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DLN: 93493027009346

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)

ightharpoonup Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

Open to Public Inspection

A Fo	rthe 2	2014 ca	lendar year, or tax year beginning	g 07-01-2014 ,and ending 06-30-20	15			
B Che	ck if ap	pplicable	C Name of organization STEVENS INSTITUTE OF TECHNOLOG	SY		D Emplo	yer ide	ntification number
☐ Add	ress ch	ange	% LOUIS MAYER EDD			22-14	8735	4
∏ Nar	ne chai	nge	Doing business as					
┌ Init	ıal retui	m				E Telepho	one num	hhar
_ Fina			Number and street (or P O box if m 1 Castle Point On Hudson	all is not delivered to street address) Room/	suite			
retu	ırn/tern	nınated	1 Castle Point on Hudson			(201)	216-8	3761
	ended i dication	return ı pending	City or town, state or province, cour Hoboken, NJ 07030	ntry, and ZIP or foreign postal code		G Gross r	eceıpts	\$ 466,631,247
,		,	F Name and address of prin	acinal officer	1 >			_
			Nariman Farvardin	icipal officer		Is this a group subordinates?	returr	ı for ┌ Yes
			1 Castle Point On Hudson			o a bora mateo		, 100, 110
			Hoboken, NJ 07030			Are all subordi	nates	Γ Y es Γ No
T Ta:	k-exem	npt status		insert no)		included? If "No." attach	a list	(see instructions)
			w stevens edu	, , , , , , , , , , , , , , , , , , , ,				
					1(-)	Group exempt		mber 🟲
	_		Corporation Trust Associatio	n Other ►	L Yea	r of formation 18	70 M	State of legal domicile NJ
Pa	rt I	Sun	nmary					
			describe the organization's mission					ddala .m. mmat af
			anization's primary exempt purpo aduate, masters and doctorate de	se is to provide educational is to pro egrees and to conduct research	vide educa	itional service	s to in	dividuals in pursuit of
<u>ိ</u>	_							
Œ	-							
Activities & Governance	-	Chaak t	bio boy b C if the eventuation di	- continued its constitute or dispose	l of more ti	han 2 E0/ of the		a a a ta
9	2 (спеск	nis box 🖣 If the organization dis	scontinued its operations or disposed	i or more ti	nan 25% orits	net as	ssets
xő .	3 1	Number	of voting members of the govern	ing body (Part VI, line 1a)			з	26
<u>8</u>				of the governing body (Part VI, line 1			4	20
Ĕ				calendar year 2014 (Part V, line 2a)			5	3,218
Ą				ecessary)			6	218
-				art VIII, column (C), line 12			7a	116,034
				rom Form 990-T, line 34			7b	-4,478
				·		Prior Year	<u>' </u>	Current Year
	8	Contr	butions and grants (Part VIII, li	ne 1h)		17,560,	864	25,805,184
₽	9			ne 2g)		233,795,	-	262,172,197
Rayenue	10			(A), lines 3, 4, and 7d)		11,072,		13,122,901
걆	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		4,311,	-	4,474,371
	12	Total	revenue—add lines 8 through 11	(must equal Part VIII, column (A), li	ne			
				<u> </u>		266,740,	-	305,574,653
	13			IX, column (A), lines 1-3)		52,663,		63,568,371
	14			X, column (A), line 4)			0	0
ø	15	Salar 5-10		e benefits (Part IX, column (A), lines	•	111,165,	761	123,644,401
Expenses	16a		•	column (A), line 11e)			0	0
<u>क</u>			undraising expenses (Part IX, column (D)		·			
ŭ	Ь							
	17			ines 11a-11d, 11f-24e)		76,480,		84,428,118
	18			st equal Part IX, column (A), line 25)		240,309,		271,640,890
	19	Kevei	nue less expenses. Subtract line	18 from line 12		26,431,		33,933,763
Net Assets or Fund Balances					Begi	inning of Curre Year	nt	End of Year
20 CE	20	Total	assets (Part X, line 16)			360,519,	023	381,928,126
A B	21		liabilities (Part X, line 26)			118,176,		118,203,122
žĒ	22			line 21 from line 20		242,342,		263,725,004
Pai	t II		nature Block					
my kr	rowled	dge and		amined this return, including accompanded in the properties of the				
		***	***			2016-01-26		
Sign		IB	nature of officer			Date		
Here		Mar	y S Wheeler Avp of Finance					
			e or print name and title					
			Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	1400
Paid	i		SCOTT THOMPSETT Firm's name	SCOTT THOMPSETT		self-employed Firm's EIN	P0074	1430
Pre	pare		TIIII S HAINE F GRAINT THURINTUN LLP			I IIIII S EIIN F		
	Onl		Firm's address 🟲 757 THIRD AVE 4TH FL	OOR		Phone no (212) 599-0	100
			NEW YORK, NY 10017	2013				

orm	n 990 (2014) Pag
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
OFFI SCIE MAS HE BRO WHI EC RESI	VENS INSTITUTE OF TECHNOLOGY WAS FOUNDED IN 1870 THE INSTITUTE IS A NON-PROFIT RESEARCH UNIVERSITY ERING MORE THAN 30 UNDERGRADUATE MAJORS INCLUDING PROGRAMS IN ENGINEERING, THE SCIENCES, COMPUTER ENCE, BUSINESS, AND THE HUMANITIES, AND GRADUATE LEVEL COURSES IN A RANGE OF DISCIPLINES LEADING TO THE TERS AND PHD DEGREES ACADEMIC RESEARCH IS CARRIED OUT AT EVERY LEVEL OF THE INSTITUTE THE MISSION OF INSTITUTE IS ACCOMPLISHED BY THE ACHIEVEMENT OF THE FOLLOWING CORE GOALS PROVIDING STUDENTS WITH A AD-BASED, MULTIDISCIPLINARY LEARNING EXPERIENCE IN THE SCIENCES, ENGINEERING, BUSINESS AND LIBERAL ARTS LE STRESSING THE FUNDAMENTAL CONCEPTS, TECHNIQUES AND ATTITUDES THAT UNDERLIE DIFFERENT BRANCHES OF HNOLOGY, PROMOTING THE PERSONAL DEVELOPMENT OF THE STUDENT, DEMONSTRATED BY A SENSE OF ETHICAL PONSIBILITY, AWARENESS OF THE SOCIETAL IMPACT OF THEIR PROFESSIONS, DEVELOPMENT OF LEADERSHIP AND TEALS, AND A LOVE OF LEARNING, CREATING KNOWLEDGE THROUGH WORLD-
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 189,775,168 including grants of \$ 63,568,371) (Revenue \$ 204,273,068)
	Educational Instruction In the academic year 2014-2015, Stevens' enrollment was 2892 undergraduate students and 3572 graduate students 532 students graduated with bachelor of engineering, science or arts degrees, 1346 students received master's in engineering, science, business administration or arts 55 PHI degrees were also conferred. In addition, Stevens collaborated with numerous domestic and international universities and other educational programs to provide courses and training to international students. Stevens emphasizes innovation and teaches entrepreneurship throughout its curriculum with the aim of enabling the integration of technological and market knowledge.
4b	(Code) (Expenses \$ 25,189,719 including grants of \$) (Revenue \$ 28,275,834)
	Student Life Stevens Institute maintains a 55 acre campus in Hoboken, New Jersey and provides students with on campus and off campus housing as well as several dining facilities. Close interactions between professors and students allow for greater academic and social development. There are over 120 clubs, organizations and varsity sports that offer the students ample opportunity to participate, broaden and enrich their student life. The S.C. Williams library serves as Institute's intellectual, cultural and social center capitalizing on a resourceful staff and new technologies to foster a stimulating environment for teaching, learning and scientific discovery.
4c	(Code) (Expenses \$ 25,739,187 including grants of \$) (Revenue \$ 29,623,295)
	Research The research enterprise includes academic research, national research centers and cross-disciplinary research initiatives with affiliated organizations ar infrastructure. Creative and entrepreneural research is an integral part of the Stevens Mission. The Institute has been recognized by both the U.S. Department of Defense and the Department of Homeland Security as a national center of excellence in the areas of systems engineering, port security and information assurance.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 240,704,074

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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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
С	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		Νο
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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 $\ \ \ \ \ \ \ \ \ \ \ \ \ $	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	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
	Estable sombar assistat a Rev 2 of Farm 1006 Fator 0 of automates the contract of the contract		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 312 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
J	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
_	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			<u></u>
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. 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			
C	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

See med detronor									
Check if Schedule O contains a response or note to any line in this Part VI	_			_	_	_	_	_	Ī

Se	ction A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	26			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		Νo
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management cor			3	Yes	
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	ation's assets? .	5		No	
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ction B. Policies (This Section B requests information about policies not i	requi	red by the Internal R	evenu	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its the form?	s gov	erning body before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 $$.			12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	12c	Yes	
13	Did the organization have a written whistleblower policy?			13	Yes	
14	Did the organization have a written document retention and destruction policy? $$.			14	Yes	
15	Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the					
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other officers or key employees of the organization \ldots . \ldots . \ldots			15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	rsım •	ılar arrangement with a	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	step	s to safeguard the	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply own website. Another's website. Upon request. Other (explain in Schedule O)
 - 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, address, and telephone number of the person who possesses the organization's books and records ►LOUIS MAYER EDD

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
--	-----------------------	---------------------------------------	--	---	-----	------------------

Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t	han d n is l	ne l both	box, an d	officer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	7,755,016	0	757,262

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►259

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Sodexo Operations, PO Box 360170 PITTSBURGH, PA 152516170	Food Service Mgmt	9,435,905
Vandis Inc, 1 Albertson Ave Suite 1 ALBERTSON, NY 11507	IT Support	3,364,230
UGL SVCS UNICCO OPERATIONS CO, 275 GROVE ST STE 3-200 AUBURNDALE, MA 02466	MAINTENANCE	2,599,981
GEORGIA TECH RESEARCH, PO BOX 100117 ATLANTA, GA 30384	RESEARCH/MONITORING	2,449,393
Workday INC, 6230 STONERIDGE MALL RD PLEASANTON, CA 94588	software/consulting	1,870,258
2 Total number of independent contractors (including but not limited to the	ose listed above) who received more than	

Form 99	90 (20	014)					Page '
Part V	700	Statement of Revenue					
		Check if Schedule O contains a respo	nse or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 20	1a	Federated campaigns 1a					
E E	ь	Membership dues 1b					
9 E	С	Fundraising events 10	221,640				
£,ĕ	d	Related organizations 1d					
ig i		Government grants (contributions) 1e					
ns,	е				ļ		
atio er	f	All other contributions, gifts, grants, and similar amounts not included above	25,583,544				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$	2,211,716	İ	į		
an Co	h	Total. Add lines 1a-1f		25,805,184			
			Business Code				
) E	2a	TUITION & FEES	611600	204,273,068	204,273,068		
Program Serwce Revenue	ь	RESEARCH REVENUE	541610	29,623,295	29,623,295		
	С	STUDENT HOUSING	611710	18,760,918	18,760,918		
	d	STUDENT DINING	611710	9,514,916	9,514,916		
	е						
	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f		262,172,197			
	3	Investment income (including divider					
		and other similar amounts)	• [2,582,255		-9,429	2,591,6
	4	Income from investment of tax-exempt bond	proceeds	12,383			12,3
	5	Royalties		12,363			12,3
	6a	(1) Real Gross rents 192,159	(II) Personal				
	ь	Less rental					
	c	expenses Rental income 192,159	0				
		or (loss)		192,159		3,150	189,0
	d	Net rental income or (loss)	, · · · · · · · · · · · · · · · · · · ·	192,139		3,130	109,0
	7a	(i) Securities Gross amount	(II) O ther				
		from sales of 170,406,629 assets other					
	Ь	than inventory Less cost or					
	"	other basis and sales expenses 159,493,826	372,157				
	С	Gain or (loss) 10,912,803	-372,157				
	d	Net gain or (loss)		10,540,646			10,540,6
	8a	Gross income from fundraising					
Other Revenue		events (not including					
₫ >		of contributions reported on line 1c)					
æ		See Part IV, line 18					
<u> </u>	ь	Less direct expenses b	94,000				
₹	c	Net income or (loss) from fundraising		-160,698			-160,6
_							
		See Part IV, line 19					
	1	a .					
	b c	Less direct expenses b Net income or (loss) from gaming act		0			
		Gross sales of inventory, less		<u> </u>			
		returns and allowances .					
		а	990,499				
	b	Less cost of goods sold b	935,253	FF 3.44			F3 3:
		Net income or (loss) from sales of inv		55,246		1,876	53,31
	11a	Miscellaneous Revenue	Business Code 900099	300,288			300,2
	l _	INSURANCE RECOVERIES	713940	217,111	121,126	95,985	300,20
	b	AQUATICS	812930	448,585	121,120		448,58
	4 C	PARKING All other revenue	312930	3,409,297		24,452	·
	d e	All other revenue Total. Add lines 11a-11d	🕨	5,703,237		27,432	3,304,0
			. -	4,375,281			
	12	Total revenue. See Instructions .	🕨	305,574,653	262,293,323	116,034	17,360,11

Part IX Statement of Functional Expenses

section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete	olumn (A
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Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	63,568,371	63,568,371		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals 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	7,771,839	4,353,013	3,418,826	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	93,374,094	82,448,472	8,687,107	2,238,515
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,142,114	3,922,088	1,083,972	136,054
9	Other employee benefits	11,825,640	9,019,869	2,492,878	312,893
10	Payroll taxes	5,530,714	4,218,488	1,165,890	146,336
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	768,753	592,140	176,613	
С	Accounting	430,493	9,103	421,390	
d	Lobbying	245,132		245,132	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	970,602	956,057	14,545	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	16,993,875	14,264,297	2,372,883	356,695
12	Advertising and promotion	756,663	318,148	438,515	
13	Office expenses	2,376,436	1,684,172	495,393	196,871
14	Information technology	7,526,156	7,425,373	84,583	16,200
15	Royalties	0			
16	Occupancy	12,605,664	12,605,664		
17	Travel	3,485,930	3,278,513	123,360	84,057
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	435,731	387,466	46,530	1,735
20	Interest	3,743,229		3,743,229	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	8,965,926	8,965,926		
23	Insurance	1,276,851	1,273,625	3,196	30
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	6,048,424	5,606,446	438,407	3,571
b	RESEARCH CONTRACTS	8,899,924	8,900,258	-334	
c	HOSPITALITY	2,735,409	2,116,581	615,150	3,678
d	RENTAL EQUIPMENT	1,874,933	1,784,434	79,296	11,203
e	All other expenses	4,287,987	3,005,570	1,169,907	112,510
25	Total functional expenses. Add lines 1 through 24e	271,640,890	240,704,074	27,316,468	3,620,348
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)				
					000 /2014

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		· ·	
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	6,461,517	1	16,269,030
	2	Savings and temporary cash investments	5,254,749	2	901,378
	3	Pledges and grants receivable, net	16,802,092	3	21,806,121
	4	Accounts receivable, net	26,903,921	4	26,136,123
	5	Loans and other receivables from current and former officers, directors, trustees, ke employees, and highest compensated employees Complete Part II of Schedule L	у	5	0
ts	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 employer and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	on s		0
Assets	7	Notes and loans receivable, net	0	7	
4	8	Inventories for sale or use	393,963	8	423,695
	9	Prepaid expenses and deferred charges	1,829,205	9	1,954,600
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 274,998,48	, ,		1,551,555
	Ь	Less accumulated depreciation		10c	139,283,423
	11	Investments—publicly traded securities	77,802,603	11	102,741,960
	12	Investments—other securities See Part IV, line 11	84,645,868	12	64,371,999
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	11,863,722	15	8,039,797
	16	Total assets. Add lines 1 through 15 (must equal line 34)	360,519,023	16	381,928,126
	17	Accounts payable and accrued expenses	15,344,164	17	18,253,044
	18	Grants payable	0	18	0
	19	Deferred revenue	11,717,869	19	11,952,307
	20	Tax-exempt bond liabilities	73,261,013	20	70,063,972
ø	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
<u>, âu</u>	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	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			
		D	17,853,875	25	17,933,799
	26	Total liabilities. Add lines 17 through 25	118,176,921	26	118,203,122
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
<u>lan</u>	27	Unrestricted net assets	39,973,087	27	56,107,821
<u>ස</u>	28	Temporarily restricted net assets	114,951,763	28	115,314,804
Ξ	29	Permanently restricted net assets	87,417,252	29	92,302,379
r Fui		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ري ن	30	Capital stock or trust principal, or current funds		30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund		31	
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	242,342,102	33	263,725,004
_	34	Total liabilities and net assets/fund balances	360,519,023	34	381,928,126

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		305,5	574,653
2	Total expenses (must equal Part IX, column (A), line 25)	2			540,890
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		33,9	933,763
		4		242,3	342,102
5	Net unrealized gains (losses) on investments	5		-11,	195,381
6	Donated services and use of facilities	6			
7	Investment expenses	_			
_		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1.5	355,480
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			725,004
Dar	t XII Financial Statements and Reporting	10		203,7	23,004
·	Check if Schedule O contains a response or note to any line in this Part XII				. г
				Yes	No
				163	140
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th	e			
Ja	Single Audit Act and OMB Circular A-133?	_	За	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 Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation Compensated Employees, and Indo				· · · u	stc.	cs, r	(Cy			
(A) Name and Title	(B) A verage hours per week (list any hours for related	r more than one box, unless t person is both an officer s 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 trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 11130/	2/1033 11130)	related organizations
(1) Virginia P Ruesterholz Chairman/Trustee	3 0	х		х				0	0	0
(1) Stephen T Boswell	1 0	x		х				0	0	0
Vice Chairman/Trustee (2) Thomas A Corcoran	0 0	X		X				0	0	0
Vice Chairman/Trustee (3) Richard R Roscitt	0 0	^								
Vice Chairman/Trustee	0 0	Х		Х				0	0	0
(4) John A Schepisi Vice Chairman/Trustee	1 0	×		х				0	0	0
(5) Kendra L Appleheimer	1 0	х						0	0	0
Trustee To 10/30/14 (6) Lawrence T Babbio Jr	1 0	×						0	0	0
Trustee (7) Anthony Barrese	0 0 55 0							101 120	0	24 772
Trustee/Assoc Dean To 5/19/15 (8) Alan F Blumberg	0 0	X						181,139	0	31,772
Trustee/Professor	0 0	х						288,457	0	27,463
(9) Michael F Cahill Trustee	0 0	×						0	0	0
(10) Philip P Crowley Trustee	1 0	х						0	0	0
(11) John R Dearborn	1 0	х						0	0	0
Trustee (12) Joseph G DiPompeo	0 0	X						0	0	0
Trustee (13) Steven M Feller	0 0							0		
Trustee	0 0	Х						0	0	0
(14) Emilio A Fernandez Trustee	1 0	×						0	0	0
(15) Joseph J Garvey Trustee To 5/19/15	1 0	х						0	0	0
(16) Samantha S George	1 0	x						0	0	0
Trustee (17) Larry B Giannechini	0 0	X						0	0	0
Trustee To 10/30/14 (18) John Sean J Hanlon IV	0 0	^								
Trustee (10) On the land	0 0	Х						0	0	0
(19) Owen Jappen Trustee	1 0	x						0	0	0
(20) Rainer Martini Trustee/Professor	55 0	х						148,501	0	25,528
(21) Linda M Mascolo	1 0	Х						0	0	0
Trustee (22) Thomas J Moschello	0 0									
Trustee (23) Spyros Polemis	0 0	X						0	0	0
Trustee	0 0	х						0	0	0
(24) Annmarie Rizzo Trustee	1 0	x						0	0	0
	•	-				•	•		-	-

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-M13C)	2/1099-M13C)	organization and related organizations
(26) Ronald E Salluzzo	1 0	х						0	0	0
Trustee/Interim VP Finance	0 0							, in the second	, in the second	
(1) Thomas H Scholl	1 0	x						0	0	0
Trustee (2) Frank J Semcer	1 0									
Trustee	0 0	X						0	0	0
(3) Henrik C Slipsager	1 0	x						0	0	0
Trustee	0 0							Ŭ.	Ů	
(4) J Scott Swensen	1 0	x						0	0	0
Trustee (5) Narıman Farvardın	0 0 55 0									
President	0 0			х				789,543	0	24,415
(6) Diana Colombo Exec Asst/Asst Sec To 12/31/14	55 0			х				93,044	0	23,310
(7) Randy Greene	55 0			х				412,556	0	32,090
VP FINANCE/TREAS To 1/31/15 (8) Beth Libow LeFante	0 0 55 0									
Asst GENERAL COUNSEL/Asst Sec	0 0			Х				117,870	0	14,529
(9) Louis Mayer	55 0			,,					_	
VP FINANCE/TREAS Start 3/16/15 (10) Helen Oberle	0 0			X				0	0	0
Exec Asst/Asst Sec	0 0			х				49,498	0	13,675
(11) Kathy L Schulz	55 0			Х				328,772	0	29,502
VP, GENERAL COUNSEL/Secretary (12) Elizabeth Shelton	0 0 55 0									
AVP Investments/Assist Treas	0 0			Х				187,492	0	17,015
(13) Mary Wheeler	55 0			х				200,112	0	32,350
AVP Finance/Assist Treas (14) Michael Bruno	0 0 55 0							,		,
Dean	0 0				Х			380,456	0	37,232
(15) Mohammad Dehghani	55 0				х			399,864	0	23,400
Vice Provost (16) David Dodd	55 0									
VP FOR INFO TECHNOLOGY	0 0				Х			233,856	0	35,536
(17) George Korfiatis	55 0				х			555,823	0	40,632
PROVOST (18) Robert Maffia	0 0 55 0									
VP FOR FACILITIES	0 0				х			257,456	0	41,146
(19) MaryBeth Murphy	55 0									
VP ENROLLMENT MANAGEMENT	0 0				Х			251,723	0	32,678
(20) Gregory Prastacos DEAN	55 0				х			367,989	0	44,196
(21) Mark Samolewicz	55 0				х			164,460	0	29,339
VP FOR HUMAN RESOURCES (22) Dinesh Verma	0 0							107,700		27,337
DEAN	0 0				Х			438,785	0	40,338
(23) William Rouse	55 0					х		360,500	0	21,350
PROFESSOR (24) Alexei Miasnikov	0 0 55 0						-			
PROFESSOR	0 0					х		321,000	0	30,121

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 (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(51) Ralph G Giffin III VICE PROVOST	55 0					×		310,954	0	17,573
(1) Constantin Chassapis VICE PROVOST	55 0					х		305,602	0	41,638
(2) Christos Christodoulatos ASSOC PROVOST	55 0 0 0					х		282,537	0	13,318
(3) Charles T Koeller Trustee/Assoc Dean To 5/21/14	40 0						х	174,692	0	17,332
(4) Edward C Eichhorn FORMER KEY (LEFT 6/30/2014)	55 0						х	152,335	0	19,784

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SCHEDULE A

(Form 990 or 990EZ)

Internal Revenue Service

Name of the organization

Department of the

Treasury

Total

As Filed Data -

DLN: 93493027009346

Employer identification number

OMB No 1545-0047

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.

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

Open to Public Inspection

SIEVE	INS INS	SITIUTE OF TECHNOLOGY				22-1487354	
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	tions must complete this		ons.
					through 11, check only one b		
1	Г	A church, convention	of churches, o	r association of churc	hes described in section 170(b)(1)(A)(i).	
2	~	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)		
3					described in section 170(b)(1)(A)(iii).	
4	Γ	A medical research or hospital's name, city,	ganızatıon ope and state	erated in conjunction v	vith a hospital described in se	ction 170(b)(1)(A)(ii	<u> </u>
5	Г	An organization opera	ted for the ber	iefit of a college or uni	versity owned or operated by	a governmental unit d	escribed in
		section 170(b)(1)(A)	(iv). (Complet	e Part II)			
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in section 170(b)(1)(A)(v).	
7	_	described in section 1	70(b)(1)(A)(v	/i). (Complete Part II		ental unit or from the q	general public
8	<u> </u>	A community trust de					
9	ı				1/3% of its support from contr		
		·		·	ubject to certain exceptions,		
		· · · · · · · · · · · · · · · · · · ·			usiness taxable income (less	•	n businesses
				·	tion 509(a)(2). (Complete Pa	•	
10		An organization organ	ized and opera	ited exclusively to tes	t for public safety See sectio	n 509(a)(4).	
11	Γ	one or more publicly s	upported orga	nızatıons described ın	e benefit of, to perform the fun section 509(a)(1) or section of supporting organization and	509(a)(2) See sectio	on 509(a)(3). Check
а	Γ		n(s) the power	to regularly appoint o	r controlled by its supported or r elect a majority of the direct B.		
b	Γ	Type II. A supporting	organization s pporting organ	upervised or controlle	d in connection with its supposame persons that control or		
С	Γ	Type III functionally	integrated. A	supporting organizatio	n operated in connection with mplete Part IV, Sections A, D		grated with, its
d	Γ	not functionally integr	ated The orga	inization generally mu	zation operated in connection st satisfy a distribution requir		
e	Γ	(see instructions) Yo Check this box if the contegrated, or Type III	organization re	ceived a written deter	mination from the IRS that it	ıs a Type I, Type II, T	ype III functionally
f		· , , , ,		, -			
g		Provide the following i					
	(i)N	ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the organization listed in your governing	(v) A mount of monetary support	(vi) A mount of other support (see

(described on lines

1-9 above or IRC section (see instructions))

No

(see instructions)

document?

Yes

instructions)

Schedule A (Form 990 or 990-EZ) 2014 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

	ection A. Public Support							
Cale	endar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	8,164,727	7 11,295,493	25,009,202	17,560,864	25,805,184	87,835,470	
2	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	8,164,727	11,295,493	25,009,202	17,560,864	25,805,184	87,835,470	
5	The portion of total contributions							
	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						15,401,015	
6	Public support. Subtract line 5							
	from line 4						72,434,455	
	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	beginning in) ► A mounts from line 4	8,164,727	11,295,493	25,009,202	17,560,864	25,805,184	87,835,470	
8	Gross income from interest,	-,,	,,		,,			
	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,939,696	1,860,847	4,048,925	3,759,802	2,793,076	14,402,346	
9	Net income from unrelated business activities, whether or not the business is regularly	140,432	114,350	121,928	122,501	116,034	615,245	
10	carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	2,951,916	3,288,130	5,265,887	4,934,792	5,218,877	21,659,602	
11	Total support Add lines 7						124,512,663	
12	through 10 L Gross receipts from related activit	les etc (see ins	L tructions)	L	L	12	859,778,195	
13	·	, ,	•	third fourth or t	fifth tax vear as a			
	13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
S	ection C. Computation of Pu							
14	Public support percentage for 201	4 (line 6, column	(f) divided by line	11, column (f))		14	58 174 %	
15	Public support percentage for 201	3 Schedule A , Pa	rt II, line 14			15	55 242 %	
16a	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported.							
b 18								

Schedule A (Form 990 or 990-EZ) 2014 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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (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 C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) 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 section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 0 %

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18 Investment income percentage from 2013 Schedule A, Part III, line 17

19a 33 1/3% support tests—2014. 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—2013. 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

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

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year						
1 A mounts paid to supported organizations to accomplish exempt purposes							
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in					
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons					
4 Amounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval rec	nured)						
6 Other distributions (describe in Part VI) See instru	JCTIONS						
7 Total annual distributions. Add lines 1 through 6							
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide					
9 Distributable amount for 2014 from Section C, line	6						
10 Line 8 amount divided by Line 9 amount							
		(::)	(:::)				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014				
1 Distributable amount for 2014 from Section C, line 6							
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)							
3 Excess distributions carryover, if any, to 2014							
a From 2009							
b From 2010							
c From 2011							
d From 2012							
e From 2013							
f Total of lines 3a through e							
g Applied to underdistributions of prior years							
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)							
j Remainder Subtract lines 3g, 3h, and 3i from 3f							
4 Distributions for 2014 from Section D, line 7 \$							
A pplied to underdistributions of prior years							
b Applied to 2014 distributable amount							
c Remainder Subtract lines 4a and 4b from 4							
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)							
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)							
7 Excess distributions carryover to 2015. Add lines 3j and 4c							
8 Breakdown of line 7							
a From 2010							
b From 2011							
c From 2012							
d From 2013							

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test	

Return Reference	Explanation
Schedule A, Part II, LINE 10 - DETAIL OF OTHER INCOME	GROSS INCOME FROM FUNDRAISING ACTIVITIES \$ 94,660

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493027009346

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its 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

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

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

	me of the organization EVENS INSTITUTE OF TECHNOLOGY				tification number
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(22-1487354 c) or is a section 527	organization.
1 2 3		ganızatıon's dırect and ındırect po		_	\$
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization mar	nagers under sectioi	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	<u> </u>	ganization is exempt unde		•	1(c)(3).
1		ended by the filing organization for			\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which to organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also amount of political contributions received that were promptly and directly delivered to a separate political organization, s separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	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 \$500,00	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	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	r-0-				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	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

Pa		nization is exempt under section 501(c)(3) and has letion under section 501(h)).	NOT				
<i></i>	•		(2	a)		(b)	
activ		below, provide in Part IV a detailed description of the lobbying	Yes	No	A	moun	ιt
1		tion attempt to influence foreign, national, state or local influence public opinion on a legislative matter or referendum,					
а	Volunteers?			Νo			
b	Paid staff or management (include coi	mpensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media advertisements?			No			
d	Mailings to members, legislators, or t	· •		Νo			
е	Publications, or published or broadcas			No			
f	Grants to other organizations for lobb	· - · ·		No			
g		taffs, government officials, or a legislative body?	Yes			24	5,132
h		nventions, speeches, lectures, or any similar means?		No			
i	Other activities?			No			
j	Total Add lines 1c through 1i		ſ	Ī		24	5,132
2a		organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax						
С		incurred by organization managers under section 4912	r	ı			
		ction 4912 tax, did it file Form 4720 for this year?					
Pai		lization is exempt under section 501(c)(4), section	501(c))(5), (or se	ctio	n
	501(c)(6).					Yes	No
1	Were substantially all (90% or more)	dues received nondeductible by members?		Г	1		
2		ise lobbying expenditures of \$2,000 or less?			2		
3	- · · · · · · · · · · · · · · · · · · ·	er lobbying and political expenditures from the prior year?		F	3		
Pai		nization is exempt under section 501(c)(4), section	501(c)(5),	or se	ctio	
		er (a) BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, assessments and similar amou		1				
2		g and political expenditures (do not include amounts of political					
а	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in section	6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	ver to the reasonable estimate of hondeductible lobbying and	4				
5	Taxable amount of lobbying and politic	cal expenditures (see instructions)	5				
P	art IV Supplemental Inform	ation					
Pro	ovide the descriptions required for Part	I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou Also, complete this part for any additional information	ıp lıst),	Part II	-A, lır	nes 1	and
	Return Reference	Explanation					
Part	hire	Stevens Institute of Technology does not directly engage in any lold divarious outside consultants to undertake lobbying activities relates sion related initiatives on its behalf					

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493027009346

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Open to Public

nal Revenue Service Information about Schedule D (Form 990) and its instructions is at <u>www.</u>	irs.gov/1	<u>orm990</u> .	Inspect	tion	
ame of the organization EVENS INSTITUTE OF TECHNOLOGY		Emp	loyer ident if icat	ion numbe	er	
EVENS INSTITUTE OF TECHNOLOGY		22-1	1487354			
art I Organizations Maintaining Donor		Funds	or Accounts.	Comple	te ıf	the
organization answered "Yes" to Form	(a) Donor advised funds		(b) Funds and o	theracco	ıntc	
Total number at end of year	(a) Donor advised funds		(b) I ulius aliu o	ther accou	11105	
Aggregate value of contributions to (during year)						_
Aggregate value of grants from (during year)						_
Aggregate value at end of year						_
Did the organization inform all donors and donor a funds are the organization's property, subject to t		onor advi	sed	┌ Yes	Г	No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the b	and donor advisors in writing that grant fun			-		
conferring impermissible private benefit?	to Cile and a large and live of		- 000 D 1 TV	☐ Yes		— 10
rt II Conservation Easements. Comple		to Form	1 990, Part IV	, line 7.		—
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreations).		an histori	cally important	land area		
Protection of natural habitat	Preservation of					
Preservation of open space	,					
Complete lines 2a through 2d if the organization heasement on the last day of the tax year	neld a qualified conservation contribution i	n the form	n of a conservat	ion		
casement on the last day of the tax year			Held at the	End of the	Year	_
Total number of conservation easements		2a				_
Total acreage restricted by conservation easeme	nts	2b				_
Number of conservation easements on a certified	historic structure included in (a)	2c				_
Number of conservation easements included in (c historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d				
Number of conservation easements modified, tran	sferred, released, extinguished, or termina	ated by th	e organızatıon d	luring		
Number of states where property subject to conse	ervation easement is located 🕨					
Does the organization have a written policy regard enforcement of the conservation easements it hol	ding the periodic monitoring, inspection, ha	andling of	violations, and	┌ Yes	Г	No
Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation eas	ements d	uring the year			
Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easeme	nts durınç	the year			
Does each conservation easement reported on lin and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of s	ection 17	'0(h)(4)(B)(ı)	┌ Yes	Г	No
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financ					
Organizations Maintaining Collec Complete if the organization answere	tions of Art, Historical Treasures	s, or Otl	ner Similar <i>I</i>	\ssets.		
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footn	assets held for public exhibition, educatio	n, or rese	arch in furthera			
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenu assets held for public exhibition, educatio	ıe statem	ent and balance		lıc	
(i) Revenue included in Form 990, Part VIII, line	1		► \$	30	0,00	0
(ii) Assets included in Form 990, Part X			<u></u>		45,40	 J 5
If the organization received or held works of art, h following amounts required to be reported under S			r → cıal gaın, provid		•	_
Revenue included in Form 990, Part VIII, line 1	-		▶ - \$			
Assets included in Form 990, Part X			F >			

Par	t IIII Organizations Maintaining Co	Ilections of Art, I	<u>listoric</u>	al Treas	sures, or Oth	<u>ier Similar As</u>	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check a	ny of the f	ollowing that are	e a significant use	of its
а	▼ Public exhibition	•	d $ egin{array}{c c c c c c c c c c c c c c c c c c c $	Loan or e	xchange prograr	ns	
b	✓ Scholarly research		е Г	Other			
c	Preservation for future generations						
4	Provide a description of the organization's c Part XIII	ollections and explain	how they	further th	e organızatıon's	exempt purpose ı	n
5	During the year, did the organization solicit						
	assets to be sold to raise funds rather than						Yes V No
Pal	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar				ion answered	res to form 9	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				s or other asset		Yes No
b	If "Yes," explain the arrangement in Part XI	I and complete the fo	llowing ta	ıble			
						Am	ount
С	Beginning balance				10		
d	Additions during the year				10	1	
e	Distributions during the year				16		
f	Ending balance				11		
2a	Did the organization include an amount on F	orm 990, Part X, line 2	1, for es	crow or cu	stodial account	liability?	Yes V No
_ь	If "Yes," explain the arrangement in Part XI	II Check here if the ex	xplanatio	n has bee	n provided in Pa	rt XIII	
Pa	rt V Endowment Funds. Complete						() 5
1a	Beginning of year balance	(a)Current year 173,055,379	(b) Prior ye 155.74	48,717	141,416,999	144,100,616	(e)Four years back 134,214,252
b	Contributions	3,683,046		34,292	5,544,879	2,197,390	335,365
c	Net investment earnings, gains, and losses	, ,	<u> </u>	,			· · · · · · · · · · · · · · · · · · ·
_		1,490,160 4,547,574		09,353 86,983	14,042,029 5,255,190	1,391,552 6,272,559	14,682,338 5,131,339
d	Grants or scholarships	4,347,374	3,20	50,963	3,233,190	6,272,339	3,131,339
e	Other expenditures for facilities and programs						
† 	Administrative expenses	173,681,011	173.0	55,379	155,748,717	141,416,999	144,100,616
g	End of year balance	· , ,				141,410,999	144,100,010
2	Provide the estimated percentage of the cur	rent year end balance 4 600 %	(line 1g,	column (a)) held as		
a	Board designated or quasi-endowment	4 000 %					
Ь	Permanent endowment ► 95 400 %						
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld agual 100%					
За	Are there endowment funds not in the posse	•	on that a	ra hald an	d administared f	or the	
Ja	organization by	ssion of the organization	on that a	ie lielu ali	u aummistereu i	or the	Yes No
	485					3a(i) Yes
	(i) unrelated organizations					3a(i	
	(ii) related organizations					34(1	ii) No
b	(ii) related organizations	ns listed as required o	n Schedi				
4	(ii) related organizations	ns listed as required one organization's endo	n Schedı wment fu	nds		3b	
4	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedı wment fu	nds		3b	
4	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedu wment fu e organi (a) 0	nds	nswered 'Yes' t	3t	
4 Par	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedu wment fu e organi (a) 0	nds zation ar	nswered 'Yes' t	TO Form 990, Pa	rt IV, line
Par	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedu wment fu e organi (a) 0	nds zation ar	(b)Cost or othe basis (other)	co Form 990, Par (c) Accumulated depreciation	rt IV, line (d) Book value 1,763,196
Par Par 1a	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedu wment fu e organi (a) 0	nds zation ar	(b)Cost or other basis (other)	co Form 990, Par (c) Accumulated depreciation	rt IV, line (d) Book value 1,763,196
1a b c	(ii) related organizations	ns listed as required one organization's endoment. Complete if the	n Schedu wment fu e organi (a) 0	nds zation ar	(b)Cost or other basis (other)	co Form 990, Par (c) Accumulated depreciation 6 108,056,956	rt IV, line (d) Book value 1,763,196 111,120,579
1a b c d	(ii) related organizations	ns listed as required one organization's endorent. Complete if the 10.	m Schedu wment fu e organi (a) C basis	nds zation ar cost or other (investment	(b)Cost or other basis (other) 1,763,19 219,177,53 37,096,65 16,961,10	3b Co Form 990, Pa Co Form 990	rt IV, line (d) Book value 1,763,196 111,120,579

See Form 990, Part X, line 12.	mpiete ir the organization a	inswered 'Yes' to Form 990, Part IV, line IID.
(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		
(A) ALTERNATIVE INVESTMENTS	40,732,843	F
(B) TRUSTS HELD BY OTHERS	3,824,876	F
(C) SPLIT INTEREST AGREEMENTS	2,853,379	F
(C) SPLIT INTEREST AGREEMENTS	2,055,579	<u> </u>
(D) OTHER	160,958	F
(E) PRIVATE EQUITY	16,799,943	F
7 1-1 (0-1 (1) 15 200 0-1 (1) (12)	► 64.371.999	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. C	0.70.27000	answered 'Yes' to Form 990 Part IV line 11c
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end of year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*	
	on answered 'Yes' to Form 990,	Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Table (Column (b) much and Form COC Both V and (B) have	· · ·	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 3 Part X Other Liabilities. Complete if the org		Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
ACCRUED POST-RETIREMENT BENEFI	5,061,655	
ANNUITIES PAYABLE CONDITIONAL ASSET RETIREMENT	1,631,739	
CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	6,032,221 5,208,184	
ALL ONDINGER ADVANCES	3,200,104	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	17,933,799	

PART XI, LINE 4B

but Not on Return

but Not on Books

Other Expenses Included on Books

Other Expenses Included on Return

Par		evenue per Audited Financial Statered 'Yes' to Form 990, Part IV, line 1		nts With Revenue p	er R	eturn Complete If
1	_	support per audited financial statements			1	230,562,946
2	• - •	not on Form 990, Part VIII, line 12	•			230,302,310
a	Net unrealized gains (losses) o		2a	-11,195,381		
b	Donated services and use of fa		2b	-11,193,301		
_			20 2c			
C				212.606		
d	,		2d	-212,606	-	11 107 007
e	Add lines 2a through 2d .				2e	-11,407,987
3					3	241,970,933
4), Part VIII, line 12, but not on line 1	l _			
а	•	ded on Form 990, Part VIII, line 7b .	4a	970,602		
Ь			4b	62,633,118		
C	Add lines 4a and 4b				4c	63,603,720
5		4c. (This must equal Form 990, Part I, line			5	305,574,653
Part		openses per Audited Financial Sta Swered 'Yes' to Form 990, Part IV, line			per	Return. Complete
1		audited financial statements			1	208,037,171
2	Amounts included on line 1 but	not on Form 990, Part IX, line 25				
а		cilities	2a			
b	Prior year adjustments		2b		1	
c	Otherlosses		2c		1	
d			2d	935,253	1	
e e	Add lines 2a through 2d				2e	935,253
3	Subtract line 2e from line 1 .				3	207,101,918
4		Part IX, line 25, but not on line 1:	• •		ب	207,101,510
a		ded on Form 990, Part VIII, line 7b	4a	970,602		
b	·		4b		1	
c				03,300,370	4c	64,538,972
5		d 4c. (This must equal Form 990, Part I, lin			5	271,640,890
	Supplemental Info		e 10)			2/1,040,890
Prov Part	ide the descriptions required for V, line 4, Part X, line 2, Part XI, mation	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				de any additional
<u></u>	Return Reference	Explanation				
Treas	ctions of Art, Historical ures - FORM 990, SCHEDULE RT III	Various Pieces of art that have been donat of visitors, faculty, staff and students	ed are	on public display for the	e enric	hment and enjoyment
	vment Funds - FORM 990, DULE D, PART V, LINE 4	The Institute's endowment fund is intende students and to provide financial assistant				
	ne Taxes - FORM 990, DULE D, PART X	The University has been classified as an of Internal Revenue Code (the "Code") and, to Section 501(a) of the Code and similar State on income that is not related to an organize the Code. The University has processes pexempt status, to identify and report unrel jurisdictions for which it has nexus, and to Management of the University believes the 2012, 2013, 2014, and 2015 are still operations.	thereforate of Nation's resent ated in reviev	re, is exempt from Feder New Jersey tax provision s tax-exempt purposes o ly in place to ensure the acome, determine its filin vother matters that may no uncertain tax positio	ral incors Fed rothe maint g and be co	ome taxes under deral law imposes tax rwise excluded under denance of its tax- tax obligations in insidered tax positions
RETU PART	Rev On Books NOT ON RN, FORM 990, SCHEDULE D, XI, LINE 2D	Post-Retirement Benefit Changes Other T Split-Interest Agreements 169,420	han Ne T	et Periodic Costs \$-382 otal \$-212,606	,026 (
	ReV ON Return NOT ON (S - FORM 990, SCHEDULE D,	SCHOLARSHIPS NET ON FINANCIAL ST 2) \$63,568,371 BOOK STORE COSTS O				

FINANCIAL STATEMENTS (\$935,253) ----- TOTAL \$62,633,118

EXPENSES ON FINANCIAL STATEMENTS (\$935,253)

Form 990, Schedule D, Part XII, Line 2d BOOKSTORE 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) \$63,568,371

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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DLN: 93493027009346

201*A*

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 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 Νo a Students' rights or privileges? 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? No_ 5g h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a h Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

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

Return Reference	Explanation
Nondiscrimination Policy - 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
Governmental Funding PART I, LINE 6A	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) (2014)

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As Filed Data -

DLN: 93493027009346

Employer identification number

SCHEDULE F (Form 990)

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.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

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

Open to Public Inspection

				22-148/354				
	r mation on Activiti 990, Part IV, line 14b		he United States. C	omplete if the organiza	ation answered			
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. De assistance outside the		ganızatıon's p	procedures for monitor	ring the use of its grant	s and other			
3 Activites per Region (T	he following Part I, line	3 table can be c	luplicated 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	e	-	Investments		26,866,741			
(2) East Asia and the Pacifi	ic		Program Services	ACADEMIC RECRUITMENT	22,105			
(3)								
(4)								
(5)								
3a Sub-total b Total from continuation to Part I	sheets				26,888,846			
c Totals (add lines 3a and					26,888,846			
For Paperwork Reduction Act No	otice, see the Instructions	for Form 990.	Cat	No 50082W Schedu	le F (Form 990) 2014			

Schedule F (Form 990) 2014

Pa				izations or Entitie ved more than \$5,0		•	9		to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	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)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

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)	V	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	∀	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Γ	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)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	অ	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 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
Schedule F, Part IV	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 in 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: 93493027009346

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

Supplemental Information Regarding

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

Open to Public Inspection

Name of the organization STEVENS INSTITUTE OF TECI	INOLOGY	-		·		Employer iden	tification number
SIEVENS INSTITUTE OF TECT	TNOLOGY					22-1487354	
Part I Fundraising Acti filers are not requi			ganızatıo	n answered "Yes" to	Form 9	990, Part IV,	line 17. Form 990-EZ
1 Indicate whether the organ	ization raised funds	through a	ny of the f	following activities Che	eck all th	at apply	
a Mail solicitations			е	Solicitation of nor	n-govern	ment grants	
b Internet and email soli	cıtatıons		f	Solicitation of gov	ernment/	grants	
c Phone solicitations			g	Special fundraisin	ig events		
d In-person solicitations	5						
2a Did the organization have a or key employees listed in							Г _{Yes} Г _{No}
b If "Yes," list the ten higher to be compensated at leas			fundraıse	rs) pursuant to agreem	ents und	er which the fu	ndraiser is
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or crol of putions?	(iv) Gross receipts from activity	(or r fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
2							
2							
3							
4							
5							
6							
7							
8							
9							
10							
			<u>▶</u>				
3 List all states in which the registration or licensing	organization is regis	tered or lı	censed to	I o solicit contributions o	r has be	en notified it is	exempt from

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut			
	(a) Event #1 (b) Event #2 Awards Gala Golf Tournament			(c) O ther events	(d) Total events (add col (a) through	
			(event type)	Golf Tournament (event type)	(total number)	col (c))
₽	1	Gross receipts	220,905	78,075	17,320	316,300
Revenue	2	Less Contributions	155,805	56,575	9,260	221,640
	3	Gross income (line 1 minus line 2)	65,100	21,500	8,060	94,660
	4	Cash prizes				
ဟ	5	Noncash prizes				
Expenses	6	Rent/facility costs		19,500		19,500
ă	7	Food and beverages .	137,431	. 525	6,875	144,831
Dregt	8	Entertainment	3,345	5		3,345
à	9	Other direct expenses .	83,170	2,637	1,875	87,682
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(255,358)
	11	Net income summary Subtract lii	ne 10 from line 3, columr	ı (d)	•	-160,698
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, lir	(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				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	│ Yes	☐ Yes	│ Yes %	
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)		
9	Ent	er the state(s) in which the organiza	ition conducts gaming ac	tivities		
a b		the organization licensed to conduct No," explain				. Fyes FNo
10a b		re any of the organization's gaming Yes," explain	icenses revoked, susper	nded or terminated during		

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3						
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity								
	formed to administer charitable gaming	,,		Г _{Yes} Г	— No						
13	Indicate the percentage of gaming acti		1 1	,							
а	The organization's facility		13a		%						
b	An outside facility				%						
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records								
	Name ▶										
	Address ►										
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming								
154				┌ Yes 「	– _{No}						
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the								
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										
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to								
	retain the state gaming license?			Γ _{Yes} [Γ _{No}						
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent								
	ın the organization's own exempt activi		·								
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr								
	Return Reference		Explanation								

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493027009346 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

Part III Grants and Other Assistance to Domestic Individuals. 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
(1) Scholarships and Grants	2792	63,568,371			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.						
Return Reference	Explanation					
U S 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 systemgenerated reports					

Schedule I (Form 990) 2014

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DLN: 93493027009346

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ 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**

|-- - ---

			22-148/354			
Pa	rt I Questions Regarding Compensation	<u>on</u>				
					Yes	No
1a	Check the appropriate box(es) if the organization pre 990, Part VII, Section A, line 1a Complete Part II		ny of the following to or for a person listed in Form ide any relevant information regarding these items			
	▼ First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u>~</u>	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses of			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exc			2	Yes	
3	Indicate which, if any, of the following the filing org organization's CEO/Executive Director Check all used by a related organization to establish comper	that apply				
	▼ Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a		No
b	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b		No
С						
	If "Yes" to any of lines 4a-c, list the persons and p					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz	ations mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section of compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section of compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section apayments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII,					
		ın Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow to section 53 4958-6(c)?	he rebutta	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation			column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part IIII 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

Also complete this part for any additional information						
Return Reference	Explanation					
Compensation Information PART I, LINE 1	the Stevens Institute of Technology guidelines regarding first class/business class travel and spousal travel are included in the Stevens Business and Travel Expense Policy Expenses incurred for accompanying companions/spouses are considered personal in nature except on 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 essential (not just beneficial) to the employee being able to carry out the business purpose for the University Given that attendance is essential, this is not taxable to the employee Campus housing is provided for the University President and is used for program and development purposes. There is one instance in which a club membership is in the name of an individual due to club imposed membership rules. This membership is solely for business purposes to foster relationships within the New York metropolitan area for the University.					
Incentive Compensation, PART I, LINE 7	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 decisions regarding incentive compensation will be subject to the Board of Trustees and others' determinations as to the financial results of the University and other factors not specified in the plan. Incentive compensation for faculty, staff and administration are recommended by managerial staff, are approved by the President and are within parameters established by the Board of Trustees. Incentive compensation for executive leaders is recommended by the Human Resources and Compensation Committee of the Board of Trustees and approved by the full Board of Trustees as part of its consideration of this group (and as further described in Schedule O.). Each year, the Board of Trustees will approve a set of annual incentive performance measures for the executive leaders and will review with the President the process for determining them for each other group or sub-group of employees.					

Schedule J (Form 990) 2014

Software ID: Software Version:

EIN: 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

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

(A) Name and Title		of W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(A) Name and Title	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
Anthony Barrese, Trustee/Assoc Dean To 5/19/15	(1) 181,13		0	17,971 0	13,801 0	212,911 0	0
Alan F Blumberg, Trustee/Professor	(I) 283,45 (II)	7 0 5,000 0	0	21,361 0	6,102 0	315,920 0	0
Rainer Martini, Trustee/Professor	(I) 148,50 (II)	1 0	0	9,2 4 9 0	16,279 0	174,029 0	0
Narıman Farvardın, President	(I) 662,40	5 0 117,275 0 0	9,863 0	23,400	1,015	813,958 0	0
Randy Greene, VP FINANCE/TREAS To 1/31/15	(I) 412,55	6 0	0	26,000 0	6,090 0	444,646 0	0
Kathy L Schulz, VP, GENERAL COUNSEL/Secretary	(I) 322,77	2 0 6,000 0	0	23,400 0	6,102 0	358,274 0	0
Elizabeth Shelton, AVP Investments/Assist Treas	(I) 187,49	2 0	0	17,015	0	204,507	0
Mary Wheeler, AVP Finance/Assist Treas	(I) 200,11	2 0	0	18,518	13,832	232,462	0
Michael Bruno, Dean	(I) 376,45	6 4,000 0 0	0	23,400	13,832	417,688 0	0
Mohammad Dehghanı, Vice Provost	(I) 371,38	4 4,000 0 0	24,480 0	0	23,400	423,264 0	0
David Dodd, VP FOR INFO TECHNOLOGY	(I) 233,85 (II)	6 0	0	21,735 0	13,801	269,392 0	0
George Korfiatis, PROVOST	(I) 532,84 (II)	0 0 10,000 0 0	12,983 0	24,400 0	16,232 0	596,455 0	0
Robert Maffia, VP FOR FACILITIES	(I) 252,45 (II)	6 0 5,000 0	0	22,950 0	18,196 0	298,602 0	0
MaryBeth Murphy, VP ENROLLMENT MANAGEMENT	(I) 245,72 (II)	3 0 6,000 0	0	22,815 0	9,863 0	284,401 0	0
Gregory Prastacos, DEAN	(I) 355,98 (II)	9 6,000	6,000 0	26,000 0	18,196 0	412,185 0	0
Mark Samolewicz, VP FOR HUMAN RESOURCES	(I) 164,46 (II)	0 0		15,507 0	13,832 0		0
Dinesh Verma, DEAN	(I) 438,78	5 0	-	22,100 0	18,238 0	479,123 0	0
William Rouse, PROFESSOR	(I) 360,50 (II)	0 0	-	21,350 0	0	381,850 0	0
Alexei Miasnikov, PROFESSOR	(I) 316,00 (II)	0 5,000 0 0	0	16,289 0	13,832 0	351,121 0	0
Ralph G Giffin III, VICE PROVOST	(I) 307,45	3,500 0		17,573 0	0	· '	0

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

(A) Name and Title		(B) Breakdown of	of W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
Constantin Chassapis, VICE PROVOST	(I) (II)		4,000	0	23,400	18,238	347,240	0
Christos Christodoulatos, ASSOC PROVOST	(ı) (ıı)	·	3,500 0	13,318 0	13,318 0	0	295,855	0
Edward C Eichhorn, FORMER KEY (LEFT 6/30/2014)	(ı) (ıı)	152,335	0	0	12,884 0	6,900 0	172,119	0
Charles T Koeller, Trustee/Assoc Dean To 5/21/14	(I) (II)		0	0	11,230	6,102 0	192,024	0

DLN: 93493027009346

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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

Inspection

Nar	rnal Revenue Service ne of the organization EVENS INSTITUTE OF TECHNO	LOGY								Emp	oloyer id	entifica		mber		
										22	-14873	54				
P	art I Bond Issues (a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(f)	Description	on of purpose	(g) De	feased	beh	On alf of suer		Pool	
										Yes	No	Yes	No	Yes	No	
A	NJ EDU FAC AUTH STEVENS ISSUE 2007	22-1829511	646065LP5	08-02-2007	71,633	3,268	Refund	ling of Pric	rIssues		Х		Х		Х	
В	NJ EDU FAC AUTH CAPITAL IMP 2005 a	22-1829511	60605LWWX	08-10-2005	792	2,706	Refunding of Prior Issues			Х		Х		Х		
c	NJ EDU FAC AUTH CAPITAL IMP 2006 A	22-1829511	64605LZ43	10-26-2006	133	3,640	Refund	efunding of Prior Issues			Х		Х		Х	
D	NJ EDU AUTH DORM SAFETY 2003 A	22-1829511	64605NBU7	01-15-2004	244			nance Dorm Safety mprovements			х		Х		Х	
P	art III Proceeds						<u> </u>			l	<u> </u>		<u> </u>	l	<u> </u>	
					А				В		С			D		
1	Amount of bonds retired					7,010	,000		0			0			198,500	
_2		ased					0		0			0			0	
3					8	5,725	,356	0					0		(
4						5,776	,701		0			0			0	
5							0		0			0			0	
6	Proceeds in refunding escrows				6	6,517	,119		0			0			0	
7	Issuance costs from proceeds	s				1,535	,969		0			0			0	
8	Credit enhancement from prod						0		0			0			0	
9	Working capital expenditures	from proceeds					0		0			0			0	
10		ceeds					0		0			0			0	
11	Other spent proceeds						0		0			0			0	
12	Other unspent proceeds						0		0			0			0	
13	Year of substantial completion	n			200	9		20	05	2	006			2004		
					Yes	No	,	Yes	No	Yes	N	ю	Yes		No	
14	Were the bonds issued as par	t of a current refund	ing issue?			Х			Х		>	(Х	
15	Were the bonds issued as par	t of an advance refu	nding issue?		X				x		 	·			X	
16	Has the final allocation of pro	ceeds been made?			Х			Х		Х			Х			
17					Х			Х		X			Х			
Pa	art IIII Private Business L	Jse														

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

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

Schedule K (Form 990) 2014

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

Part V Procedures To Undertake Corrective Action

	Α	A			C		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?	×		х		×		×	

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

Return Reference Explanation 1 BOND ISSUE A - COLUMN (F) This issue advance refunded all of the outstanding principal amount of the Revenue Bonds, Stevens Institute of Technology issue, 2004 Series B issued on July 1, 2004 by the New Jersey Educational Facilities Authority ("NJEFA"), all of the Revenue Bonds, 2002 Series C issued by NJEFA on December 1, 2002 and a portion of the revenue bonds, Stevens Institute of Technology issue, 1998 Series I issued by NJEFA on August 25, 1998 The refunded bonds financed capital improvements for the University 2 BOND ISSUE B - COLUMNS (E) AND (F) These bonds were issued in the par amount of \$15,077,352 to refund a portion of the NJEFA Capital Improvement Fund (CIF) issues, Series 2000 A, Series 2000 B and Series 2002 A CIF bonds were issued pursuant to a legislative program to finance capital improvements for New Jersey colleges and universities. Eleven colleges received grants from the 2000 A, 2000 B and 2002 A bonds. Stevens received grants only from the 2000 A and 2000 B bonds. The refunded bonds and the series 2005 A refunding bonds (bond Issue B) are repayable in part by state appropriations. The issue price shown on Schedule K for the series 2005 A bonds is the approximate amount of the issue price allocable to the Institute 3 BOND ISSUE C - COLUMNS (E) AND NJ EDU FAC AUTH STEVENS ISSUE (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 2007 2000 B. Series 2002 A and Series 2004 A. The 2000 A. 2000 B. 2002 A and 2004 A bonds were issued on July 1, 2000. December 30, 2000. November 21, 2002 and March 14, 2004 respectively. At least eleven colleges received grants from these bonds. Stevens received grants only from 2000 A and 2000 B. The refunded bonds and the Series 2006 A refunding bonds (bond issue C) are repayable in part by state appropriations. The issue price shown on the Schedule K for the refunding 2006 A bonds is the approximate amount of the issue price allocable to the Institute 4 BOND ISSUE D

\$4,500,000 which requires that the Institute pay one fourth (25%) of debt service of the underlying bonds

COLUMNS (E) AND (F) These bonds were issued pursuant to a legislatively created state-backed program to finance safety improvements for dormitory facilities. The bonds are repayable in part by state appropriations. Bond proceeds were issued as a single issue of \$5,440,000 which was lent in varying amounts to 12 of the private colleges located in New Jersey. The Institute received a loan of \$243,500. The issue price shown on Schedule K is the approximate amount of the \$5,523,846 05 issue price for the entire bond issue which is allocable to the loan made to the Institute single issuance which was granted in varying amounts to 6 of the private colleges located in New Jersey. The institute entered into lease agreements with NJEFA for a total of

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

For Paperwork Reduction Act Notice, see the Instructions for 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.

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

OMB No 1545-0047

Schedule K (Form 990) 2014

DLN: 93493027009346

Open to Public **Inspection**

Name of the organization

Part I Bond Issues

(Form 990)

Department of the Treasury

Internal Revenue Service

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number 22-1487354

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue pric	e (f)) Description	n of purpose	(g) Def		beha Iss	On alf of uer	finai	Pool ncing
									Yes	No	Yes	No	Yes	No
	NJ EDU FAC AUTH ELF ISSUE SERIES 2014B	22-1829511	6460658J4	01-30-2014	8,131,4	97 FINAN	NCE IT INFF	RASTRUCTURE		Х		×	X	
Pa	rt III Proceeds													
					Α			В		С			D	
1	A mount of bonds retired	<u> </u>				0								
2	A mount of bonds legally defe	eased ————————————————————————————————————				0								
3	Total proceeds of issue				8	,131,497	-							
4	Gross proceeds in reserve fu					572,098								
5	Capitalized interest from pro					0								
6	Proceeds in refunding escrov					0								
7	Issuance costs from proceed					54,772								
8	Credit enhancement from pro					0								
9	Working capital expenditures	<u> </u>				0								
10	Capital expenditures from pr	oceeds			3	,927,902								
11	O ther spent proceeds					0								
12	O ther unspent proceeds					0								
13	Year of substantial completion	on			_		_							
					Yes	No	Yes	No	Yes	<u> </u>	ю	Yes		No
14	Were the bonds issued as pa	ort of a current refund	ding issue?			Χ								
15	Were the bonds issued as pa	irt of an advance ref	ındıng ıssue?			X								
16	Has the final allocation of pro	oceeds been made?				Х								
17	Does the organization mainta allocation of proceeds?	aın adequate books	and records to sup	port the final	Х									
Par	Private Business	Use												
					A Van	No		B		C		V	D	N-
1	Was the organization a partn property financed by tax-exe		or a member of an l	LC, which owned	Yes	No X	Yes	No	Yes		lo	Yes		No
2	Are there any lease arranger financed property?	•	lt ın prıvate busıne	ss use of bond-		Х								

Cat No 50193E

Sche	dule K (Form 990) 2014									Page 2	
Par	Private Business Use (Continued)						•				
				Α		B		C		D	
2-	Are there any management or service contracts that may result in private	husiness usel	Yes	No	Yes	No	Yes	No	Yes	No	
3a	of bond-financed property?	business use		Х							
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?										
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance										
4	Enter the percentage of financed property used in a private business use bother than a section 501(c)(3) organization or a state or local government			0 %						•	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 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 t nongovernmental person other than a 501(c)(3) organization since the bor issued?			х							
ь	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 1 141-12 and 1 145-2?	sections		×							
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х								
Pai	t IV Arbitrage							•			
		Α			В		С		D	<u> </u>	
		Yes	No	Yes	No	<u>, </u>	res	No	Yes	No	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X								
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?		Х								
ь	Exception to rebate?		Х								
С	No rebate due?	×									
	If "Yes" to 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	0									
С	Term of hedge										
d	Was the hedge superintegrated?										
e	Was the hedge terminated?										
		1									

Return Reference

		Α .		В		С		D	
		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?	x							

Part V Procedures To Undertake Corrective Action

	A		В		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 Information. Provide additional information for responses to questions on Schedule K (see instructions).

	= ;-
NJ EDU FAC AUTH ELF ISSUE, SERIES 2014B	BOND ISSUE A - COLUMN (A) These bonds were issued pursuant to a legislatively created state-backed program, Higher Education Equipment Leasing Fund, to finance capital improvements for New Jersey colleges and universities. The bonds are repayable in part by state appropriations. Bond proceeds of \$8,131,497,as shown on Schedule K, were received from a single issuance which was granted in varying amounts to 6 of the private colleges located in New Jersey. The institute entered into lease agreements with NJEFA for a total of \$4,500,000 which requires that the Institute pay one fourth (25%) of debt service of the underlying bonds.

Explanation

DLN: 93493027009346

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► 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.

Transactions with Interested Persons

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

Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes

	Enterth																									n 	
3	Enter th	ne ar	mou	nt o	ftax	, ıf a	any,	, on	line	2,	abo	ve,	reir	mbu	ırse	d by	the	org	gan	zatı	on		•		Þ	\$ 	
	ten ans to	and	d/e	or F	ron	n I	nte	ere	este	d F	er	soi	ns.														

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

(a) Name of interested person	rested with organization Purpose of or from the		ne	(e)Original principal amount	(f) Balance due	(g) defau	ılt?	(h) Approv by boar	d or	d or		
			То	From			Yes	No	Yes	No	Yes	No

Total	▶ \$					
Part IIII Grants or As Complete if the	TV line 2	7				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance		of assistanc	e (e) Purpos	e of assistance

Part IV Business Transactions Involving Interested Persons.

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

Complete if the organization	Talisweled les oill	offit 550, raiciv, iniv	e 20a, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship	(c) A mount of	(d) Description of transaction	(e) Sh	arıng
	between interested	transaction		of	f
	person and the			organiz	zatıon's
	organization			reven	ues?
				Yes	No
(1) VIRGINIA RUESTERHOLZ	Board Trustee Chair	381,322	See Schedule L, Part V		No
(2) Annmarie Rizzo	Board Trustee	381,322	See Schedule L, Part V		No
(3) Lawrence T Babbio Jr	Board Trustee	381,322	See Schedule L, Part V		No
(4) Ronald E Salluzzo	Board Trustee	136,406	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 is the retired president of Verizon Services Operations She received long term stock payments from Verizon during this fiscal year Board of Trustees member Annmarie Rizzo was Director of Operations in the Network and Technology organization at Verizon Communications during the prior year and is now retired. 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 \$381,322 in the fiscal year). Board of Trustees Member Ronald E. Salluzzo was 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 from July 1, 2014 to January 31, 2015 and from April 1, 2015 through June 30, 2015. Mr. Salluzzo served as interim CFO from February 1, 2015 to March 31, 2015. The university paid Attain, LLC, of which Mr. Salluzzo is a partner, for his board service, his committee service and interim CFO work. Amounts paid to Mr. Salluzzo for his service as interim CFO are not required to be reported in Part VII yet since those amounts were paid in calendar year 2015. This compensation will be reported on the Institute's 2015 Form 990. The fees 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 during the time he serves as a Professional Trustee and as Chair of the Audit Committee. The compensation relating to this service was \$71,606. The fees paid to Attain, LLC relating to the 2 month period that Mr. Salluzzo served as Interim Chief Financial Officer were \$64,800. During this time, Mr. Salluzzo was not independent. 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 truste

DLN: 93493027009346

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

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.

Employer identification number

	-			22	-1487354			
Pa	rt I Types of Property	1	<u> </u>		T			
		(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 contr		_	nts
1	Art—Works of art	Х	1	300,000	FMV			
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	X		2,300	FMV			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
9	Securities—Publicly traded .	X	35	1,562,635	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 .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other ► (Х	11	346,781	FMV			
1ısc	Equipment)	_						
26	O ther ▶()							
27	O ther ►()							
	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received by the for which the organization completed ${\bf I}$				9			
30a	During the year, did the organization	receive by	contribution any property r	enorted in Part I lines 1	through 28 that		Yes	No
Jou	it must hold for at least three years fi	•	, , , ,	·				
	for exempt purposes for the entire ho			, and winch is not required	i to be useu	20-		
L						30a		No
о 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	
						<u> </u>		i
s∠a	Does the organization hire or use this contributions?	u parties of	related organizations to s	oncit, process, or sell noi		32a	Yes	
b	If "Yes," describe in Part II							
33	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,			

	hether the organization is reporting in Part I, column (b), the number of contributions, the ceived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
	LINE 9 - To the extent that the Institute receives contributions of securities, the Institute's investment brokerage bank is tasked with selling those securities promptly LINE 32 - The Institute uses various galleries to facilitate the sale of art. However, the work of art reported on Line 1 is a

statue that is not intended for sale but instead will be displayed on the campus

Schedule M (Form 990) (2014)

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DLN: 93493027009346

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ 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

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' endow ment pursuant to contracts which address the scope of the delegation of authority, monitoring by Stevens' management and the Board, and reporting, among other matters 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 2014 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 Communications and Marketing Vice President for Development Vice President for Enrollment Management and Student Affairs 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.

Return Reference	Explanation
990, pART vI, IINE 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
Reconciliation of Net Assets - FORM 990, PART XI, LINE 9	POST-RETIREMENT BENEFIT CHANGES OTHER THAN PERIODIC COSTS \$(382,026) CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 169,420 Uncollectible Contributions (1,142,874) TOTAL (1,355,480) ====================================

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DLN: 93493027009346

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

2014

OMB No 1545-0047

000000

Employer identification number

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.► Attach to Form 990.

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

Open to Public Inspection

DIEVENS INSTITUTE OF TECHNOLOGY	22-14873	22-1487354							
Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.									
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity				

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

of more related tax exempt organizations during the tax year.											
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(l (13) controlle entity?					
						Yes	No				

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h	1)	(i)	(j)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	ortionate	Code V-UBI	General	or Percentage
related organization		domicile	controlling	income(related,	total income	end-of-year	allocat	tions?	amount in box	managı	ng ownership
		(state or	entity	unrelated,		assets			20 of	partne	?
		foreign		excluded from					Schedule K-1		
		country)		tax under					(Form 1065)		
				sections 512-							
				514)							
				,			Yes	No		Yes N	0
			l								

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(i contro entit	n 512 13) olled
								Yes	No
(1) Castle Point Holdings Inc	Tech Transfer	NJ	Stevens Instit	C Corp	-8,386	617,408	100 000 %	Yes	
One Castle Point on hudson Hoboken, NJ 07030 20-4264786									

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

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

chedule	R (Form 990) 2014		Рa	ge 3
Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Rec	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gıft	t, grant, or capital contribution to related organization(s)	1b		No
c Gıft	t, grant, or capital contribution from related organization(s)	1c		No
d Loa	ans or loan guarantees to or for related organization(s)	1d	Yes	
e Loa	ans or loan guarantees by related organization(s)	1e		No
f Divi	ridends from related organization(s)	1f		
g Sale	le of assets to related organization(s)	1 g		No
h Pur	rchase of assets from related organization(s)	1h		No
i Excl	hange of assets with related organization(s)	1i		No
j Leas	se of facilities, equipment, or other assets to related organization(s)	1j		No
k Lea	ase of facilities, equipment, or other assets from related organization(s)	1k		No
I Perf	formance of services or membership or fundraising solicitations for related organization(s)	11		No
m Perf	formance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Shar	ring of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sha	aring of paid employees with related organization(s)	10		No
p Reir	imbursement paid to related organization(s) for expenses	1 p		No
q Reir	imbursement paid by related organization(s) for expenses	1q		No

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

	, ,	· · · · · · · · · · · · · · · · · · ·	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Castle Point Holdings Inc	D	24,366	FMV

No

No

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

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	Legal Predominant on come (state or foreign unrelated,	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	end-of-year	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
								<u>, </u>	\Box	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**