<u>n</u>			201		\perp	20			2005			2004	
			-		Yes	No		Yes	No	Yes	-	No	Yes		No
14					X				Х			Х			X
15	Were the bonds issued as part of an advance refunding issue?								Х	Х			Х		
16	6 Has the final allocation of proceeds been made?					Х		Х		Х			X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							Х		Х			х		
Par	TIIII Private Business U	Jse											1		
					Y				3	Y	C	NI-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	D I	No
					Yes	No	•	Yes	No	Yes		No	Yes		No

property financed by tax-exempt bonds?

financed property?

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

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Χ

Χ

Χ

Χ

Page **2** Part III Private Business Use (Continued) C Α В D Yes No Yes No Yes No Yes Are there any management or service contracts that may result in private business За Χ Χ Χ Χ If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed Χ Χ property? Are there any research agreements that may result in private business use of bondfinanced property? Χ Χ Χ Χ If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government 1 000 % 1 000 % 59 600 % ٠ Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 % 0 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 1 000 % 1 000 % 59 600 % Has the organization adopted management practices and procedures to ensure the Χ Χ Χ Х post-issuance compliance of its tax-exempt bond liabilities? Part IV Arbitrage

Α В С D Yes No No Yes Yes No Yes No Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and 1 Penalty in Lieu of Arbitrage Rebate, been filed with respect to the Х Х Χ Is the bond issue a variable rate issue? Χ Χ Χ Χ Has the organization or the governmental issuer entered За into a hedge with respect to the bond issue? Χ Χ Χ Х Name of provider Term of hedge Was the hedge superintegrated? Was a hedge terminated? Were gross proceeds invested in a GIC? 4a Χ Χ Χ Χ Name of provider b Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary 5 Χ Χ Χ Χ

Part V Procedures To Undertake Corrective Action Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary

Did the bond issue qualify for an exception to rebate?

Х

Χ

Χ

Χ

Part VI Supplemental Information Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

COLUMN (E) AND PART II, QUESTIONS (3) AND (10)

Identifier	Return Reference	Explanation
	PART II, QUESTION (3)	AMOUNT LISTED DIFFERS FROM THE ISSUE PRICE LISTED IN PART I, COLUMN (E) DUE TO EARNINGS ON INVESTMENT PROCEEDS
	PART V	THE ORGANIZATION IMPLEMENTED REVISED WRITTEN PROCEDURES TO UNDERTAKE CORRECTIVE ACTION SHORTLY AFTER THE COMPLETION OF THE REPORTING PERIOD APPLICABLE TO THIS FORM
	ENTITY I, PART I, BOND A, COLUMN F	BONDS REFUNDED BY SERIES 2012A SERIES 2007C (ISSUED 6/21/07), SERIES 2004A (ISSUED 6/17/04)
	ENTITY I, PART I, BOND C, COLUMN F	BONDS REFUNDED BY HECIF 2005 HECIF 2002A (ISSUED 11/21/2002)
		BONDS REFUNDED BY HECIF 2006 ISSUER'S HECIF 2002A (ISSUED 3/14/00), HECIF 2000B (ISSUED 3/14/00) HECIF 2002A (ISSUED 11/21/2002), HECIF 2004A (ISSUED 4/14/04)
		AMOUNT IN PART I, COLUMN(E) AND PARTS II, QUESTIONS (3) AND (10) FOR THE ISSUES CITED (BONDS B, C, AND D) REFLECT ONLY THE AMOUNT RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS
	,	THE AMOUNT LISTED ONLY INCLUDES PRIVATE USE PERCENTAGE APPLICABLE TO THE ORGANIZATION'S PORTION OF THE HECIF 2004A BONDS ALL OTHER BONDS REFUNDED BY THE HECIF 2006 ISSUE WERE ISSUED PRIOR TO JANUARY 1, 2003 AND THEREFORE HAVE BEEN EXCLUDED FROM PART III OF THIS SCHEDULE
	,	AMOUNT IN PART I, COLUMN(E) AND PARTS II, QUESTIONS (3) AND (10) FOR THE ISSUES CITED (BOND A) REFLECT ONLY THE AMOUNT RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS

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 O (Form 990).
 ► Attach to Form 990.
 ► See separate instructions.

OMB No 1545-0047

2011

DLN: 93493020003194

Open to Public Inspection

Internal Revenue Service

Name of the organization

RIDER UNIVERSITY

Department of the Treasury

Schedule K

(Form 990)

Employer identification number

	ne of the organization										mployer	identifi	cation nu	mber		
KID	ER UNIVERSITY									2	1-0650	0678				
Pa	art I Bond Issues															
										(a) Do	feased		On alf of) Pool	
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pri	ce	(f)	Description	of Purpose	(g) De	leaseu		suer	fina	financing	
										Yes	No	Yes	No	Yes	No	
Α	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LNM6	04-14-2004	540 (VATIONS A ESSION SYS		l x			X	l _x		
^_	TACILITIES AUTHORITI	22-1029311	04003ENM0	04-14-2004	340,0			LLATION) L ·	^				_ ^		
Pa	rt III Proceeds				_											
	^				A		<u> </u>	E	3		С			D		
1_	Amount of bonds retired						500						<u> </u>			
	A mount of bonds defeased					165,							<u> </u>			
3	Total proceeds of issue					540,8	868									
4	Gross proceeds in reserve fun															
	Capitalized interest from proc	eeds ———————————————————————————————————														
6	Proceeds in refunding escrow															
7	Issuance costs from proceeds															
8	Credit enhancement from proc															
9	Working capital expenditures															
10	Capital expenditures from pro	ceeds				540,8	868									
11	Other spent proceeds															
12	Other unspent proceeds															
13	Year of substantial completion	າ			200	5										
					Yes	No		Yes	No	Yes		No	Yes		No	
14	Were the bonds issued as part	t of a current refund	ing issue?			Х										
15	Were the bonds issued as part	t of an advance refu	ndıng ıssue?			Χ										
16	Has the final allocation of prod	ceeds been made?			Х											
17	Does the organization maintai allocation of proceeds?	n adequate books a	nd records to supp	ort the final	X											
Pa	rt IIII Private Business U	Jse														
					Yes	No		Yes	No No	Yes	C	No	Yes	<u>D</u>	No	
_	Was the organization a partne	r in a narthership o	ra member of an II	C which owned	res			res	INO	res		NO	Tes	+	IAO	
1	was the organization a partne		i a illellinel Ol all Ll	_c, willcil owned		Χ										

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Χ

	· · · ·								
Part III	Private Business Use (Continued)								
			Α		В		С	1)
		Yes	No	Yes	No	Yes	No	Yes	
									-

			Α		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	Х							
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	Х							
С	Are there any research agreements that may result in private business use of bond-financed property?		х						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		59 600 %		•		•		
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		0 %						
6	Total of lines 4 and 5		59 600 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							

Part IV Arbitrage

		A		В		с		D	
		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						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			х						
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х						
6	Did the bond issue qualify for an exception to rebate?		х						

Part V **Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary

Part VI **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier Return Reference Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493020003194

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization RIDER UNIVERSITY

Employer identification number

					21-0650678			
Pai	Types of Property							
_	Aut. Maulia af au	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	Method of c contributio	letermi		
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Х	36	589,160	MEAN PRICE-GIF	TDATE		
	Securities—Closely held stock .							
1	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
3	Qualified conservation contribution—Historic structures							
1	Qualified conservation contribution—Other							
5	Real estate—Residential .							
5	Real estate—Commercial							
7	Real estate—O ther							
3	Collectibles							
9	Food inventory							
0	Drugs and medical supplies .							
1	Taxıdermy							
2	Historical artifacts							
3	Scientific specimens							
4	Archeological artifacts							
	O ther ► ()							
5	O ther ►()							
7	O ther ►()							
В	O ther ► ()							
9	Number of Forms 8283 received for which the organization compl				29			
_					4.00.11.7.3		Yes	No
Ua	During the year, did the organiza							
	must hold for at least three year				d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement	ent in Part 1	II					
1	Does the organization have a gif	t acceptano	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
2a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
ь	If "Yes," describe in Part II							
	If the organization did not report	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II				•			

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.

Identifier	Return Reference	Explanation
THIRD PARTY USE	· · · · · · · · · · · · · · · · · · ·	THE UNIVERSITY USES A THIRD PARTY (MERRILL LYNCH) TO PROCESS THE SALE OF STOCK GIFTS

Schedule M (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493020003194

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
RIDER UNIVERSITY

Employer identification number
21-0650678

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	990, PART III, LINE 1 - CONTINUED	RIDER'S VISION RIDER UNIVERSITY WILL BE A LEADER IN AMERICAN HIGHER EDUCATION CELEBRATED FOR EDUCATING TALENTED STUDENTS FOR CITIZENSHIP, LIFE AND CAREER SUCCESS IN A DIVERSE AND INTERDEPENDENT WORLD RIDER WILL ACHIEVE DISTINCTIVENESS BY FOCUSING ON STUDENTS FIRST, BY CULTIVATING LEADERSHIP SKILLS, BY AFFIRMING TEACHING AND LEARNING THAT BRIDGES THE THEORETICAL AND THE PRACTICAL AND BY FOSTERING A CULTURE OF ACADEMIC EXCELLENCE. RIDER'S MISSION RIDER ATTRACTS AND GRADUATES TALENTED AND MOTIVATED STUDENTS WITH DIVERSE BACKGROUNDS FROM ACROSS THE NATION AND AROUND THE WORLD AND PUTS THEM AT THE CENTER OF OUR LEARNING AND LIVING COMMUNITY AS A LEARNER-CENTERED UNIVERSITY DEDICATED TO THE EDUCATION OF THE WHOLE STUDENT, RIDER PROVIDES STUDENTS THE INTELLECTUAL RESOURCES AND BREADTH OF STUDENT LIFE OPPORTUNITIES OF A COMPREHENSIVE UNIVERSITY WITH THE PERSONAL ATTENTION AND CLOSE STUDENT-FACULTY INTERACTIONS OF A LIBERAL ARTS COLLEGE. THROUGH A COMMITMENT TO HIGH QUALITY TEACHING, SCHOLARSHIP AND EXPERIENTIAL OPPORTUNITIES, FACULTY ON BOTH CAMPUSES PROVIDE UNDERGRADUATE AND GRADUATE STUDENTS RIGOROUS AND RELEVANT PROGRAMS OF STUDY TO EXPAND THEIR INTELLECTUAL, CULTURAL AND PERSONAL HORIZONS AND DEVELOP THEIR LEADERSHIP SKILLS. OUR HIGHLY REGARDED PROGRAMS IN THE ARTS, SOCIAL SCIENCES, SCIENCES, MUSIC, BUSINESS AND EDUCATION CHALLENGE STUDENTS TO BECOME ACTIVE LEARNERS WHO CAN ACQUIRE, INTERPRET, COMMUNICATE AND APPLY KNOWLEDGE WITHIN AND ACROSS DISCIPLINES TO FOSTER THE INTEGRATIVE THINKING REQUIRED IN A COMPLEX AND RAPIDLY CHANGING WORLD RIDER ATTRACTS HIGHLY QUALIFIED FACULTY, STAFF AND ADMINISTRATORS WITH DIVERSE BACKGROUNDS WHO CREATE AN ENVIRONMENT WHICH INSPIRES INTELLECTUAL AND SOCIAL ENGAGEMENT, STIMULATES INNOVATION AND SERVICE AND ENCOURAGES PERSONAL AND PROFESSIONAL DEVELOPMENT AS KEY MEMBERS OF OUR UNIVERSITY COMMUNITY, IT IS THEIR COMMUNITHENT TO OUR VALUES, VISION AND MISSION THAT WILL ENSURE RIDERS SUCCESS THE UNIVERSITY'S INSTITUTIONAL IDENTITY WILL CONTINUE TO REFLECT THE STRENGTHS OF ITS PEOPLE, HIS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE OF THE UNIVERSITY'S BOARD OF TRUSTEES PERFORMED A REVIEW OF THE FORM 990 AND ALL APPLICABLE SCHEDULES PRIOR TO SUBMISSION AS PART OF AN AUDIT COMMITTEE MEETING IN ADDITION, THE FORM 990 AND ALL APPLICABLE SCHEDULES WERE POSTED ON THE UNIVERSITY'S INTRANET FOR THE ENTIRE BOARD OF TRUSTEES TO REVIEW PRIOR TO SUBMISSION

ldentifier F	Return Reference	Explanation
P. S	FORM 990, PART VI, SECTION B, INE 12C	THE UNIVERSITY HAS A WRITTEN CONFLICT OF INTEREST POLICY, AND AN ANNUAL COMPLIANCE REVIEW PROCESS WHICH INCLUDES - SOLICIT FEEDBACK FROM DIVISION HEADS ON PROPOSED STAFF IN THEIR UNITS WHO SHOULD PARTICIPATE IN THE ANNUAL REPORTING AND REVIEW PROCESS ANY INDIVIDUAL WHO IS CONSIDERED TO HAVE SIGNIFICANT RESPONSIBILITY FOR INSTITUTIONAL OPERATIONS OR PURCHASING IS INCLUDED THE POLICY REQUIRES THAT PERSONS INVOLVED IN DECISION MAKING DISCLOSE FINANCIAL OR OTHER INTERESTS-EITHER CURRENT OR PROPOSED- THAT IMPAIR OR MAY APPEAR TO IMPAIR THEIR INDEPENDENT, UNBIASED JUDGEMENT - DISTRIBUTE THE CONFLICT OF INTEREST POLICY AND QUESTIONNAIRE FOR DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST TO ALL INDIVIDUALS SO IDENTIFIED IN 2012, 127 INDIVIDUALS (OFFICERS, TRUSTEES, COACHES, AND ADMINISTRATORS) RECEIVED AND COMPLETED THE CONFLICT QUESTIONNAIRE - REVIEW OF ALL CONFLICT QUESTIONNAIRE RESPONSES BY THE UNIVERSITY BOARD OF TRUSTEES' HUMAN RESOURCES COMMITTEE, WHICH SERVES AS THE CONFLICT COMMITTEE UNDER THE UNIVERSITY'S BY LAWS THE HUMAN RESOURCES COMMITTEE REPORTS ITS FINDINGS TO THE BOARD OF TRUSTEES, WHICH IS RESPONSIBLE FOR ACTING ON THE COMMITTEE SINDINGS - IN PARTICULAR ON ANY CONFLICT THAT MIGHT BE IDENTIFIED BY POLICY, ANY PROPOSED BUSINESS RELATIONSHIP BETWEEN A TRUSTEE OR THEIR RELATED ENTITY MUST BE EVALUATED AND ACTED ON PRIOR TO ITS POTENTIAL IMPLEMENTATION NO SUCH RELATIONSHIP CURRENTLY EXISTS - ANY BOARD MEMBER WITH A CONFLICT WILL RECUSE HIMSELF/HERSELF FROM ANY VOTES REGARDING THE MATTER

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE SENIOR COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES ENGAGES AN INDEPENDENT CONSULTING FIRM TO ANNUALLY UNDERTAKE A REASONABLENESS REVIEW OF TOP MANAGEMENT COMPENSATION TOP MANAGEMENT INCLUDES THE INSTITUTION'S PRESIDENT AND VICE PRESIDENTS THE REASONABLENESS REVIEW INCLUDES CONSIDERATION OF COMPARABILITY DATA PREPARED BY THE CONSULTANTS WHICH IS PROVIDED TO ALL COMMITTEE MEMBERS AND TO ALL MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES THE BENCHMARK DATA CONSIDERED INCLUDES BOTH SALARY AND TOTAL COMPENSATION INFORMATION CONTEMPORANEOUS MINUTES ARE MAINTAINED FOR BOTH THE SENIOR COMPENSATION COMMITTEE OF THE BOARD AND FOR THE FULL BOARD OF TRUSTEES MEETINGS THE UNIVERSITY CONSISTENTLY UTILIZES HIGHER EDUCATION BENCHMARKING DATA TO ASSESS THE REASONABLENESS OF KEY EMPLOYEES' COMPENSATION FACULTY COMPENSATION IS GOVERNED BY A COLLECTIVE BARGAINING AGREEMENT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
	PART VII	MICHAEL B KENNEDY RECEIVES NO COMPENSATION FOR HIS WORK AS A TRUSTEE. THE REPORTED COMPENSATION IS ONLY FOR HIS WORK AS A RIDER UNIVERSITY ADJUNCT LECTURER TERRY K MCEWEN RECEIVES NO COMPENSATION FOR HIS WORK AS A TRUSTEE. THE REPORTED COMPENSATION IS ONLY FOR HIS WORK AS A RIDER UNIVERSITY ADJUNCT LECTURER

ldentifier	Return Reference	Explanation
ANGES IN NET ASSETS OR	FORM 990, PART	NET UNREALIZED LOSSES ON INVESTMENTS -2,710,045 CHANGE IN VALUE OF
ND BALANCES	XI, LINE 5	PENSION -1,131,752 TOTAL TO FORM 990, PART XI, LINE 5 -3,841,797

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	RIDER UNIVERSITY DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE YEAR

Identifier	Return Reference	Explanation
	REASON FOR AMENDED RETURN	THE RETURN IS BEING AMENDED TO BREAKOUT BASE COMPENSATION AND BONUS/INCENTIVE COMPENSATION ON FORM 990, SCHEDULE J, PART II THE METHOD OF DETERMINING THE BONUS/INCENTIVE COMPENSATION HAS ALSO BEEN ADDED TO FORM 990, SCHEDULE J, PART III