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DLN: 93493125019504

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

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

Open to Public

	ha 2012 cal					
s Check		endar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30 C Name of organization	-2013	D Employer	identification number	
_	of applicable ss change	Stevens Institute of Technology				
_	change	Doing Business As		22-1487	354	
Initial r	-					
Termin		Number and street (or P O box if mail is not delivered to street address) Room/suit 1 Castle Point On Hudson	e	E Telephone	number	
-	ded return	Suite City or town, state or country, and ZIP + 4		(201)21	6-8761	
_	ation pending	Hoboken, NJ 07030				
Аррііса	ation pending				ipts \$ 404,539,602	
		F Name and address of principal officer Nariman Farvardin	H(a) Is this affiliat		turn for ┌ Yes 🗸 No	
		1 Castle Point On Hudson Hoboken, NJ 07030				
		Hoboken, NJ 07030			ncluded? Tyes No	
Tax-e:	exempt status	✓ 501(c)(3)	It "No	." attach a I	ist (see instructions)	
Web	site: ► ww	w stevens edu	H(c) Group	exemption	number ►	
			T.		T	
		✓ Corporation Trust Association Other ►	L Year of for	nation 1870	M State of legal domicile NJ	
Part		mary				
'		escribe the organization's mission or most significant activities inization's primary exempt purpose is to provide educational services to	ındıvıduals ın	pursuit of	undergraduate, masters	
,		octorate degrees and to conduct research		,		
<u> </u>						
<u> </u>						
	2 Check tl	nis box দ if the organization discontinued its operations or disposed of	more than 25	% of its ne	t assets	
	n Ni i			ı	a	
)		of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b)			3 25 4 20	
1		mber of individuals employed in calendar year 2012 (Part V., line 2a) .			5 3,131	
		mber of volunteers (estimate if necessary)		_	6 305	
·		related business revenue from Part VIII, column (C), line 12			7a 121,928	
		elated business taxable income from Form 990-T, line 34			7b -10,310	
			Prior	Year	Current Year	
	8 Contr	butions and grants (Part VIII, line 1h)		11,295,49	25,009,202	
	9 Progra	am service revenue (Part VIII, line 2g)	20	08,906,156	217,683,956	
10	.0 Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)		3,559,052	10,727,755	
1.		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,656,009	5,854,187	
12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		26,416,710	259,275,100	
-		s and similar amounts paid (Part IX, column (A), lines 1-3)	,	12,668,734		
13	J Clanc.			(0	
13 14		ts paid to or for members (Part IX, column (A), line 4)				
14	.4 Benef .5 Saları	es, other compensation, employee benefits (Part IX, column (A), lines	1.	25.046.063	106 671 627	
14	.4 Benefi .5 Saları 5-10	es, other compensation, employee benefits (Part IX, column (A), lines	10	05,046,962		
14	4 Benefit5 Saları5-106a Profes	es, other compensation, employee benefits (Part IX, column (A), lines) sional fundraising fees (Part IX, column (A), line 11e)	10			
25 14 25 15 26 16	 4 Benefit 5 Salarit 5-10 6a Profest b Total full 	es, other compensation, employee benefits (Part IX, column (A), lines of the compensation, employee benefits (Part IX, column (A), line 11e) of the column (B), line 11e) of the column (B), line 25) • 3,015,243		(0	
SE 12 15 15 16	 4 Benefi 5 Salari 5-10 6a Profes b Total fu 7 Other 	es, other compensation, employee benefits (Part IX, column (A), lines of the compensation, employee benefits (Part IX, column (A), line 11e) of the column (B), line 11e) of the column (B), line 25) expenses (Part IX, column (A), lines 11a-11d, 11f-24e) of the column (A), lines 11a-11d, 11f-24e) of the column (B), lines (B), l		73,489,72	75,531,628	
及 888 88 16 17	 4 Benefit 5 Salarit 5-10 6a Profest b Total fut 7 Other 8 Total 	es, other compensation, employee benefits (Part IX, column (A), lines of the strength of the s	22	73,489,72: 21,205,417	75,531,628 230,048,695	
14 19 22 25 25 26 16 17 18	 4 Benefit 5 Salarit 5-10 6a Profest b Total fut 7 Other 8 Total 	es, other compensation, employee benefits (Part IX, column (A), lines of the compensation, employee benefits (Part IX, column (A), line 11e) of the column (B), line 11e) of the column (B), line 25) expenses (Part IX, column (A), lines 11a-11d, 11f-24e) of the column (A), lines 11a-11d, 11f-24e) of the column (B), lines (B), l	22	73,489,72	75,531,628 7 230,048,695 3 29,226,405	
14 19 22 25 25 26 16 17 18	 4 Benefit 5 Salarit 5-10 6a Profest b Total fut 7 Other 8 Total 9 Revent 	es, other compensation, employee benefits (Part IX, column (A), lines of signal fundraising fees (Part IX, column (A), line 11e)	Beginning Ye	73,489,722 21,205,417 5,211,293 of Current	75,531,628 7 230,048,695 8 29,226,405 End of Year	
14 15 15 16 17 18	 4 Benefit 5 Salarit 5-10 6a Profest b Total fut 7 Other 8 Total 9 Revent 10 Total 	es, other compensation, employee benefits (Part IX, column (A), lines of the signal fundraising fees (Part IX, column (A), line 11e)	Beginning Ye	73,489,72: 21,205,417 5,211,293 of Current ar	75,531,628 7 230,048,695 8 29,226,405 End of Year 3 334,218,462	
14 19 16 17 18 19 19 19 19 19 19 19 19 19 19 19 19 19	.4 Benefi .5 Saları 5-10 .6a Profes b Total fu .7 Other .8 Total .9 Reven	es, other compensation, employee benefits (Part IX, column (A), lines of signal fundraising fees (Part IX, column (A), line 11e)	Beginning Ye 30	73,489,722 21,205,417 5,211,293 of Current	0 0 0 1 75,531,628 7 230,048,695 8 29,226,405 End of Year 3 334,218,462 123,676,117	

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

✓ Yes No

Form	990 (2012)					Page 2
Par		f Program Serv lle O contains a res		plishments uestion in this Part III		
1	Briefly describe the or	ganızatıon's mıssıor	า			
majo range the I learn attitu ethic	rs including programs in e of disciplines leading t nstitute is accomplished ing experience in the sc udes that underlie differe	n engineering, the so to the Master's and I d by the achievemer tiences, engineering ent branches of tech ness of the societal	lences, computed the computer of the following and notices and notices and notices and notices.	iter science, business, Academic research is o ng core goals providir Iliberal arts while stres ting the personal deve	esearch University offering mand the humanities, and graderined out at every level of thing students with a broad-basesing the fundamental conceptopment of the student, demonent of leadership and team s	duate level courses in a ne Institute The mission of ed, multidisciplinary ots, techniques and nstrated by a sense of
2	the prior Form 990 or 9	990-EZ?			r which were not listed on	
	If "Yes," describe thes	e new services on S	chedule O			
3	Did the organization ce services?		make sıgnıfıca • • •	nt changes in how it co	onducts, any program	
	If "Yes," describe these	e changes on Sched	ule O			
4		L(c)(3) and 501(c)(4	1) organization	s are required to repor	ree largest program services t the amount of grants and al	
4a	(Code) (Expenses \$	158,316,240	ıncludıng grants of \$	47,845,440) (Revenue \$	164,849,521)
	graduated with bachelor of degrees were also conferre	f engineering, science or ed In addition, Stevens ernational students Stev	arts degrees, 110 collaborated with ens emphasizes ii	D6 students received master numerous domestic and into	graduate students and 3484 graduat 's in engineering, science, business ernational universities and other edi epreneurship throughout its curriculu	administration or arts 48 PHD ucational programs to provide
	(6-4-	\ /F	21 460 767) /D #	22 (12 01()
4b	several dining facilities Clo organizations and varsity s	ose interactions between sports that offer the stud	professors and stenders ents ample oppor	tudents allow for greater act tunity to participate, broade) (Revenue \$ es students with on campus and off ademic and social development The in and enrich their student life The nologies to foster a stimulating envi	ere are over 120 clubs, S C Williams library serves as the
4 c	(Code) (Expenses \$	24,475,353	including grants of \$) (Revenue \$	29,221,519)
	infrastructure Creative and Defense and the Departme	d entrepreneural researd ent of Homeland Security	h is an integral pa y as a national cei	art of the Stevens Mission T	oss-disciplinary research initiatives with a second constitute has been recognized by the second control of systems engineering, port second control of the second control of th	both the U.S. Department of
	0.11					
4d	Other program servic (Expenses \$	•	edule O) luding grants c	of \$) (Revenue \$)
4e	Total program service	expenses 🗠	204.260.360)		

Form 990 (· · · · · · · · · · · · · · · · · · ·		
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	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 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 $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, 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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	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		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Par				_
	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 1a 578		1 00	"
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		V	
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country DR			
	See 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?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Instruction for a and control control to the product of an Port VIII. Inc. 1.2.			
	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	j	No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Section A. Governing Body and Management

			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
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		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			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 $\dots \dots \dots$	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 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

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
- 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 ►RANDY GREENE 1 CASTLE POINT ON HUDSON Hoboken, NJ (201) 216-8761

Form 990	(2012	,
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

	1	1										
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		
		organızatıons below	organizations below	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table												
	•	•	•							Form 990 (2012)		

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion (han d n is	one I both	box, an d	heck unless officer stee)	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	rtable Estimated nsation amount of othe related compensation tions (W- from the				
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizati relate rganiza	d		
								L_							
1b c	Sub-Total				•			•							
d	Total (add lines 1b and 1c)			` .	٠.	٠.	٠.	•	7,170,194	C			530,744		
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an					
												Yes	No		
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3	Yes			
4	For any individual listed on line organization and related organ individual										4	Yes			
5	Did any person listed on line 1			-					_						
	services rendered to the organ	nization? <i>If</i> "Yes	," compl	ete S	ched	lule J	ifor su	ch pe	erson	[5		No		
S	ection B. Independent Co	ntractors													
1	Complete this table for your five		ensate	dinde	epen	den	t contr	acto	rs that received mo	re 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
Sodexo Operations , PO Box 360170 PITTSBURGH PA 152516170	Food Service Mgmt	8,232,724
GCA Services Group , PO Box 643823 PITTSBURGH PA 15264	Maintenance	1,365,587
Hewlett Packard Financial , PO Box 402582 ATLANTA GA 30384	Financial	1,279,784
Donnelly Construction , 557 Route 23 South WAYNE NJ 07470	Construction	973,831
UGL SVCS Unico Operations Co , 4002 Solutions Center CHICAGO IL 60677	Maintenance	1,056,236
2 Total number of independent contractors (including but not limited to those	se listed above) who received more than	

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 114

Part V		Statement of Check of Sched	ule O contains a respor	nse to any question	ın thıs Part VIII	<u> </u>	<u> </u>	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s ts	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	ıes 1b					
Gr m	С	Fundraising ev	ents 1c	161,718				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organiz	zations 1d					
, Gi nila	e	Government grant	s (contributions) 1e					
ons Sir	f	All other contribution	ons, gifts, grants, and 1f	24,847,484				
uti	•	similar amounts no						
file Offi	g	Noncash contributi 1a-1f \$	ons included in lines	568,780				
Cont and	h	Total. Add line:	s 1 a - 1 f	🛌	25,009,202			
				Business Code				
enue	2a	TUITION & FEES		611600	164,849,521	164,849,521		
Reve	ь	RESEARCH REVEN	UE	541700	29,221,519	29,221,519		
Program Serwce Revenue	С	STUDENT HOUSIN	G	611710	14,931,743	14,931,743		
erw	d	STUDENT DINING		611710	8,681,173	8,681,173		
ម ៣	е							
ogra	f	All other progra	am service revenue					
Ğ	g	Total. Add line:	s 2a-2f		217,683,956			
	3		ome (including dividen		2,498,338		-39,657	2,537,995
	4		ar amounts) stment of tax-exempt bond	•	0		33,037	2,557,555
	5			.	96,055			96,055
		,	(ı) Real	(II) Personal				
	6a	Gross rents	1,435,570					
	Ь	Less rental expenses						
	С	Rental income or (loss)	1,435,570	0				
	d	, ,	me or (loss)		1,435,570		20,695	1,414,875
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	152,415,807					
	b	Less cost or other basis and	143,492,359	694,031				
	c	sales expenses Gaın or (loss)	8,923,448	-694,031				
	d	• •	ss)	· ·	8,229,417			8,935,416
ıne	8a	Gross income f	from fundraising	,				
Other Revenue		of contributions See Part IV, lir	s reported on line 1c) ne 18 a	102,235				
the	b		penses b	225,966	400 701			400 701
0	c 9a		(loss) from fundraising	events 🕦	-123,731			-123,731
	94		from gaming activities ne 19 a					
	b		penses b					
	с 10а	Net income or Gross sales of returns and allo		vities	0			
	ь		a oods sold b	1,098,889 852,146				
	С		(loss) from sales of inv		246,743		6,103	240,640
	11a	Miscellaneou INSURANCE R HURRICANE S	RECOVERY -	Business Code 900099	481,775			481,775
	b	AQUATICS	PANDI	713940	278,486		119,885	158,601
	c	PARKING		812930	419,421			419,421
	d	All other reven	ue		3,019,868		14,902	3,004,966
	e	Total. Add lines	s 11a-11d	🕨	4,199,550			
	12	Total revenue.	See Instructions .	🕨	259,275,100	217,683,956	121,928	17,166,013
	1				237,213,100	211,000,000	121,720	

	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns Al	other organizat	ions must comp	lete column (A)	r age 20
	Check if Schedule O contains a response to any question in this Pa				г
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	47,845,440	47,845,440		
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	5,146,015	2,043,701	3,102,314	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	110,149		110,149	
7	Other salaries and wages	82,134,090	72,785,768	7,683,367	1,664,955
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,391,070	3,759,932	526,068	105,070
9	Other employee benefits	10,144,152	8,686,112	1,215,311	242,729
10	Payroll taxes	4,746,151	4,063,977	568,608	113,566
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	1,204,971	299,563	905,408	
C	Accounting	701,127	17,246	683,881	
d	Lobbying	274,000		274,000	
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	1,603,578		1,603,578	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,072,543	3,293,818	1,476,926	301,799
12	Advertising and promotion	701,691	268,768	432,607	316
13	Office expenses	3,150,857	1,575,151	1,348,129	227,577
14	Information technology	2,103,214	1,975,068	116,194	11,952
15	Royalties	0			
16	Occupancy	11,189,319	11,000,144	189,175	
17	Travel	2,609,165	2,400,351	179,407	29,407
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	174,465	109,132	65,333	
20	Interest	3,947,910	3,801,972	145,938	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	7,409,495	7,143,266	266,229	
23	Insurance	1,040,357	1,030,487	9,870	
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)				
а	REPAIRS & MAINTENANCE	8,246,951	7,238,205	1,002,910	5,836
ь	RESEARCH CONTRACTS	15,361,315	15,359,733	1,582	
c	HOSPITALITY	2,171,130	1,576,382	426,455	168,293
d	RENTAL EQUIPMENT	1,952,851	1,777,531	157,797	17,523
e	All other expenses	6,616,689	6,208,613	281,856	126,220
25	Total functional expenses. Add lines 1 through 24e	230,048,695	204,260,360	22,773,092	3,015,243
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response to any question in t	hıs Part X .				
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			54,585	1	2,700,160
	2	Savings and temporary cash investments			17,963,668	2	26,833,602
	3	Pledges and grants receivable, net			8,309,162	3	20,393,138
	4	Accounts receivable, net			26,324,728	4	21,461,816
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II of		0	5	0
ts	6	Loans and other receivables from other disqualified persons (4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section 501(c)(9) voluntary organizations (see instructions) Complete Part II of Schedule	d contributing employees' b	employers	0	6	0
Assets	7	Notes and loans receivable, net			0	7	
4	8	Inventories for sale or use			302,624	8	386,294
	9	Prepaid expenses and deferred charges			1,447,855	9	1.854.604
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	244,987,349	1,111,000		1,00 1,00 1
	ь	Less accumulated depreciation	10b	117,724,559	127,903,609	10c	127,262,790
	11	Investments—publicly traded securities			65,806,447	11	61,320,918
	12	Investments—other securities See Part IV, line 11			52,688,229	12	64,964,348
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			7,105,116	15	7,040,792
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			307,906,023	16	334,218,462
	17	Accounts payable and accrued expenses		•	13,309,069	17	16,061,630
	18	Grants payable			0	18	0
	19	Deferred revenue			6,212,618	19	5,787,382
	20	Tax-exempt bond liabilities			77,988,160	20	75,238,958
	21	Escrow or custodial account liability Complete Part IV of Sc			0	21	0
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquared to the compensated employees.	ctors, trustees		-	21	<u> </u>
Liabiliti		persons Complete Part II of Schedule L			o	22	0
ä	23	Secured mortgages and notes payable to unrelated third part			12,760,415	23	7,088,276
	24	Unsecured notes and loans payable to unrelated third parties		_	0	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete F	lated third par	ties,			
		D			20,299,868	25	19,499,871
	26	Total liabilities. Add lines 17 through 25			130,570,130	26	123,676,117
s es		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	and comp	lete			
<u>a</u>	27	Unrestricted net assets			22,779,457	27	26,484,141
<u>8</u>	28	Temporarily restricted net assets			44,641,385	28	105,221,104
₹	29	Permanently restricted net assets			109,915,051	29	78,837,100
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here ► ┌ an	d			
S 0.	30	Capital stock or trust principal, or current funds				30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	_
Assets	32	Retained earnings, endowment, accumulated income, or othe				32	
Šet	33	Total net assets or fund balances			177,335,893	33	210,542,345
Z	34	Total liabilities and net assets/fund balances			307,906,023	34	334,218,462
					, , , -		,

Pai	Reconcilliation 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		259,7	275,100
2	Total expenses (must equal Part IX, column (A), line 25)	2		230 (048,695
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		29,2	226,405
_		4		177,3	335,893
5	Net unrealized gains (losses) on investments	5		4,:	124,854
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		-:	144,807
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		210,!	542,345
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

Software ID: Software Version:

EIN: 22-1487354

Name: Stevens Institute of Technology

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list	Positio more unless an o	(C on (do than	o not n one son is er and	e box, is bot nd a itee)	k, oth		(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		
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations		
Lawrence T Babbio Jr Trustee	1 0	х						0	0	0		
Stephen T Boswell Trustee/Vice Chairman	1 0	х		х				0	0	0		
Thomas A Corcoran Trustee/Vice Chairman	1 0	х		х			<u> </u>	0	0	0		
Richard R Roscitt Trustee/Vice Chairman	1 0	х		х			'	0	0	0		
Virginia P Ruesterholz Trustee/Chairman	1 0	х		х				0	0	0		
John A Schepisi Trustee/Vice Chairman	1 0	х		х				0	0	0		
Kendra L Appleheimer Trustee	1 0	х						0	0	0		
Philip P Crowley Trustee	1 0	х						0	0	0		
Joseph J Garvey Trustee	1 0	х						0	0	0		
Larry B Giannechini Trustee	1 0	х						210	0	0		
John Sean J Hanlon IV Trustee	1 0	х						0	0	0		
Mark LaRosa Trustee (not on 6/30/2013)	1 0	х						0	0	0		
Matthew R Libera Trustee/Faculty	55 0	х						226,370	0	24,864		
Richard S Magee Trustee	1 0	х						11,666	0	0		
Lisa M Mascolo Trustee	1 0	х						0	0	0		
Sandeep Mathranı Trustee	1 0	х						0	0	0		
Victoria L O'Connor Trustee	1 0	х						0	0	0		
Hillary Paul Trustee (not on 6/30/2013)	1 0	х						0	0	0		
Spyros Polemis Trustee	1 0	х			'		'	0	0	0		
Ronald E Salluzzo Trustee	1 0	х			'			0	0	0		
Thomas H Scholl Trustee	1 0	х			'			0	0	0		
Frank J Semcer Sr Trustee	1 0	х						0	0	0		
James M Walsh Trustee	1 0	х						0	0	0		
Charles T Koeller Trustee/Dean	55 0	х						153,674	0	15,587		
John R Dearborn Trustee	1 0	x						0	0	0		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the per from related compensation organization (Wan officer and a organizations (Wweek from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee ndividual trustaa or diliector Institutional Trustee hours organizations for employee related organızatıons below dotted line) 1 0 Steven M Feller Χ 0 0 0 Trustee 1 0 Owen P Jappen 0 0 Х Trustee 55 0 Anthony Barrese 27,166 185,156 Х Trustee/Assoc Dean 1 0 Martin C Fliesler Х Trustee 1 0 Steven Shulman Х Trustee 55 0 Narıman Farvardın 0 Χ 726,464 26,326 President 55 0 Randy L Greene Χ 0 472,020 28,826 vp of Finance/Treasurer 55 0 Mary Wheeler Χ 195,119 0 26,676 Assist VP of Fin/Assist Treas 55 0 Elizabeth Shelton Χ 180,660 0 16,394 AVP Inv & Treas Op/Asst Treas 55 0 Kathy L Schulz 0 Х 300.845 25,114 VP/General Counsel/Secretary 55 0 Diana Colombo Χ 86,058 0 17,984 Exec Assistant/Assistant Sec 55 0 **Gregory Prastacos** 332,806 0 31,350 Dean 55 0 Henry P Dobbelaar Jr Х 277,513 0 22,506 Vice President 55 0 George P Korfiatis Х 527,670 0 36,613 Provost/VP 55 0 Maureen P Weatherall Χ 392,590 0 31,337 Vice President 55 0 Michael S Bruno 370,690 0 Х 31.337 Dean 55 0 Lisa Dolling Χ 0 180.800 15,300 Dean 55 0 Dinesh Verma Χ 499,503 0 31,525 Dean 55 0 Mark L Samolewicz Х 157,054 0 23,597 Vice President 55 0 Constantin Chassapis 0 34,025 Х 306,389 Vice Provost 55 0 Ralph G Giffin III Х 308,242 Vice Provost 55 0 Souran Manoochehri Х 269,705 0 28,210 Assoc Dean/Prof 55 0 Donald M Merino Χ 287,963 0 13,806 Professor 55 0 Christos Christodoulatos 283,379 22,201 Х 0 Associate Provost 0 0 Harold J Raveche 6302010 President - Former 302,911 0 0 0

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

(A) Name and Title	hours per week (list any hours for related organizations below dotted line)	than	not one son i er an trust	box s bo d a tee)	, th	Former	(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
Malcolm Kahn Former Key Employee	0 0					х	134,737	0	0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493125019504

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Stevens Institute of Technology

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

									22-1487		
Pai				blic Charity Sta						ınstructıoı	ns.
The o	rganı:			te foundation becaus			= -				
1	<u>_</u>		· ·	on of churches, or a				section 170	(b)(1)(A)(i)		
2	고	A scho	ol described	in section 170(b)(1	.)(A)(ii). (A	ttach Sche	dule E)				
3		A hosp	ital or a coo	perative hospital se	rvice organi:	zatıon desc	rıbed ın sect	ion 170(b)(1)(A)(iii).		
4	Γ			h organization operat	ted ın conjur	nction with	a hospital de	scribed in s	ection 170(b)(1)(A)(iii)	. Enter the
_	_			ty, and state	+ - 6 11						
5	ı	_	•	erated for the benefi	_	e or univers	ity owned or	operated by	y a governme	intal unit de	scribed in
_	_			(A)(iv). (Complete P	•			470(1)	(4)(4)(
6	<u> </u>			local government or							
7	_	describ	oed in sect ic	at normally receives on 170(b)(1)(A)(vi).	(Complete I	Part II)			nental unit or	from the ge	eneral public
8	Г		-	described in section			-	-			
9	Γ	An org	anızatıon th	at normally receives	(1) more th	nan 331/3%	of its suppor	t from conti	ibutions, me	mbershıp fe	es, and gross
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of									
		ıts sup	port from gr	oss investment inco	me and unre	lated busin	ess taxable	ıncome (les	s section 51	1 tax) from	businesses
		acquire	ed by the org	ganızatıon after June	30,1975	See section	509(a)(2).(Complete P	art III)		
10 An organization organized and operated exclusively to test for public safety. See section							on 509(a)(4)				
11	Γ			ganized and operated							
				ly supported organız bes the type of supp						See section	1 509(a)(3). Check
				b Type II c						Non-functio	nally integrated
e	Г		* *	ox, I certify that the			-				· -
				on managers and ot							
_			1 509(a)(2)								
f			rganızatıon thıs box	received a written de	etermination	from the I	RS that it is a	a Type I, Ty	pe II, or Typ	e III suppo	rting organization,
g				2006, has the organi	zation accei	pted any di	ft or contribu	tion from an	v of the		1
9			ng persons?			p, g			.,		
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	ner alone or	together wit	h persons d	escribed in (ш) 	Yes No
		and (111) below, the	governing body of th	e supported	organizatio	on?			1	1g(i)
		(ii) A f	amıly memb	er of a person descr	bed ın (ı) ab	ove?				1:	lg(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11	.g(iii)
h		Provide	e the followi	ng information about	the support	ed organıza	ition(s)				
) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	ou notify	(vi) I	c tha	(vii) A mount of
_	uppor		(11)	organization	organizat		the organ	•	organiza		monetary
	ganiza			(described on	coľ (i) lıs		ın col (i)		col (i) or		support
	-			lines 1 - 9 above	your gove		supp	ort?	ın the	US?	
				or IRC section	docume	ent?					
				(see instructions))		1			_		_
					Yes	No	Yes	No	Yes	No	
Total			1					1			1

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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

Schedule A (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493125019504

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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

	me of the organization vens Institute of Technology	·		Employer iden	tification number
				22-1487354	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	itical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 495!	5 ▶	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
		ganization is exempt unde			1(c)(3).
1		ended by the filing organization for		•	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organization	s for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b ►	\$
4	Did the filing organization file I	Form 1120-POL for this year?			┌ Yes ┌ No
5	organization made payments l amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid from	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		i	1		

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

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 1b					
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

circulate e (i	31111 330 01 330 22/2012		F
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT	

<i></i>	r each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		a)	(b)		
activ		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
C	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		No			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			27	4,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	O ther activities?		No			
j	Total Add lines 1c through 1i				27	4,000
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), o	rse	ectio	n
		•			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		

			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."

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).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, 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
Lobbying		The Stevens Institute of Technology does not directly engage in any lobbying activities, the Institute hired various outside consultants to undertake lobbying activities on its behalf

1

DLN: 93493125019504

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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

Open to Public

lema	Revenue Service F Attach to For	m 990. F See separate instructions.			Tushecu	UII
Na Ste	me of the organization vens Institute of Technology			loyer identificati	on number	
г.	Our and and the second state of the second s	Seed Founda - OUL O' U -		1487354	C !	
- 6	organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unas	or Accounts.	Complete	e ir tne
	organization answered Tes to Form 550	(a) Donor advised funds		(b) Funds and ot	her accour	nts
L	Total number at end of year					
<u> </u>	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
ļ	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	5	nor advi	sed	┌ Yes	┌ No
,	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef	onor advisors in writing that grant funds			┌ Yes	⊏ Na
	conferring impermissible private benefit?	11		- 000 D TV		No
	rt II Conservation Easements. Complete if		to Forn	n 990, Part IV,	line 7.	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation	<u> </u>	n histori	ıcally ımportant l	and area	
	Protection of natural habitat	Preservation of a	certifie	d historic structu	re	
	Preservation of open space					
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in	the forn	n of a conservatio	on	
				Held at the E	nd of the \	Year
a	Total number of conservation easements		2a			
Ь	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified histo	oric structure included in (a)	2c			
t	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d			
	Number of conservation easements modified, transferr	ed. released. extinguished. or terminat	ed by th	ne organization di	ırına	
	the tax year ►	, · · · · · · · · · · · · · · · · · ·	,		J	
	Number of states where property subject to conservat	on easement is located ►				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	ndling of	violations, and	┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments c	luring the year		
	Amount of expenses incurred in monitoring, inspecting					
	★ \$	i, and enforcing conservation easement	is auring	g the year		
	Does each conservation easement reported on line 2(or and section $170(h)(4)(B)(H)^{2}$	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
1	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the					
	the organization's accounting for conservation easeme					
ar	Complete if the organization answered "Y		or Otl	her Similar A	ssets.	
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in furtheran		с
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education,				С
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$	32	4,405
	If the organization received or held works of art, histor following amounts required to be reported under SFAS					
a	Revenues included in Form 990, Part VIII, line 1	· -		► \$		
	Revenues included in Form 550, Fait VIII, lille I			F P		

b Assets included in Form 990, Part X

Par	t III Organizations Maintaining Co	ollections of Art	t, His	tori	<u>cal Trea</u>	sures, or O	the	<u>r Similar</u>	<u>Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other reco	ds, ch	neck	any of the	following that a	are a	significant i	use of	ıts	
а	▼ Public exhibition		d	Γ	Loan or e	exchange progr	rams				
b	✓ Scholarly research		е	Γ	Other						
c	▼ Preservation for future generations										
4	Provide a description of the organization's of Part XIII	ollections and expla	ain hov	w the	y further th	ne organization	ı's ex	cempt purpos	se in		
5	During the year, did the organization solicit							nılar	_		_
	assets to be sold to raise funds rather than							'aall ta Farra		Yes	✓ No
Pa	Part IV, line 9, or reported an a						a "Y	es" to Forn	n 990	,	
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?						ets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	wing t	:able	_					
									Amou	nt	
С	Beginning balance						1 c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?						Γ	Yes	√ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	anatı	on has bee	n provided in F	art :	XIII			Γ
Pa	rt V Endowment Funds. Complete				ed "Yes" t	to Form 990,	Par	t IV, line 1			
		(a)Current year	(b)	Prior y		Two years back		•	_		ears back
1a	Beginning of year balance	141,416,999			100,616	134,214,252	-	129,122,2	_	15	5,485,695
b	Contributions	5,544,879		2,	197,390	335,365	1	742,4	25		788,435
C	Net investment earnings, gains, and losses	14,042,029		1,	391,552	14,682,338	3	8,926,0	18	-2	4,764,095
d	Grants or scholarships	5,255,190		6,	272,559	5,131,339		4,576,4	47		2,387,779
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance	155,748,717		141,	416,999	144,100,616	5	134,214,2	52	12	9,122,256
2	Provide the estimated percentage of the cu	rrent year end balan	ce (lır	ne 1g	, column (a	a)) held as					
а	Board designated or quasi-endowment ►	5 000 %									
b	Permanent endowment ► 95 000 %										
c	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that	are held an	ıd admınıstere	d for	the			
	organization by							Г	2- (:)	Yes	No
	(i) unrelated organizations						•		3a(i) 3a(ii)	Yes	No
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization				· · · · · · · · · · · · · · · · · · ·		٠.	· · · <u>L</u>	3b		110
4	Describe in Part XIII the intended uses of t	•									
Par	rt VI Land, Buildings, and Equipm										
	Description of property				Cost or othe s (investmen			(c) Accumula depreciatio		(d) Boo	ok value
1a	Land					1,763	3,196				1,763,196
b	Buildings					212,711		96,198	,817		6,512,532
c	Leasehold improvements					·					
	Equipment					26,349	,532	21,525	,742		4,823,790
е	Other					4,163					4,163,272
	II. Add lines 1a through 1e (Column (d) must			ımn (B), line 10(•				7,262,790
		•		•				Schedul	e D (F		90) 2012

Part VIII Investments—Other Securities. S	<u>See Form 990, Part X, line 12.</u>	
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) ALTERNATIVE INVESTMENTS	30,416,611	F
(8) TRUCTO HELD BY GIVED	2 2 4 7 4 2 4	_
(B) TRUSTS HELD BY OTHERS	3,347,431	F
(C) SPLIT INTEREST AGREEMENTS	3,340,482	F
(D) OTHER	204,707	F
(E) PRIVATE EQUITY	27,655,117	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 64,964,348	
Part VIII Investments—Program Related.		3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	j-	
Part IX Other Assets. See Form 990, Part X		
	scription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) lin	e 15.)	
Part X Other Liabilities. See Form 990, Pa		
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
ACCRUED POST-RETIREMENT BENEFIT	6,306,533	
ANNUITIES PAYABLE	1,982,301	
CONDITIONAL ASSET RETIREMENT	6,082,829	
REFUNDABLE ADVANCES	5,128,208	
Tabel (Column (h)t15 200 Device (1/0) / Device (1/0)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	19,499,871	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	214,658,274
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	3,980,046
3	Subtract line 2e from line 1	3	210,678,228
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,603,578		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	48,596,872
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	259,275,100
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	181,451,823
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	852,146
3	Subtract line 2e from line 1	3	180,599,677
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,603,578		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	49,449,018
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	230,048,695
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
Collections of Art, Historical Treasures or Other Similar Assets	Form 990, Schedule D, Part III	Various Pieces of art that have been donated are on public display for the enrichment and enjoyment of visitors, faculty, staff and students
Endowment Funds	Form 990, Schedule D, Part V, Line 4	The Institute's endowment fund is intended to support scholarships for undergraduate and graduate students and to provide financial assistance for programs and services conducted by the Institute
Income Taxes	Form 990, Schedule D, Part X	The Institute adopted ASC 740-10 as of July 1, 2007 ASC 740-10 clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to Financial Statement recognition and measurement This section provides that the tax effects from an uncertain tax position can be recognized in the Financial Statements only if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. The Institute has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and to review other matters that may be considered tax positions. Management of the Institute believes there are no uncertain tax positions. Therefore, the adoption of ASC 740-10 did not have any Impact on the Institute's Financial Statements.
Other Revenue Included on Return But Not On Books	Form 990, Schedule D, Part XI, Line 4b	SCHOLARSHIPS NET ON FINANCIAL STATEMENTS RECLASSED TO EXPENSES (PART IX, LINE 2) \$47,845,440 BOOK STORE COSTS OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS (\$852,146) TOTAL \$46,993,294 ==========
Other Revenue Included On Books But Not Return	Form 990, Schedule D, Part XI, Line 2d	Post-Retirement Benefit Changes Other Than Net Periodic Costs \$(513,880) Change In Value Of Split-Interest Agreements 150,736 Provision For Uncollectible Contributions Receivable 218,336 Total \$(144,808) =======
Other Expenses Included on Books but Not on Return	Form 990, Schedule D, Part XII, Line 2d	BOOK STORE COSTS OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS (\$852,146)
Other Expenses Included on Return but Not on Books	Form 990, Schedule D, Part XII, Line 4b	SCHOLARSHIPS NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS RECLASSED TO EXPENSES (PAR' IX LINE 2) \$47,845,440 =========

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DLN: 93493125019504

OMB No 1545-0047

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.

Employer identification number Name of the organization Stevens Institute of Technology 22-1487354 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes 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 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo 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

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

ldentifier	Return Reference	Explanation
Nondiscrimination Policy	Part I, Line 3	The Stevens Institute of Technology nondiscrimination policy is distributed annually as well as printed in student materials and on its website
Governmental Funding	Part I, Line 6a	Stevens Institute of Technology receives funding from various governmental sources including, but not limited to, Pell, Academic Competitiveness Grant, National Smart, Perkins and FSEOG

Schedule E (Form 990 or 990-EZ) 2012

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

As Filed Data -

DLN: 93493125019504

Schedule F (Form 990) 2012

Employer identification number

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

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

Steve	ens Institute of Technology				22-1487354	
Pa	General Informatio "Yes" to Form 990, Pa			he United States. C	omplete if the organiz	zation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or assis	stance, and the select	ion criteria used to awa	ard
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitor	ing the use of grant fu	ınds outsıde
3	Activites per Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional sp	ace 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	1	2	Program Services	Graduate Education	57,23
	Central America and the Caribbean			Investments		40,664,428
	East Asia and the Pacific			Program Services	Continuing Education	231,72
	East Asia and the Pacific			Program Services	A cademic Recruitment	28,553
	Sub-total	1	2			40,981,937
b	Total from continuation sheets to Part I					
c	Totals (add lines 3a and 3b)	1	2	1		40,981,937

Cat No 50082W

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
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	 	+			+		+
			<u> </u>		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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)	<u> </u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Yes	▽	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	굣	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	Νo
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	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	✓	No

Schedule F (Form 990) 2012

	Part V	Sup	plemental	Informatio
--	--------	-----	-----------	------------

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).

as applicable. Als	o complete this part to provide any ac	dutional information (see instructions).
Identifier	ReturnReference	Explanation
Schedule F, Part IV	Form 990, Schedule F, Part IV, Lines 1,4 & 5	Stevens Institute of Technology invests in domestic and foreign limited partnerships that may own an interest in a foreign corporation, passive foreign investment company or foreign partnership. To the extent that those investments resulted in transfers of property that exceeded the applicable filing thresholds, the Forms 926, 5471, 8621 and 8865 accompanied the filing of the University's Form 990-T
		Schedule F (Form 990) 2012

DLN: 93493125019504

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Name of the organization Stevens Institute of Technology

Employer identification number

						22-1487354	
Part I	Fundraising Act	civities. Complete	e if the oi	ganızatı	ion answered "Yes" t	o Form 990, Part IV	', line 17.
a	Mail solicitations Internet and email soli Phone solicitations In-person solicitations the organization have a ey employees listed in es," list the ten highes	citations s a written or oral agre Form 990, Part VII t paid individuals or	ement witl) or entity entities (f	e f g n any Indi in connec	following activities Che Solicitation of non Solicitation of gov Special fundraisin vidual (including officer ction with professional f	-government grants ernment grants g events rs, directors, trustees undraising services?	Г Yes Г N o
(i) Na	me and address of individual native (fundraiser)	(ii) Activity	(iii) fundrais custe cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
Total .							
3 List licer		organization is regis	tered or li	censed to	l o solicit funds or has be	l en notified it is exempt	I from registration or

Sche	edule	G (Form 990 or 990-EZ) 2012				Page 2				
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut							
		эт эт ал ал ад	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through				
			Golf Tournament (event type)	Awards Gala (event type)	(total number)	col (c))				
Φ	1	Gross receipts	100,223	150,385	13,345	263,953				
Revenue	2	Less Contributions	66,328	87,910	7,480	161,718				
<u>~</u>	3	Gross income (line 1 minus line 2)	33,89!							
	4	Cash prizes								
မှာ	5	Noncash prizes								
Expenses	6	Rent/facility costs	28,478	1,305	6,947	36,730				
	7	Food and beverages .		95,282		95,282				
Direct	8	Entertainment		2,250)	2,250				
ā	9	Other direct expenses .	1,626	90,078	3	91,704				
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n (d)		(225,966)				
	11	Net income summary Combine I	ine 3, column (d), and line	e 10	•	-123,731				
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo					
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
Rev	1	Gross revenue				(-),				
	2	Cash prizes								
benses	3	Non-cash prizes								
盃	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	Г Yes Г No	Г Yes Г Nо	Г Yes					
	7	7 Direct expense summary Add lines 2 through 5 in column (d)								
	8	Net gaming income summary Com	nbine lines 1 and 7 in coli	umn (d)						
9 a b	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? Yes No If "No," explain									
10a b	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?									

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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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.

OMB No 1545-0047

DLN: 93493125019504

Open to Public Inspection

Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Department of the Treasury ► Attach to Form 990

Employer identification number

	ens Institute of Technology	n on Cuanta and					22-1487354	
1 2	Tt I General Information Does the organization maintain the selection criteria used to available in Part IV the organization	records to substanti ward the grants or as:	ate the amount of the					Γ Yes Γ I
Pai	Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	
		_						
2	Enter total number of section 50	 01(c)(3) and governr	nent organizations list	ed in the line 1 table .			<u> </u>	

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, F	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) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1)					
(2) Scholarships and Grants	2251	47,845,440			
		<u> </u>			

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	xplanation						
	Line 2	Scholarships and grants are awarded as financial assistance to students attending the Stevens Institute of Technology The distribution and application of the financial assistance are based on the specific criteria of each scholarship and grant and are administered consistent with federal, state, and institutional student aid policies. Administration of financial assistance is monitored on an on-going basis through a review of bi-weekly system-generated reports.						

Schedule I (Form 990) 2012

DLN: 93493125019504

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization Stevens Institute of Technology **Employer identification number**

22-1487354

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov					
	990, Part VII, Section A, line 1a Complete Part III t First-class or charter travel	.o prov	Housing allowance or residence for personal use			
	Travel for companions	F	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	, V	Health or social club dues or initiation fees			
	Discretionary spending account	Ė	Personal services (e g , maid, chauffeur, chef)			
		,	(3, , , , , ,			
b	If any of the boxes in line 1a are checked, did the org	anızatı	on follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses des	cribed	above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to re					
	directors, trustees, and the CEO/Executive Director,	regard	ling the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organi					
	organization's CEO/Executive Director Check all that used by a related organization to establish compensa					
	_		Written employment contract			
	Compensation committee Independent compensation consultant	 -	• •			
	Form 990 of other organizations	□	Approval by the board or compensation committee			
	,	•	The state of the s			
4	During the year, did any person listed in Form 990, P.	art VII	, Section A, line 1a with respect to the filing organization			
	or a related organization					
а	Receive a severance payment or change-of-control p	aymen	t?	4a	Yes	
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro-	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, I					
	compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I	ıne 1a	, did the organization pay or accrue any			
	compensation contingent on the net earnings of					
a	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7	Yes	
8	Were any amounts reported in Form 990, Part VII, pa					
	subject to the initial contract exception described in in Part III	Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
				8		No
9	If "Yes" to line 8, did the organization also follow the section $534958-6(c)$?	rebutta	able presumption procedure described in Regulations	9		

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)(1)-(111) 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	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

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
Compensation Information	Form 990, Schedule J, Part I	LINE 1 - The Stevens Institute of Technology guidelines regarding first class/business class travel and spousal travel are included in the Stevens Business and Travel Expense Policy Expenses incurred for accompanying companions/spouses are considered personal in nature except on occassions when attendance of a companion/spouse at an event serves a bona fide business purpose for the University and the presence of the companion/spouse is essential (not just beneficial) to the employee being able to carry out the business purpose for the University Given that attendance is essential, this is not taxable to the employee Campus housing is provided for the University President and is used for program and development purposes. There is one instance in which a club membership is in the name of an individual due to club imposed membership rules. This membership is solely for business purposes to foster relationships within the New York metropolitan area for the University
Incentive Compensation	Schedule J, PartI, Line 7	INCENTIVE COMPENSATION The Stevens Incentive Compensation Plan provides a mechanism to reward faculty, administrative leaders, and certain key staff for extraordinary performance over a period of one academic year. In contrast to merit-based salary increases, annual incentives do not increase base salary. Incentive compensation may be awarded upon a finding by management that an employee's work has been extraordinary and has clearly contributed toward the goals and mission of Stevens. Incentive compensation, even in cases of extraordinary performance, is not guaranteed, and decisions regarding incentive compensation will be subject to the Board of Trustees and others' determinations as to the financial results of the University and other factors not specified in the plan. Incentive compensation for faculty, staff and administration are recommended by managerial staff, are approved by the President and are within parameters established by the Board of Trustees. Incentive compensation for executive leaders is recommended by the Human Resources and Compensation Committee of the Board of Trustees and approved by the full Board of Trustees as part of its consideration of this group (and as further described in Schedule O.). Each year, the Board of Trustees will approve a set of annual incentive performances metrics (performance measures) for the executive leaders and will review with the President the process for determining the metrics for each other group or sub-group of employees. The metrics must be defined by the institutional performance metrics and the institutional core and strategic objectives.
Compensation of Former President	Schedule J, Part II	Dr Ravech served 22 years as Stevens' President, ending on June 30, 2010 All of the elements of his compensation reported in the 2012 IRS Form 990 relate to long-standing contractual obligations. His calendar year 2012 contracted compensation consisted solely of consulting payments. The compensation paid in 2012 is the final amount due to Dr. Raveche under these contractual obligations.

Software ID: Software Version:

EIN: 22-1487354

Name: Stevens Institute of Technology

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Narıman Farvardın	(I) (II)	634,601 0	82,000 0	9,863 0	22,500	3,826 0	752,790 0	0
Randy L Greene	(ı) (ıı)		2,000	0	25,000 0	3,826 0	500,846 0	0
Mary Wheeler	(1) (11)		3,000	0	17,799 0	8,877 0	221,795 0	0
Elizabeth Shelton	(ı) (ıı)		0	0	16,394 0	0	197,054	0
Kathy L Schulz	(ı) (ıı)		2,000	0	21,250 0	3,864 0	325,959 0	0
Matthew R Libera	(ı) (ıı)		0	0	13,391	11,473 0	251,234 0	0
Gregory Prastacos	(1) (11)		2,000	37,360 0	20,833	10,517 0	364,156 0	0
Henry P Dobbelaar Jr	(1) (11)		0	1,708	22,505	0	300,018	0
George P Korfiatis	(ı) (ıı)		3,000 0	18,938 0	22,500	14,113 0	564,283 0	0
Maureen P Weatherall	(ı) (ıı)	377,777 0	0	14,813	22,500	8,837 0	423,927 0	0
Michael S Bruno	(1) (11)	368,690 0	2,000	0	22,500	8,837 0	402,027	0
Lisa Dolling	(1) (11)		2,000	0	15,300 0	0	196,100 0	0
Charles T Koeller	(1) (11)		0	0	15,587 0	0	169,261 0	0
Dinesh Verma	(ı) (ıı)		2,000	0	20,000	11,525 0	I and the second	0
Mark L Samolewicz	(ı) (ıı)		0	0	14,720 0	8,877 0	180,651	0
Malcolm Kahn	(ı) (ıı)	106,250 0	0	28,487 0	0	0	134,737 0	0
Constantin Chassapis	(ı) (ıı)		4,000 0	0	22,500	11,525 0	340,414 0	0
Ralph G Giffin III	(ı) (ıı)		0	0			308,242	
Souran Manoochehri	(ı) (ıı)		0	0	16,737 0	11,473 0	297,915 0	0
Donald M Merino	(1) (11)	287,963 0	0	0	13,806	0	,	0

Form 990, Schedule J, Pa	rt I	I - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees			
(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
Hamald 2 Davisaha		(i) Base Compensation (ii) Bonus & Incentive compensation		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
Harold J Raveche 6302010	(I) (II)	0	0	302,911	0	0	302,911	0	
Christos Christodoulatos	(I) (II)	283,379 0	0	0	22,201 0	0	305,580	0	
Anthony Barrese	(I) (II)	185,156			17,231	9,935	212,322		

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

DLN: 93493125019504

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Stevens Institute of Technology

Employer identification number

22-1487354

D	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	orice	(f	f) Description	n of purpose	(g) De	feased	(h) beha ıss	alfof		Pool ncing
										Yes	No	Yes	No	Yes	No
A	NJ EDU FAC AUTH STEVENS ISSUE 2007	22-1829511	646065LP5	08-02-2007	71,63	3,268	Refunding of Prior Issues			х		х		Х	
В	NJ EDU FAC AUTH CAPITAL IMP 2005 A	22-1829511	60605LWWX	08-10-2005	79	2,706	Refunding of Prior Issues				Х		х		Х
c	NJ EDU FAC AUTH CAPITAL IMP 2006 A	22-1829511	64605LZ43	10-26-2006	13	3,640	Refur	ındıng of Prıor	Issues		Х		х		Х
D	NJ EDU AUTH DORM SAFETY 2003 A	22-1829511	64605NBU7	01-15-2004	244,207 Finance Dorm Safety Improvements			Х		х		Х			
Pa	rt III Proceeds													·	
					A	1		В			С			D	
1	A mount of bonds retired			2,225,	,000		0			0		:	168,500		
2	A mount of bonds legally defeased						0		0			0			0
3	Total proceeds of issue				8	35,725,	,356		0			0			0
4	Gross proceeds in reserve fun					5,796,	,727		0			0			0
_5	Capitalized interest from proc					0 0		0		0	C		0		
6	Proceeds in refunding escrows				66,517,119 0		0			0					
7	Issuance costs from proceeds	5				1,535,969 0				0	0				
8	Credit enhancement from proc	eeds					0		0			0			0
9	Working capital expenditures	from proceeds					0		0			0			0
10	Capital expenditures from pro	ceeds					0		0			0			0
11	Other spent proceeds						0		0			0			0
12	Other unspent proceeds						0		0			0			0
13	Year of substantial completion				200	9		200	5	2 (006			2004	
					Yes	No		Yes	No	Yes	N	0	Yes		No
14	Were the bonds issued as part	t of a current refund	ing issue?			Х			Х		×				Х
15	Were the bonds issued as part	t of an advance refu	nding issue?		Х				Х		×	·			Х
16	Has the final allocation of proc	ceeds been made?			Х			Х		Х			Χ		
17	Does the organization maintai	n adequate books a	nd records to supp	ort the final	х			х		Х			Х		

Private Business Use

allocation of proceeds?

		A		<u> </u>		c)
		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?		Х		Х		Х		X

Part Private Business Use (Continued) В C D Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ Х of bond-financed property? 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? Are there any research agreements that may result in private business use of bond-Х Χ Х Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 00000% 0 00000% 0 00000% 0 00000% other than a section 501(c)(3) organization or a state or local government 5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0 00000% 0 00000% 0 00000% 0 00000% 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 00000% 0 00000% 0 00000% 0 00000% Does the bond issue meet the private security or payment test? 7 Х Χ Х Х Has there been a sale or disposition of any of the bond financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Х Χ Χ Х issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Х Х Х Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Х Х Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С D Α Yes No Yes No No Yes Yes No Has the issuer filed Form 8038-T? 1 Χ Χ Χ Х If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? b Х Х Χ Х No rebate due? Х c Х Χ Χ If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was a hedge terminated?

Pai	rt IV Arbitrage (Continued)								
		А	ı	В	ı	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		Х		Х		
b Name of provider		0		0		0		0	
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		×		X		х		х
7	Has the organization established written procedures to monitor the requirements of section 148?	х		Х		×		х	
Pa	rt V Procedures To Undertake Corrective Action								
		А	1	В	ı.	С		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

Schedule K (Form 990) 2012

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DLN: 93493125019504

OMB No 1545-0047

2012

Open to Public Inspection

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.

Name of the orga Stevens Institute of T								Em	ploye	r identif	fication	number	•
									-1487				
						nd section 5							
						Part IV, line 25							
1 (a) Name o	or aisquai	ified pers			between dı: d organizati		(c) Descri	ption of	trans	saction		(d) Corre	
				person an	a organizaci	011						res	No
			<u> </u>										
2 Enter the am	ount of ta	x incurre	d by organiza	ation mana	igers or dis	qualified perso	ns during the	year u	nders	section			
4958									•	- 5			
3 Enter the am	iount of ta	x, ir any,	on line 2, and	ove, reimb	ursea by th	e organization			•	F \$			
Part II Loai	ns to ar	d/or F	rom Inter	ested P	ersons.								
						-EZ, Part V, li	ne 38a, or Fo	rm 990), Par	t IV, lın	e 26, o	r ıf the	
			n amount on l			5,6,or22						1	
(a) Name of			(c) Purpose			(e)Original	(f)Balance	(g)		(h		(i)Wr	
ınterested person	with orga	anızatıon	of loan	or from organizat		principal amount	due	defa	uit	A ppro		agreen	nent?
person				organizat	.1011	amount				commi			
				То	From			Yes	No	Yes	No	Yes	No
												•	•
												_	
												_	
												_	
												_	
otal				▶ \$		•	•					7	
Part IIII Gran	ts or A	ssistan	ce Benefit	ting Int	erested I	Persons.						•	
Com	plete ıf tl	he orgai	nızatıon ans	wered "\	es" on Fo	rm 990, Part	IV, line 27.						
(a) Name of inte	erested		ationship bet		c) A mount o	of assistance	(d) Type o	fassis	tance	(e)	Purpos	e of ass	ıstance
person			ted person ar	nd the									
		,	organization										
							•						

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 (c) A mount of (d) Description of transaction (e) Sharing between interested transaction of person and the organızatıon's revenues? organization Yes No (1) Virginia P Ruesterholz Chairman of the Board 1,003,985 | See Schedule L, Part V Νo (2) Ronald Salluzzo Board Trustee 189,013 See Schedule L, Part V Νo

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
Schedule L, Part IV		Virginia Ruesterholz, was the President of Verizon Services Operation The Stevens Institute conducts business with Verizon Wireless, Verizon Select Services and various other Verizon companies (total fees of \$1,003,985) Board of Trustees member Ronald E Salluzzo, is a partner at Attain, LLC The University conducts business with Attain, LLC (total fees of \$189,013) When entering into transactions with organizations that have a relationship with a University Board Member or Officer, the Stevens Institute of Technology ensures that they are conducted at arm's length

Schedule L (Form 990 or 990-EZ) 2012

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DLN: 93493125019504

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

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.

Noncash Contributions

Name of the organization Stevens Institute of Technology **Employer identification number**

					22-1487354			
Par	tI 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 d noncash contrib	letermi		ts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
ç	Clothing and household goods							
6 (Cars and other vehicles							
	Boats and planes							
8 I	Intellectual property							
9 9	Securities—Publicly traded .	X	29	554,364	FMV			
	Securities—Closely held stock .	•						
	Securities—Partnership, LLC, or trust interests							
2 9	Securities—Miscellaneous							
C	Qualified conservation contribution—Historic structures							
4 (Qualified conservation contribution—Other							
5 F	Real estate—Residential .							
6 F	Real estate—Commercial							
7 F	Real estate—O ther							
8 (Collectibles							
9 F	Food inventory							
0 [Orugs and medical supplies .							
1 T	Taxıdermy							
2 ⊦	Historical artifacts							
3 9	Scientific specimens							
4 /	Archeological artifacts							
	Misc							
5 (Other► (<u>Equipment</u>)	X	4	14,416	FMV			
6 (Other ▶()							
7 (Other ►()							
8 (O ther ► ()							
	Number of Forms 8283 received				29			
Ť	or which the organization comple	eted Form 8	283, Part IV, Donee Ackno	owledgement [23		I I	
0-	During the year, did the organiza	ation receive	a by contribution any propa	erty raported in Dart I. lines	1 20 +ba+ +		Yes	No
	must hold for at least three year				a to be used			NI-
	for exempt purposes for the enti					30a	\vdash	No
	If "Yes," describe the arrangem Does the organization have a gr			review of any non-standard	contributions?	31	Yes	
							"	
	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	noncash • • •	32a	Yes	
b	If "Yes," describe in Part II							
3	If the organization did not repor	t an amount	: in column (c) for a type of	property for which column (a) is checked,			
	describe in 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
Non-Cash Contributions	, ,	LINE 9 - To the extent that the Institute receives contributions of securities, the Institute's investment brokerage bank is tasked with selling those securities LINE 32 - The Institute uses various galleries to facilitate the sale of art

Schedule M (Form 990) (2012)

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As Filed Data -

DLN: 93493125019504

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.

2012
Open to Public Inspection

Name of the organization			
Stevens institute of Technology	Name of the organization Stevens Institute of Technol		

Employer identification number

22-1487354

Identifier	Return Reference	Explanation
990 Review	Form 990, Part VI, Line 11b	This form 990 was prepared by members of the finance and legal offices of the Institution together with its outside tax and accounting firm specializing in higher education. The form 990 was then presented to the Audit Committee of the Board of Trustees for review and approval. Following this process and any modifications recommended by the Audit Committee, the form 990 was presented to a meeting of the full Board of Trustees of the Institution and approved in accordance with the By-Laws of the Institution.

ldentifier	Return Reference	Explanation
Conflict Of Interest	Form 990, Part VI, Line 12c	The Institution's conflict of interest policy requires ongoing compliance and self-reporting of conflicts. It also provides for completion of an annual questionnaire by all Trustees, officers and faculty, which questionnaire is reviewed by the Office of Audit, Risk and Compliance and the General Counsel and reported to the Audit Committee of the Board and to the Board of Trustees. Information disclosed in the questionnaires which indicates the possible presence of a conflict is investigated, discussed with relevant personnel and, if necessary, the conflict is eliminated or managed pursuant to a conflict management plan or device supervised by the Chair of the Board of Trustees or the Chair of the Audit Committee, with advice from the Office of Audit, Risk and Compliance and the General Counsel. In addition, conflicts are identified by the officers of the Institution and staff at other levels of the Institution as they arise from time to time and are referred to Office of Audit, Risk and Compliance and the General Counsel for further analysis and resolution. Certain conflicts relating solely to research activities may be managed by the Director of the Office of Sponsored Programs, with advice from the Office of Audit, Risk and Compliance and the General Counsel.

ldentifier	Return Reference	Explanation
Compensation	Form 990, Part VI, Line 15b	All compensation of persons occupying the following positions paid during calendar year 2012 was approved by the Human Resources and Compensation Committee of the Board of Trustees and the full Board of Trustees, in each case acting at meetings duly held, with the exception of one faculty member who serves as a representative on the Board of Trustees. President Provost and University Vice President Dean Chief Administrative Officer and VP for Enrollment Management Chief Financial Officer and Treasurer Vice President for Development Vice President for Facilities and Community Affairs Vice President, General Counsel and Secretary Professor of Economics (faculty trustee) Distinguished Service Professor and Associate Dean (faculty trustee) All such compensation was determined based upon recommendations from the President (except with respect to the President himself and except with respect to the Deans and faculty for whom compensation is recommended by the Provost), and comparative data on peer institutions collected and analyzed by an independent compensation consultant. The Secretary to the Board of Trustees took contemporaneous minutes of each meeting of the Board and the Human Resources and Compensation. Committee at which these compensation decisions were made, except with respect to her own compensation.

Identifier	Return Reference	Explanation
Disclosure	Form 990, Part VI, Line 19	The governing documents of the Institution together with charters for committees of the Board of Trustees, the conflict of interest policy and the financial statements of the Institution are all made available on the Institution's website (www stevens edu). In addition, a variety of other documents and materials regarding the Institution and its operations as well as the other policies of the Institution, are also available on the website.

ldentifier	Return Reference	Explanation
Tax Exempt Bonds	Form 990, Schedule K, Part I	PART V SUPPLEMENTAL INFORMATION PART 1 - BOND ISSUES 1 BOND ISSUE A - COLUMN (F) This issue advance refunded all of the outstanding principal amount of the Revenue Bonds, Stevens Institute of Technology issue, 2004 Series B issued on July 1, 2004 by the New Jersey Educational Facilities Authority ("NJEFA"), all of the Revenue Bonds, 2002 Series C issued by NJEFA on December 1, 2002 and a portion of the revenue bonds, Stevens Institute of Technology issue, 1998 Series I issued by NJEFA on August 25, 1998 The refunded bonds financed capital improvements for the Institute 2 BOND ISSUE B - COLUMNS (E) AND (F) These bonds were issued in the par amount of \$15,077,352 to refund a portion of the NJEFA Capital Improvement Fund (CIF) issues, Series 2000 A, Series 2000 B and Series 2002 A CIF bonds were issued pursuant to a legislative program to finance capital improvements for New Jersey colleges and universities Eleven colleges received grants from the 2000 A, 2000 B and 2002 A bonds Stevens received grants only from the 2000 A and 2000 B bonds. The refunded bonds and the series 2005 A refunding bonds (bond Issue B) are repayable in part by state appropriations. The issue price shown on Schedule K for the series 2005 A bonds is the approximate amount of the issue price allocable to the Institute 3 BOND ISSUE C - COLUMNS (E) AND (F). These bonds were issued in the par amount of \$155,460,000 to refund a portion of NJEFA's Capital Improvement Fund issues, Series 2000 A Series 2000 B, Series 2002 A and Series 2004 A The 2000 A, 2000 B, 2002 A and 2004 A bonds were issued on July 1, 2000, December 30, 2000, November 21, 2002 and March 14, 2004 respectively. At least eleven colleges received grants from these bonds. Stevens received grants only from 2000 A and 2000 B. The refunded bonds and the Series 2006 A refunding bonds (bond issue C) are repayable in part by state appropriations. The issue price shown on the Schedule K for the refunding 2006 A bonds is the approximate amount of the issue price shown on Schedule K for th

ldentifier	Return Reference	Explanation
Reconciliation of Net Assets	Form 990, Part XI, Line 8	POST-RETIREMENT BENEFIT CHANGES OTHER THAN PERIODIC COSTS \$(513,880) CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 150,737 ALLOWANCE FOR UNCOLLECTIBLE CONTRIBUTIONS 218,336 TOTAL \$(144,807) ====================================

Identifier	Return Reference	Explanation
Part VI - Governing Body and Management	Form 990, Part VI, Line 3	Stevens' Board of Trustees delegated to a prominent investment bank the management of Stevens' endow ment pursuant to contracts which address the scope of the delegation of authority, monitoring by Stevens' management and the Board, and reporting, among other matters

SCHEDULE R Related Organ

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization Stevens Institute of Technology

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

Employer identification number

22-1487354

2012

Open to Public Inspection

Part I Identification of Disregarded Entities (Complete	ıf the organization	answered "Yes" to	o Form 990, Pa	irt 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) t controlling entity		
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	tions (Complete ıf tax year.)	the organization a	nswered "Yes"	to Form 990, P	art IV, lın	e 34 because it	: had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) co ent	ontrolle tity?
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	<u> </u> 35Y			Schedule R (Form	 n 990) 2	012

Part III Identification of Related On because it had one or more re	r <mark>ganizations Taxable</mark> lated organizations tre	e as a Partno ated as a part	ership tnershւր	(Complete during th	e if the o	organı ear.)	zation a	nswered "Y	es" to	Form	າ 990, Part	IV, l	ine 3	34		
(a) Name, address, and EIN orelated organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	rolling roome(re		(f) Share o total inco			prtionate	(i) Code V—UBJ amount in bo 20 of Schedule K-1 (Form 1065)	managing partner?		(k Percen owner	ntage	
					J 31	. ¬ ,			Yes	No		Yes	No			
												_				
												\vdash				
												\vdash				
Part IV Identification of Related O									swere	l ed "Ye	s" to Form	990,	Par	t IV,		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or for country	reign	Direct	(d) controlling entity	Type of (C corp	e) of entity , S corp, rust)	(f) Share of total Income			(h) Percentage ownership		centage Sec nership ((i) Section 5 (b)(13 controlle entity	512 3) led
(1) Ravenswood Corporation	Real Estate			Steven	s Instit	C Corp		1,504,142	1		100 00	00 %	ŀ	Yes Yes	No	
One Castle Point on Hudson Hoboken, NJ 07030 22-1854071		NJ				<u>'</u>		, ,	2 100 000							
(2) Castle Point Holdings Inc One Castle Point on hudson Hoboken, NJ 07030 20-4264786	Tech Transfer	Ŋ		Steven	s Instit	C Corp		-9,943		613,8	32 100 00	00 %		Yes		
									-							
									-							

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

Yes No

1 During the tax yea	ar, did the orgranization engage in any of the following transactions with one or m	ore related organizations l	ısted ın Parts II-IV?				,		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity									
b Gift, grant, or c	apital contribution to related organization(s)				1b		No		
c Gıft, grant, or c	apıtal contribution from related organization(s)				1 c		No		
d Loans or loan guarantees to or for related organization(s)									
e Loans or loan g	guarantees by related organization(s)				1e		No		
f Dividends from	related organization(s)				1f		No		
g Sale of assets	to related organization(s)				1g		No		
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 facilit	ies, equipment, or other assets from related organization(s)				1k 1l	Yes	No		
I Performance of	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)									
• Sharing of paid	o Sharing of paid employees with related organization(s)								
p Reimbursemen	t paid to related organization(s) for expenses				1 p		No		
q Reimbursemen	t paid by related organization(s) for expenses				1q		No		
r Othertransfer	of cash or property to related organization(s)				1r		No		
s Other transfer	of cash or property from related organization(s)				1s	Yes			
2 If the answer to	any of the above is "Yes," see the instructions for information on who must com	nplete this line, including c	overed relationships	and transaction thresholds					
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved			
1) Ravenswood Corpora	tion	s,I	1,587,600	FMV					
2) Castle Point Holdings	Inc	d,I	290,971	FMV					

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				•	,		Ī	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	,	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 22-1487354

Name: Stevens Institute of Technology

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
	Schedule R, Part IV, Line 1 (g)	Ravenswood Corporation was dissolved and liquidated as of December 31, 2012 and therefore, did not have any assets as of June 30, 2013

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