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Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>  ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		<b>2012</b>
		<b>Open to Public Inspection</b>

<b>A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013</b>			
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization ROCHESTER INSTITUTE OF TECHNOLOGY	<b>D Employer identification number</b>  16-0743140	
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 7 Lomb Memorial Drive	Room/suite	<b>E Telephone number</b>  (585) 475-2383
	City or town, state or country, and ZIP + 4 Rochester, NY 146235603		<b>G</b> Gross receipts \$ 839,141,242
	<b>F</b> Name and address of principal officer WILLIAM DESTLER 7 Lomb Memorial Drive Rochester, NY 146235603		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>J Website:</b> ▶ WWW.RIT.EDU		<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
		<b>H(c)</b> Group exemption number ▶	
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation 1829	
		<b>M</b> State of legal domicile NY	

Part I		Summary	
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities RIT'S MISSION IS TO PROVIDE A BROAD RANGE OF CAREER-ORIENTED EDUCATIONAL PROGRAMS WITH THE GOAL OF PRODUCING INNOVATIVE, CREATIVE GRADUATES WHO ARE WELL-PREPARED FOR THEIR CHOSEN CAREERS IN A GLOBAL SOCIETY		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .		<b>3</b> 56
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .		<b>4</b> 52
	<b>5</b> Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .		<b>5</b> 12,356
<b>6</b> Total number of volunteers (estimate if necessary) . . . . .		<b>6</b> 3,400	
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .		<b>7a</b> 5,066,916	
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .		<b>7b</b> -1,510,826	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year 133,615,147	Current Year 122,862,530
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	470,360,956	495,271,400
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	46,724,958	32,222,476
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,226,456	11,236,733
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	659,927,517	661,593,139
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	139,791,948
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		311,251,659	320,731,732
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <u>8,771,207</u>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .		158,840,317	165,778,660
<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		609,883,924	636,901,120
<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .		50,043,593	24,692,019
Net Assets or Fund Balances	<b>Beginning of Current Year</b>		<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) . . . . .	1,490,565,991	1,603,679,040
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	485,079,509	543,810,199
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	1,005,486,482	1,059,868,841

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	Signature of officer		2014-05-13		
	Date				
	JAMES H WATTERS SR VP FINANCE & ADMINISTRATION				
Type or print name and title					
Paid Preparer Use Only	Prnt/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

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

☐ Yes☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization's mission

RIT'S MISSION IS TO PROVIDE A BROAD RANGE OF CAREER-ORIENTED EDUCATIONAL PROGRAMS WITH THE GOAL OF PRODUCING INNOVATIVE, CREATIVE GRADUATES WHO ARE WELL-PREPARED FOR THEIR CHOSEN CAREERS IN A GLOBAL SOCIETY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 427,157,433 including grants of \$ 146,657,188 ) (Revenue \$ 408,982,626 )

INSTRUCTION AND ACADEMIC SUPPORT - ESTABLISHED IN 1829, RIT IS A PRIVATE COEDUCATIONAL UNIVERSITY LOCATED IN UPSTATE NEW YORK, WITH APPROXIMATELY 17,950 FULL AND PART-TIME UNDERGRADUATE AND GRADUATE STUDENTS RIT IS COMPRISED OF NINE COLLEGES OFFERING MORE THAN 200 GRADUATE AND UNDERGRADUATE PROGRAMS NTID (NATIONAL TECHNICAL INSTITUTE FOR THE DEAF), ONE OF RIT'S COLLEGES, IS THE WORLD'S FIRST AND LARGEST TECHNICAL COLLEGE FOR DEAF STUDENTS WITH APPROXIMATELY 1,529 STUDENTS FROM THE UNITED STATES AND ABROAD FOR THE PAST 20 YEARS, US NEWS AND WORLD REPORT HAS RANKED RIT FIRST OR SECOND IN ACADEMIC REPUTATION AMONG REGIONAL UNIVERSITIES IN THE NORTH OVER THE PRECEDING 10 YEARS, TOTAL FALL ENROLLMENT HAS INCREASED 2,509 FULL TIME EQUIVALENTS (FTES) OR 20 4% FROM 12,322 IN 2002 TO 14,831 IN 2012 TOTAL SCHOLARSHIPS INCREASED 8 1% OVER THE PRIOR YEAR AND INSTITUTIONALLY FUNDED SCHOLARSHIPS INCREASED BY 8 0% OVER THE PRIOR YEAR

4b

(Code ) (Expenses \$ 116,078,056 including grants of \$ 41,586 ) (Revenue \$ 81,097,790 )

STUDENT AND AUXILIARY SERVICES - STUDENT SERVICES PROVIDE STUDENTS WITH ADDITIONAL ENRICHMENT AND EDUCATIONAL OPPORTUNITIES SUCH SERVICES INCLUDE ATHLETICS, STUDENT HEALTH AND ADMISSIONS AUXILIARIES PROVIDE ESSENTIAL SERVICES TO STUDENTS IN SUPPORT OF RIT'S EDUCATIONAL MISSION THESE SERVICES INCLUDE HOUSING OPERATIONS AND DINING SERVICES SALES & SERVICES OF AUXILIARY ENTERPRISES GENERATED TOTAL REVENUE OF \$74 3 MILLION, AN INCREASE OF \$5 3 MILLION OVER THE PRIOR YEAR SURPLUSES FROM AUXILIARY OPERATIONS SUPPORT THE OPERATING BUDGET OF THE UNIVERSITY

4c

(Code ) (Expenses \$ 40,713,575 including grants of \$ 3,691,954 ) (Revenue \$ 5,190,984 )

RESEARCH AND PUBLIC SUPPORT - RIT ENGAGES IN PUBLIC SERVICE ACTIVITIES THAT BENEFIT THE GENERAL COMMUNITY, IN WHICH IT RESIDES, INCLUDING TRAINING, POSTSECONDARY EDUCATION FOR DEAF AND HARD OF HEARING, AND K-12 PROGRAMS RIT ALSO CONDUCTS RESEARCH TO ADVANCE THE BODY OF KNOWLEDGE, ENHANCE STUDENT AND FACULTY LEARNING AND BUILD OUR REPUTATION IN THE SCIENTIFIC AND TECHNICAL COMMUNITIES IN SUPPORT OF, OR IN CONCERT WITH THE UNIVERSITY'S EXEMPT MISSION, WHILE PROVIDING POSITIVE RETURNS TO OUR SPONSORING PARTNERS AS ARTICULATED IN RIT'S STRATEGIC PLAN, THE UNIVERSITY CONTINUES TO PLACE EMPHASIS ON ITS REVENUE GROWTH IN THE RESEARCH PORTFOLIO

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )














4e

Total program service expenses

583,949,064

Form 990 (2012)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
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	
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 Yes	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 Yes	
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
e 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 and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
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, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts 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 United States? If "Yes," complete Schedule F, Parts 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? If "Yes," complete Schedule G, Part I (see instructions)	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 hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b	Yes	
c	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 direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
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 "Yes," complete Schedule R, Part I</i> . . . . .	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1,002	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.	12,356	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country: <b>HR</b> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response to any question in this Part VI

Section 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		
1a	56		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	52		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	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		
a	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

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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 this 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?		
a	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	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	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 during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	Lyn Kelly 7 Lomb Memorial Drive Rochester, NY (585) 475-2383

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

[illegible]



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Sub-Total . . . . .</b>										
<b>c Total from continuation sheets to Part VII, Section A . . . . .</b>										
<b>d Total (add lines 1b and 1c) . . . . .</b>								5,631,514	0	900,803

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **431**

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

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WILJEFF LLC 1265 SCOTTSVILLE RD ROCHESTER NY 14624	RENT	802,363
DDS CONSTRUCTORS LLC 240 COMMERCE DRIVE ROCHESTER NY 14623	LAND DEVELOPMENT	705,572
SIMPLEXGRINNELL LP 90 GOODWAY DRIVE ROCHESTER NY 14623	FIRE SAFETY - SPRINKLER SYSTEM	580,051
HBT ARCHITECTS LLP 16 SOUTH MAIN ST PITTSFORD NY 14534	ARCHITECTURAL SERVICES	378,887
LECLAIRRYAN 951 EAST BYRD ST RICHMOND VA 23219	LEGAL SERVICES	314,945

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 ►15

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c	27,411				
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	99,028,090				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	23,807,029				
	g	Noncash contributions included in lines 1a-1f \$		5,871,369				
	h	Total. Add lines 1a-1f . . . . .			122,862,530			
Program Service Revenue	2a	TUITION	Business Code	900099	413,554,531	413,554,531		
	b	AUXILIARY SERVICES		721000	64,999,858			64,999,858
	c	RESEARCH		900099	2,322,076		411,269	1,910,807
	d	NONCREDIT INSTRUCTION		900099	4,011,050	4,011,050		
	e	FEES		713990	1,873,275			1,873,275
	f	All other program service revenue			8,510,610	6,796,363	345,073	1,369,174
	g	Total. Add lines 2a-2f . . . . .			495,271,400			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .			11,767,953		-190,722
4		Income from investment of tax-exempt bond proceeds . .			484,587			484,587
5		Royalties . . . . .			367,550			367,550
6a		Gross rents	(i) Real	(ii) Personal				
			517,142					
		b	Less rental expenses					
		c	Rental income or (loss)		250,595	0		
d		Net rental income or (loss) . . . . .			250,595	11,395		239,200
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			197,154,588	38,001				
		b	Less cost or other basis and sales expenses		174,282,886	2,939,767		
		c	Gain or (loss)		22,871,702	-2,901,766		
d		Net gain or (loss) . . . . .			19,969,936			19,969,936
8a		Gross income from fundraising events (not including \$ 27,411 of contributions reported on line 1c) See Part IV, line 18 . . .	a	35,066				
		b	Less direct expenses . . . .	b	58,903			
		c	Net income or (loss) from fundraising events . .			-23,837		
9a		Gross income from gaming activities See Part IV, line 19 . . . .	a					
		b	Less direct expenses . . . .	b				
		c	Net income or (loss) from gaming activities . .			0		
10a		Gross sales of inventory, less returns and allowances . . .	a					
	b	Less cost of goods sold . . .	b					
	c	Net income or (loss) from sales of inventory . .			0			
Miscellaneous Revenue		Business Code						
11a	RIT INN AND CONFERENCE CENTER		721110	3,981,528		3,981,528		
b	BOOKSTORE COMMISSIONS		451211	971,660			971,660	
c	MARGARET'S HOUSE		624410	765,357			765,357	
d	All other revenue . . . . .			4,923,880	4,363,094	519,768	41,018	
e	Total. Add lines 11a-11d . . . . .			10,642,425				
12	Total revenue. See Instructions . . . . .			661,593,139	428,736,433	5,066,916	104,927,260	

Part IX

Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 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.	366,660	366,660		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	150,024,068	150,024,068		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	4,373,119	1,374,963	2,329,962	668,194
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	241,693,933	218,307,539	18,694,961	4,691,433
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	18,578,072	16,485,991	1,751,732	340,349
9	Other employee benefits.	39,743,401	35,830,186	2,084,812	1,828,403
10	Payroll taxes.	16,343,207	14,502,795	1,541,006	299,406
11	Fees for services (non-employees):				
a	Management.	333,080	140,913	192,167	
b	Legal.	1,022,839	259,234	737,569	26,036
c	Accounting.	266,407	1,257	265,150	
d	Lobbying.	350,490		336,171	14,319
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	181,175		181,175	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	29,887,814	25,814,761	4,006,938	66,115
12	Advertising and promotion.	924,722	877,248	32,873	14,601
13	Office expenses.	37,360,641	33,629,171	3,423,882	307,588
14	Information technology.	5,786,718	5,314,180	391,387	81,151
15	Royalties.	26,044	26,044		
16	Occupancy.	11,648,069	11,104,818	543,251	
17	Travel.	11,357,044	9,903,105	1,067,978	385,961
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	3,015	3,015		
20	Interest.	9,209,286	8,745,096	464,190	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	34,552,361	31,479,990	3,072,371	
23	Insurance.	1,612,554	1,538,683	73,871	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	LOSS ON EARLY EXTINGUISHMENT OF DEBT	24,346,768	23,192,731	1,154,037	
b	POSTRETIREMENT BENEFITS FAS 106	-8,177,441	-7,256,578	-903,993	-16,870
c	GAIN ON PROPERTY ACQUISITION	-6,921,923	-6,593,824	-328,099	
d	ASSET RETIREMENT OBLIGATIONS	3,713,537	3,537,515	176,022	
e	All other expenses	8,295,460	5,339,503	2,891,436	64,521
25	<b>Total functional expenses.</b> Add lines 1 through 24e.	636,901,120	583,949,064	44,180,849	8,771,207
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0			

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			18,417,483	1	6,009,741
	2	Savings and temporary cash investments . . . . .			34,671,972	2	59,423,228
	3	Pledges and grants receivable, net . . . . .			40,729,046	3	32,210,888
	4	Accounts receivable, net . . . . .			59,402,124	4	61,180,211
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .				5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	0
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .			1,922,401	8	1,499,756
	9	Prepaid expenses and deferred charges . . . . .			6,194,082	9	8,603,897
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,016,470,836			
	b	Less accumulated depreciation . . . . .	10b	398,354,278	580,858,133	10c	618,116,558
	11	Investments—publicly traded securities . . . . .			317,832,095	11	331,891,033
	12	Investments—other securities See Part IV, line 11 . . . . .			427,687,458	12	479,901,354
	13	Investments—program-related See Part IV, line 11 . . . . .			0	13	0
	14	Intangible assets . . . . .				14	
	15	Other assets See Part IV, line 11 . . . . .			2,851,197	15	4,842,374
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			1,490,565,991	16	1,603,679,040	
Liabilities	17	Accounts payable and accrued expenses . . . . .			54,800,977	17	45,611,544
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			26,382,322	19	22,688,143
	20	Tax-exempt bond liabilities . . . . .			222,912,046	20	297,450,507
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .				22	0
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . . . . .			180,984,164	25	178,060,005
	26	Total liabilities. Add lines 17 through 25 . . . . .			485,079,509	26	543,810,199
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			659,256,194	27	701,485,239
	28	Temporarily restricted net assets . . . . .			213,088,798	28	220,303,251
	29	Permanently restricted net assets . . . . .			133,141,490	29	138,080,351
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			1,005,486,482	33	1,059,868,841
	34	Total liabilities and net assets/fund balances . . . . .			1,490,565,991	34	1,603,679,040

Part XI Reconciliation of Net Assets

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	661,593,139
2	Total expenses (must equal Part IX, column (A), line 25)	2	636,901,120
3	Revenue less expenses Subtract line 2 from line 1	3	24,692,019
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,005,486,482
5	Net unrealized gains (losses) on investments	5	29,690,340
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,059,868,841

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

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Name: ROCHESTER INSTITUTE OF TECHNOLOGY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM W DESTLER PRESIDENT	40 00 10	X		X				808,011	0	89,535
ANDREW N BRENNEMAN TRUSTEE	10	X						0	0	0
ANN L BURR TRUSTEE	10	X						0	0	0
ANNE M SEVIER-BUCKINGHAM TRUSTEE	10	X						0	0	0
ARTHUR A GOSNELL TRUSTEE	10	X						0	0	0
B THOMAS GOLISANO TRUSTEE	10	X						0	0	0
BRIAN H HALL TRUSTEE	10	X						0	0	0
BRIAN P O'SHAUGHNESSY TRUSTEE	10	X						0	0	0
BROOKS H BOWER TRUSTEE	10	X						0	0	0
CARL E SASSANO TRUSTEE	10	X						0	0	0
CHARLES S BROWN JR TRUSTEE	10	X						0	0	0
CHESTER N WATSON TRUSTEE	10	X						0	0	0
CHRISTINE B WHITMAN TRUSTEE	10 10	X						0	0	0
DAVID J BURNS TRUSTEE	10	X						0	0	0
DONALD J TRUESDALE TRUSTEE	10	X						0	0	0
DONALD N BOYCE TRUSTEE	10	X						0	0	0
ESSIE L CALHOUN-MCDAVID TRUSTEE	10	X						0	0	0
FRANK S HERMANC TRUSTEE	10	X						0	0	0
FRANK S SKLARSKY TRUSTEE	10	X						0	0	0
GARY J LINDSAY TRUSTEE	10	X						0	0	0
GERARD Q PIERCE TRUSTEE	10	X						0	0	0
HAROLD M MOWL JR TRUSTEE	10	X						0	0	0
HARRY P TRUEHEART III TRUSTEE	10	X						0	0	0
JANET F SANSONE TRUSTEE	10	X						0	0	0
JAY T HOLMES TRUSTEE	10 10	X						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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JEFFREY K HARRIS TRUSTEE	10	X						0	0	0
JOSEPH M LOBOZZO II TRUSTEE	10	X						0	0	0
JOYCE B KLEMMER TRUSTEE	10	X						0	0	0
JUDY B VON BUCHER TRUSTEE	10	X						0	0	0
KATHLEEN C ANDERSON TRUSTEE	10	X						0	0	0
KEVIN J SURACE TRUSTEE	10	X						0	0	0
KIM E VANGELDER TRUSTEE	10	X						0	0	0
KRAIG H KAYSER TRUSTEE	10	X						0	0	0
MARK C CLEMENT TRUSTEE	10	X						0	0	0
NANCY L FEIN TRUSTEE	10	X						0	0	0
RICARDO A VENEGAS TRUSTEE	10	X						0	0	0
RICHARD A KAPLAN TRUSTEE	10	X						0	0	0
RICHARD E SANDS TRUSTEE	10	X						0	0	0
ROBERT D MOORE JR TRUSTEE	10	X						0	0	0
ROBERT D WAYLAND-SMITH TRUSTEE	10	X						0	0	0
ROBERT DOBIES TRUSTEE	10	X						0	0	0
ROBERT W RICE TRUSTEE	10	X						0	0	0
RONALD L ZARRELLA TRUSTEE	10	X						0	0	0
ROOSEVELT MERCER JR TRUSTEE	10	X						0	0	0
SAMUEL T HUBBARD JR TRUSTEE	10	X						0	0	0
SANDRA A PARKER TRUSTEE	10	X						0	0	0
SHARON TING TRUSTEE	10	X						0	0	0
STEPHEN L SCHULTZ TRUSTEE	10	X						0	0	0
SUSAN J RILEY TRUSTEE	10	X						0	0	0
SUSAN M PUGLIA TRUSTEE	10	X						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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUSAN R HOLLIDAY TRUSTEE	10	X						0	0	0
THOMAS F JUDSON JR TRUSTEE	10	X						0	0	0
THOMAS S RICHARDS TRUSTEE	10	X						0	0	0
WILLEM APPELO TRUSTEE	10 10	X						0	0	0
WILLIAM A BUCKINGHAM TRUSTEE	10	X						0	0	0
WOLFGANG PFIZENMAIER TRUSTEE	10	X						0	0	0
DANIEL ORNT VP AND DEAN OF INST OF HEALTH SCIENCES AND TECH	40 00			X				385,062	0	29,814
DEBORAH M STENDARDI VP GOVT AND COMMUNITY RELATIONS	40 00			X				228,123	0	40,308
GERARD BUCKLEY PRESIDENT NTID, VP AND DEAN RIT	40 00			X				279,483	0	64,937
JAMES G MILLER SVP ENROLLMENT MGMT AND CAREER SVCS	40 00 10			X				329,612	0	39,375
JAMES H WATTERS SVP FINANCE AND ADMINISTRATION	40 00 10			X				429,929	0	81,196
JEREMY A HAEFNER PROVOST AND SVP ACADEMIC AFFAIRS	40 00 10			X				421,315	0	94,531
KAREN A BARROWS SECRETARY OF THE INST AND CHIEF OF STAFF	40 00			X				110,697	0	19,258
KATHERINE J MAYBERRY VP FOR STRATEGIC PLANNING AND SPECIAL INITIATIVES	40 00			X				220,018	0	36,165
KEVIN MCDONALD VP AND ASSOC PROVOST FOR DIVERSITY AND INCLUSION	40 00			X				222,432	0	77,447
LISA A CAUDA VP DEVELOPMENT AND ALUMNI RELATIONS	40 00			X				277,136	0	37,521
MARY-BETH A COOPER SVP STUDENT AFFAIRS	40 00			X				256,948	0	42,428
RYNE RAFFAELLE VP FOR RESEARCH AND ASSOC PROVOST	40 00			X				249,177	0	52,071
ANDREW SEARS DEAN GCCIS	40 00					X		277,995	0	51,619
DONALD F FIGER PROF AND DIR CENTER FOR DETECTORS	40 00					X		261,112	0	35,263
DONALD O BAKER EXEC DIR CENTER FOR QUALITY AND APPL STATISTICS	40 00					X		247,007	0	23,970
JOHN R SCHOTT WIEDMAN CHAIR AND PROFESSOR	40 00					X		248,002	0	40,202
NABIL Z NASR ASST PROVOST, DIR GOLISANO INST OF SUSTAINABILITY	40 00					X		379,455	0	45,163



SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

☐

Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 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						
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						▶

Part IIISupport Schedule for Organizations Described in Section 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 in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

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.

OMB No 1545-0047

2012

Open to Public Inspection

If the organization answered “Yes” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered “Yes” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization ROCHESTER INSTITUTE OF TECHNOLOGY	Employer identification number  16-0743140
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		379,134													
c Total lobbying expenditures (add lines 1a and 1b)		379,134	0												
d Other exempt purpose expenditures		583,569,930													
e Total exempt purpose expenditures (add lines 1c and 1d)		583,949,064	0												
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000	0												
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000	0												
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0	0												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	442,558	424,301	395,962	379,134	1,641,955
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	32,790	20,957	0	0	53,747

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)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(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			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

	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 carry over lobbying and political expenditures from the prior year?	3	

Part III-B

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

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

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, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

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, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☒ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☒ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ► 1

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☒ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ 83,600

(ii) Assets included in Form 990, Part X

► \$ 8,655,385

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ 13,906

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2012



Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☒

Scholarly research

c

☐

Preservation for future generations

d

☒

Loan or exchange programs

e

☒

Other EDUCATION

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☒ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	628,328,362	640,962,040	559,539,414	530,411,586	671,482,363
b Contributions	4,654,227	1,676,001	6,852,732	6,116,934	13,217,807
c Net investment earnings, gains, and losses	62,099,043	11,769,898	97,039,041	44,168,388	-130,157,738
d Grants or scholarships	6,636,972	6,708,063	5,751,946	5,809,130	6,129,443
e Other expenditures for facilities and programs	19,112,753	19,371,514	16,717,201	15,348,364	18,001,403
f Administrative expenses					
g End of year balance	669,331,907	628,328,362	640,962,040	559,539,414	530,411,586

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

52 300 %

b

Permanent endowment

20 300 %

c

Temporarily restricted endowment

27 400 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

Yes

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		10,714,830		10,714,830
b Buildings		856,676,987	315,686,674	540,990,313
c Leasehold improvements				0
d Equipment		134,313,789	82,667,604	51,646,185
e Other		14,765,230		14,765,230
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				618,116,558

Schedule D (Form 990) 2012



<b>Part XI    Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>					
<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .			<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>			
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>			
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>			
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>			
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>				
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>			
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>			
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>		
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .			<b>5</b>	
<b>Part XII    Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>					
<b>1</b>	Total expenses and losses per audited financial statements . . . . .			<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25				
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>			
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>			
<b>c</b>	Other losses . . . . .	<b>2c</b>			
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>			
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :				
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>			
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>			
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>		
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .			<b>5</b>	

**Part XIII    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, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Conservation easements financial reporting	Schedule D, Part II, Line 9	IN 2007, THE UNIVERSITY ENTERED INTO A CONSERVATION EASEMENT WITH THE TOWN OF HENRIETTA, NY. THE CONSERVATION EASEMENT IS VALUED AS PART OF THE LAND AND RECORDED IN RIT'S FINANCIAL STATEMENTS.
Collections of art - description of collections	Schedule D, Part III, Line 4	THE CARY LIBRARY HOUSES SOME 20,000 VOLUMES AND A GROWING NUMBER OF MANUSCRIPTS AND CORRESPONDENCE COLLECTIONS ON THE HISTORY AND PRACTICE OF GRAPHIC COMMUNICATION TECHNOLOGIES. ALSO INCLUDED ARE IMPRESSIVE HOLDINGS ON BOOKBINDING, PAPERMAKING, TYPE DESIGN, CALLIGRAPHY AND BOOK ILLUSTRATION. THE GOAL OF DEVELOPING THE DIGITAL IMAGE DATABASE IS TO ENABLE USERS ALL OVER THE WORLD TO SAMPLE THE WEALTH OF RICH MATERIALS HOUSED IN THE COLLECTION. AN ADDITIONAL FEATURE IS THE INCLUSION IN THE SCHOOL'S CURRICULUM OF SEVERAL COURSES WHICH ACTUALLY MEET IN THE LIBRARY. THE COLLECTION'S HOLDINGS ARE ALSO AVAILABLE TO OUTSIDE RESEARCHERS. THE WILL BURTIN COLLECTION IS AN AMALGAMATION OF MATERIALS FROM GRAPHIC DESIGNER WILL BURTIN. IT INCLUDES EXTENSIVE CLIENT PROJECT FILES AND DOCUMENTATION (SKETCHES, MECHANICALS, MODELS, PRINTED SAMPLES, PHOTOGRAPHS), BUSINESS AND PROFESSIONAL CORRESPONDENCE, FINANCIAL RECORDS, PUBLICATIONS, PERSONAL PAPERS, EXHIBIT PLANS, AND AUDIO/VISUAL MATERIALS. THE COLLECTION IS OPEN FOR ACADEMIC AND PUBLIC RESEARCH. THE PUBLIC ART ON CAMPUS COLLECTION IS A SERIES OF 31 PIECES OF FINE ART INCLUDING, BUT NOT LIMITED TO, MURALS, PAINTING, AND STATUES. ALL OF THESE WORKS ENLIVEN AND ENRICH THE CULTURAL ENVIRONMENT OF RIT, WHILE THOSE THAT GRACE THE PUBLIC SPACES OF OUR CAMPUS HELP TO DEFINE AND ENHANCE THE BUILDINGS AND WALKWAYS THEY INHABIT.
Intended uses of endowment funds	Schedule D, Part V, Line 4	THE INTENDED USES OF THE UNIVERSITY'S ENDOWMENT FUNDS, AS DETERMINED BY EITHER DONOR RESTRICTION OR BOARD DESIGNATION, INCLUDE SCHOLARSHIPS, AWARDS, PROFESSORSHIPS, LECTURES, AND OTHER GENERAL SUPPORT OF THE UNIVERSITY'S EDUCATIONAL AND RESEARCH MISSION.
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	EFFECTIVE JULY 1, 2007, THE UNIVERSITY ADOPTED FIN 48 AND INTERPRETATION OF SFAS 109 ACCOUNTING FOR INCOME TAXES. AS A TAX-EXEMPT ORGANIZATION, THE UNIVERSITY HAS A VERY LIMITED NUMBER OF TAX POSITIONS SUBJECT TO FIN 48, AND BELIEVES ITS TAX POSITIONS MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD IN FIN 48 AND AS SUCH, AS INCLUDED THE EFFECTS OF THOSE TAX POSITIONS IN ITS FINANCIAL STATEMENTS.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Schools

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

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number

16-0743140

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 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

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain If you need more space, use Part II

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, explain on Part II
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

**Part III 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)

Identifier	Return Reference	Explanation
Racially nondiscriminatory policy	Schedule E, Part I, Line 3	RIT'S RACIALLY NON-DISCRIMINATORY POLICY WITH RESPECT TO STUDENT SOLICITATION IS PUBLICIZED IN ALL UNIVERSITY APPLICATIONS, REGISTRATIONS AND OTHER CAMPUS-WIDE PUBLICATIONS. IN ADDITION, RIT PUBLICIZES ITS RACIALLY NON-DISCRIMINATORY EMPLOYMENT POLICIES IN THE LOCAL NEWSPAPER WHEN RECRUITING FOR OPEN POSITIONS.
Financial aid or assistance from a governmental agency	Schedule E, Part I, Line 6a	THE UNIVERSITY IS THE RECIPIENT OF APPROPRIATIONS AND ASSISTANCE FROM THE DEPARTMENT OF EDUCATION TO OPERATE THE NATIONAL TECHNICAL INSTITUTE FOR THE DEAF AND TO SUPPORT THE FEDERAL WORK STUDY AND FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAMS. THE UNIVERSITY ALSO RECEIVES AN APPROPRIATION OF DIRECT INSTITUTIONAL SUPPORT OF "BUNDY AID" FROM THE NEW YORK STATE DEPARTMENT OF EDUCATION.

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		148,317,174
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		4,746,851
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			153,064,025

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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

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

## Part III

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



**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☒ Yes ☐ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes ☒ No

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

[illegible]



Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>TIGER OPEN</u>	<u>SCB GOLF TOURN</u>	<u>1</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts . . . .	19,840	27,255	15,382	62,477	
	2	Less Contributions . . .	11,700	10,661	5,050	27,411	
3	Gross income (line 1 minus line 2) . . . .	8,140	16,594	10,332	35,066		
Direct Expenses	4	Cash prizes . . . .	0	0	0	0	
	5	Noncash prizes . . .	0	0	0	0	
	6	Rent/facility costs . . .	6,490	13,377	2,000	21,867	
	7	Food and beverages .	5,750	585	6,764	13,099	
	8	Entertainment . . . .	0	0	200	200	
	9	Other direct expenses .	9,334	460	13,943	23,737	
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶					(58,903)
	11	Net income summary Combine line 3, column (d), and line 10 . . . . . ▶					-23,837

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
	3	Non-cash prizes . . . .			
	4	Rent/facility costs . . . .			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor . . . .			
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name  .....

Address  .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization  \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party  \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name  .....

Address  .....

16 Gaming manager information

Name  .....

Gaming manager compensation  \$ .....

Description of services provided  .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

DLN: 93493134024814

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

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? . . . . .

Yes

No

2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AACSB INTERNATIONAL 777 S HARBOUR ISLAND BLVD TAMPA, FL 336025730	43-6036286	501C3	75,000				CONF SPONSORSHIP
(2) CHILDREN'S SUCCES FUND SPECIAL EVENTS 2000 JEFFERSON RD PITTSFORD, NY 14534	26-2998673	501C3	28,000				LPGA SPONSORSHIP
(3) GREATER ROCHESTER ENTERPRISE INC ONE HSBC PLAZA 100 CHESTNUT ST SUITE 1910 ROCHESTER, NY 14604	10-0000080	501C3	51,250				GENERAL SUPPORT, EVENT SPONSORSHIP
(4) HENRIETTA FIRE DISTRICT 850 BAILEY RD WHENRIETTA, NY 14586	16-0974231	STATE OF NY	35,000				GENERAL SUPPORT
(5) HIGH TECH ROCHESTER INC 150 LUCIUS GORDON DR SUITE 100 WHENRIETTA, NY 14586	16-1195028	501C3	30,000				GENERAL SUPPORT
(6) NATIONAL ASSOC OF THE DEAF 8630 FENTON ST SUITE 820 SILVER SPRING, MD 20910	94-1358295	501C3	17,000				YOUTH CAMP & CONF SPONSORSHIPS
(7) NEW YORK WINE & CULINARY CTR 800 S MAIN ST CANANDAIGUA, NY 14424	20-1682175	501C3	56,500				GENERAL SUPPORT, EVENT SPONSORSHIP
(8) ROCHESTER AREA COMMUNITY FOUNDATION 500 EAST AVE ROCHESTER, NY 146071912	23-7250641	501C3	10,250				GENERAL SUPPORT
(9) ROCHESTER BUSINESS ALLIANCE 150 STATE ST ROCHESTER, NY 146141308	51-0439860	501C6	10,000				GENERAL SUPPORT, EVENT SPONSORSHIPS
(10) ROCHESTER GENERAL HOSPITAL 1425 PORTLAND AVE ROCHESTER, NY 14621	16-0743134	501C3	6,000				GENERAL SUPPORT

2

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

9

3

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

1

**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.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP	12900	144,197,839			
(2) GRADUATE RESEARCH ASSISTANCE	335	4,242,781			
(3) FELLOWSHIPS	54	455,224			

**Part IV**

**Supplemental Information.**  
Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
NUMBER OF RECIPIENTS	SCHEDULE I, PART III	THE UNIVERSITY ESTIMATES THE NUMBER OF RECIPIENTS FROM RECORDS MAINTAINED IN OUR FINANCIAL AID (SCHOLARSHIPS) AND ACCOUNTS PAYABLE SYSTEM (GRADUATE RESEARCH ASSISTANCE STIPENDS, FELLOWSHIPS, AND AWARDS) WHICH HAVE BEEN CLASSIFIED BY THE TYPE OF ASSISTANCE
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	SCHOLARSHIPS, FELLOWSHIPS, AND OTHER STUDENT RELATED FINANCIAL AID MUST BE USED FOR EDUCATIONAL PURPOSES SCHOLARSHIPS AND GRANTS ARE CREDITED DIRECTLY TO STUDENT ACCOUNTS THROUGH AN AUTOMATED SYSTEM AUTHORIZED BY THE UNIVERSITY'S OFFICE OF FINANCIAL AID AND SCHOLARSHIPS

Software ID: 12000266

Software Version: v2012.1.0

EIN: 16-0743140

Name: ROCHESTER INSTITUTE OF TECHNOLOGY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AACSB INTERNATIONAL 777 S HARBOUR ISLAND BLVD TAMPA, FL 336025730	43-6036286	501C3	75,000				CONF SPONSORSHIP
CHILDREN'S SUCCESS FUND SPECIAL EVENTS 2000 JEFFERSON RD PITTSFORD, NY 14534	26-2998673	501C3	28,000				LPGA SPONSORSHIP



Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER ROCHESTER ENTERPRISE INCONE HSBC PLAZA 100 CHESTNUT ST SUITE 1910 ROCHESTER,NY 14604	10-0000080	501C3	51,250				GENERAL SUPPORT, EVENT SPONSORSHIP
HENRIETTA FIRE DISTRICT 850 BAILEY RD W HENRIETTA,NY 14586	16-0974231	STATE OF NY	35,000				GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGH TECH ROCHESTER INC150 LUCIUS GORDON DR SUITE 100 W HENRIETTA,NY 14586	16-1195028	501C3	30,000				GENERAL SUPPORT
NATIONAL ASSOC OF THE DEAF8630 FENTON ST SUITE 820 SILVER SPRING,MD 20910	94-1358295	501C3	17,000				YOUTH CAMP & CONF SPONSORSHIPS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK WINE & CULINARY CTR800 S MAIN ST CANANDAIGUA, NY 14424	20-1682175	501C3	56,500				GENERAL SUPPORT, EVENT SPONSORSHIP
ROCHESTER AREA COMMUNITY FOUNDATION 500 EAST AVE ROCHESTER, NY 146071912	23-7250641	501C3	10,250				GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROCHESTER BUSINESS ALLIANCE150 STATE ST ROCHESTER, NY 146141308	51-0439860	501C6	10,000				GENERAL SUPPORT, EVENT SPONSORSHIPS
ROCHESTER GENERAL HOSPITAL1425 PORTLAND AVE ROCHESTER, NY 14621	16-0743134	501C3	6,000				GENERAL SUPPORT

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>1b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div></div>		No
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div></div>	Yes	
<div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div><div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</div></div>		
<div><div>4a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>4b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>		No
<div><div>4c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>		No
<div><div></div><div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div></div>		
<div><div>5</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div></div>		
<div><div>5a</div><div>The organization?</div></div>		No
<div><div>5b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>		No
<div><div>6</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div></div>		
<div><div>6a</div><div>The organization?</div></div>		No
<div><div>6b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>		No
<div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div></div>		No
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</div></div>		

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported 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, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Housing allowance or residence for personal use	Schedule J, Part I, Line 1a	DUE TO THE NUMBER OF UNIVERSITY-RELATED ACTIVITIES THAT THE PRESIDENT IS REQUIRED TO HOST, HE IS REQUIRED TO LIVE IN A HOME OWNED AND MAINTAINED BY THE UNIVERSITY. THIS BENEFIT IS NOT DEEMED TO BE TAXABLE COMPENSATION.
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a	THE UNIVERSITY PAYS SOCIAL CLUB INITIATION FEES AND DUES FOR SEVEN OFFICERS AND/OR HIGHLY COMPENSATED EMPLOYEES. THE PERSONAL USE PORTION OF THE BENEFIT IS TREATED AS TAXABLE COMPENSATION AND ADDED TO THE EMPLOYEES' FORM W-2.
Written policy regarding payment or reimbursement of expenses	Schedule J, Part I, Line 1b	EACH OF THE BENEFITS INDICATED IS AVAILABLE TO THE PRESIDENT, CERTAIN OF THESE BENEFITS ARE AVAILABLE TO SELECT OFFICERS. AMOUNTS CONSIDERED TAXABLE ARE REPORTED. COMPENSATION INCLUDED ON THE EMPLOYEE'S FORM W-2. SINCE THESE BENEFITS ARE LIMITED TO VERY FEW INDIVIDUALS, A WRITTEN POLICY IS NOT CONSIDERED NECESSARY, HOWEVER, THE UNIVERSITY HAS SPECIFIC WRITTEN POLICIES PERTAINING TO TRAVEL EXPENDITURES AND PAYMENTS/REIMBURSEMENTS.
METHODS USED TO ESTABLISH COMPENSATION	SCHEDULE J, PART I, LINE 3	THE UNIVERSITY UTILIZES EACH OF THE METHODS LISTED IN SCHEDULE J, PART I, LINE 3 ON AN ANNUAL BASIS WITH THE EXCEPTION OF REVIEWING FORM 990 OF OTHER ORGANIZATIONS EVERY OTHER YEAR. IN THE YEAR THAT 990 OF OTHER ORGANIZATIONS ARE NOT REVIEWED BY THE UNIVERSITY, A BROADER COMPENSATION SURVEY OR STUDY IS CONDUCTED.

**Software ID:** 12000266  
**Software Version:** v2012.1.0  
**EIN:** 16-0743140  
**Name:** ROCHESTER INSTITUTE OF TECHNOLOGY

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WILLIAM W DESTLER	(i) (ii)	752,901 0	45,843 0	9,267 0	22,500 0	67,035 0	897,546 0	0 0
JEREMY A HAEFNER	(i) (ii)	404,478 0	14,515 0	2,322 0	22,500 0	72,031 0	515,846 0	0 0
JAMES G MILLER	(i) (ii)	314,810 0	5,969 0	8,833 0	25,000 0	14,375 0	368,987 0	0 0
JAMES H WATTERS	(i) (ii)	411,339 0	14,801 0	3,789 0	25,000 0	56,196 0	511,125 0	0 0
MARY-BETH A COOPER	(i) (ii)	255,397 0	109 0	1,442 0	24,059 0	18,369 0	299,376 0	0 0
LISA A CAUDA	(i) (ii)	257,542 0	0 0	19,594 0	23,764 0	13,757 0	314,657 0	0 0
KEVIN MCDONALD	(i) (ii)	199,101 0	0 0	23,331 0	18,896 0	58,551 0	299,879 0	0 0
KATHERINE J MAYBERRY	(i) (ii)	209,578 0	0 0	10,440 0	21,432 0	14,733 0	256,183 0	0 0
DEBORAH M STENDARDI	(i) (ii)	224,809 0	0 0	3,314 0	23,159 0	17,149 0	268,431 0	0 0
DANIEL ORNT	(i) (ii)	381,228 0	0 0	3,834 0	22,500 0	7,314 0	414,876 0	0 0
RYNE RAFFAELLE	(i) (ii)	247,935 0	0 0	1,242 0	24,302 0	27,769 0	301,248 0	0 0
GERARD BUCKLEY	(i) (ii)	277,161 0	0 0	2,322 0	25,000 0	39,937 0	344,420 0	0 0
DONALD O BAKER	(i) (ii)	161,063 0	0 0	85,944 0	16,210 0	7,760 0	270,977 0	0 0
DONALD F FIGER	(i) (ii)	222,861 0	0 0	38,251 0	18,198 0	17,065 0	296,375 0	0 0
NABIL Z NASR	(i) (ii)	377,133 0	0 0	2,322 0	25,000 0	20,163 0	424,618 0	0 0
ANDREW SEARS	(i) (ii)	277,185 0	0 0	810 0	22,500 0	29,119 0	329,614 0	0 0
JOHN R SCHOTT	(i) (ii)	244,913 0	0 0	3,089 0	22,220 0	17,982 0	288,204 0	0 0



Schedule K  
(Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	DASNY RIT SERIES 2002B	14-6000293	64983QH51	05-04-2006	15,719,523	SEE SUPPLEMENTAL INFORMATION	X			X		X
B	DASNY RIT SERIES 2006A	14-6000293	64983QF38	05-04-2006	61,706,239	SEE SUPPLEMENTAL INFORMATION		X		X		X
C	DASNY RIT SERIES 2008A	14-6000293	6499034Y4	11-13-2008	84,352,284	SEE SUPPLEMENTAL INFORMATION	X			X		X
D	DASNY RIT SERIES 2010	14-6000293	6499054S2	10-21-2010	83,324,343	SEE SUPPLEMENTAL INFORMATION		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	2,780,000		15,025,000		5,400,000		1,820,000	
2	Amount of bonds legally defeased	10,850,000		0		76,100,000		0	
3	Total proceeds of issue	15,720,929		61,710,620		85,041,578		83,421,565	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	141,121		457,585		684,437		559,987	
8	Credit enhancement from proceeds	5,000		470,127		0		0	
9	Working capital expenditures from proceeds	9,808		15,809		0		0	
10	Capital expenditures from proceeds	0		0		83,691,277		34,709,546	
11	Other spent proceeds	15,565,000		60,767,099		665,864		44,726,855	
12	Other unspent proceeds	0		0		0		3,425,177	
13	Year of substantial completion	2004		2000		2010		2013	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X			X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X	X			X	X	
16	Has the final allocation of proceeds been made?	X		X		X			X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
			X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X	X		X	

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X	X		X	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X		X		X		X
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X	X		X	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X		X		X
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 00000%		0 00000%		0%		0%	
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 00000%		0 00000%		0%		0%	
6	Total of lines 4 and 5	0 00000%		0 00000%		0%		0%	
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0%		0%		0%		0%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		X
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X	X		X	

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X	X		X	
b	Exception to rebate?		X		X		X		X
c	No rebate due?	X		X			X		X
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		X		X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge	0 0		0		0		0	
d	Was the hedge superintegrated?		X		X		X		X
e	Was a hedge terminated?		X		X		X		X

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b	Name of provider								
c	Term of GIC	0 0		0		0		0	
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X		X		X		X
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI

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

Identifier	Return Reference	Explanation
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Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

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 Part VI.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number  
16-0743140

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A DASNY RIT SERIES 2012A	14-6000293	649907HM7	12-12-2012	168,217,368	SEE SUPPLEMENTAL INFORMATION		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	168,427,078							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	109,309,562							
7	Issuance costs from proceeds	854,858							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	13,638,768							
11	Other spent proceeds	75,000							
12	Other unspent proceeds	44,548,890							
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?				X							

Part III Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X						
c	Are there any research agreements that may result in private business use of bond-financed property?	X							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X						
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	0 %		%		%		%	
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	0 %		%		%		%	
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0 %		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X						
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X							
b	Exception to rebate?		X						
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge	0							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC	0							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X						
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							

Part VI

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

Identifier	Return Reference	Explanation
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Schedule L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047  

2012

Open to Public Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
  
16-0743140

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

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

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

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) PIKE COMPANY	TRUSTEE, THOMAS F JUDSON	500,058	CONSTRUCTION SERVICES		No
(2) DUMBWAITER DESIGN	TRUSTEE, SUSAN HOLLIDAY	107,422	WEB DESIGN SERVICES		No
(3) XEROX CORPORATION	TRUSTEE, WILLEM APPELO	686,204	FEES FOR COPIERS, OTHER DEVICES		No
(4) MARK BARROWS	FAMILY MEMBER OF OFFICER	34,635	PAYMENT OF COMPENSATION		No

**Part V Supplemental Information**

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

Identifier	Return Reference	Explanation
LINE 1	SCHEDULE L, PART IV	TRUSTEE, THOMAS JUDSON JR, IS THE OWNER AND CHAIRMAN OF PIKE COMPANY
LINE 2	SCHEDULE L, PART IV	TRUSTEE, SUSAN R HOLLIDAY, IS THE OWNER OF DUMBWAITER DESIGN
LINE 3	SCHEDULE L, PART IV	TRUSTEE, WILLEM APPELO, IS AN OFFICER OF XEROX CORPORATION



SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .	X	5	83,600	MARKET VALUE
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	40	1,726,793	MEAN VALUE DATE OF GIFT
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .	X	1	1,425,000	APPRAISAL/FMV
17 Real estate—Other . . . . .				
18 Collectibles . . . . .	X	8	87,372	APPRAISAL/FMV
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( <u>SOFTWARE</u> ) . . . . .	X	7	975,380	MARKET VALUE
26 Other ► ( <u>CONSUMABLES</u> ) . . . . .	X	101	886,289	MARKET VALUE
27 Other ► ( <u>EQUIPMENT</u> ) . . . . .	X	39	668,520	MARKET VALUE
28 Other ► ( <u>OTHER</u> ) . . . . .	X	13	18,415	MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .292

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

31 If "Yes," describe the arrangement in Part II

32a Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

33 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

34a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

35 If "Yes," describe in Part II

36 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line 1	
Number of contributions or items contributed	Schedule M, part I, column (b), Line 9	
Number of contributions or items contributed	Schedule M, part I, column (b), Line 16	
Number of contributions or items contributed	Schedule M, part I, column (b), Line 18	
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=SOFTWARE	

**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.**

OMB No 1545-0047

**2012****Open to Public  
Inspection**Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY**Employer identification number**

16-0743140

Identifier	Return Reference	Explanation
Family/business relationships amongst interested persons	Form 990, Part VI, Section A, Line 2	ANN L BURR, B THOMAS GOLISANO, SUSAN R HOLLIDAY, SAMUEL T HUBBARD JR, RICHARD A KAPLAN, KRAIG H KAYSER, SANDRA A PARKER, CARL E SASSANO, STEPHEN L SCHULTZ, CHRISTINE B WHITMAN AND RONALD L ZARELLA ARE RIT TRUSTEES WILLIAM W DESTLER AND JAMES H WATTERS ARE OFFICERS - BUSINESS RELATIONSHIP, COMPLEMAR PARTNERS INC SUSAN R HOLLIDAY (DIRECTOR), CARL E SASSANO (DIRECTOR), AND CHRISTINE B WHITMAN (CHAIR AND CEO) - BUSINESS RELATIONSHIP, FRONTIER COMMUNICATIONS ANN L BURR (PRESIDENT, NORTHERN REGION), SANDRA A PARKER (DIRECTOR, FRONTIER COMMUNICATIONS), AND HARRY P TRUEHEART III (DIRECTOR OF FRONTIER TELEPHONE OF ROCHESTER, A SUBSIDIARY) - BUSINESS RELATIONSHIP, ONE STREAM NETWORKS LLC CARL E SASSANO (DIRECTOR) AND CHRISTINE B WHITMAN (MANAGING MEMBER) - BUSINESS RELATIONSHIP, PICTOMETRY INTERNATIONAL CORP B THOMAS GOLISANO (DIRECTOR) AND STEPHEN L SCHULTZ (CTO) - BUSINESS RELATIONSHIP, SENECA FOODS CORP SAMUEL T HUBBARD JR (DIRECTOR) AND KRAIG H KAYSER (PRESIDENT AND CEO) - BUSINESS RELATIONSHIP, TORVEC INC WILLIAM W DESTLER (DIRECTOR) AND RICHARD A KAPLAN (CEO) - BUSINESS RELATIONSHIP, VNMICS CORP RICHARD A KAPLAN (DIRECTOR), JAMES H WATTERS (DIRECTOR), AND RONALD L ZARELLA (CHAIR) - BUSINESS RELATIONSHIP, VOICEPORT LLC CARL E SASSANO (DIRECTOR) AND CHRISTINE B WHITMAN (MANAGING MEMBER) - BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	PRIOR TO FILING THE RETURN, IT WAS PROVIDED TO THE MEMBERS OF THE AUDIT COMMITTEE AND SUBSEQUENTLY PRESENTED FOR REVIEW AT A REGULARLY SCHEDULED AUDIT COMMITTEE MEETING PRIOR TO FILING THE RETURN, IT WAS MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF TRUSTEES VIA A SECURED WEBSITE

Identifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	<p>THE UNIVERSITY'S CONFLICT OF INTEREST POLICY APPLIES TO ALL MEMBERS OF THE BOARD OF TRUSTEES. ALL TRUSTEES AND OFFICERS ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS SOON AS POSSIBLE. ADDITIONALLY, ON AN ANNUAL BASIS, THE SECRETARY OF THE UNIVERSITY DISTRIBUTES A CONFLICT OF INTEREST DISCLOSURE FORM TO ALL TRUSTEES AND OFFICERS SOLICITING DISCLOSURE OF ANY ACTUAL OR POTENTIAL CONFLICTS. FOLLOWING THE RECEIPT OF INFORMATION CONCERNING A CONTRACT OR TRANSACTION INVOLVING A POTENTIAL CONFLICT OF INTEREST, THE SECRETARY OF THE UNIVERSITY WILL ARRANGE FOR THE CONFLICT OF INTEREST SUBCOMMITTEE TO CONSIDER THE MATERIAL FACTS CONCERNING THE FAIRNESS AND BUSINESS CASE OF THE PROPOSED CONTRACT OR TRANSACTION. THE COMMITTEE SHALL APPROVE ONLY THOSE CONTRACTS OR TRANSACTIONS IN WHICH THE TERMS ARE FAIR AND REASONABLE TO THE UNIVERSITY AND THE ARRANGEMENTS ARE CONSISTENT WITH THE BEST INTERESTS OF THE UNIVERSITY. IN ANY EVENT, SUCH MEMBERS WILL NEITHER VOTE, NOR DISCHARGE HIS/HER DUTIES WITH RESPECT TO ANY MATTER CONCERNING A CONFLICT. THE COMMITTEE SHALL SET FORTH THE BASIS FOR ITS DECISION WITH RESPECT TO APPROVAL OF CONTRACTS OR TRANSACTIONS INVOLVING CONFLICTS OF INTEREST IN THE MINUTES OF THE MEETING AT WHICH THE DECISION IS MADE, INCLUDING THE BASIS FOR DETERMINING THAT THE CONSIDERATION TO BE PAID IS FAIR TO THE UNIVERSITY. THE CONFLICT OF INTEREST CONFLICT OF COMMITMENT (ICIC) POLICY REQUIRES ALL REGULAR RIT FACULTY AND STAFF TO DISCLOSE POTENTIAL, REAL, OR PERCEIVED CONFLICTS OF INTEREST OR COMMITMENT ANNUALLY TO THEIR IMMEDIATE SUPERVISOR. ADDITIONALLY, THE ICIC POLICY REQUIRES THAT EMPLOYEES SUBMIT AN ANNUAL DISCLOSURE AND/OR A DISCLOSURE WHEN CIRCUMSTANCES CHANGE THAT MAY CREATE A POTENTIAL, REAL, OR PERCEIVED CONFLICT.</p>

Identifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE EXECUTIVE COMPENSATION SUBCOMMITTEE SHALL DECIDE UPON MATTERS OF EXECUTIVE SALARY AND BENEFITS, AND ANNUALLY SHALL REVIEW THE COMPENSATION OF THE OFFICERS OF THE UNIVERSITY, MAKING A RECOMMENDATION CONCERNING THE SAME TO THE EXECUTIVE COMMITTEE FOR ITS FINAL APPROVAL. THE PRESIDENT ANNUALLY WILL MEET WITH THE EXECUTIVE COMPENSATION SUBCOMMITTEE AND PROVIDE IT WITH AN EVALUATION OF THE OFFICERS OF THE UNIVERSITY OTHER THAN THE PRESIDENT, AND A PROPOSAL FOR THEIR COMPENSATION. THE CHAIR OF THE BOARD OF TRUSTEES ANNUALLY WILL MEET WITH THE EXECUTIVE COMPENSATION SUBCOMMITTEE AND PROVIDE IT WITH AN EVALUATION OF THE PRESIDENT AND A PROPOSAL FOR THE PRESIDENT'S COMPENSATION. BIENNIALY THE EXECUTIVE COMPENSATION SUBCOMMITTEE UTILIZES VARIOUS TOOLS TO REVIEW THE COMPENSATION FOR THE OFFICERS: INDEPENDENT CONSULTANT AND COMPENSATION SURVEY BASED ON A SALARY ANALYSIS OF COMPARABLE POSITIONS IN LIKE CIRCUMSTANCES.

Identifier	Return Reference	Explanation
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	THE EXECUTIVE COMPENSATION SUBCOMMITTEE REVIEWS THE PROPOSED SALARIES OF THE FOLLOWING POSITIONS PRESIDENT, PROVOST AND SVP ACADEMIC AFFAIRS, SVP FINANCE AND ADMINISTRATION, SVP ENROLLMENT MANAGEMENT AND CAREER SERVICES, VP FOR RESEARCH AND ASSOC PROVOST, VP DEVELOPMENT AND ALUMNI RELATIONS, SVP STUDENT AFFAIRS, PRESIDENT NTID, VP AND DEAN RIT, VP FOR STRATEGIC PLANNING AND SPECIAL INITIATIVES, VP GOVERNMENT AND COMMUNITY RELATIONS, VP DEAN INSTITUTE HEALTH SCIENCES AND TECHNOLOGY , AND VP AND ASSOC PROVOST FOR DIVERSITY AND INCLUSION THE EXECUTIVE COMPENSATION SUBCOMMITTEE SHALL SET FORTH THE BASIS FOR ITS DECISIONS WITH RESPECT TO COMPENSATION IN THE MINUTES OF THE MEETING AT WHICH THE DECISIONS ARE MADE, INCLUDING THE PRIMARY CONCLUSIONS OF THE EVALUATION AND THE BASIS FOR DETERMINING THAT THE INDIVIDUAL'S COMPENSATION WAS REASONABLE IN LIGHT OF THE EVALUATION AND COMPARABILITY DATA THE EXECUTIVE COMPENSATION SUBCOMMITTEE REPORTS ANNUALLY TO THE FINANCE COMMITTEE AND TO THE FULL BOARD CONCERNING THE EVALUATION OF OFFICERS AND THE ESTABLISHMENT OF THEIR COMPENSATION

Identifier	Return Reference	Explanation
Governing documents, conflict of interest policy and financial statements available to the public	Form 990, Part VI, Section C, Line 19	THE FOLLOWING DOCUMENTS ARE AVAILABLE AT THE UNIVERSITY'S WEBSITE AT WWW.RIT.EDU 1) LIST OF MEMBERS OF THE BOARD OF TRUSTEES, 2) CONSOLIDATED AUDITED FINANCIAL STATEMENTS, AND 3) UNIVERSITY POLICY AND PROCEDURES MANUAL. ADDITIONALLY, THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.



SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
ROCHESTER INSTITUTE OF TECHNOLOGY

Employer identification number  
16-0743140

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 5257 W HENRIETTA ROAD LLC 5257 W HENRIETTA RD HENRIETTA, NY 14586 16-1609483	OWN REAL PROPERTY	NY	5,566,830	22,979,076	NA

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) RIT GLOBAL DELIVERY CORPORATION  7 LOMB MEMORIAL DRIVE  ROCHESTER, NY 14623	EDUCATIONAL PURPOSES	NY	501(C)(3)	11 - Type II	NA		No
(2) AMERICAN COLLEGE OF MANAGEMENT AND TECHNOLOGY  DON FRANA BULIKA 6 DUBROVNIK HR	EDUCATIONAL PURPOSES	HR	501(C)(3)	2	RIT GLOBAL DELIVERY CORPORATION		No
(3) RIT HIGH TECHNOLOGY INCUBATOR  7 LOMB MEMORIAL DRIVE  ROCHESTER, NY 14623	TECH TRAINING SMALL BUS	NY	501(C)(3)	11 - Type II	NA		No
(4) RIT CAMPUS CLUB  39 LOMB MEMORIAL DRIVE  ROCHESTER, NY 14623	SUPPORT RIT	NY	501(C)(3)	11 - Type II	NA		No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) RIT VENTURE FUND  5 LOMB MEMORIAL DRIVE ROCHESTER, NY 14623	INVESTMENTS	DE	ROCHESTER INSTITUTE OF TECHNOLOGY	UNRELATED	0	5,500	Yes		0		No	100 %

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c No

1d No

1e No

1f No

1g No

1h No

1i No

1j No

1k No

1l Yes

1m No

1n No

1o No

1p No

1q No

1r Yes

1s Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) RIT CAMPUS CLUB	A	678,756	
(2) RIT CAMPUS CLUB	L	2,372,412	
(3) RIT GLOBAL DELIVERY CORPORATION	R	1,421,790	
(4) RIT VENTURE FUND I LLC	B	348,395	

Schedule R (Form 990) 2012

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

[illegible]

**Software ID:** 12000266  
**Software Version:** v2012.1.0  
**EIN:** 16-0743140  
**Name:** ROCHESTER INSTITUTE OF TECHNOLOGY

**Part VII** Supplemental Information

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

Identifier	Return Reference	Explanation
RELATED ORGANIZATIONS TAXABLE AS A PARTNERSHIP	PART III	RIT VENTURE FUND I, LLC WAS CREATED TO MAKE INVESTMENTS IN SEED, VENTURE, AND GROWTH-STAGE COMPANIES THAT INVOLVE RIT STUDENTS, FACULTY, TECHNOLOGIES, OR INCUBATORS OR SIMILAR FACILITIES GENERATED BY, CONNECTED WITH, OR SPUN-OUT FROM RIT

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