efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493094000139 OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

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

Open to Public

Internal Revenue Service

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

Department of the Treasury ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Inspection For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018 C Name of organization D Employer identification number B Check if applicable STEVENS INSTITUTE OF TECHNOLOGY □ Address change ☐ Name change % LOUIS MAYER EDD Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite One Castle Point on Hudson ☐ Amended return ☐ Application pending (201) 216-8761 City or town, state or province, country, and ZIP or foreign postal code Hoboken, NJ $\,$ 07030 $\,$ **G** Gross receipts \$ 493,586,662 Name and address of principal officer H(a) Is this a group return for LOUIS MAYER □Yes ☑No subordinates? One Castle Point on Hudson H(b) Are all subordinates Hoboken, NJ 07030 ☐ Yes ☐No ıncluded? Tax-exempt status **✓** 501(c)(3) 501(c) () **◀** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www stevens edu L Year of formation 1870 **M** State of legal domicile NJ K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities The organization's primary exempt purpose is to provide educational is to provide educational services to individuals in pursuit of undergraduate, masters and doctorate degrees and to conduct research Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 27 Number of independent voting members of the governing body (Part VI, line 1b) 4 3,377 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . 6 368 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 34,097 Net unrelated business taxable income from Form 990-T, line 34 -36,672 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . 22,970,900 34,904,846 Program service revenue (Part VIII, line 2g) . 299,950,502 311,117,231 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,502,806 5,294,606 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,615,037 2,935,676 332,039,245 354,252,359 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 72,890,058 77,240,413 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 132,817,213 138,743,057 **16a** Professional fundraising fees (Part IX, column (A), line 11e) 82,679 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶4,788,702 85,698,428 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 83,952,287 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 291,405,699 300,018,436 $\mathbf{19}$ Revenue less expenses Subtract line 18 from line 12 . 40,633,546 54,233,923 Net Assets or Fund Balances **End of Year** Beginning of Current Year 20 Total assets (Part X, line 16) . 526,191,126 577,869,085 199,080,870 21 Total liabilities (Part X, line 26) . 206,996,600 Net assets or fund balances Subtract line 21 from line 20 319,194,526 378,788,215 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-04-02 Signature of officer Sign Here LOUIS MAYER VP FINANCE/TREASURER Type or print name and title Print/Type preparer's name PHILLIP GROFF Preparer's signature PHILLIP GROFF Date PTIN Check \square if 2019-04-02 P01247783 Paid self-employed Firm's name ► KPMG LLP Firm's EIN ▶ **Preparer** Firm's address > 345 Park Avenue Phone no (212) 758-9700 Use Only

New York, NY 101540102

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

☑ Yes ☐ No

Form	990 (2017)									Page 2	
Par	Statement	of Program Servi	ce Accomplis	hments							
	Check If Sche	dule O contains a resp	onse or note to a	any line in this Part III						✓	
1	Briefly describe the o	organization's mission									
30 UI AND OUT GOAL AND TECH AWAI	NDERGRADUATE MAJO GRADUATE LEVEL COI AT EVERY LEVEL OF T .S PROVIDING STUDI LIBERAL ARTS WHILE NOLOGY, PROMOTINO	DRS INCLUDING PROG URSES IN A RANGE OF HE UNIVERSITY THE I ENTS WITH A BROAD-I STRESSING THE FUNI G THE PERSONAL DEVI ETAL IMPACT OF THEII	RAMS IN ENGINE DISCIPLINES LE MISSION OF THE BASED, MULTIDI DAMENTAL CONC ELOPMENT OF TH	ERING, THE SCIENCES EADING TO THE MASTE INSTITUTE IS ACCOMI SCIPLINARY LEARNING EPTS, TECHNIQUES AN IE STUDENT, DEMONST	ON-PROFIT RESEARCH UIT, COMPUTER SCIENCE, I RS AND PHD DEGREES PLISHED BY THE ACHIEV EXPERIENCE IN THE SC ID ATTITUDES THAT UNI RATED BY A SENSE OF I ADERSHIP AND TEAM SK	BUSINESS ACADEMIC EMENT OF IENCES, E DERLIE DI ETHICAL R	, AND TERESEARED THE FE ENGINE FFEREN ESPON	HE H ARCH OLLO ERINC IT BRA SIBIL	UMANI IS CAF WING (6, BUS ANCHE ITY,	TIES, RRIED CORE INESS S OF	
2	Did the organization	, 3	ant program ser	vices during the year w	hich were not listed on		Г	Vec	<u> </u>	No.	
	If "Yes," describe these new services on Schedule O										
3	•			changes in how it cond	ieta any program						
3	services?		□ v.	es 🗸	No.						
		ese changes on Schedu								1110	
4	Describe the organiz Section 501(c)(3) ar	ation's program servic	e accomplishmer ons are required	to report the amount of	largest program services of grants and allocations				enses		
4a	(Code) (Expenses \$	211,180,318	including grants of \$	77,240,413) (Reven	ue \$	252.5	04,583	3)		
	See Additional Data	, (=						,			
4b	(Code) (Expenses \$	30,722,002	including grants of \$) (Reven	ue \$	28,4	67,260	D)		
	See Additional Data										
4c	(Code See Additional Data) (Expenses \$	27,453,576	including grants of \$) (Reven	ue \$	30,5	32,554	1)		
4d	Other program servi	ces (Describe in Sched	ule O)								
	(Expenses \$	inc	luding grants of	\$) (Revenue \$)			

or X as applicable

Checklist of Required Schedules

Yes

Page 3

No

Nο

No

Nο

No

No

Nο

Nο

Nο

Nο

Nο

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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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? Yes

5

assessments, or similar amounts as defined in Revenue Procedure 98-19? 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? 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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Yes

Yes 11a Yes 11b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

11c

11d

11e

11f

12a

12b

13

14a

14h

15

16

17

18

19

29

•	·		
Part IV	Checklist of Required Schedules (continued)		
		Yes	No

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,"

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

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a 20b

Yes

Yes

Yes

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

No

Νo

Nο

Νo

Nο

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orm	990 (2017)			Page
Par	t 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		<u> </u>	Ш
	5 - 1 - 1 - 1 - 1 - 1 - 2 - C - 400 - 5 - 0 - C - 1 - 1 - 1 - 1 - 1 - 2 - 2 - 2 - 2 - 2		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 6,838 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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 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?	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?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	5с 6а		No
b	solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were			
	not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 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		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	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)			
.2a	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			
.3	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		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	Governance, Management, and DisclosureFor each "Yes" response to lines 2 to 8a. 8b. or 10b below, describe the circumstances, processes, or changes in Sched			" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
				ı		Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	30			
	body,	re are material differences in voting rights among members of the governing , or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	27			
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ss rela	stionship with any other	2		No
3		ne organization delegate control over management duties customarily performed by icers, directors or trustees, or key employees to a management company or other i			3	Yes	
4	Did th	ne organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Diq +	ne organization become aware during the year of a significant diversion of the organ	 nizatio	n's assets?	5		No
_			ilizatio	iiis assets.	6		No
6		ne organization have members or stockholders?			\vdash		INO
/a		ne organization have members, stockholders, or other persons who had the power bers of the governing body?			7a		No
b	Are a	ny governance decisions of the organization reserved to (or subject to approval by)) mem		7b		No
8		ne organization contemporaneously document the meetings held or written actions ollowing	under	taken during the year by			
а	The g	overning body?			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			8b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> C			9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	ired Ł	y the Internal Revenu	e Code	∍.)	
						Yes	No
10a	Did th	ne organization have local chapters, branches, or affiliates?			10a		No
b		es," did the organization have written policies and procedures governing the activitie oranches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has t form?	he organization provided a complete copy of this Form 990 to all members of its go	vernın •	ng body before filing the	11a	Yes	
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually intcts?	terests	that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy •	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?			13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?			14	Yes	
15		ne process for determining compensation of the following persons include a review ons, comparability data, and contemporaneous substantiation of the deliberation and					
а	The o	organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Ye	es" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or si ble entity during the year?			16a		No
b	ın joir	es," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ard th		4.51		
					16b		
<u>5e</u> 17		C. Disclosure he States with which a copy of this Form 990 is required to be filed▶					
	LISE U	AK , CO , [OC , M	D, MI, NH, NC, OR, PA	, SC		
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99		990-T (501(c)(3)s only)			
	_	able for public inspection Indicate how you made these available Check all that ap					
4.0		Dwn website 🔲 Another's website 💆 Upon request 🔲 Other (explain in So		•			
19	policy	ribe in Schedule O whether (and if so, how) the organization made its governing do ,, 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 organ	ızatıor	's books and records			

compensated employees, and former such persons

Part VII

 $\overline{\mathbf{V}}$

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

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

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

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

- 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

(A) (C) (F) (B) (D) (E) Name and Title Position (do not check more Reportable Reportable Estimated Average than one how unless nerson amount of other

	hours per week (list any hours	reek (list is both an officer and a organization (W- organizations organization)								amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1033-MI3C)	MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2017)

Part VII

5

1

Section B. Independent Contractors

TERMINAL CONSTRUCTION CORP,

CAPSTONE DEVELOPMENT PARTNERS LLC,

compensation from the organization ► 143

402 OFFICE PARK DRIVE SUITE 199 BIRMINGHAM, AL 35223

116 HUNTINGTON AVE 12TH FLOOR

215 STATE HIGHWAY 17 SOUTH WOODRIDGE, NJ 07075 COMPASS GROUP USA.

2400 YORKMONT ROAD CHARLOTTE, NC 28217 GILBANE BUILDING COMPANY,

7 JACKSON WALKWAY PROVIDENCE, RI 02903

BOSTON, MA 02116

UG2 LLC,

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

3

4

5

Description of services

Construction

FOOD SERVICE

CONSTRUCTION

real estate devel

FACILITY SVCS

Yes

Yes

No

(C)

Compensation

11,296,019

7,710,837

3,953,831

2,606,061

1,864,457

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	week (list any hours	eek (list shoth an officer and a shours director/trustee) from the organization (Wordship) organizations (compen	sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organızat relat organıza	ed
See Additional Data Table											
						<u> </u>			<u> </u>		
1b Sub-Total	art VII, Sectio	nΑ.				* _		8,325,870	0		800,138
Total number of individuals (including of reportable compensation from the	but not limited	to thos					rece		00,000		
			,							Yes	No
3 Did the organization list any former			ee, k	ey ei	mple	oyee, c	or hi	gnest compensated	employee on		

line 1a? If "Yes," complete Schedule J for such individual .

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

services rendered to the organization? If "Yes," complete Schedule J for such person .

Name and business address

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

hours per than one box, unless person compensation compensation

(C) (F) Name and Title Reportable Reportable Average Position (do not check more Estimated amount of other

For	m 990 (2017)				Page 10
	Irt IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anızatıons must comp	olete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	199,600	199,600		
2	Grants and other assistance to domestic individuals See Part IV, line 22	77,040,813	77,040,813		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,408,329	2,381,477	3,674,121	352,731
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	107,087,560	95,259,730	9,423,145	2,404,685
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,229,710	5,359,457	718,900	151,353
9	Other employee benefits	12,733,649	10,954,836	1,469,445	309,368
10	Payroll taxes	6,283,809	5,405,999	725,143	152,667
11	Fees for services (non-employees)				

a Management .

b Legal .

c Accounting

d Lobbying .

13 Office expenses .

15 Royalties .

17 Travel .

16 Occupancy .

20 Interest . .

23 Insurance .

14 Information technology

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

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

25 Total functional expenses. Add lines 1 through 24e
 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)

federal, state, or local public officials .

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O)

a REPAIRS & MAINTENANCE

b RESEARCH CONTRACTS

d RENTAL EQUIPMENT

e All other expenses

c HOSPITALITY

g Other (If line 11g amount exceeds 10% of line 25, column

f Investment management fees .

12 Advertising and promotion .

0

612,362

5,000

947,520

603,453

808,793

1,892,957

12,063,501

3,998,135

600,313

3,006,951

12,613,990

6,722,247

5,472,541

2,653,347

691,203

7,471,779

269,355,896

72,480

12,517,412

416,295

326,677

276,628

3,322,225

320,149

180,677

70,553

406,130

140,272

56,076

213,682

896,385

1,284,436

969,293

5,554

220,421

129,448

628,183

25,873,838

6,978

82,679

395,061

2,335

2,580

85,384

13,404

17,462

362,169

33,868

109,022

4,788,702

Form 990 (2017)

306,956

1,035,635

326,677

281,628

82,679

947,520

925,937

2,380,590

12,469,631

4,223,791

669,793

3,220,633

13,510,375

1,356,916

7,709,002

5,478,095

3,235,937

854,519

8,208,984

300,018,436

0

881,926

16,234,698

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Page **11**

19,444,004

0

0

0

0

0

0

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O

21.024.785

199,080,870

132.074.462

129.892.503

116.821.250

378,788,215

577.869.085

Form **990** (2017)

2.000.518

198,117,347

151.173.609

35.771.314

61.124.137

577.869.085

22,385,256

15,100,133

140,570,696

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0

425.788

1.665.563

168.832.558

135.168.598

42.171.679

81.067.244

526,191,126

22,924,342

18,579,086

141,405,945

24.087.227

206,996,600

95.368.546

125.631.755

98.194.225

319,194,526

526.191.126

Check if Schedule O contains a response or note to any line in this Part IX

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

		Beginning of year		End of year
1	Cash-non-interest-bearing	45,220,354	1	638,517
2	Savings and temporary cash investments	1,963,649	2	69,821,467
3	Pledges and grants receivable, net	29,162,842	3	39.778.172

362,920,281

164.802.934

2 3 Pledges and grants receivable, net . . . 29,162,842 3 20.512.851 4 Accounts receivable, net .

10a

10b

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and

contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net .

Page **12**

6,099

378,788,215

No

No

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

9

Revenue less expenses Subtract line 2 from line 1	3	
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
Net unrealized gains (losses) on investments	5	
Donated services and use of facilities	6	

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Other changes in net assets or fund balances (explain in Schedule O)

Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Form 990 (2017)

Part XII

Schedule O

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3:
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	319,194,
5	Net unrealized gains (losses) on investments	5	5,353,
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Additional Data

Software ID:

Software Version:

EIN: 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

Form 990 (2017)

market knowledge

E- -- 000 P- 1 TTT 1:-- 4

Form 990, Part III, Line 4a:
Educational Instruction In the academic year 2017-18, Stevens' enrollment was 3,123 undergraduate students and 4,038 graduate students 675 students graduated with bachelor of engineering, science or arts degrees, 1,666 students received master's in engineering, science, business administration or arts 53 PHD 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

Form 990, Part III, Line 4b:

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 132 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 the 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.

Form 990, Part III, Line 4c:

Research The research enterprise includes academic research, national research centers and cross-disciplinary research initiatives with affiliated organizations and

and the Department of Homeland Security as a national center of excellence in the areas of systems engineering, port security and information assurance

Infrastructure Creative and entrepreneurial research is an integral part of the Stevens Mission. The University has been recognized by both the U.S. Department of Defense

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours	and	a dır	ecto	r/tr	ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Stephen T Boswell Chairman/Trustee as of 5/22/18	3 0	×		х				0	0	0
Thomas A Corcoran Vice Chairman/Trustee	1 0	х		х				0	0	0
Richard R Roscitt Vice Chairman/Trustee	1 0	х		x				0	0	0
John A Schepisi Vice Chairman/Trustee	1 0	х		x				0	0	0
Shane O Arlington	1 0									

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30,271

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317,503

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Vice Chairman/Trustee
John A Schepisi
Vice Chairman/Trustee
Shane Q Arlington
Trustee

Saleel Awsare

Trustee

Trustee as of 9/1/17

Lawrence T Babbio Jr

Trustee/Professor to 1/30/18

Alan F Blumberg

Michael F Cahill

Philip P Crowley

Trustee

Trustee to 9/28/17

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

	£							/// 2/1000	/14/ 2/1000	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
John R Dearborn	1 0	×						0	0	0
Trustee	0 0	l								
Joseph Del Guercio Trustee as of 12/8/17	1 0	x						0	0	0
William W Destler Trustee as of 9/1/17	10	×						0	0	0
Joseph G DiPompeo	1 0	v						0	0	0

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28,740

0

369

168,417

0

William W Destler
Trustee as of 9/1/17
Joseph G DıPompeo
Trustee

Emilio A Fernandez

John Sean J Hanlon IV

......

Matthew B Hunt

Trustee as of 9/1/17

Daniella M Kranjac

Trustee

Trustee

Trustee

Trustee

Rainer Martini

Lisa M Mascolo

Trustee/Professor

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

!	any hours	and a director/trustee)						organization	organizations	from the organization and	
	for related organizations below dotted line)		Institutional Trustee	10	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
Elizabeth C Pallone Trustee as of 5/22/18	1 0	×						0	0	0	
Samuel P Reckford Trustee	1 0	x						0	0	0	
Annmarie Rizzo Trustee	1 0	×						0	0	0	
Virginia P Ruesterholz Chair to 5/22/18 - Trustee	1 0	×						0	0	0	

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6,556

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Annmarie Rizzo
Trustee
Vırgınıa P Ruesterholz
Chair to 5/22/18 - Trustee
Ronald E Salluzzo

Trustee

Trustee

Trustee

Trustee

Thomas H Scholl

Olivia Schreiber

Frank J Semcer

Henrik C Slipsager

Trustee to 8/4/17

J Scott Swensen

Trustee as of 5/22/18

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours organization organizations from the

	£				•			1 (1) 2 (4 0 0 0	/W 2/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Victoria Velasco	1 0									
		X						0	0	0
Trustee as of 9/12/17	0 0									
Michael zur Muehlen	55 0									
		X						234,899	0	31,594
Trustee/Profess as of 5/22/18	0 0									
Narıman Farvardın	55 0									
Training Farvaran		Х		х				1,035,863	0	27,141
President/Trustee	0 0									
ToniAnn Biondolillo	55 0									
TOTIZATI DIGITACINO				x				78,689	0	6,956
Asst Corp Sec	0.0							·		,

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234,498

394,456

374,767

203,819

240,442

392,655

21,297

45,751

30,658

18,535

34,271

44,736

0

0

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President/Trustee
ToniAnn Biondolillo
Asst Corp Sec
Joseph E Cassidy

AVP Finance

Louis J Maver

Kathy L Schulz

Elizabeth Shelton

Anthony Barrese

Vice Provost

VP FINANCE/TREAS

VP, GENERAL COUNSEL/Secretary

AVP Investments/Assist Treas

Interim Dean to 12/31/17

Mohammad Dehghani

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

4	1 6		 			J /14/ 2/4000 J	/4/ 3/4000	1
	for related organizations below dotted line)	AMSONI TOUDOUNTS OF	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
David Dodd VP FOR INFO TECHNOLOGY	55 0		x			266,605	0	41,075
Robert Maffia VP FOR FACILITIES	55 0		×			286,289	0	42,958
MaryBeth Murphy VP ENROLLMENT MANAGEMENT	55 0		x			282,432	0	37,207
Warren Petty VP HR AS OF 2/6/17	55 0		x			213,472	0	16,618
Christophe Pierre	55 0		×			574,569	0	38,535

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404,604

347,068

237,243

480,185

336,622

45,658

27,141

26,305

42,745

41,235

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Provost

Gregory Prastacos

William Remington

DEAN AS OF 5/1/2017

Constantin Chassapis

VP Development

George Korfiatis

VICE PROVOST

DEAN

Jean Zu

Professor

and Independent Contractors (A) (B) (C) (D) (E) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other hours per compensation compensation

Х

258,786

(F)

35,932

	week (list any hours					office ustee		from the organization	from related organizations	compensation from the organization and related organizations
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	-E	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	
William Rouse Professor	55 0 0 0					х		329,836	0	22,626
Dinesh Verma Professor/Exec Director	55 0 0 0					х		315,831	0	40,602
Hady Salloum	55 0					х		309,395	0	21,551

0 0 55 0

0 0

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Professor

Keith Sheppard

Professor/FORMER KEY EMPLOYEE

efil	e GR/	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493094000139			
SCI	HED m 990	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) c mpt charitable	ort	2017				
Depart	ment of	f the Treasury	▶ Info	ormation abou	► Attach to Form It Schedule A (Form www.irs.g			ections is at	Open to Public Inspection			
Nam	e of th	he organiza STITUTE OF TEC						Employer identific	ation number			
Pa	rt I	Reason	for Public	Charity Stati	us (All organization	s must comple	te this part) 9	22-1487354 See instructions				
					it is (For lines 1 thro			occ macractions.				
1		A church, c	onvention of	churches, or as	sociation of churches	described in sect	tion 170(b)(1)	(A)(i).				
2	<u></u> ✓	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))										
3	<u>~</u>				/ice organization desc	·	• •					
_		·	•	·	<u>-</u>			•				
4	Ш	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5			ition operate (iv). (Comple		t of a college or unive	rsity owned or op	erated by a gov	ernmental unit descri	ped in section 170			
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).				
7				mally receives (vi). (Complete	a substantıal part of ıt Part II)	s support from a	governmental u	init or from the genera	al public described in			
8		A communi	ty trust desc	nbed in section	170(b)(1)(A)(vi)	(Complete Part I	I)					
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a			
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
11		An organiza	ition organize	ed and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).				
12		more public	ly supported:	organizations of	l exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	tion 509(a)(2). See section 509(a				
a		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or co appoint or elect a majo	ontrolled by its si	upported organi	zation(s), typically by				
b		Type II. A manageme	supporting on t of the sup	rganization sup	ervised or controlled i ation vested in the sar							
С		Type III f	unctionally	integrated. A s	supporting organizatio ons) You must com				ted with, its			
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgar				
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	functionally			
f	Enter			ion-functionally Lorganizations	integrated supporting	organization						
g				_	pported organization(5)						
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? (v) Amount of monetary support other sup (see instructions)						
						Yes	No					
Tota									1			

(b)(1)(A)(ix)

	(Complete only if you cr III. If the organization fo						y under Part
_	Section A. Public Support	ans to quanty und	der the tests hat	ed below, pieds	e complete rait	111.)	
_	Calendar year	() 2012	(1.) 2014	() 2015	(1) 2016	() 2017	
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	17,241,594	25,805,184	8,675,979	22,968,900	34,904,846	109,596,503
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						0
4	the organization without charge Total. Add lines 1 through 3	17,241,594	25,805,184	8,675,979	22,968,900	34,904,846	109,596,503
5	The portion of total contributions by each person (other than a governmental unit or publicly	17,241,334	23,803,184	8,073,979	22,900,900	34,904,640	
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						23,996,393
6	Public support. Subtract line 5 from line 4						85,600,110
	Section B. Total Support						
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e)2017	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	17,241,594	25,805,184	8,675,979	22,968,900	34,904,846	109,596,503
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,759,802	2,793,076	3,490,579	4,164,121	5,910,248	20,117,826
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	4,934,792	5,218,877	4,760,448	4,081,092	4,163,674	23,158,883
11	Total support. Add lines 7 through 10						152,873,212
12	Gross receipts from related activities,					12	1,074,646,471
13	First five years. If the Form 990 is for	or the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) orga	nızatıon,
	check this box and stop here					▶ □	
5	Section C. Computation of Publi						
14	Public support percentage for 2017 (li	ne 6, column (f) div	vided by line 11, co	olumn (f))		14	55 994 %
15	Public support percentage for 2016 Sc	hedule A, Part II, l	ine 14			15	54 734 %
16	33 1/3% support test—2017. If the	e organization did n	ot check the box o	on line 13, and line	e 14 is 33 1/3% or	more, check this b	ox
	and stop here. The organization qual 33 1/3% support test—2016. If the	ifies as a publicly s ne organization did	upported organizat not check a box or	tion n line 13 or 16a, a			this
17	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2017. If the org	janization did not o -and-circumstance	theck a box on line s" test, check this	box and stop her	r e. Explain	▶⊔
Ŀ	organization 10%-facts-and-circumstances te: 15 is 10% or more, and if the organic Explain in Part VI how the organization	zation meets the "fa	acts-and-circumsta	ances" test, check	this box and stop	here.	▶□
	supported organization						▶ □

, circ	dale A (101111 330 01 330 EZ) 2017						rage L
P	art IIII Support Schedule for						
	(Complete only if you cl						ler Part II. If
	the organization fails to	qualify under t	ne tests listed I	below, please co	omplete Part II.)	
Se	ction A. Public Support Calendar year			Ι			I
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
6	the organization without charge Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
, a	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support						
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(4) 2013	(5) 2011	(0, 2013	(4) 2010	(6) 201/	(1) 10001
9	Amounts from line 6						
.0a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)	.1		1.6.11.60			<u> </u>
14	First five years. If the Form 990 is for	r the organization	's first, second, tr	nira, fourth, or fift	n tax year as a se	ction $501(c)(3)$ c	
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			(0)			
15	Public support percentage for 2017 (lin	15					
16	Public support percentage from 2016 S	· · · · · · · · · · · · · · · · · · ·	•			16	
	ction D. Computation of Investr						
17	Investment income percentage for 201	,	• • • • • • • • • • • • • • • • • • • •	line 13, column (f))	17	
18	Investment income percentage from 20	•	•			18	
19a	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lin	ie 15 is more than	33 1/3%, and lir	ne 17 is not
1	more than 33 1/3%, check this box and s	stop here. The or	ganızatıon qualıfı	es as a publicly su	ipported organizat	tion	▶ □
	33 1/3% support tests—2016. If the	-					3% and line 18 is
_	not more than 33 1/3%, check this box	-			•		ightharpoons
20	Private foundation. If the organization		-				▶□

Schedule A (Form 990 or 990-EZ) 2017

7

10a

answer line 10b below

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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)				
	III section 309(a)(1) or (2)	2			
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)				
Ja	below	3a			
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				

		Ja	. '		
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				
	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				
	If res, 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				
4a	checked 12a or 12b in Part I, answer (b) and (c) below				
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	4b			
С	supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections				
Ĭ	501(c)(3) and 509(a)(1) or (2)? 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) nurposes				

4a							
	checked 12a or 12b in Part I, answer (b) and (c) below						
b	checked 12a or 12b in Part I, answer (b) and (c) below 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 of supervised by or in connection with its supported organizations. 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)? 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. 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) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the						
c	supervised by or in connection with its supported organizations. 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)? If "Yes," explain in Part VI what controls the organization used to ensure that all support	4b					
	to the foreign supported organization was used exclusively for section 170(c)(2)(b) purposes						
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 (!) 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)						
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		<u> </u>				
	organization's organizing document?	5b					
			, '	I			

	supervised by or in connection with its supported organization had such control and discretion despite being controlled or	4b	
С	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)? 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?	5с	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other		

	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes				
5a Di (c) or or an b Ty or	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes				
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			
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 .	-			
		0	I	1	

-	section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a				
Q	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	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 I of Schedule L (Form 990 or 990-EZ)				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as				

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

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 I of Schedule L (Form 990 or 990-EZ)	œ	
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	

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	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		
	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		
	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		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 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			
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		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 instruct 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 (see		ctions)	
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	Parent of Supported Organizations Answer (a) and (b) below.			
	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? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 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)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Schedule A ((Form 990 or 990-EZ)	2017 Page
Part VI	Section A, lines 1, 2 Part IV, Section D, l	prmation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, 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, 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, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See
		Facts And Circumstances Test
990 Sche	dule A, Suppleme	ntal Information
Ret	urn Reference	Explanation
Schedule A	, Part II, LINE 10 -	GROSS INCOME FROM FUNDRAISING ACTIVITIES \$ 122,401 GROSS SALES OF INVENTORY 736,888 AQUATI

CS 80,916 PARKING 330,517 ALL OTHER REVENUE 2,586,702 NON REFUNDABLE DEPOSITS 306,250 ----DETAIL OF OTHER INCOME

----- TOTAL OTHER INCOME \$4,163,674

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Political Campaign and Lobbying Activities

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

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

Schedule C (Form 990 or 990-EZ) 2017

Cat No 50084S

DLN: 93493094000139

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶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

• 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" on 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" on 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 Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2 5

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017

Pa	rt II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT fil Form 5768 (election under section 501(h)).	ed				
or e	ach "Yes"	response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	<u>;)</u>	(b)		
activ		esponse on lines to through it below, provide in tare to a detailed description of the lobbying	Yes	No	,	Amou	ınt
1		e year, did the filing organization attempt to influence foreign, national, state or local legislation, any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Voluntee	757		No			
b	Paid staff	or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media ad	vertisements?		No			
d	Mailings t	o members, legislators, or the public?		No			
е	Publication	ns, or published or broadcast statements?		No			
f	Grants to	other organizations for lobbying purposes?		No			
g	Direct co	ntact with legislators, their staffs, government officials, or a legislative body?	Yes			3	65,464
h	Rallies, d	emonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other act	ivities?		No			
j	Total Ad	d lines 1c through 1i				3	65,464
2a	Did the a	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes,"	enter the amount of any tax incurred under section 4912					
C	If "Yes,"	enter the amount of any tax incurred by organization managers under section 4912					
d	If the filir	ig organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A	Complete if the organization is exempt under section $501(c)(4)$, section $501(c)$ $501(c)(6)$.	(5), o	r sec	tion		
_						Yes	No
1		stantially all (90% or more) dues received nondeductible by members?			1		
2		rganization make only in-house lobbying expenditures of \$2,000 or less?			2		
3		rganization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				501(c)(6)
1	•	sessments and similar amounts from members	1				
2		62(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).					
а	Current y		2a				
b	•	r from last year	2b				
С	Total		2c				
3		e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	the orgar	were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does lization agree to carryover to the reasonable estimate of nondeductible lobbying and political lire next year?	4				
5	'	mount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Explanation Part II-B, Line 1G - Lobbying Stevens Institute of Technology hired various outside consultants to undertake lobbying activities related to educational and other mission related initiatives on its behalf. Staff participates indirectly in activities such as meeting with New Jersey and Hoboken elected and appointed officials to promote Stevens and its priority

> programs and initiatives such as capital projects and funding initiatives. In addition, they provide oversight to outside consultants and are directly engaged in activities related to Stevens' federal research initiatives

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Supplemental Financial Statements

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

DLN: 93493094000139 OMB No 1545-0047

Open to Public

(Form 990)

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

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

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Cat No 52283D

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Schedule D (Form 990) 2017

50,400

Par	t III	Organizations M	aintaining Col	lections of	Art, His	torical T	reas	ures, o	r Other	Simila	r Assets	s (conti	nued)	
3		the organization's acq (check all that apply)	juisition, accessior	n, and other r	ecords, ch	eck any of	the fo	ollowing 1	that are a	significa	ant use of	its coll	ection	
а	✓	Public exhibition				d 🗌	Loar	n or exch	ange prog	ırams				
b	✓	Scholarly research				e 🗌	Othe	er						
С	_	Preservation for future	e generations											
4		de a description of the		lections and e	explain ho	w they furt	her th	ne organi:	zation's ex	xempt p	urpose in			
_	Part X				- t		-14		- L I					
5		g the year, did the org s to be sold to raise fui								ıllar		Yes	✓ N	o
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			on Form	990, Part	: IV,	line 9, o	r reporte	ed an a	mount o	n Form	990,	Part
1a		organization an agent led on Form 990, Part		an or other in	termediar	y for contr	ibutio	ns or oth	er assets	not			П.	
											Ш	Yes	∐ N	0
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete	e the follo	wing table					Amou	nt		_
С	Begin	ning balance							1c					_
d	Addıtı	ons during the year							1d					_
e	Distrib	butions during the yea	r						1e					_
f	Ending	g balance							1f					_
2 a	Did th	ne organization include	an amount on Fo	rm 990, Part	X, line 21	, for escrov	v or c	ustodial a	account lia	ability?		Yes	☑ N	o
b	If "Ye	s," explain the arrange	ement in Part XIII	Check here	ıf the expl	anation ha	s beer	n provide	d in Part)	XIII .				
Pa	irt V	Endowment Fun	ds. Complete ıf	the organiz	ation ans	wered "Y	'es" o	n Form	990, Par	t IV, lır	ne 10.			
				(a)Current		(b) Prior yea			ears back	 	e years ba	ars back (e)Four years		
1a	Beginni	ing of year balance .		183,9	34,000	166,02	4,661	17	73,680,721		173,055,3	79	155,	748,717
b	Contrib	utions		-	93,944		0,730		1,908,265		3,683,0			484,292
С	Net inv	estment earnıngs, gaıı	ns, and losses	9,0	51,558	15,13	2,869		-3,516,117		1,490,1	60	14,	109,353
d	Grants	or scholarships	•	2,0	38,014	6,36	4,260		6,048,208		4,547,8	64	5,	286,983
е		expenditures for faciliting	es	3,5	35,488									
f	Adminis	strative expenses .												
g	End of	year balance		206,8	06,000	183,93	4,000	10	66,024,661		173,680,7	21	173,	055,379
2	Provid	de the estimated perce	ntage of the curre	•	palance (li	ne 1g, colu	ımn (a	a)) held a	is					
а	Board	designated or quasi-e	endowment >	5 880 %										
b	Perma	anent endowment 🕨	53 430 %											
С	Temp	orarily restricted endo	wment ► 40 6	90 %										
	•	ercentages on lines 2a		· ·										
3а		nere endowment funds Ization by	not in the posses	sion of the or	ganızatıor	that are h	neld ar	nd admın	istered fo	r the			Yes	No
	-	related organizations										3a(i)	Yes	NO
		elated organizations										3a(ii)		No
b	. ,	s" on $3a(II)$, are the re			quired on	Schedule F	۲۶ .					3b		
4	Descr	ibe in Part XIII the into	ended uses of the	organization'	s endowm	ent funds								
Pa	rt VI	Land, Buildings,			_								_	
	Doseri	Complete If the or ption of property	ganization answ (a) Cost or oth			990, Part other basis (. See For				ook valu	Δ
	Descri	paon or property	(investme		COSC OF	odiei pasis ((Juliel)	(6) ACC	.amulated t	acpi eciali		(u) bo	on valu	_
1 2	Land					1 7	63,196	5					-	1,763,196
		gs				•	47,360			128,197,9	975			1,249,385
		old improvements				2,2,4	.,,500	+		,_,			140	.,,,,,,,,
		·		+		51 5	65,357	7		36,604,9	959		1/	1,960,398
		nent		+						30,004,5	,,,,			
е	other		1			3/,1	44,368	ا ر			1		3,	7,144,368

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

198,117,347

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he orgar	nization answ	vered "Yes" on For	m 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) E	Book value		Method of valuation end-of-year market value
	ıl derivatives			2032 01 4	end of year market value
(2) Closely- (3) Other _	held equity interests				
(A) ALTERNATIVE INVESTMENTS			10,149,700		F
(B) TRUSTS HELD BY OTHERS			5,669,196		F
(C) SPLIT INTEREST AGREEMENTS			2,709,219		F
(D) OTHER INVESTMENTS			48,000		F
(E) PRIVATE EQUITY			17,195,199		F
(F)					
(G)					
(H)					
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•	35,771,314		
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on I	Form 00		no 11c Con Form	000 Part V line 12
	(a) Description of investment		b) Book value	(c)	Method of valuation
(1)				Cost or e	end-of-year market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX	Other Assets. Complete if the organization answered		Form 990, Pa	rt IV, line 11d See i	
(1) DEPOSIT	(a) Description TS WITH BOND TRUSTEES				(b) Book value 61,073,737
(2) OTHER <i>A</i> (3)	ASSETS				50,400
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)				▶ 61,124,137
Part X	Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	answere	d 'Yes' on Fo	rm 990, Part IV, I	ine 11e or 11f.
1.	(a) Description of liability		(b) Bo	ook value	
• •	ncome taxes			0	
ACCRUED PO ANNUITIES	DST RETIREMENT BENEFIT OBL PAYABLE			5,603,473 1,854,792	
	AL ASSET RETIREMENT			6,066,557	
REFUNDABLE ADVANCES				4,667,880	
CAPITAL LEA (6)	ASE OBLIGATION			2,832,083	
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)		>	21,024,785	
	or uncertain tax positions In Part XIII, provide the text on I's liability for uncertain tax positions under FIN 48 (ASC).				

Schedule D (Form 990) 2017

Page 4

	Complete il the organiz	zacioni answered Tes On Form 330, Fart		ille 12a.		_	
1	Total revenue, gains, and other su	upport per audited financial statements			1		
2	Amounts included on line 1 but no	t on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) on ir	ivestments	2a				
b	Donated services and use of facilit	nes	2b				
С	Recoveries of prior year grants .		2c				
d	Other (Describe in Part XIII) .		2d				
e	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, P	art VIII, line 12, but not on line 1					
а	Investment expenses not included	on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII) .		4b				
С	Add lines 4a and 4b				4c		
5	Total revenue Add lines 3 and 4c	. (This must equal Form 990, Part I, line 12)			5		
Par		penses per Audited Financial Statem			Return	n	
1	Total expenses and losses per aud	zation answered 'Yes' on Form 990, Part	. IV, I	IIIE 12d.	1		
2	Amounts included on line 1 but no				-		
² a	Donated services and use of facilit	, , ,	2a	I			
b	Prior year adjustments		2b				
c	Other losses		2c				
d	Other (Describe in Part XIII)		2d				
e	Add lines 2a through 2d				⊢ _{2e}		
3	Subtract line 2e from line 1		•		3		
4	Amounts included on Form 990, P		•				
a		on Form 990, Part VIII, line 7b	4a	I			
b	Other (Describe in Part XIII)	· · ·	4b		_		
C					⊣ գ _с		
5		c. (This must equal Form 990, Part I, line 18			5		
	t XIII Supplemental Info		<i>,</i> .				
	• •	art II, lines 3, 5, and 9, Part III, lines 1a and	4 Par	t IV lines 1h and 2h Pa	rt V line	4 Part X line 2 Part	
XI,	lines 2d and 4b, and Part XII, lines	2d and 4b Also complete this part to provide	any a	idditional information		Ty rate Xy mie 2y rate	
	Return Reference	Explanation					
See /	Additional Data Table						
					_		

Page 5		Schedule D (Form 990) 2017					
	ormation (continued)	Part XIII Supplemental Info					
	Explanation	Return Reference					

Schedule D (Form 990) 2017

Additional Data

Software ID:

Software Version:

EIN: 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

Supplemental Information

Explanation

Return Reference Various Pieces of art that have been donated are on public display for the enrichment and enjoyment of visitors, faculty, staff and students

Collections of Art, Historical Treasures - FORM 990,

SCHEDULE D, PART III

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	The University's endowment fund is intended to support scholarships for undergraduate and graduate students and to provide financial assistance for programs and services conducted by the University

S

Return Reference	Explanation
Income Taxes - FORM 990, SCHEDULE D, PART X	The University has been classified as an organization described under Section 501(c)(3) of the Internal Revenue Code (the "Code") and, therefore, is exempt from Federal income taxe s under Section 501(a) of the Code and similar State of New Jersey tax provisions Federal law imposes tax on income that is not related to an organization's tax-exempt purposes or otherwise excluded under the Code The University has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, det

otherwise excluded under the Code. The University has processes presently in place to ens ure the maintenance of its tax-exempt status, to identify and report unrelated income, det ermine its filing and tax obligations in jurisdictions for which it has nexus, and to review other matters that may be considered tax positions. Management of the University believes there are no uncertain tax positions. The tax years ended 2015, 2016, 2017 and 2018 are

still open to audit for federal purposes

Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493094000139 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **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? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e No f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο 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 Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No 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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2017)

Schedule E (Form 990 or 990EZ) (2017)	Page 2
Part II Supplemental Information. Provide any other additional information (see inst	e the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide tructions)
Return Reference	Explanation
Nondiscrimination Policy - PART I, LINE 3	Stevens Institute of Technology's nondiscrimination policy is available on the admissions application webpage for prospective students and in the student handbook which is available on the Stevens website and available to all students at orientation and registration
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) (2017)

efile GRAPHIC print	- DO NOT I	PROCESS	As Filed Data -	•		DLN:	93493094000139
SCHEDULE F (Form 990)	State	ement of	Activities (Outside the Uni	ited S	tates	OMB No 1545-0047
(1 01111 330)	► Compl	lete if the organ		Yes" to Form 990, Part IV, I to Form 990.	ıne 14b, 1!	5, or 16.	2017
Department of the Treasury Internal Revenue Service	► Informa	tion about Sche	dule F (Form 990) a	and its instructions is at wi	vw.irs.gov,	/form990.	Open to Public Inspection
Name of the organization STEVENS INSTITUTE OF TI	ECHNOLOGY					Employer iden 22-1487354	tification number
	nformation Part IV, line		s Outside the U	Jnited States. Comple	te if the	organization a	nswered "Yes" to
=		=		substantiate the amount	_		
other assistance, the to award the grant	_		he grants or assis	stance, and the selection	criteria i	used	
	Describe in		janization's proce	dures for monitoring the	use of it	s grants and otl	Yes No
3 Activites per Region	(The following	ng Part I, line 3	table can be dupli	cated if additional space is	needed))	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	rity listed in (d) is a service, describe icific type of ce(s) in region	(f) Total expenditures for and investments in region
See Add'l Data							
3a Sub-total			0 143				746,941
b Total from continuation Part I	on sheets to						21,861,442
	and 3b)		0 155				22,608,383

Part III can be du Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV,
							appraisal, other
		+ +					
		1					

Sche	dule F (Form 990) 2017		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☑ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	✓ Yes	□No

Schedule F (F	rm 990) 2017 Page 5
	Eupplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; imounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
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 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

i or property that exceeded the applicable liling thresholds, the Forms 926, 5471, 8621 and 8865 accompanied the filing of the

University's Form 990-T

Additional Data

East Asia and the Pacific

Form 900 Schedule E Part T - Activities Outside The United States

Software ID: Software Version:

EIN: 22-1487354

Name: STEVENS INSTITUTE OF TECHNOLOGY

CONFERENCES/SPEAKING

108,554

roi ili 990 Schedule r Pai	of the states										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region						
Central America and the Caribbean	0	1	Program Services	CONFERENCES/SPEAKING	2,782						

30 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and CONFERENCES/SPEAKING 213.143 56 Program Services Greenland) Middle East and North Africa 1,672 2 Program Services CONFERENCES/SPEAKING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) North America CONFERENCES/SPEAKING 47.456 25 Program Services South America 2 Program Services CONFERENCES/SPEAKING 1,211

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa CONFERENCES/SPEAKING 7.043 1 Program Services Central America and the 1 Program Services RECRUITING - STUDENTS 290 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific 8 Program Services RECRUITING - STUDENTS 151.854 Europe (Including Iceland and 2 Program Services RECRUITING - STUDENTS 7,121 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Middle East and North Africa 2 Program Services RECRUITING - STUDENTS 5.464 North America 2 Program Services RECRUITING - STUDENTS 4,914

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America IRECRUITING - STUDENTS 6.190 1 Program Services South Asia 7 Program Services RECRUITING - STUDENTS 169,326

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures ın region (by type) (i e , offices in the employees or is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific 1 |Program Services FIELD RESEARCH 13.089 Europe (Including Iceland and 1 Program Services IFIELD RESEARCH 5,364 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Middle East and North Africa FIELD RESEARCH 1.468 1 Program Services Middle East and North Africa 2 Program Services IFIELD RESEARCH 6,321

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific 3 Program Services INSTITUTIONAL 26.778 IDEVELOPM Europe (Including Iceland and 4 | Program Services INSTITUTIONAL 22.539 Greenland) IDEVELOPM

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa 1 Program Services INSTITUTIONAL 6.028 IDEVELOPM South Asia 2 Program Services INSTITUTIONAL 13.236 IDEVELOPM

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Central America and the 21.786.540 0 linvestments Caribbean

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Inspection

DLN: 93493094000139 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990 or 990-EZ)

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. **Employer identification number**

STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (ii) Activity fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No DIG & DIR MAIL ROYALL AND COMPANY DBA HARDWICK DAY мкт 82,679 Nο -82,679 1920 E PARHAM RD RICHMOND, VA 23228

Total			>		82,679	-82,679
3 List all states in which the organ licensing	nization is registered	or licens	ed to so	licit contributions or has b	peen notified it is exempt i	from registration or

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b) Event #2 (c)Other events (d) Total events awards gala golf tournament (add col (a) through (total number) (event type) (event type) col (c)) Revenue 1 Gross receipts. 304,975 78,980 14,690 398,645 2 Less Contributions. 220,485 47,135 8,624 276,244 3 Gross income (line 1 minus 84,490 31,845 6,066 line 2) 122,401 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 225 35,550 35,775 7 Food and beverages 135,771 915 7,183 143,869 8 Entertainment 10,045 10,045 Other direct expenses 116,474 896 117,370 **10** Direct expense summary Add lines 4 through 9 in column (d) 307,059 11 Net income summary Subtract line 10 from line 3, column (d) -184,658 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes____ Yes % Yes % 6 Volunteer labor No No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No If "Yes," explain _

Sche	dule G (Form 990 or 990-EZ) 2017						F	Page 3
11	Does the organization conduct gaming	activities with nonmen	nbers?			□Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust g?	or a member of a partnership or other en	tity		□Yes	_	
13	Indicate the percentage of gaming acti	vity conducted in						
а	The organization's facility				13a			%
b	An outside facility				13b			%
14	Enter the name and address of the per	son who prepares the o	organization's gaming/special events book	s and rec	ords			
	Name							
	Address -							
15a	Does the organization have a contract revenue?	with a third party from	whom the organization receives gaming			□Yes	Пио	
b	If "Yes," enter the amount of gaming reasonable amount of gaming revenue retained by		e organization 🕨 \$	and the				
С	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 contracto	r				
17	Mandatory distributions							
а	Is the organization required under stat retain the state gaming license?	e law to make charitab	le distributions from the gaming proceeds	to		□Yes	Пио	
ь	Enter the amount of distributions requi	red under state law dis	stributed to other exempt organizations or	spent		□ 163		
	ın the organization's own exempt activ	•	•					
Pai			anations required by Part I, line 2b, c applicable. Also provide any addition					s).
	Return Reference		Explanation					
SCHE	EDULE G, PART I, LINE 2A	digital and direct mark the University paid Ro	TIES Effective July 1, 2017, the University keting services In addition to the professic yall and Company \$7,125 for postage expi al Inc the University continued to use thei	nal servi enses Afl	ce exp er Roy	enses show	vn in Par	

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DO NOT PROCESS DLN: 93493094000139 As Filed Data 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," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** 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 ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

funding Stevens' administration monitors these situations on an on-going basis and makes any appropriate adjustments

Scholarships and grants are awarded as financial assistance to students attending Stevens Institute of Technology Distribution and application of 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. Situations such as changes in financial need, changes in federal aid eligibility, changes in enrollment and receipt of aid from outside sources may affect a students eligibility to receive

Page 2

Schedule I (Form 990) 2017

(4) (5)

Grants and Other Assistance in

(6)

(7)

Part IV

Return Reference

US PART I. LINE 2

Schedule I (Form 990) 2017

Explanation

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	9309	4000	139	
Sch	edule J	Co	mpensati	ion Information	OM	IB No	1545-0	0047	
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.					2017		
•	tment of the Treasury	▶ Information ab	out Schedule J	(Form 990) and its instructions agov/form990.	is at C		to Pul		
	al Revenue Service ne of the organiza	ation	<u>www.irs.</u>	<u>.gov/107111990</u> .	Employer identificat		ectio Imber		
	VENS INSTITUTE OF				22-1487354				
Pa	rt I Questi	ons Regarding Compensat	ion		22-140/334				
	(·····					Yes	No	
1a				f the following to or for a person liste ly relevant information regarding the					
		or charter travel		Housing allowance or residence for	personal use				
	_	companions		Payments for business use of perso					
		nification and gross-up payments	∀	Health or social club dues or initiation					
	☐ Discretion	ary spending account	▼	Personal services (e g , maid, chauf	feur, chef)				
b		kes in line 1a are checked, did th Il of the expenses described abo		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1 b	Yes		
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2	Yes		
	directors, truste	es, officers, including the CEO/E.	Recutive Directo	r, regarding the items checked in line	: Iar				
3				ed to establish the compensation of the	ne				
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III				
	✓ Compens		~	Months and a section of					
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study					
		of other organizations	~	Approval by the board or compensa	tion committee				
4			90, Part VII, Se	ction A, line 1a, with respect to the f	ılıng organızatıon or a				
	related organiza								
a		ance payment or change-of-cont				4a		No	
b c	•	rreceive payment from, a supple rreceive payment from, an equit	•	· ·		4b 4c		No No	
·				plicable amounts for each item in Part	t III	40		NO	
), 501(c)(4), and 501(c)(29)	-						
5		ed on Form 990, Part VII, Sectior ontingent on the revenues of		the organization pay or accrue any					
а	The organization	٦٦				5a		No	
b	Any related orga	anization? 5a or 5b, describe in Part III				5b		No_	
_	-	•		kl					
6	compensation c	ontingent on the net earnings of	i A, iine Ia, did	the organization pay or accrue any					
a L	The organization					6a		No	
b	Any related orga	anization? 6a or 6b, describe in Part III				6b		No	
7	•	•	ι Δ line 1a did	the organization provide any nonfixe	d				
•		escribed in lines 5 and 6? If "Yes			u	7	Yes		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No	
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follov	v the rebuttable	presumption procedure described in	Regulations section	9			
For I	Danerwork Pedi	ction Act Notice, see the Inst	ructions for Fo	orm 990 Cat No 5	50053T Schedule J	/Form	990)	2017	

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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (C) Retirement (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC (E) Total of (F) and other benefits columns compensation Compensation in

		compensation		deferred	Bellettes	(0)(1) (0)	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
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	'	'	1		'	'	1
	1	<u> </u>		<u> </u>		<u> </u>	
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		1	Schedule J (Fo	orm 990) 2017

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 Return Reference Explanation Compensation Information PART I, The Stevens Institute of Technology guidelines regarding 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 LINE 1

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. The following officer/key employees also received a housing allowance which is included in their taxable income Kathy L Schulz George Korfiatis CHRISTOPHE PIERRE JEAN ZU 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 Personal services are provided to the President in the form of housekeeping by an employee of the Physical Plant department. The value of these services is included as taxable income and is disclosed as part of his Schedule J Part II. Column B (iii), Other Reportable Compensation Incentive Compensation, PART I, LINE 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

Schedule J (Form 990) 2017

Supplemental Information

consultant

Part III

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 Ithe Board of Trustees Incentive compensation for executive leaders is recommended by the Human Resources Committee of the Board of Trustees and approved by the Human Resources Committee or the full Board of Trustees as part of its consideration of this group (and as further described in Schedule O) Each year, the Human Resources Committee approves the annual performance goals for the executive leaders and will review with the President the process for determining them

for each other group or sub-group of employees Compensation Information, Part II Line Part II, line 4 contains information about the compensation of the Universitys President, Dr. Nariman Farvardin, paid during the year. All amounts were paid pursuant to the Presidents written five-year contract. In addition to his annual base salary of \$780,000, these amounts include an annual incentive compensation

payment of \$234,000 associated with achievement of separate metrics for the Universitys fiscal year ended 6/30/17 All incentive compensation amounts were based upon determinations by the full Board of Trustees that objective metrics relating to the Universitys Strategic Plan were achieved and, in many cases exceeded with exceptional performance. In addition, such amounts were reviewed and evaluated for market comparability by the Universitys independent compensation

Page 3

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

Form 990, Schedule	orm 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	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 on prior Form 990					
1Alan F Blumberg Trustee/Professor to	(1)	317,503			23,913	6,358	347,774						
1/30/18	(11)	0	0	0	0	0	0						
1 Rainer Martini Trustee/Professor	(1)	168,417			9,989	18,751	197,157						
	(11)	0	0	0	0	0	0						
2 Michael zur Muehlen Trustee/Profess as of	(1)	234,899			12,936	18,658	266,493						
5/22/18	(11)	0	0	0	0	0	0						
3 Narıman Farvardın President/Trustee	(1)	780,000	234,000	21,863	27,000	141	1,063,004						
	(II)	0	0	0	0	0	0						
4 Joseph E Cassidy AVP Finance	(I)	234,498			21,156	141	255,795						
FI 1 Manage	(11)	0	0	0	0	0	0						
5 Louis J Mayer VP FINANCE/TREAS	(1)	384,456	10,000		27,000	18,751	440,207						
sk il i c l i	(11)	0	0	0	0	0	0						
6 Kathy L Schulz VP, GENERAL COUNSEL/Secretary	(1)	325,167	10,000	39,600	24,300	6,358	405,425						
	(11)	0	0	0	0	0	0						
7 Elizabeth Shelton AVP Investments/Assist Treas	(1)	201,019	2,800		18,394	141	222,354						
8 Anthony Barrese	(1)	235,442	5,000	U	20,101	14,170	274,713						
Interim Dean to 12/31/17	(11)	0			0	0	0						
9Mohammad Dehghani	(ı)	392,655		<u> </u>	27,000	17,736	437,391						
Vice Provost	(II)	0	0	0	0	0	0						
10David Dodd VP FOR INFO TECHNOLOGY	(1)	261,605	5,000		26,905	14,170	307,680						
TOTAL IN STREET IN SECTION OF SEC	(11)	0	0	0	0	0	0						
11Robert Maffia VP FOR FACILITIES	(I)	270,389	7,500	8,400	24,300	18,658	329,247						
	(11)	0	0	0	0	0	0						
12MaryBeth Murphy VP ENROLLMENT	(1)	282,432			27,000	10,207	319,639						
MANAGEMENT	(11)	0	0	0	0	0	0						
13Warren Petty VP HR AS OF 2/6/17	(1)	196,472	17,000		16,500	118	230,090						
	(11)	0	0	0	0	0	0						
14 Christophe Pierre Provost	(1)	519,903	25,000	29,666	24,300	14,235	613,104						
	(11)	0	0	0	0	0	0						
15 Gregory Prastacos DEAN	(1)	392,604	12,000		27,000	18,658	450,262						
	(11)	0	0	0	0	0	0						
16 William Remington VP Development	(1)	347,068			27,000	141	374,209						
	(11)	0	0	0	0	0	0						
17 Jean Zu DEAN AS OF 5/1/2017	(1)	212,704	4,000	20,539	19,500	6,805	263,548						
	(11)	0	0	0	0	0	0						
18 George Korfiatis Professor	(1)	427,811		52,374	27,000	15,745	522,930						
	(11)	0	0	0	0	0	0						
19 Constantin Chassapis VICE PROVOST	(1)	336,622			27,000	14,235	377,857						
	(11)	0	0	0	0	0	0						

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred (B)(i)-(D)benefits column (B) (i) Base Compensation (ii) (iii) reported as deferred on compensation Bonus & incentive Other reportable prior Form 990 compensation compensation 21William Rouse 329,836 22,485 141 352,462 Professor

21,410

141

330,946

1Dinesh Verma Professor/Exec Director	(1)	315,831			21,851	18,751	' I	
	(11)	0	0	0	0	0	0	
2Keith Sheppard	(1)	256,786	2,000		17,181	18,751	294,718	

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

309,395

Professor/FORMER KEY

EMPLOYEE 3Hady Salloum

Professor

efi	le GRAPHIC prin	t - DO NOT	PROCESS	As Filed Data -									DLN: 9	3493	09400	0139				
	nedule K orm 990)			the organization and	Information o	990, Part informatio	IV, line	24a. Pı		criptions,			2	No 154	7					
	rtment of the Treasury nal Revenue Service	►Information about Schedule K (Form 990) and its instructions is at <u>www.irs.qov/form990</u> .												Open to Public Inspection						
Name	of the organization /ENS INSTITUTE OF	TECHNOLOGY	,								Emplo	yer iden	tıficatıoı	numbe	r					
											22-14	87354								
Part I Bond Issues (a) Issuer name (b) Issuer EIN (c) (c)		(c) CUSIP #	(d) Date Issued	(e) Issue price			Description	on of purpose	(g) De	efeased	feased (h) O			i) Pool						
									No	ISS	ıer									
A	NJ EDU FAC AUTH S ISSUE 2017 SERIES		22-1829511	646066M31	04-04-2017	132,5	89,361	1998 &	Yes à 2007 REFUNDING/Cap Proj				Yes	X	Yes	X				
В	NJ EDU FAC AUTH O SERIES 2016B	CAPITAL IMP	22-1829511	646066F54	12-20-2016	30,6	76,062	FINANC	CING NEW	N	X		Х	Х						
С	NJ EDU FAC AUTH (Series 2016A	Capital Imp	22-1829511	000000000	07-26-2016	20,8	05,115	2005 &	2005 & 2006 RefundING			Х		Х	Х					
D	NJ EDU FAC AUTH E SERIES 2014B	ELF ISSUE	22-1829511	6460658յ4	01-30-2014	8,1	31,497	FINANC	CE IT INFRA		Х		Х	Х						
Pa	rt III Proceeds	;		<u> </u>							l									
	Amount of bands	raturad					A		E	-	C				D					
1 2								0		180,478		222,	,639			409,525				
3							132,589	-		17,575,574		1,182,	407		4	500,000				
4							0 0				0			.,,,,,,,,						
5							0 0				0			0						
6	Proceeds in refund	ling escrows .				0 0			0					0						
7	Issuance costs fro	m proceeds .				911,558 141,254				2,752			30,311							
8	Credit enhanceme	nt from proce	eds			0 0						0	0							
9	<u> </u>	•	•			0 0				0			0							
10						31,762,051 6,843,493						1,179	,655	4,469,689						
11						60,877,803 0							0	0						
12							39,03	7,949		10,590,827			0			0				
13	fear or substantia	completion .			• •					20:			2017							
	Were the honds is	sued as part o	of a current refund	ling issue?		Yes	No	+	Yes	No X	Yes X	No		Yes		No X				
14		*					X	+			^	X				X				
15		e the bonds issued as part of an advance refunding issue?								X	V					<u></u>				
16		the final allocation of proceeds been made?					 			^	X									
17	proceeds?		<u> </u>			Х			X		Х			Х						
Pai	t IIII Private B	usiness Us	е			Γ														
						Yes	A No	. 	Yes	No No	Yes	No		Yes	D 	No No				
1	Was the organizat	ion a partner i cempt bonds?	ın a partnership, d	or a member of an LLC	, which owned property	1.03	×		. 05	X		X				×				
2		e arrangemen	its that may resul	t in private business us			×			х		Х				X				
For				uctions for Form 990	n.	Ca	t No 5	0193F				S	chedule	K (Fo	rm 990)) 2017				

За

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Part IV

Arbitrage

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Page 2

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Schedule K (Form 990) 2017

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Yes Are there any management or service contracts that may result in private business use of 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?

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

counsel to review any research agreements relating to the financed property?

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 unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Does the bond issue meet the private security or payment test? . . .

property?.........

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

No rebate due?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Are there any research agreements that may result in private business use of bond-financed

Χ Χ Х

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	Albitiage (col	initiaed)						I					
			Yes	A No		Yes No		Yes No			Yes D	No	
5a	Were gross proceeds inv	rested in a guaranteed investment contract	Yes	X		res	No X	Yes	No X		res	X	
ь	Name of provider	0	1	0			0	•	0				
С	Term of GIC												
d	Was the regulatory safe the GIC satisfied?	harbor for establishing the fair market value of											
6	Were any gross proceed period?	s invested beyond an available temporary		х			×		х			X	
7	Has the organization est requirements of section	ablished written procedures to monitor the 148?	х			Х		х			Х		
Pa	t V Procedures To	o Undertake Corrective Action				·				·			
						A		В	C			D	
					Yes	No	Yes	No	Yes	No	Yes	No	
	requirements are timely	ablished written procedures to ensure that violal identified and corrected through the voluntary of available under applicable regulations?			X		X		х		X		
Pā	rt VI Supplemen	tal Information. Provide additional inform	mation for res	ponses to o	questions	on Sche	dule K (see ır	nstructions).					
	Return Reference		Explanati	ion									
	1 BOND ISSUE A - Columns (E) & (F) These bonds were issued in the par amount of \$132,589,361 for refunding and legal defeasance of the 1998 Series I and 2007 Series A Bonds and to finance (a) the construction, renovation and equipping of the new research and academic buildings comprising the Gianforte Family Academic Center, (b) the construction, renovation and expansion of the existing Babbio Garage, (c) the construction, renovation, expansion and equipping of certain additional facilities at the University for research and education, (d) preconstruction costs related to a proposed combined student residence and university for research and education, (d) preconstruction costs related to a proposed combined student residence and university for research and education, (d) preconstruction costs related to a proposed combined student residence and university for research and education, (d) preconstruction costs related to a proposed combined student residence and university for research and education, (d) preconstruction costs related to a proposed subject of the proposed state-backed program to finance capital improvements for New Jersey Stevens received and for \$17,434,950 in part of the proposed of \$142,715,000 were received a total of \$17,434,500 is to be used to finance a portion of the construction of the Gianforte Family Academic Center Stevens principal portion is \$8,522,585 and is recorded on THE books as long term debt, payable over 20 years 3 BOND ISSUE C - COLUMNS (E) AND (F) These bonds were issued in the par amount of \$252,270,000 by the NJEFA and the pooled amount was distributed to various New Jersey colleges. Stevens received allocated proceeds of \$1,182,407 which were used to advance refund the balance of NJEFA's Capital Improvement Fund issues, Series 2005A and Series 2006A. The 2005A and 2006A 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												

efil	e GRAPHIC pr	int - DO NOT PF	ROCESS	As Filed Data -			DLN:	9349309	4000	139
	EDULE M		N	loncash Contri	hutions			OMB No 1	.545-0	047
(For	m 990)		organizati	ons answered "Yes" on F		9 or 3	0.	20	17	7
		► Attach to Form		le M (Form 990) and its i	netructione is at www.ire	. aou/	formoon			
Intern	tment of the Treasury		out Schedu	ie iii (Foriii 990) and its i				Open to Inspe	ection	
	e of the organizat ENS INSTITUTE OF T					Empic	oyer ident	ification n	umbei	-
						22-14	87354			
Pa	rt I Types	of Property								
			(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	1		(d) d of determin ontribution a		.s
1	Art—Works of art									
2	Art—Historical tre					-				
3	Art—Fractional in					-				
4	Books and public Clothing and hou					-				
5	_									
6	Cars and other v	ehicles								
7	Boats and planes									
8	Intellectual prope	,								
9	Securities—Public	•	X	23	147,717	FMV				
	Securities—Close	•								
11	Securities—Partr or trust interest									
12	Securities—Misce									
13	Qualified conserve contribution—Hi structures	storic								
14	Qualified conserv	/ation								
	Real estate—Res									
	Real estate—Con									
17	Real estate—Oth									
18 19	Collectibles . Food inventory									
20	Drugs and medic									
21	Taxidermy									
	Historical artifact	:	Х	5	6,000	fmv				
23	Scientific specim	ens			·					
24	Archeological art	ifacts								
	Other ► (Equipment)		X	2	179,050	FMV				
26	Other ► (D,BEV& OTHER)	<u> </u>	Х	4	13,456	fmv				
27	Other ▶ ()								
28	Other ▶ (
29				tion during the tax year for I, Part IV, Donee Acknowled		29				
	_	·							Yes	No
30a	must hold for at		om the date	contribution any property is of the initial contribution, a				mpt		
b	If "Yes," describ	e the arrangement i	ın Part II					30a		No_
31	Does the organi	zation have a gift ac	ceptance po	olicy that requires the review	v of any nonstandard contri	butions	s?	31	Yes	
32a		zation hire or use th		or related organizations to s	olicit, process, or sell nonca	sh •		32a	Yes	
	If "Yes," describ									
33	If the organizati describe in Part	•	amount in	column (c) for a type of pro	perty for which column (a)	ıs chec	ked,			
Eor D		on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271		Schoo	lule M (Form	000)	2017)

Schedule M (Form 990) (2017)	Page 2
Part II Supplemental Info Provide the informat I, column (b), the ni	cion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part Lumber of contributions, the number of items received, or a combination of both. Also complete
this part for any add	litional information.
Return Reference	Explanation
	LINE 9 - To the extent that the University receives contributions of securities, the University's investment brokerage bank is tasked with selling those securities promptly LINE 32 - The University uses various galleries to facilitate the sale of art. The University is reporting in Part I, Column B, the number of items received
	Schedule M (Form 990) (2017)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493094000139 OMB No 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Name of the organization **Employer identification number** STEVENS INSTITUTE OF TECHNOLOGY 22-1487354 990 Schedule O, Supplemental Information Return Explanation Reference The full legal name of the University is The Trustees of the Stevens Institute of Technolo Governing Body and gy Stevens Institute of Technology is registered in the State of New Jersey as a "doing b Management usiness name" Stevens' Board of Trustees delegated to a prominent investment bank the man - Form 990, agement of Stevens' endowment pursuant to contracts which address the scope of the delegat Part VI, Line ion of authority, monitoring by Stevens' management and the Board, and reporting, among ot her matters The University retained Attain, LLC, to provide the services of a professiona I trustee to serve as the Chair of Stevens Audit Committee (as contemplated by the Univers ity's by-laws) During fiscal year 2018, the university paid Attain \$45,240 for these serv ices This role was filled by Ronald E Salluzzo, a senior partner in the higher education and academic medical center practice at Attain Form 990 Review - Form 990, Part VI, Line 11B This Form 990 was prepared by members of the finance and legal offices of the Univers ity together with its outside tax and accounting firm specializing in higher education. Th e Form 990 was then presented to the Audit Committee of the Board of Trustees for review a nd approval Following this process and any modifications recommended by the Audit Committ ee, the Form 990 was presented to a meeting of the full Board of Trustees of the Universit y and approved in accordance with the By-Laws of the University

Return Reference	Explanation
Conflict Of Interest - Form 990, PART VI, LINE 12C	The University's conflict of interest policy requires ongoing compliance and self-reporting of conflicts. It also provides for completion of an annual disclosure form by all Truste es, officers and faculty. Each disclosure form is reviewed by the Office of Audit, Risk and Compliance, and disclosure forms for trustees and officers are reviewed by the Office of General Counsel, all conflicts of interest are reported to the Audit Committee of the Board and to the Board of Trustees. Information disclosed in the disclosure forms which indice ates the 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 on redevice supervised by the Chair of the Board of Trustees or the Chair of the Audit Commit tee, 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, LINES 15A & 15B	The compensation of the President and five highest compensated employees of the University was approved by an independent Human Resources Committee of the Board of Trustees and the full Board of Trustees, in each case acting at meetings duly held. IN ADDITION TO APROVIN G THE PRESIDENT'S COMPENSATION FOR CALENDAR YEAR 2017, THE COMPENSATION FOR THE FOLLOWING 5 ADDITIONAL POSITIONS WERE APPROVED. Provost and University Vice President for academic a ffairs Chief Financial Officer and Treasurer Dean of School of Business Vice Provost for R esearch Vice President, General Counsel and Secretary With respect to the following additional positions, the Human Resources Committee of the Board of Trustees, acting on behalf of the Board of Trustees, approved the compensation at duly held meetings of the Committee. The Board was fully informed of the Committees actions. Vice President for Alumni and Development Vice President for Facilities and Campus Operations Vice President for Enrollment Management and Student Affairs Vice President for Information Technology Vice President for communications and Marketing Vice President for Information Technology Vice President for Communications and Marketing Vice President for Human Resources Chief of Staff and Director of Government and Community Relations Faculty Trustee (2) Professor, Endowed Chair (Former Provost) All such compensation was determined based upon recommendations from the President (except with respect to the President, whose compensation is recommended by the Board of Trustees, and the Deans and faculty, whose compensation is recommended by the Provost) The University retains the services of a national professional compensation consulting firm to perform a comprehensive compensation assessment of the salaries of all members of the University salaries with a core comparison market. The results of the study are reviewed and discussed annually with the Board's Human Resources Committee and the Board of Trustees, as those bodies approve executive compensation. The Secr

Return Reference	Explanation
Disclosure - FORM 990.	The governing documents of the University together with charters for committees of the Boa
PART VI,	sity are all made available on the University's website (www stevens edu). In addition, a
LINE 19	variety of other documents and materials regarding the university and its operations as we

Il as the other policies of the university, are also available on the website

Return Reference	Explanation
of Net Assets t E - FORM 990, ,3:	Post-Retirement Benefits - Other than Net periodic benefits costs \$ 501,400 Post-Retiremen Benefits - Other Components of Periodic Costs (375,423) Uncollectible Contributions (339 324) CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 219,447 ROUNDING (1) TOTAL \$ 5,099

Return Explanation
Reference

FORM 990,	UNRELATED BUSINESS TAXABLE INCOME FROM FORM 990-T THE AMOUNT REPORTED ON PART I, LINE 7B I
PART I, LINE	NCLUDES CERTAIN FRINGE BENEFIT EXPENSES SUBJECT TO UNRELATED BUSINESS TAXABLE INCOME UNDER
7B	RC SECTION 512(A)(7) AMOUNTS THAT ARE NOT REVENUE AND, THEREFORE, NOT REPORTED AS SUCH O
	N FORM 990. PART VIII

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	094000	139
SCHEDULE R (Form 990)	▶ 0	Related O	_		s" on Form	990, Part		-		37.		20	1545-004 17	17
Department of the Treasury Internal Revenue Service	•	Information about S	chedule I	R (Form 990)) and its in	structions	s is at <u>www</u>	.irs.gov/f	orm990	<u>0</u> .		Open to	o Public ection	C
Name of the organization STEVENS INSTITUTE OF TECHNOLOG	GY								Emp	loyer identif	icatior	n number		
										487354				
Part I Identification	of Disregarded E	ntities Complete If t	he organ	ization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	(a) EIN (if applicable) of disre	egarded entity		(b) Primary a			c) nicile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	(f Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Exc npt organizations du		s Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	ıt had one or	more	
Name, address, an	(a) d EIN of related organızatı	on	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled
													les	
For Paperwork Reduction Ac	t Notice, see the Ins	tructions for Form 9	90.		Ca	it No 5013	 B5Y				Sch	edule R (Form	990) 20	117

Part III Identification of Related Organization one or more related organization	anizations Taxable as a lastreated as a partnership	Partnership during the ta	Complet x year.	e if the org	anızatıor	n answ	ered "Ye	s" on Form	990,	Part I\	V, line 34 b	ecaus	e it ha	d
(a) Name, address, and EIN related organization	N of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	t Predomina ling income(rela		(f) Share of total incom		(h) Disproprtionat allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partr	al or Peging o	(k) ercentage wnership
									Yes	No		Yes	No	
Part IV Identification of Related Orga because it had one or more relat		s a corporation	on or tru	st during th	ie tax ye	ār.								(1)
(a) Name, address, and EIN of related organization	Primary activity	(c) Legal domicile (state or foreign country)		Direct			f entity S corp, rust)	(f) Share of total Income	Share	(g) of end-o year ssets	owner		[(13)	(i) ion 512(b) controlled entity?
(1)Castle Point Holdings Inc	Tech Transfer	N		Stevens	s Instit	C Corp	-9,;			634,62	29 100 00	100 000 %		5 140
One Castle Point on hudson Hoboken, NJ 07030 20-4264786														
(2)CHARITABLE REMAINDER TRUST (1)	TRUST	0	Н	NA		TRUST							Yes	5
(3)CHARITABLE REMAINDER UNITRUST (5)	TRUST			NA		TRUST							Yes	5
	ı								1					

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.												
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No									
1 During 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 Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No									
b Gift, grant, or capital contribution to related organization(s)	1b		No									
c Gift, grant, or capital contribution from related organization(s)	1c		No									
d Loans or loan guarantees to or for related organization(s)	1d	Yes										
e Loans or loan guarantees by related organization(s)	1e		No									
f Dividends from related organization(s)	1f											
g Sale of assets to related organization(s)	1 g		No									
h Purchase of assets from related organization(s)	1h		No									
i Exchange of assets with related organization(s)	1i		No									
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No									
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No									
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No									
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No									
o Sharing of paid employees with related organization(s)	10		No									
p Reimbursement paid to related organization(s) for expenses	1 p		No									
q Reimbursement paid by related organization(s) for expenses	1q		No									

Page **3**

-	The state of the s			ı							
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No							
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No							
0	Sharing of paid employees with related organization(s)	10		No							
p	Reimbursement paid to related organization(s) for expenses	1p		No							
q	Reimbursement paid by related organization(s) for expenses	1q		No							
r	Other transfer of cash or property to related organization(s)	1r		No							
s	Other transfer of cash or property from related organization(s)	1s		No							
2	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) (b) (c) (d)										

(b) Transaction type (a-s) (a)
Name of related organization (c) Amount involved (d)
Method of determining amount involved 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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017		

Schedule R (Form 990) 2017 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation Schedule R, Part IV, Column (C) The charitable remainder unitrusts listed on Part IV, line 2 have the following legal domiciles MD NJ (2) NC PA

Schedule R (Form 990) 2017