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DLN: 93493113004025

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013	calendar year, or tax year beginning	y 07-01-2013 , 2013, and ending	g 06-30-:	2014						
B Ch	eck if a	applicab	le C Name of organization Stevens Institute of Technology				D Emplo	yer io	lentification number			
☐ Add	dress c	change					22-14	4873	54			
∏ Na	me ch	ange	Doing Business As									
Init	ial ret	urn		all is not delivered to street address) Ro	oom/suite		E Teleph	one nu	ımber			
Tei	mınat	ed	1 Castle Point On Hudson Suite				(201)) 216	-8761			
☐ Am	ended	l return	City or town, state or province, cour Hoboken, NJ 07030	ntry, and ZIP or foreign postal code			(201)	, 210	-0701			
	olicatio	on pendi	ng				G Gross	receipt	s \$ 411,499,423			
			F Name and address of prin	cıpal officer		H(a) Is th	nis a group	retu	rn for			
			Narıman Farvardın 1 Castle Poınt On Hudson				ordinates?		┌ Yes 🗸 No			
			Hoboken, NJ 07030			H(b) Are	all subord	ınato	s			
						• • • • • •	ıded?	mace.	3 163 110			
I Ta	x-exei	mpt sta	tus 🔽 501(c)(3) 🗍 501(c)() 🖪 (nsert no) 4947(a)(1) or 527		If"N	lo," attach	n a lıs	t (see instructions)			
J W	ebsit	e: 🕨	www.stevens.edu			H(c) Gro	up exempt	tıon n	umber ►			
K For	n of o	rganızat	ion 🔽 Corporation 🗆 Trust 🗀 Associatio	n		L Year of f	ormation 18	370	M State of legal domicile NJ			
Pa	rt I	Sı	ımmary			•						
ance	1	The o	y describe the organization's missio rganization's primary exempt purpo graduate, masters and doctorate de	se is to provide educational is to	provide	education	al service	s to ı	ndıvıduals ın pursuıt of			
Governance	2	Chec	< this box ► if the organization dis	scontinued its operations or dispo	osed of r	nore than	25% of its	net	assets			
	3	Numb	er of voting members of the govern	ng body (Part VI, line 1a)				з	25			
Activities &	1		er of independent voting members of					4	20			
5	5	Total	number of individuals employed in o	calendar year 2013 (Part V, line	2a) .			5	3,119			
¥	6	Total	number of volunteers (estimate if n	ecessary)				6	218			
	7a	Total	unrelated business revenue from P	art VIII, column (C), line 12 .				7a	122,632			
	Ь	Netu	nrelated business taxable income fi	om Form 990-T, line 34				7b	-17,911			
						Pri	or Year		Current Year			
a.	8	10 O	ntributions and grants (Part VIII, lii	ne 1 h)			25,009,	202	17,560,864			
Ravenue	9	Pro	gram service revenue (Part VIII, li	ne 2g)			217,683,	956	233,795,857			
e Per	10		estment income (Part VIII, column				10,727,	755				
т.	11		er revenue (Part VIII, column (A),				5,854,	187	4,311,807			
	12		al revenue—add lines 8 through 11		"		259,275,	100	266,740,979			
	13		nts and similar amounts paid (Part				47,845,	-	52,663,308			
	14		nefits paid to or for members (Part I					0	0			
ø	15		aries, other compensation, employe				106,671,	627	111,165,761			
Expenses	16a		fessional fundraising fees (Part IX,	column (A.) line 11e)			0					
⊕ ⊕	ь		If fundraising expenses (Part IX, column (D)					0				
Э	17		n rundraising expenses (Part IX, column (D, ier expenses (Part IX, column (A), l				75,531,	628	76,480,255			
	18		al expenses Add lines 13-17 (mus	· · · · · · · · · · · · · · · · · · ·			230,048,		240,309,324			
	19		enue less expenses Subtract line				29,226,		26,431,655			
Net Assets or Fund Balances			·			_	ng of Curre Year		End of Year			
SSed Safa	20	Tot	al assets (Part X, line 16)				334,218,	462	360,519,023			
MA Pd E	21		al liabilities (Part X, line 26)				123,676,	$\overline{}$	118,176,921			
žZ_	22	Net	assets or fund balances Subtract	line 21 from line 20			210,542,	345	242,342,102			
Unde my k	nowle arer h	alties edge an nas any	gnature Block of perjury, I declare that I have example the performance of perjury, I declare that I have example the perjury of the perjury			officer) is						
			ype or print name and title									
			Print/Type preparer's name	Preparer's signature	Date		eck l	PTIN				
Paid Pre		er	Firm's name FGRANT THORNTON LLP	1			lf-employed m's EIN 🕨					
Use	•		Firm's address ► 757 THIRD AVE 4TH FL	OOR		Ph	one no	ne no				

NEW YORK, NY 100172013

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

┌Yes ┌No

orm	990 (2013)				Page
Par	Statement of Program S Check if Schedule O contains			II	
1	Briefly describe the organization's m	ssion			
OFFE SCIE MAS THE BRO WHII TECI	VENS INSTITUTE OF TECHNOLOGY ERING MORE THAN 30 UNDERGRAD ENCE, BUSINESS, AND THE HUMANITERS AND PHD DEGREES ACADEM! INSTITUTE IS ACCOMPLISHED BY AD-BASED, MULTIDISCIPLINARY LESTRESSING THE FUNDAMENTAL HNOLOGY, PROMOTING THE PERSCIPCIONSIBILITY, AWARENESS OF THE LS, AND A LOVE OF LEARNING, CRI	UATE MAJORS INC TIES, AND GRADUA C RESEARCH IS CA THE ACHIEVEMENT EARNING EXPERIEN CONCEPTS, TECHN NAL DEVELOPMEN SOCIETAL IMPACT	LUDING PROGRAMS: ATE LEVEL COURSES ARRIED OUT AT EVEF OF THE FOLLOWING NCE IN THE SCIENCE NIQUES AND ATTITU IT OF THE STUDENT, OF THEIR PROFESSI	IN ENGINEERING, THE SO IN A RANGE OF DISCIP RY LEVEL OF THE INSTIT GCORE GOALS PROVID: S, ENGINEERING, BUSIN DES THAT UNDERLIE DIF DEMONSTRATED BY A S	CIENCES, COMPUTER LINES LEADING TO THE UTE THE MISSION OF ING STUDENTS WITH A ESS AND LIBERAL ARTS FERENT BRANCHES OF ENSE OF ETHICAL
2	Did the organization undertake any s the prior Form 990 or 990-EZ? .		rvices during the year	which were not listed on	
	If "Yes," describe these new services	on Schedule O			
3	Did the organization cease conductin services?	g, or make sıgnıfıcan • • • • • •	t changes in how it cor	nducts, any program	
	If "Yes," describe these changes on	Schedule O			
4	Describe the organization's program expenses Section 501(c)(3) and 50 the total expenses, and revenue, if ar	l (c)(4) organizations	are required to report		
4a	(Code) (Expenses \$	169,329,655	including grants of \$	52,663,308) (Revenue \$	180,383,245)
	Educational Instruction In the academic year graduated with bachelor of engineering, scie degrees were also conferred In addition, St courses and training to international student integration of technological and market known	nce or arts degrees, 1346 evens collaborated with n s Stevens emphasizes in	5 students received master's numerous domestic and inte	s in engineering, science, busines mational universities and other e	s administration or arts 44 PHD ducational programs to provide
4b	(Code) (Expenses \$	21,939,968	ıncludıng grants of \$) (Revenue \$	25,247,132)
	Student Life Stevens Institute maintains a several dining facilities Close interactions be organizations and varsity sports that offer the Institute's intellectual, cultural and social cerand scientific discovery	etween professors and stu e students ample opportu	idents allow for greater aca unity to participate, broader	demic and social development T and enrich their student life Th	here are over 120 clubs, e S C Williams library serves as
4c	(Code) (Expenses \$	22,835,162	ıncludıng grants of \$) (Revenue \$	28,166,974)
	Research The research enterprise includes a infrastructure Creative and entrepreneural in Defense and the Department of Homeland S	esearch is an integral par	t of the Stevens Mission Th	ne Institute has been recognized	by both the U.S. Department of
4d	Other program services (Describe ii	n Schedule O)			
	(Expenses \$	including grants of	⁻ \$) (Revenue \$)
4e	Total program service expenses 🕨	214,104,785			

art TV	Check	list 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	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 1	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^{\bullet}	9		No
LO	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	
L1	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI 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
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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
L8	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	
L9	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 or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 $\footnote{5}$	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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

аI	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 313		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	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	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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	
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	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		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	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)			
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Check if Schedule O contains a response of	r note to any	line in this Part VI							.マ

Se	ection A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	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		Νo						
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		No						
6	Did the organization have members or stockholders?	6		No						
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one of more members of the governing body?									
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							
ь	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	eveni	ie Cod	e.)						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod Yes	e.) No						
10a	Did the organization have local chapters, branches, or affiliates?	evenu 10a								
10a				No						
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No						
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No						
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No						
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No						
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No						
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No						
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No						
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No						
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No						
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No						
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No						
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No						
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No						
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No						

- 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.
- 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 ►MARY WHEELER 1 CASTLE POINT ON HUDSON Hoboken, NJ 07030 (201)216-5287

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	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

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

	(A) Name and Title	(B) Average hours per week (list any hours	A verage hours per more than one box, unless week (list any hours and a director/trustee) Position (do not check meek Reportable compensation from the organization (Worganizations) (Worganizations)									- '	(F) Estima mount o compens from t	ted fother ation he					
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed					
												-							
												-							
												-							
												-							
16	Cub Tabal							<u> </u>											
1b c	Sub-Total	s to Part VII, S	ection A	٠.															
d	Total (add lines 1b and 1c) .							Þ		7,189,960		0		659,463					
2	Total number of individuals (in \$100,000 of reportable compe	-					d abov	e) w	ho receive	d 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 highes	t 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									janization • • •	or individual for	5		No					
S.	ection B. Independent Co	ntractors									-								
1	Complete this table for your fiv		ensate	d inde	epen	den	t contr	acto	rs that red	eived mo	re than \$100,000	of							
	compensation from the organiz	zation Report co									thin the organizati		tax year (c						
	N		address					(A) Name and business address (B) Description of services											

(A) Name and business address	(B) Description of services	(C) Compensation
Sodexo Operations, PO Box 360170 PITTSBURGH PA 152516170	Food Service Mgmt	9,028,405
UGL SVCS UNICCO OPERATIONS CO, 275 GROVE ST STE 3-200 AUBURNDALE MA 02466	Maintenance	2,412,015
GEORGIA TECH RESEARCH, POBox 100117 ATLANTA GA 30384	RESEARCH/MONITORING	1,043,846
JIM LUONGO CONSTRUCTION, 373 PROSPECT STREET NUTLEY NJ 07110	Construction	1,034,631
WALLACE ROBERTS AND TODD LLC, 1700 MARKET STREET 28TH FL PHILADELPHIA PA 19103	Construction/DESIGN	965,636

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 ►136

Part V	Ш	Statement o			and have to the Dart VIII						
		Check If Sched	ule O contains a respoi	nse or note to any li	ne in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
s E	1a	Federated cam	paigns 1a								
Grants imounts	b	Membership du	ies 1b								
Gr.	С	Fundraising ev	ents 1c	136,497							
Giffs, nilar Aı	d	Related organiz	zations 1d								
, G nila	е	Government grant	s (contributions) 1e								
ons Sii	f	All other contribution	ons, gifts, grants, and 1f	17,424,367							
Contributions, Gifts, Grants and Other Similar Amounts	•	sımılar amounts no	ot included above								
	g	Noncash contributi 1a-1f \$	ons included in lines	9,914,446							
Coni and	h	Total. Add line:	s 1 a - 1 f		17,560,864						
9				Business Code							
enu	2a	TUITION & FEES		611600	180,383,245	180,383,245					
Æ	b	RESEARCH REVEN	UE	541700	28,166,974	28,166,974					
ИСе	С	STUDENT HOUSIN	G 	611710	16,278,592	16,278,592					
Seri	d	STUDENT DINING		611710	8,967,046	8,967,046					
a E	e	A II a b b a u u u a u a u u									
Program Serwce Revenue	f	All other progra	am service revenue								
_ ь	g		s 2a – 2f		233,795,857						
	3		ome (including dividen ar amounts)		3,339,873		-23,902	3,363,775			
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0						
	5	Royalties .			96,003			96,003			
	62	Gross rents	(ı) Real 310,649	(II) Personal							
	b	Less rental	551,515								
	c	expenses Rental income	310,649	0							
	d	or (loss)	me or (loss)		310,649		10,625	300,024			
	u	Wet rental inco	(ı) Securities	(II) O ther	020,015			333,021			
	7a	Gross amount from sales of	151,725,617	,							
		assets other than inventory	131,723,617								
	b	Less cost or	142 705 620	107 411							
		other basis and sales expenses	143,795,628	-197,411							
	c d	Gain or (loss)	7,929,989	-197,411	7,732,578			7,732,578			
		Gross income f	ı		,,,,,,,,,,			.,. 52,51			
<u>e</u>		events (not inc									
Other Revenue		\$ of contributions	s reported on line 1c)								
∂ev		See Part IV, lir	ne 18 a								
erl	b	Less directey	penses b	72,890 230,065							
oth	c		(loss) from fundraising		-157,175			-157,175			
_	9a		from gaming activities								
		See Part IV, lir	ne 19 a								
	b	Less direct ex	penses b								
	С	Net income or	(loss) from gamıng acti	vities	0						
	10a	Gross sales of returns and allo									
	.	<u>-</u>	a .	1,036,697							
			oods sold b (loss) from sales of inv	930,162 entory .	106,535		5,319	101,216			
	_	Miscellaneou		Business Code	, '-		,	, 1			
	11a	INSURANCER		900099	569,461			569,461			
	ь	HURRICANE S AQUATICS	SANDY	713940	228,831		121,370	107,461			
	С	PARKING		812930	426,742		, -	426,742			
	d	All other reven	ue		2,730,761		9,220	2,721,541			
	e	Total. Add line:	s 11a-11d	🕨	3,955,795						
	12	Total revenue.	See Instructions .		266,740,979	233,795,857	122,632	15,261,626			
					200,740,979	233,193,037	122,032	13,201,020			

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al	l other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u></u>		<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	52,663,308	52,663,308		
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	5,917,858	2,753,331	2,881,373	283,154
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	119,697		119,697	
7	Other salaries and wages	85,760,762	77,390,624	6,911,701	1,458,437
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,525,085	3,702,429	714,578	108,078
9	Other employee benefits	9,805,283	8,022,691	1,548,400	234,192
10	Payroll taxes	5,037,076	4,121,340	795,429	120,307
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	705,919	360,208	345,711	
c	Accounting	492,906		492,906	
d	Lobbying	393,164		393,164	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	918,032	7,458	910,574	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	15,032,830	12,943,667	1,932,820	156,343
12	Advertising and promotion	929,144	551,749	377,395	130,313
13	Office expenses	2,217,007	1,524,465	503,234	189,308
14	Information technology	3,487,174	3,283,137	164,894	39,143
15	Royalties	0	3,203,137	101,031	33,113
16	Occupancy	10,736,631	10,631,046	105,585	
17	Travel	3,118,879	2,938,494	124,268	56,117
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,330,434	124,200	30,117
19	Conferences, conventions, and meetings	326,355	258,819	66,057	1,479
20	Interest	3,757,066		3,757,066	-,
21	Payments to affiliates	0		,:::,::53	
22	Depreciation, depletion, and amortization	8,453,922	8,453,922		
23	Insurance	1,081,967	955,384	126,583	
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	6,645,823	6,463,876	176,559	5,388
b	RESEARCH CONTRACTS	7,553,675	7,550,598	3,077	
c	HOSPITALITY	2,305,956	1,823,606	364,380	117,970
d	RENTAL EQUIPMENT	1,936,182	1,816,149	109,362	10,671
е	All other expenses	6,387,623	5,888,484	411,474	87,665
25	Total functional expenses. Add lines 1 through 24e	240,309,324	214,104,785	23,336,287	2,868,252
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

	Check if Schedule O contains a response or note to any line in this Part X	_	• •	<u> </u>
				(B) End of year
1	Cash-non-interest-bearing	2,700,160	1	6,461,517
2	Savings and temporary cash investments	26,833,602	2	5,254,749
3	Pledges and grants receivable, net	20,393,138	3	16,802,092
4	Accounts receivable, net	21,461,816	4	26,903,921
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	0
6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers	n S		0
7	Notes and loans receivable net			
			-	393,963
_		<u> </u>	-	1,829,205
10a	Land, buildings, and equipment cost or other basis	, ,		1,020,200
ь	· · · · · · · · · · · · · · · · · · ·	8 127,262,790	10c	128,561,383
	·			77,802,603
		64,964,348	12	84,645,868
		0	13	0
	· ·	0	_	0
		7,040,792		11,863,722
				360,519,023
				15,344,164
		0	18	0
		5,787,382		11,717,869
20			20	73,261,013
21		0	21	0
22	Loans and other payables to current and former officers, directors, trustees,			
	persons Complete Part II of Schedule L	0	22	0
23	Secured mortgages and notes payable to unrelated third parties	7,088,276	23	0
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
				17,853,875
26		123,676,117	26	118,176,921
	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	26,484,141	27	39,973,087
28	Temporarily restricted net assets	105,221,104	28	114,951,763
29	Permanently restricted net assets	78,837,100	29	87,417,252
	Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
		040 540 045	22	242,342,102
33	Total net assets or fund balances	210,542,345	33	242,342,102
	2 3 4 5 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 Cash-non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part II of Schedule D 10a 255,394,77 b Less accumulated depreciation 10b 126,833,38 11 Investments—publicity traded securities 110a 126,833,38 11 Investments—publicity traded securities 120a 120a 120a 120a 120a 120a 120a 120a	Cash—non-interest-bearing Seginning of year	Cash-non-interest-bearing 2,00,0160 1

Par	t XI Reconcilliation of Net Assets			<u>'</u>	age ==
	Check if Schedule O contains a response or note to any line in this Part XI				▽
	Total various (much asset David VIII. calumn (A.) line 12)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		266,7	40,979
2	Total expenses (must equal Part IX, column (A), line 25)	2		240 7	309,324
3	Revenue less expenses Subtract line 2 from line 1				
	Not assets as for disclosure of his construction of Dark V, but 22, as lower (A.V.	3		26,4	31,655
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		210,5	542,345
5	Net unrealized gains (losses) on investments	5		3.7	773,215
6	Donated services and use of facilities			,	, 5,215
_	<u>. </u>	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
40		9		1,5	94,887
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		242,3	342,102
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				I
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 sepa basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Both consolidated and separate basis				l
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: **Software Version:**

EIN: 22-1487354

Name: Stevens Institute of Technology

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	er more than one box, unless st person is both an officer rs and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former			related organizations	
Virginia P Ruesterholz	1 0	х		х				0	0	0	
Chairman/Trustee Stephen T Boswell	1 0										
Vice Chairman/Trustee		Х		Х				0	0	0	
Thomas A Corcoran	1 0	x		х				0	0	0	
Vice Chairman/Trustee Richard R Roscitt	1 0										
Vice Chairman/Trustee		X		Х				0	0	0	
John A Schepisi	1 0	x		х				0	0	0	
Vice Chairman/Trustee Kendra L Appleheimer	1 0										
Trustee		X						0	0	0	
Lawrence T Babbio Jr Trustee	1 0	x						0	0	0	
Anthony Barrese	55 0	×						177,294	0	29,885	
Trustee/Associate Dean Alan F Blumberg	55 0										
Trustee/Professor		х						282,482	0	26,369	
Philip P Crowley	1 0	х						0	0	0	
Trustee John Dearborn	1 0	х						0	0	0	
Trustee Steven Feller	1 0	х						0	0	0	
Trustee Joseph J Garvey	1 0	х						0	0	0	
Trustee Samantha George	1 0	×						0	0	0	
Trustee Larry B Giannechini	1 0	x						0	0	0	
Trustee John Sean J Hanlon IV	1 0										
Trustee		Х						0	0	0	
Owen P Jappen	1 0	х						1,168	0	0	
Trustee Charles T Koeller	55 0										
Trustee/Dean (Thru 5/21/14) Rıchard S Magee	1 0	×						192,157	0	20,175	
Trustee (Thru 5/21/14)		X						0	0	0	
Lisa M Mascolo Trustee	10	х						0	0	0	
Thomas Moschello Trustee	1 0	х						0	0	0	
Victoria L OConnor Trustee (thru 10/11/13)	10	х						0	0	0	
Spyros M Polemis	1 0	х						0	0	0	
Trustee Annmarie Rizzo	1 0	х						0	0	0	
Trustee Ronald E Salluzzo	1 0	×						0	0	0	
Trustee	J										

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours organization (Wand a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related nstitutional Trustee mer below organızatıons employee dotted line) t compensated ee Thomas H Scholl 1 0 Χ 0 0 Trustee Frank J Semcer 1 0 Χ 0 0 Trustee J Scott Swensen 10 Х 0 Narıman Farvardın 55 0 Х 0 756,499 28,377 President Diana Colombo 55 0 Χ 85,492 0 21,690 Exec Asst to Pres/Asst Sec Randy Greene 55.0 Χ 441,180 0 30,927 VP of Finance/Treasurer Kathy L Schulz 55 0 Х 321,496 0 28,417 VP, General Counsel/Secretary Elizabeth Shelton 55 0 Χ 186,672 0 16,640 AVP FOR INVEST/ASST TREASURER Mary Wheeler 55 0 Χ 197,763 0 30,549 AVP FINANCE/ASST TREASURER Michael Bruno 55 0 375,594 0 35,344 Mohammad Dehghani 55 0 Х 166,781 0 7,650 Vice Provost David Dodd 55 0 Χ 230,049 0 33,053 VP for Info Technologies Lisa Dolling 55 0 Х 189,879 0 32,888 DEAN Edward C Eichhorn 55 0 38,677 Χ 245,313 0 VP for Development George Korflatis 55 0 Χ 555,276 0 37,943 Provost Elisabeth McGrath 55 0 Х 192,482 0 15,247 Chief of Staff Gregory Prastacos 55 0 Х 338,803 0 41,783 Mark Samolewicz 55 0 Χ 158,279 0 27,262 VP for Human Resources Dinesh Verma 55 0 Х 457,013 0 33,764 Dean William Rouse 55 0 385,550 Χ 0 21,000 Ralph G Gıffın III 55 0 309,275 0 Х 17.228 Vice Provost Constantin Chassapis 55 0 0 Х 306,986 39,288 Assoc Provost Christos Christodoulatos 55 0 Х 264,590 0 17,410 Assoc Provost Alexei Miasnikov 55 0 252,190 0 27,897 Х

0 0

0 0

Χ

119,697

0

0

Professor

Maureen Weatherall

Former Key employee

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493113004025

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of	the	org	a niz	zat	io	n
teven:	s In	stitut	e of	Tech	nno	loc	ıv

Employer identification number

22-1487354

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All ord	anizations	must com	olete this n	art.) See ir	structions.		
				e foundation becaus							-	
1	Г	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b	o)(1)(A)(i).			
2	~		-	in section 170(b)(1				-				
3				perative hospital se			· ·	n 170(b)(1)	(A)(iii).			
4	Ė			n organization operat						1)(A)(iii). E	nter the	
	•			ty, and state	,					_,(-,(,-		
5	Γ	Anorga	anızatıon op	erated for the benefi	t of a college	or universit	ty owned or o	perated by a	a government	al unit desc	rıbed ın	
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)							
6	\sqcap	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).			
7	\sqcap	An orga	anization tha	at normally receives	a substantial part of its support from a governmental unit or from the general public							
_	_			n 170(b)(1)(A)(vi).								
8	<u> </u>	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)										
9	ı	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
		•			•	-						
				oss investment inco						tax) from bu	sinesses	
	_			janization after June	•			•	•			
10	<u> </u>			ganized and operated								,
11	Γ	one or the box	more public that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr or <u>ti</u> ng organ	ıbed ın sectı ızatıon and o	ion 509(a)(1) complete line) or section s 11e th <u>ro</u> u	509(a)(2) So gh 11h	ee section 5	09(a)(3)	. Check
е	Γ	other tl	_	ox, I certify that the on managers and ot	_		•		•	•		
f			. , , ,	received a written de	etermination	from the IR:	S that it is a ⁻	Type I, Type	e II, or Type	III supporti	ng organi	zation,
			this box									厂
g				2006, has the organi	ızatıon accep	ted any gift	or contribution	on from any	of the			
			ig persons? erson who di	rectly or indirectly o	controls eith	eralone ort	ogether with	nersons des	scribed in (ii)		Yes	No
		., .		governing body of th	•		-	persons ac.	, , , , , , , , , , , , , , , , , , ,	11g		110
		•		er of a person descri		_				11g(
		• •	•	lled entity of a perso	• •		above?			11g(• •	
h		• •		ng information about		., .,				[5(/	
				.9		- u - u - g u <u>-</u> u - u	,					
•	i) Nan suppo	rted	(ii) EIN	(iii) Type of organization	(iv) Is t organızatı		(v) Did you the organiz	zation	(vi) Is to	on in		mount of etary
O	rganiz	ation		(described on	col (i) list		ın col (i) o		col (i) org		sup	port
				lines 1-9 above or IRC section	your gove docume	_	suppor	τ,	ın the U	5 /		
				(see	aocaine	iic:						
				instructions))	Yes	No	Yes	No	Yes No			
					163	140	1 63	140	1 63	No		
T_L-											-	

Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning (a) 2000 (b) 2010 (c) 2011 (d) 2012 (d) 2013 (d) 2013

S	ection A. Public Support	ttion rans to qu	amy ander the	tests listed sele	my piedoe comp	olete i di ciiii)	
	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	12,035,138	8,164,727	11,295,493	25,009,202	17,560,864	74,065,424
_	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	12,035,138	8,164,727	11,295,493	25,009,202	17,560,864	74,065,424
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included						14,168,995
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5						59,896,429
	from line 4 ection B. Total Support						
	endar year (or fiscal year	(=) 2000	(b) 2010	(-) 2011	(4) 2012	(5) 2012	(6) Tatal
	beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	A mounts from line 4	12,035,138	8,164,727	11,295,493	25,009,202	17,560,864	74,065,424
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,638,588	1,939,696	1,860,847	4,048,925	3,759,802	14,247,858
9	Net income from unrelated business activities, whether or not the business is regularly carried on	144,373	140,432	114,350	121,928	122,501	643,584
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	3,028,168	2,951,916	3,288,130	5,265,887	4,934,792	19,468,893
11	Total support (Add lines 7						108,425,759
12	through 10) L Gross receipts from related activiti	l es.etc (see inst	ructions)			12 1	,048,053,130
13	First five years. If the Form 990 is this box and stop here	for the organizati	on's first, second			501(c)(3) organiz	zation, check
14	ection C. Computation of Pub Public support percentage for 2013			11 column (f))		T 44 T	
15	Public support percentage for 2012	· ·		ii, column (1))		14	55 242 %
	33 1/3% support test—2013. If the	-	•	on line 12 and li	no 14 is 22 1/20/2	15	0 %
104	and stop here. The organization qua				He 14 IS 33 1/370 C	or more, check th	► ✓
	33 1/3% support test—2012. If the box and stop here. The organization 10%-facts-and-circumstances test-	n qualifies as a pi	ublicly supported	organızatıon			ck this
b	is 10% or more, and if the organiza in Part IV how the organization mee organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	ets the "facts-and — 2012. If the orga	d-cırcumstances anızatıon dıd not	test The organiz	e 13, 16a, 16b, o	a publicly suppor r 17a, and line	ted ▶┌
	Explain in Part IV how the organiza						
18	supported organization Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a, c	or 17b, check this	box and see	▶□ ▶□

Schedule A (Form 990 or 990-EZ) 2013 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) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 15 0 % 16 Public support percentage from 2012 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2012. 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

Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2012 Schedule A, Part III, line 17

17

18

17

18

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction						
	Facts And Circumstances Test							
Retu	ırn Reference	Explanation						
		Schodulo A / Form 000 o	000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493113004025

OMB No 1545-0047

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-EZ)

instructions is at www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

organization answered "Ves" to Form 990 Part IV Line 5 (Proxy Tax) or Form 990 F7 Part V Line 35c (Proxy Tax) then

	me of the organization vens Institute of Technology			Employer ide	ntification number
				22-1487354	
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(c) or is a section 52	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polı	tıcal campaıgn act	civities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization u	nder section 495	5	\$
2	Enter the amount of any excise	e tax incurred by organization mana	agers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(c), except section 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to	other organization	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter her	e and on Form 112	.0-POL, line 17b ►	¢
4	Did the filing organization file F	Form 1120-POL for this year?			↑
5	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	funds Also enter the anization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	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 lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

Schedule C (Fo	orm 990 or 990-EZ) 2013		Page		
Part II-B	Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).				
		(2)			

For e	ach "Vec" response to lines 1a through 1.	below, provide in Part IV a detailed description of the lobbying	(;	(a)		
activity.		In 11 below, provide in Part IV a decaned description of the lobbying			Amo	unt
1		tion attempt to influence foreign, national, state or local fluence public opinion on a legislative matter or referendum,				
а	Volunteers?			Νo		
b	Paid staff or management (include con	npensation in expenses reported on lines 1c through 1i)?	Yes			
C	Media advertisements?			Νo		
d	Mailings to members, legislators, or th			Νo		
е	Publications, or published or broadcas			Νo		
f	Grants to other organizations for lobby			Νo		
g	Direct contact with legislators, their s	taffs, government officials, or a legislative body?	Yes			393,164
h		nventions, speeches, lectures, or any similar means?		Νo		
i	Other activities?			Νo		
j	Total Add lines 1c through 1i			•		393,164
2a b	Did the activities in line 1 cause the o If "Yes," enter the amount of any tax ii	rganization to be not described in section 501(c)(3)? ncurred under section 4912		No		
c	If "Yes," enter the amount of any tax i	ncurred by organization managers under section 4912				
d	If the filing organization incurred a sec	tion 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organ 501(c)(6).	ization is exempt under section 501(c)(4), section !	501(c)(5), c	r secti	on
					Yes	No
1	Were substantially all (90% or more) of	dues received nondeductible by members?		L	1	
2	Did the organization make only in-hous	se lobbying expenditures of \$2,000 or less?			2	
3		er lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organ 501(c)(6) and if eithe line 3, is answered "Y	ization is exempt under section 501(c)(4), section ! r (a) BOTH Part III-A, lines 1 and 2, are answered " es."	501(c No" C)(5), c)R (b)	r secti Part II	on I-A,
1	Dues, assessments and similar amour		1			
2	Section 162(e) nondeductible lobbying expenses for which the section 527(f)	g and political expenditures (do not include amounts of political tax was paid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3		6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		n line 2c exceeds the amount on line 3, what portion of the excess er to the reasonable estimate of nondeductible lobbying and	4			
5	Taxable amount of lobbying and politic	al expenditures (see instructions)	5			
_	art IV Supplemental Informa	· · · · · · · · · · · · · · · · · · ·				
Pro		-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou	ıp lıst),	Part II	-A, line 2	, and
, u	Return Reference	Explanation				
Sch	hired	Stevens Institute of Technology does not directly engage in any lob I various outside consultants to undertake lobbying activities relate ion related initiatives on its behalf				

Return Reference	Explanation
Schedule C, Part II-B, Line g	The Stevens Institute of Technology does not directly engage in any lobbying activities, the Institute hired various outside consultants to undertake lobbying activities related to educational and other mission related initiatives on its behalf
	·

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3		rage		
Part IV Supplemental Information	on <i>(continued)</i>			
Return Reference	Explanation			

Schedule D (Form 990) 2013

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

Supplemental Financial Statements

DLN: 93493113004025

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

Internal	Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .		Inspection
	me of the organ			Emp	ployer identification number
Stev	vens Institute of Te	сппоюду		22-	1487354
Pa		nizations Maintaining Donor Adv			
	organı	zation answered "Yes" to Form 990	·	<u> </u>	(h) Funda and ather accounts
1	Total number a	at and of year	(a) Donor advised funds	+	(b) Funds and other accounts
2		itributions to (during year)			
3	33 3	nts from (during year)			
4		ue at end of year		+	
	55 5	zation inform all donors and donor adviso		nor odv	us a d
5		organization's property, subject to the or		nor auv	Yes No
6	used only for o	zation inform all grantees, donors, and do charitable purposes and not for the benef permissible private benefit?			
Pai		ervation Easements. Complete if	the organization answered "Yes"	to Forr	n 990, Part IV, line 7.
1	☐ Preservati	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat	or education) Preservation of a		rically important land area d historic structure
	┌ Preservati	on of open space			
2		s 2a through 2d ıf the organızatıon held a he last day of the tax year:	qualified conservation contribution in	the forr	n of a conservation
					Held at the End of the Year
а	Total number	of conservation easements		2a	
b	Total acreage	restricted by conservation easements		2b	
С	Number of con	nservation easements on a certified histo	rıc structure ıncluded ın (a)	2c	
d		nservation easements included in (c) acq cure listed in the National Register	uired after 8/17/06, and not on a	2d	
3	Number of con	nservation easements modified, transferr	ed, released, extinguished, or terminat	ed by th	ne organization during
	the tax year 🕨	·			
4	Number of sta	tes where property subject to conservati	on easement is located ►		
5		nization have a written policy regarding t If the conservation easements it holds?	he periodic monitoring, inspection, har	ndling of	f violations, and Yes No
6	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	during the year
7	-	penses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year
8		nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	I) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)
9	balance sheet the organization	describe how the organization reports cor , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia nts	l stater	ments that describes

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

 - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- Revenues included in Form 990, Part VIII, line 1
- Assets included in Form 990, Part X

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

Part	Organizations Maintaining Co	llections of Art,	, His	<u>tori</u>	<u>cal Trea</u>	asures, or C	the	<u>r Similar Ass</u>	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	any of the	following that	are a	significant use	of its	
а	Public exhibition		d	Γ	Loan or	exchange prog	rams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	ın how	v the	y further t	he organızatıor	ı's ex	empt purpose ıı	n	
5	During the year, did the organization solicit							_	_	_
Dov	assets to be sold to raise funds rather than t								Yes	✓ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						u r	es to form 9	90,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						ets		– Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able	_				
						<u> </u>		Am	ount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance					Ĺ	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Г	_ Yes	✓ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has be	en provided in l	Part	XIII		Γ
Pai	rt V Endowment Funds. Complete						_			
4.	Danimin of war halance	(a)Current year 155,748,717	(b) P	rior y	ear b (416,999	c) Two years back 144,100,616	 ` ·	Three years back 134,214,252		ears back 29,122,256
1a	Beginning of year balance	8,484,292			544,879	2,197,390	-	335,365	1.	742,425
b	Contributions	0,404,232		٥,	544,075	2,137,330		333,303		772,723
С	Net investment earnings, gams, and losses	14,109,353			042,029	1,391,552	-	14,682,338		8,926,018
d	Grants or scholarships	5,286,983		5,	255,190	6,272,559	<u> </u>	5,131,339		4,576,447
e	Other expenditures for facilities and programs									
f	Administrative expenses	172.055.270		155	748,717	141 416 006		144 100 515	di:	24 244 252
_	End of year balance	173,055,379				141,416,999	<u>'</u>	144,100,616	1.	34,214,252
2	Provide the estimated percentage of the cur	•	e (lın	e 1g	, column (a)) held as				
а	Board designated or quasi-endowment 🕨	4 500 %								
b	Permanent endowment ► 95 500 %									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat	are held aı	nd admınıstere	d for	the	F	T
	organization by (i) unrelated organizations							3a(i	Yes i) Yes	No
	(ii) related organizations		• •	_ •			. •	3a(i		No
b	If "Yes" to 3a(II), are the related organization			ched	ule R?.	· . · . · . · .	٠.	3b	- 	
4	Describe in Part XIII the intended uses of the	ne organization's end	dowme	ent f	unds				•	
Par	t VI Land, Buildings, and Equipme		he or	rgar	ızatıon a	nswered 'Yes	' to	Form 990, Pa	rt IV, lı	ne
	11a. See Form 990, Part X, line Description of property	10.			Cost or othe (investmer			(c) Accumulated depreciation	(d) Bo	ok value
1- '	and					1 702	100			1 762 100
	and					1,763 214,999	-	102,608,440	1	1,763,196
	Buildings		•	<u> </u>		214,999	,240	102,608,440	1 11	12,390,800
	Equipment		•	<u> </u>		29,585	261	24,224,948		5,360,313
	Other					9,047		24,224,340		9,047,074
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			mn (B), line 10i				17	28,561,383
	2	,	, 22,41	(,,5 20(. /:/		Schedule D		

provided in Part XIII

Part VII Investments—Other Securities. Compl	ete if the organization a	nswered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other	E1 722 904	F
(A) ALTERNATIVE INVESTMENTS	51,732,804	г
(B) TRUSTS HELD BY OTHERS	3,827,459	F
(C) SPLIT INTEREST AGREEMENTS	3,497,948	F
(D) OTHER	170,836	F
(E) PRIVATE EQUITY	25,416,821	F
, ,	, ,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	84,645,868	
Part VIII Investments—Program Related. Com See Form 990, Part X, line 13.	plete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(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)		
Part IX Other Assets. Complete if the organization are (a) Description		Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
7.1. (0.4. (1.3. 1.5. 1.5. 1.5. 1.5. 1.5. 1.5. 1.5.		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) Part X Other Liabilities. Complete if the organization	zation answered 'Yes' to	Form 990. Part IV. line 11e or 11f. See
Form 990, Part X, line 25.		
1 (a) Description of liability	(b) Book value	
ACCRUED POST-RETIREMENT BENEFI	4,684,235	
ANNUITIES PAYABLE	1,915,466	
CONDITIONAL ASSET RETIREMENT	6,138,028	
REFUNDABLE ADVANCES	5,116,146	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	17,853,875	
2. Liability for uncertain tax positions In Part XIII, provide th reports the organization's liability for uncertain tax positions		

4 b

but Not on Return

but Not on Books

Other Expenses Included on Books

Other Expenses Included on Return

Sched	ule D (Form 990) 2013					Page 4
Part		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line		nts With Revenue p	er R	eturn Complete ıf
1		r support per audited financial statements			1	219,457,901
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a	3,773,213		
b	Donated services and use of fa	acilities	2b			
c	Recoveries of prior year grants	5	2c			
d	Other (Describe in Part XIII)		2d	1,594,887		
e	Add lines 2a through 2d .		·		2e	5,368,100
3	Subtract line 2e from line 1 .				3	214,089,801
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				· · ·
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a	918,032		
b	Other (Describe in Part XIII)		4b	51,733,146		
c	Add lines 4a and 4b		<u> </u>		4c	52,651,178
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)		5	266,740,979
Part		xpenses per Audited Financial St			per	
		swered 'Yes' to Form 990, Part IV, lin				·
1	Total expenses and losses per	audited financial statements			1	187,658,144
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25	_	_		
а	Donated services and use of fa	acilities	2a			
b	Prior year adjustments		2b			
c	Otherlosses		2c			
d	Other (Describe in Part XIII)		2d	930,162		
e	Add lines 2a through 2d		· · ·		2e	930,162
3	Subtract line 2e from line 1 .				3	186,727,982
4		0, Part IX, line 25, but not on line 1:				
а		uded on Form 990, Part VIII, line 7b	4a	918,032		
b	•		4b	52,663,308	-	
c					4c	53,581,340
5		nd 4c. (This must equal Form 990, Part I, III			5	240,309,324
	Supplemental Inf		16 10)			240,303,324
Provi Part	ide the descriptions required for	Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
	tions of Art, Historical ures - Form 990, Schedule D, II	Various Pieces of art that have been done of visitors, faculty, staff and students	ited are	on public display for the	e enric	hment and enjoyment
	vment Funds - Form 990, lule D, Part V, Line 4	The Institute's endowment fund is intendent students and to provide financial assistar				
Income Taxes - Form 990, Schedule D, Part X		The University has been classified as an organization described under Section 501(c)(3) of the Internal Revenue Code (the "Code") and, therefore, is exempt from Federal income taxes under Section 501(a) of the Code and similar State of New Jersey tax provisions. Federal law imposes tax on income that is not related to an organization's tax-exempt purposes or otherwise excluded under the Code. The University 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 University believes there are no uncertain tax positions.				ome taxes under leral law imposes tax rwise excluded under enance of its tax- tax obligations in
	Rev on Books Not on Return - 990, Schedule D, Part XI, Line	Post-Retirement Benefit Changes Other T Split-Interest Agreements 395,146				-
	Rev On Return Not on Books - 990, Schedule D, Part XI, Line	SCHOLARSHIPS NET ON FINANCIAL S 2) \$52,663,308 BOOK STORE COSTS C				

FINANCIAL STATEMENTS (\$930,162) ------ TOTAL \$51,733,146 ========== Form 990, Schedule D, Part XII, Line 2d BOOK STORE COSTS OF GOODS SOLD INCLUDED IN

Form 990, Schedule D, Part XII, Line 4b SCHOLARSHIPS NETTED AGAINST REVENUE ON

FINANCIAL STATEMENTS RECLASSED TO EXPENSES (PART IX LINE 2) \$52,663,308

EXPENSES ON FINANCIAL STATEMENTS (\$930,162) =======

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493113004025

Employer identification number

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

eve	22-148735	4		
Pa	rtI	<u></u>	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, by other governing instrument, or in a resolution of its governing body?	ylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media d the period of solicitation for students, or during the registration period if it has no solicitation program, in a wathat 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	ay -	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	<u>4a</u>	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscrimin basis?	natory 4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	<u>5d</u>		No
е	: Educational policies?	<u>5e</u>		No
f	Use of facilities?	5f		Νo
g	Athletic programs?	<u>5g</u>		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	<u>5h</u>	<u> </u>	No
	ndoes the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a	Yes	NI.
b	If you answered "Yes" to either line 6a or line 6b, explain on Part II	6b		No
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4	105		
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information. 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)

Return Reference	Explanation
Part I, Line 3	The Stevens Institute of Technology's nondiscrimination policy is distributed annually as well as printed in student materials and on its website
	Stevens Institute of Technology receives funding from various governmental sources including, but not limited to, Pell, Federal Direct Loan Programs, Perkins and FSEOG

Schedule E (Form 990 or 990-EZ) 2013

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As Filed Data -

DLN: 93493113004025

OMB No 1545-0047

Employer identification number

22-1487354

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Stevens Institute of Technology

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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Pai	rt I General Information "Yes" to Form 990, Pai			he United States. C	omplete if the organiza	ation answered				
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?									
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitor	ing the use of its grant	s and other				
3	Activites per Region (The follow	ing 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				
(1)	Central America and the Caribbean		-	Investments		31,329,069				
(2)	East Asia and the Pacific			Program Services	A cademic Recruitment	17,168				
(3)										
(4)										
(5)										
	Sub-total Total from continuation sheets to Part I					31,346,237				
	Totals (add lines 3a and 3b)					31,346,237				
Ear D	porwark Doduction Act Natica, coa	the Instructions	for Form 000	Ca+	No FOOR 2W Schodu	lo E (Form 000) 2012				

Part II						i ted States. Compl duplicated if additior			to Form 990,
	ame of lization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
						es by the foreign co (c)(3) equivalency l			
3 Ente	er total num	ber of other or	ganızatıons or ent	ities					

Schedule F (Form 990) 2013

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 o	duplicated if addit	<u>ional space is ne</u>	eeded.				
(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) Scholarships and Grants		2,803	52,663,308				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	▽	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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	ত	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)	F	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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	~	Yes	Г	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)	F	Yes	Γ	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	굣	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
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

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DLN: 93493113004025

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

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

Supplemental Information Regarding

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization Stevens Institute of Technology 22-1487354 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations g | Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Γ Yes Γ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Dıd (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Cat No 50083H

		more than \$15,000 of fundr events with gross receipts g		ons and gross income	: OH FOHH 330-LZ, IIIIe	es I and Ob. List
			(a) Event #1 Golf Tournament	(b) Event #2 Awards Gala	(c) O ther events	(d) Total events (add col (a) through col (c))
ďh			(event type)	(event type)	(total number)	
E E	1	Gross receipts	86,800	107,887	14,700	209,387
Revenue	2	Less Contributions	68,000	60,587	7,910	136,497
<u></u>	3	Gross income (line 1 minus line 2)	18,800	47,300	6,790	72,890
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	23,370	5,725	7,232	36,327
ă	7	Food and beverages .		97,934		97,934
Dreat -	8	Entertainment		3,870		3,870
출	9	Other direct expenses .	2,426	89,508		91,934
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(230,065)
	11	Net income summary Subtract li	_			-157,175
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Б Б	4	Rent/facility costs				
툽	5	Other direct expenses				
	6	Volunteerlabor	☐ Yes	☐ Yes	☐ Yes	_
	7	Direct expense summary Add line	s 2 through 5 in column (d)	•	
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)	🕨	
9 a b	Ist	ter the state(s) in which the organiza the organization licensed to operate No," explain	gaming activities in each	n of these states?		. 「Yes 「No
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?	· · Fyes F No

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

		1
Does	s the organization operate gaming activit	ties with nonmembers?
12	Is the organization a grantor, beneficia	ry or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming	g?
13	Indicate the percentage of gaming acti	vity operated in
а	The organization's facility	
b	An outside facility	
14	Enter the name and address of the pers	son who prepares the organization's gaming/special events books and records
	_	
	Name 🟲	
	Address ►	
15a	Does the organization have a contract	with a third party from whom the organization receives gaming
	revenue?	
b	If "Yes," enter the amount of gaming re	evenue received by the organization 🟲 \$ and the
	amount of gaming revenue retained by	the third party 🕨 \$
C	If "Yes," enter name and address of the	e third party
	Name ▶	
	Address ▶	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation 🟲 \$	
	_	
	Description of services provided	
	Director/officer	Employee Independent contractor
17	Mandatory distributions	Employee I Independent contractor
1/ a	•	e law to make charitable distributions from the gaming proceeds to
u	· ·	· · · · · · · · · · · · · · · · · · ·
Ь	• •	red under state law distributed to other exempt organizations or spent
•	in the organization's own exempt activ	· · · · · · · · · · · · · · · · · · ·
Pai		on. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and
	Part III, lines 9, 9b, 10b, 15	b, 15c, 16, and 17b, as applicable. Also complete this part to provide any
	additional information (see	instructions).
	Return Reference	Explanation

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Schedule I

(Form 990)

DLN: 93493113004025

OMB No 1545-0047

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

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

Open to Public **Inspection**

► Attach to Form 990 Department of the Treasury Internal Revenue Service ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

Stevens Institute of Technology						22-1487354	
Part I General Information	on on Grants and	l Assistance				•	
Does the organization maintain the selection criteria used to ava Describe in Part IV the organization.	ward the grants or as	sıstance [?]					F Yes Γ I
Part II 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	(h) Purpose of gra or assistance
2 Enter total number of section 5			ed in the line 1 table.			· · · •	

generated reports

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) 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
Part IV Supplemental Inform	ation. Provide the inf	ormation required in Pa	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.
			<u> </u>	•	

Return Reference Explanation

Form 990, Schedule I, Part I,
Line 2

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

Schedule I (Form 990) 2013

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DLN: 93493113004025

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**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

	22-1487	354		
Pa	art I Questions Regarding Compensation			
			Yes	No
.a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in F 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these i			
	First-class or charter travel Housing allowance or residence for personal	use		
	✓ Travel for companions	ence		
	Discretionary spending account Personal services (e.g., maid, chauffeur, che	f)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	r 1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in P	art III		
	▼ Compensation committee ▼ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation comi	nittee		
ŀ	During the year, did any person listed in Form 990, Part VII, Section A, line $1a$ with respect to the filing or a related organization	rganization		
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.			
•	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
5	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
•	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
3	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was	a w b a		
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," des in Part III	cribe 8		No
)	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regusertion 53 4958-6(c)?	lations		

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

Schedule J (Form 990) 2013

Part III Supplemental Information

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

INE 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 occasions
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 issential (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 burposes to foster relationships within the New York metropolitan area for the University.
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 where permitted by law 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 lecisions regarding incentive compensation will be subject to the Board of Trustees and others' determinations as to the financial results of the Iniversity 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 ecommended 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 netrics (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.
ormer Key Employee, Maureen Weatherall, received a severance payment in calendar year 2013 This has been reported in Part II, column (b)(iii)
whisions uhe as one one one

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 22-1487354

Name: Stevens Institute of Technology

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Anthony Barrese Trustee/Associate Dean	(I) (II)		0	0	17,532 0	12,353 0	207,179 0	0 0
Alan F Blumberg Trustee/Professor	(I) (II)		5,000		20,902	5,467 0	308,851 0	0
Charles T Koeller Trustee/Dean (Thru 5/21/14)	(I) (II)		0	0	14,708 0	5,467 0	212,332 0	0
Narıman Farvardın President	(I) (II)		100,000	9,863	22,950 0	5,427 0	784,876 0	0
Randy Greene VP of Finance/Treasurer	(1) (11)		0	0	25,500 0	5,427 0	472,107 0	0
Kathy L Schulz VP, General Counsel/Secretary	(I)		7,500	3,931	22,950 0	5,467 0	349,913 0	0
Elizabeth Shelton AVP FOR INVEST/ASST TREASURER	(I)	.	4,000	0	16,640 0	0	203,312 0	0 0
Mary Wheeler AVP FINANCE/ASST TREASURER	(I) (II)	.	3,000	0	18,155 0	12,394 0	228,312 0	0
Michael Bruno DEAN	(I) (II)		5,000	0	22,950 0	12,394 0	410,938 0	0
Mohammad Dehghanı Vıce Provost	(I) (II)		0	0	7,650 0	0	174,431 0	0
David Dodd VP for Info Technologies	(I) (II)) 0	0	0	20,700 0	12,353 0	263,102 0	0 0
Lisa Dolling DEAN	(I) (II)) 0	0	0	16,605 0	16,283 0	222,767 0	0 0
Edward C Eichhorn VP for Development	(I) (II)) 0	0	0	25,313 0	13,364 0	283,990 0	0 0
George Korfiatis Provost	(I) (II)) 0	0		22,950 0		1	
Elisabeth McGrath Chief of Staff	(I) (II)) 0	0	0	15,247 0	0	207,729 0	0 0
Gregory Prastacos DEAN	(I) (II)) 0	0	0	25,500 0	16,283 0	380,586 0	0 0
Mark Samolewicz VP for Human Resources	(I) (II)) 0	0	0	14,868 0	12,394 0	185,541 0	0 0
Dinesh Verma Dean	(I) (II)) 0	0	0	20,400 0	13,364 0	490,777 0	0 0
William Rouse Professor	(I) (II)) 0	0	0	21,000 0	0	406,550 0	0 0
Ralph G Giffin III Vice Provost	(1)) 304,925) 0	4,350 0		17,228 0		326,503 0	0

Form 990, Schedule J, Par	<u>τι</u>	1 - Officers, Direc	tors, Trustees, Ke	d Highest Compensated Employees						
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form		
		(i) Base Compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ		
Constantin Chassapis Assoc Provost	(I) (II)	·	4,350 0	0	22,950 0	16,338 0	346,274 0	0		
Christos Christodoulatos Assoc Provost	(I) (II)		4,350	0	17,410 0	0	282,000 0	0		
Alexei Miasnikov Professor	(I) (II)	· I	0	0	15,503 0	12,394 0	280,087 0	0		
Maureen Weatherall Former Key employee	(I) (II)		0	119,697	0	0	119,697 0	0		

DLN: 93493113004025

Open to Public

OMB No 1545-0047

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. ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

22-1487354

Department of the Treasury Internal Revenue Service Name of the organization

Stevens Institute of Technology

Part I Bond Issues (h) O n (i) Pool (g) Defeased behalf of financing (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (a) Issuer name (e) Issue price ıssuer Yes No Yes No Yes No NJ EDU FAC AUTH STEVENS ISSUE 2007 22-1829511 646065LP5 08-02-2007 71,633,268 Refunding of Prior Issues Χ Х Χ NJ EDU FAC AUTH CAPITAL Χ IMP 2005 A 22-1829511 60605LWWX 08-10-2005 792,706 Refunding of Prior Issues Х Χ NJ EDU FAC AUTH CAPITAL Х 133.640 Refunding of Prior Issues Х Χ IMP 2006 A 22-1829511 64605LZ43 10-26-2006 NJ EDU AUTH DORM SAFETY Finance Dorm Safety 2003 A 22-1829511 64605NBU7 01-15-2004 244,207 Х Χ Χ Improvements Part II Proceeds

	11000003											
			4	E	3		С		D			
1	A mount of bonds retired		4,555,000	0		0		183,500				
2	A mount of bonds legally defeased		0		0		0		0			
3	Total proceeds of issue		85,725,356		0		0		0			
4	Gross proceeds in reserve funds		5,782,826		0		0		0			
5	Capitalized interest from proceeds		0		0		0		С			
6	Proceeds in refunding escrows		66,517,119		0		0		0		0	
7	Issuance costs from proceeds		1,535,969		0	0		0				
8	Credit enhancement from proceeds		0		0	0		0				
9	Working capital expenditures from proceeds		0	C		0		o				
10	Capital expenditures from proceeds		0	0		0		C				
11	O ther spent proceeds		0		0		0		0			
12	O ther unspent proceeds		0		0		0		0			
13	Year of substantial completion	20	2009 2005		05	20	06	20	004			
		Yes	No	Yes	No	Yes	No	Yes	No			
14	Were the bonds issued as part of a current refunding issue?		Х		Х		х		Х			
15	Were the bonds issued as part of an advance refunding issue?	Х			Х		Х		Х			

Part III **Private Business Use**

allocation of proceeds?

16

			Α		3	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×		×		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Χ

Х

Does the organization maintain adequate books and records to support the final

Has the final allocation of proceeds been made?

Χ

Χ

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

FCI	Filvate Business Ose (Continued)								
			4	I	В		С)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×		х		х		х
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		х		Х		Х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		0 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?	Х		Х		Х		Х	
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х		х		Х
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		Х		Х		Х		Х
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		х		х		Х	

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		×		×		×
2	If "No" to line 1, did the following apply?						_		
а	Rebate not due yet?		Х		Х		Х		Х
b	Exception to rebate?		Х		Х		Х		Х
С	No rebate due?	Х		Х		Х		Х	
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		Х		Х		х		Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		X		Х		Х
b	Name of provider	0		0		0			
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was the hedge terminated?								
	Schedule K (Form 990) 2013								

Χ

Par	t IV Arbitrage (Continued)								
		А	·	В	·	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		X		
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?		Х		x		X		Х
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		Х		Х		X	
Pa	rt V Procedures To Undertake Corrective Action								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No

Χ

Χ

and corrected through the voluntary closing agreement program if
self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Χ

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

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.

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493113004025

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

(Form 990)

Employer identification number

	e of the organization									Em	nployer id	lentifica	ation nui	nber	
Ste	vens Institute of Technology									2.2	2-14873	54			
Pa	art I Bond Issues			_											
										(a) De	(g) Defeased		On alf of		Pool
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(f)	Description of purpose					ıssuer		ncing
						Y					No	Yes	No	Yes	No
A	NJ EDU FAC AUTH ELF ISSUE SERIES 2014B	22-1829511	6460658J4	01-30-2014	8,131	1,497	FINAN	ICE IT INFF	RASTRUCTUR		x		х	X	
Pa	rt III Proceeds														
						A			В		С			D	
1	A mount of bonds retired						0								
	A mount of bonds legally defe				0										
3	Total proceeds of issue			8,131	. ,497										
4	Gross proceeds in reserve fu			3,326	,289										
5	Capitalized interest from pro				0										
6	Proceeds in refunding escro						0								
7	Issuance costs from procee					54	,772								
8	Credit enhancement from pro	oceeds					0								
9	Working capital expenditures						0								
10	Capital expenditures from pr	oceeds				1,173	,173,711								
11	Other spent proceeds					0									
12	Other unspent proceeds						0								
13	Year of substantial completi	on													
					Yes	No	•	Yes	No	Yes	<u> </u>	lo	Yes	\perp	No
14	Were the bonds issued as pa	art of a current refund	ding issue?			Х									
15	Were the bonds issued as pa	art of an advance ref	unding issue?			Х									
16	Has the final allocation of pr			X											
17	Does the organization maint allocation of proceeds?	×													
Pa	Part IIII Private Business Use														
						A			3		C			D	
	Was the organization a partn	I.C. which owned	Yes	No	0	Yes	No	Yes	<u> </u>	lo	Yes	+	No		
1	property financed by tax-exe		or a member of all I	LLG, Willell Owned		X									

financed property?

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

Х

SCIL	dule K (Form 990) 2013									Page 🗷
Par	Private Business Use (Continued)						_			
				A		В		C		D
		ļ	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private bu of bond-financed property?			Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or ot outside counsel to review any management or service contracts relating to the property?									
С	Are there any research agreements that may result in private business use o financed property?	of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or ot outside counsel to review any research agreements relating to the financed p									
4	Enter the percentage of financed property used in a private business use by ϵ other than a section $501(c)(3)$ organization or a state or local government	entities F		0 %				•		
5	Enter the percentage of financed property used in a private business use as a unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?		Х							
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds issued?			х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or dis	sposed of						•		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations se 1 141-12 and 1 145-2?	ections		×						
9	Has the organization established written procedures to ensure that all nonque bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		×							
Pai	t IV Arbitrage									
		Α			В		С		D	
		Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the Issuer filed Form 8038-T?		X							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х							
b	Exception to rebate?		Х							
С	No rebate due?	Χ								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed						•			
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									

r (e	rt IV Arbitrage (Continued)			.					
		A		E	1	C		D	1
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х						
b	Name of provider	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?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?	Х							
Pa	rt V Procedures To Undertake Corrective Action								
		Α	1	E	3	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	x							

Part VI Supplemental Inf	ormation. Provide additional information for responses to questions on Schedule K (see instructions).
Return Reference	Explanation
NJ EDU FAC AUTH ELF ISSUE, SERIES 2014B	THE PROCEEDS OF THIS ISSUANCE WERE SPLIT AMONG 6 UNIVERSITIES IN THE STATE OF NEW JERSEY, STEVENS' SHARE OF THE PROCEEDS WAS 55 716% OR \$4.500.000 NET OF ISSUANCE COSTS

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

DLN: 93493113004025

OMB No 1545-0047

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. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the or Stevens Institute of							ı	Employ	er ident	tificatio	n numb	er
									87354			
	ess Benefit										40h	
	olete if the orga ie of disqualifie			ship between		(c) Desc						rrected?
1 (a) Num	ie or disqualifie	a person (n and organiz		(6) 503.	cription	i oi cia	ii sactioi	''	Yes	No
			<u> </u>								105	110
												_
												_
												_
												_
												_
												_
2 Enterthe a	amount of tax 11	ncurred by or	ganızatıon r	managers or o	disqualified pe	rsons durina t	he vea	r unde	rsectio	n		
4958 .					·				F \$			
3 Enter the a	amount of tax, i	ıf any, on lıne	2, above, r	eımbursed by	the organizat	ion			> \$			
	ans to and					/ l 20	F 0		T.V - I.	26	6	
	mplete if the or ganization repo	_			•		Form 9	190, P	art IV , II	ine 26,	orittne	!
(a) Name of	(b)	(c)	(d) Loan		(e)Original	(f)Balance	(g) In		(h)		Tipw	rıtten
interested	Relationship				principal	due	defaul		Approv	/ed		ment?
person	with	loan	organizatio	on?	amount				by			
	organization								board or			
									commi	ttee?		
			То	From	1		Yes	No	Yes	No	Yes	No
											_	
											_	
											_	
											_	
Total		▶ \$										
	ants or Assi											
	mplete if the								1 -			
(a) Name of II perso		b) Relationsh nterested per			nt of assistanc	e (d) Type	eofass	istand	:e (e	Purpo:	se of as	ssistance
perso	" "	organiza										
									- 1			
												
				i								

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
				Yes	No
(1) VIRGINIA RUESTERHOLZ	Board Trustee Chair	397,683	See Schedule L, Part V		No
(2) Annmarie Rizzo	Board Trustee	397,683	See Schedule L, Part V		Νo
(3) Lawrence T Babbio Jr	Board Trustee	397,683	See Schedule L, Part V		No
(4) Ronald E Salluzzo	Board Trustee	125,564	See Schedule L, Part V		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
	Board of Trustees Chair Virginia Ruesterholz was the president of Verizon Services Operation during the prior year and is now retired. She received long term stock payments from Verizon during this fiscal year. Board of Trustees member Annmarie Rizzo is Director of Operations in the Network and Technology organization at Verizon Communications. Board of Trustees member Lawrence T. Babbio, Jr.'s son Lawrence T. Babbio, III is employed by Verizon. The Stevens Institute conducts business with Verizon Wireless, Verizon Select Services and various other Verizon companies (total fees of \$397,683 in the fiscal year). Board of Trustees Member, Ronald E. Salluzzo, has been engaged by the University to serve as a Professional Trustee (as provided by the University's By-Laws) and as Chair of the Audit Committee. Mr. Salluzzo receives compensation for his Board and committee service through Attain LLC, of which he is a partner. The University paid professional fees to Attain LLC of \$125,564 in the fiscal year for these services. The compensation paid to Attain LLC for Mr. Salluzzo's services represents reasonable compensation for his Board and committee service and, therefore, does not impair his independence. When entering into or considering transactions with organizations with a relationship to a University Trustee or Officer, the facts surrounding the conflict of interest will be disclosed and the trustee or officer will recuse him or herself from the deliberations and vote on the matter.

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493113004025

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

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

22-1487354

Pa	Tite 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	(Method of noncash contri		_	nts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		3,400	FMV			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	27	6,095,051	FMV			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► (Equipment)	X	14	528,434	FMV			
26	O ther ▶()							
	O ther ▶()							
	O ther ▶ ()				<u> </u>			
29	Number of Forms 8283 received by the for which the organization completed F	-	• •	1 2	9		V	- NI-
30-	During the year, did the organization	receive by	contribution any property r	enorted in Dart I lines 1	through 28 that		Yes	No
308	it must hold for at least three years fr							
				, and winch is not require	i to be used			
	for exempt purposes for the entire ho		'			30a		No
31	 If "Yes," describe the arrangement in Does the organization have a gift acc 		licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
				•				
32a	Does the organization hire or use thir contributions?	a parties or	related organizations to s	olicit, process, or sell no	ncash • • •	32a	Yes	
Ŀ	If "Yes," describe in Part II							
	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
	deactine til Laif II							

	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.							
Return Reference Explanation								
Schedule M, Part I	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) (2013)

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SCHEDULE O

As Filed Data -

DLN: 93493113004025

OMB No 1545-0047

2013

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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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Stevens Institute of Technology

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

22-1487354

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

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 the Office of Audit, Risk and Compliance and the General Counsel for further analysis and resolution. Certain conflicts relating 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.

Return Reference	Explanation
Compensation - Form 990, Part VI, Line 15b	All compensation of persons occupying the following positions paid during calendar year 2013 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 faculty members who serve as representatives on the Board of Trustees President Provost and University Vice President Vice President for Information Technology & CIO Chief Financial Officer and Treasurer Vice President for Development Vice President for Facilities and Campus Operations* Vice President for Human Resources Vice President, General Counsel and Secretary Chief of Staff Deans Faculty Trustees 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. *Note that this position does not appear on Form 990, Part VII nor on Schedule J since the compensation was below the reporting threshold.

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

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 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 University 2 BOND ISSUE B - COLUMNS (E) AND (F) These bonds were issued in the par amount of \$15,077,362 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. Bond proceeds

Return Reference	Explanation
Reconciliation of Net Assets - Form 990, Part XI, Line 8	POST-RETIREMENT BENEFIT CHANGES OTHER THAN PERIODIC COSTS \$1,199,741 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 395,146 ALLOWANCE FOR UNCOLLECTIBLE CONTRIBUTIONS 0TOTAL \$1,594,887 ===================================

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(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" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493113004025 OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

22-1487354

Part I Identification of Disregarded Entities Complete	ıf the organızatıon a	answered "Yes" on	ı Form 990, Pa	irt IV, line 33.				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Di	(f) rect controlling entity		
							,	
Part II Identification of Related Tax-Exempt Organizat or more related tax-exempt organizations during the	t ions Complete ıf t tax year.	he organization ar	nswered "Yes"	on Form 990, P	art IV, l	line 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Fublic charity (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) cor enti	512(b
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	35Y			Schedule R (Form	990) 2	013

(-)		(b)	(c)	_(d)	(e		(f)	(g)	_ (h	1)	(i)	(j)	(k)	
(a) Name, address, and EIN of related organization		Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predon Income(unrela exclude tax u section	related, ated, ed from nder s 512-	Share of total incon	Share of end-of-year assets	Disprop allocat		Code V-UBI amount in bo 20 of Schedule K- (Form 1065)	x man pari	eral or laging tner?	Percentag ownershi	p
					51	4)			Yes	No		Yes	No		_
													\vdash		
Identification of Related Orga line 34 because it had one or mo									wered	d "Yes	" on Form	990,	Part	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign		(d) t controlling entity	Type o	e)	(f) Share of total Income	Share	(g) of end-o year assets	(h of- Percer owne	itage		(i) ection 512 (b)(13) controlled entity?	
Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of related organization L) Castle Point Holdings Inc ne Castle Point on hudson oboken, NJ 07030	(b)	(c) Legal domicile (state or foi	e reign	Dire	(d) t controlling	Type o	e) of entity , S corp,	(f) Share of total	Share	of end-o year	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity?	
Name, address, and EIN of related organization L) Castle Point Holdings Inc ne Castle Point on hudson oboken, NJ 07030	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of related organization 1) Castle Point Holdings Inc ne Castle Point on hudson oboken, NJ 07030	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of related organization 1) Castle Point Holdings Inc ne Castle Point on hudson oboken, NJ 07030	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of related organization 1) Castle Point Holdings Inc ne Castle Point on hudson oboken, NJ 07030	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of related organization 1) Castle Point Holdings Incura Castle Point on hudson oboken, NJ 07030	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	
Name, address, and EIN of	(b) Primary activity	(c) Legal domicile (state or foi country)	e reign	Dire	(d) t controlling entity	Type of (C corp	e) of entity , S corp,	(f) Share of total income	Share	of end-o year issets	of- Percer owne	tage ship		ection 512 (b)(13) controlled entity? Yes No	

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

Yes

1 During the tax year	, did the orgranization engage in any of the following transactions with one or more	related organizations li	isted in Parts II-IV?					
a Receipt of (i) int	erest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b Gift, grant, or ca	pital contribution to related organization(s)				1b		No	
c Gıft, grant, or ca	pital contribution from related organization(s)				1c		No	
d Loans or loan gu	arantees to or for related organization(s)				1d	Yes		
e Loans or loan gu	arantees by related organization(s)				1e		No	
	elated organization(s)				1f			
_	related organization(s)				1g		No	
	ets from related organization(s)				1h		No	
	ets with related organization(s)				1i		No	
j Lease of facilities	s, equipment, or other assets to related organization(s)				1j		No	
In 1					1k		No	
	s, equipment, or other assets from related organization(s)				11		No	
Performance of services or membership or fundraising solicitations for related organization(s)								
	ervices or membership or fundraising solicitations by related organization(s)				1m		No No	
	es, equipment, mailing lists, or other assets with related organization(s)				1n			
• Sharing of paid e	employees with related organization(s)				10		No	
- Daymah					10		No.	
•	paid to related organization(s) for expenses				1p 1q		No	
q Reimbursement	paid by related organization(s) for expenses				14			
r Other transfer of	cash or property to related organization(s)				1r		No	
	cash or property from related organization(s)				1s		No	
2 If the answer to a	any of the above is "Yes," see the instructions for information on who must comple		T					
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	ivolved		
1) Castle Point Holdings In		D	13,218	FMV				
			1					

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(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 sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013