A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008

Form **990** 

Department of the Treasury

Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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

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

OMB No 1545-0047

Open to Public Inspection

В	Check if a	pplicable	Please	C Name of organization				D Emplo	yer i	dentification	number
_	Address ch		use IRS	Rider University				21-06	506	78	
$\vdash$	Name cha	inge	label or print or	,	box if mail is not delivered to	street addr	ess) Room/suite	E Teleph	one i	number	
	initial retu	_	type. See Specific	2083 Lawrenceville Road				(609)	896	-5016	
	- Inal retur		Instruc- tions.	City or town, state or cou Lawrenceville, NJ 086483					_		h 🔽 Accrual
_	Amended		tions.	Lawrenceville, NJ 000403	1033			C Oth	er (sp	ecify) 🕨	
_				,							
1 /	Application	n pending		F04(-)(0)		-1	H and I are i	not applicab	le to :	section 527 o	raanızatıons
					and 4947(a)(1) nonexempt chedule A (Form 990 or 99			a group ret	urn fo	or affiliates?	Yes V No
G	Web sit	e: 🕨 ww	w rıder edu				H(c) Are all				Yes No
J	Organiza	ation type	e (check only	one) 🕨 🔽 🐯 501(c) (3)	◀ (Insert no )	or <b>5</b> 27	` `			See instruction	,
					rting organization <b>and</b> its gross		<b>H(d)</b> Is this	a separate ed by a grou		•	organization Yes 🔽 No
			than 25,000 nplete return	A return is not required, but	f the organization chooses to f	lle a return,			•	lumber 🟲	1 163 1 110
			•				_				ot required to
L	Gross r	eceipts	Add lines 6	5b, 8b, 9b, and 10b to li	ne 12 🕨 225,976,975					0, 990-EZ, or	
P	art I				es in Net Assets or	Fund Ba	lances (See	e the in	stru	ıctions.)	
	1	Contrib	utıons, gıft	s, grants, and sımılar ar	nounts received						
	а	Contrib	utions to d	onor advised funds .		1a					
	b	Direct	oublic supp	ort (not included on line	1a)	1b	7,04	7,243			
	С	Indirec	t public sup	oport (not included on lii	ne 1a)	1c		6,938			
	d	Govern	ment contr	ibutions (grants) (not in	cluded on line 1a)	1d	6,14	5,887			
	e	Total (a	add lines 1a	a through 1d) (cash \$ <u>1</u>	2,979,283 noncash \$	220,785	)		1e		13,200,068
	2	Progran	n service r	evenue including goverr	ment fees and contracts	(from Part	VII, line 93)		2	1	155,615,321
	3	Membe	rship dues	and assessments .					3		
	4	Interes	t on saving	ıs and temporary cash ıı	nvestments				4		1,843,614
	5	Divider	ids and inte	erest from securities .					5		1,243,554
	6a	Gross	ents			6a	40	6,207			
	b	Less r	ental exper	nses		6b					
	С	Netren	tal ıncome	or (loss) subtract line 6	b from line 6a				6с		406,207
별	7	Otherı	nvestment	ıncome (describe 🕨 )					7		
Reven	8a	Gross	amount fron	n sales of assets	(A) Securities		(B) O ther				
œ		other th	nan invento	ry	52,515,701	8a					
	b	Less cos	st or other bas	sis and sales expenses	51,215,925	8b					
	С	Gain or	(loss) (att	ach schedule)	1,299,776	8c					
	d	Netgaı	n or (loss)	Combine line 8c, colum	ns (A) and (B)			. <u> </u>	8d		1,299,776
	9	Special	events and	d activities (attach sche	dule) If any amount is fr	om <b>gamin</b> g	g, check here 🕨	·			
	а	Gross	evenue (no	ot including \$	of						
		contrib	utions repo	rted on line 1b)	· · · · ·	9a					
	Ь	Less d	ırect exper	nses other than fundrais	ing expenses	9b					
	С		•		Subtract line 9b from line	9a		· <u>  •</u>	9с		
	10a			entory, less returns and		10a					
	Ь		•	Is sold		10b					
	С		, ,	, ,	n schedule) Subtract line 10b f			<del></del>	.0с		
	11		•	•				<b>⊢</b>	11		1,152,510
	12				7,8d,9c,10c, and 11				12		174,761,050
آن	13				(6)				13	1	10.500.351
ÿ	14	_			lumn (C))			_	14		19,509,251
Expenses	15							<u> </u>	15		1,699,892
ш	16				· · · · · · · · · · · · · · · · · · ·			<u> </u>	16		64 642 001
_	17				mn (A)				17		10 118 150
3	18		` '	•	ne 17 from line 12			<b>⊢</b>	18	4	10,118,159
4	19				of year (from line 73, colu ces (attach explanation)				19		L08,375,335 - 5,609,076
Ę	20		-		, ,			· —	20	4	-5,609,076
	21				Combine lines 18, 19, a				21		112,884,418
101	riivac\	, act and	a raperwor	k keduction ACT NOTICE,	see the separate instruc	. 1011S.	Cat No 11282	<u> </u>		ror	m <b>990</b> (2007)

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	1	(A) Total	( <b>B</b> ) Program services	(C) Management and general	( <b>D</b> ) Fundraising
22a	Grants paid from donor advised funds (attach Schedule) (cash $\$^0$ noncash $\$^0$ )  If this amount includes foreign grants, check here	22a				
22b	Other grants and allocations (attach schedule) $(\cosh \$ \frac{1,794,369}{}$ noncash $\$ \frac{34,409,805}{}$ ) If this amount includes foreign grants, check here	22b	36,204,174	36,204,174		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25a	Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	1,525,019	472,781	646,602	405,636
b	Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b	105,336	105,150	186	
c	Compensation and other distributions not icluded above to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ (attach schedule)	25c				
26	Salaries and wages of employees not included on lines 25a, b and c	26	59,356,105	50,634,221	8,103,039	618,845
27	Pension plan contributions not included on lines 25a, b and c	27	3,576,438	3,114,937	401,290	60,211
28	Employee benefits not included on lines 25a - 27	28	10,992,431	9,567,796	1,238,766	185,869
29	Payroll taxes	29	4,346,150	3,785,301	487,676	73,173
30	Professional fundraising fees	30				·
31	Accounting fees	31	151,000		151,000	
32	Legal fees	32	966,735		966,735	
33	Supplies	33	1,898,927	1,565,830	300,671	32,426
34	Telephone	34	474,147	346,914	123,166	4,067
35	Postage and shipping	35	564,743	430,239	92,415	42,089
36	Occupancy	36	16,454,562	14,356,494	2,046,229	51,839
37	Equipment rental and maintenance	37	1,525,742	784,142	741,087	513
38	Printing and publications	38	1,646,155	1,038,634	519,410	88,111
39	Travel	39	3,630,366	3,136,844	460,056	33,466
40	Conferences, conventions, and meetings	40	966,373	966,373		
41	Interest	41	2,128,774	2,064,698	50,878	13,198
42	Depreciation, depletion, etc (attach schedule)	42	5,489,389	5,324,158	131,197	34,034
43	Other expenses not covered above (itemize)					
а	FOOD SERVICE	43a	6,303,148	6,303,148		
Ь	OTHER PROFESSIONAL SERVICE FEE	43b	4,351,505	2,756,075	1,576,420	19,010
c	ADVERTISING & PUBLIC RELATIONS	43c	1,186,282	367,298	781,579	37,405
d	COST OF GOODS SOLD	43d	24,804	24,804		
е	ALLOCATIONS AND BAD DEBTS	43e	597,428	83,737	513,691	
f	INVESTMENT ADVISORY FEES	43f	177,158		177,158	
g		43g				
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13—15)  Costs. Check	44	164,642,891	143,433,748	19,509,251	1,699,892

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particulai
organization. How the public perceives an organization in such cases may be determined by the information presented on its return
Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and
accomplishments

All o publ char	rganizations must describe their exempt purpose achievements	ENABLE ITS STUDENTS TO ACQUIRE KNOWLEDGE, THINK CRITICALLY, COMMUNICATE CLEARLY, AND LEAD EFFECTIVELY SO THEY MAY ENJOY FULFILLING LIVES AND SUCCESSFUL CAREERS A CHALLENGING AND CARING INSTITUTIONAL ENVIRONMENT ENCOURAGES AND SUPPORTS STUDENTS AS THEY RECOGNIZE AND DEVELOP THEIR UNIQUE POTENTIALS IN THE PREPARATION OF GRADUATES FOR A KNOWLEDGE-BASED ECONOMY, THE PRIVATE UNIVERSITY'S STRATEGIC PLAN OBJECTIVE IS TO BECOME THE PREMIER CAREER PREPARATION UNIVERSITY IN THE REGION THE VISION IS GROUNDED WITHIN THE CONTEXT OF A STRONG LIBERAL ARTS FOUNDATION AND EXPERIENTIAL LEARNING OPPORTUNITIES THAT PROMOTE INTELLECTUAL DEVELOPMENT AND PROFESSIONAL SUCCESS RIDER UNIVERSITY IS AN INDEPENDENT, NON- SECTARIAN, COEDUCATIONAL INSTITUTION WITH APPROXIMATELY 5,900 FULL AND PART- TIME STUDENTS ENROLLED IN PROGRAMS LEADING TO ASSOCIATE, BACCALAUREATE, AND MASTERS DEGREES OR CERTIFICATES OF ADVANCED STUDY IN THE 143-YEAR HISTORY, RIDER EVOLVED FROM A SMALL IN a clear and concise manner State the number of clients served, tible (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others )
	(Grants and allocations \$	If this amount includes foreign grants, check here 🕨 🦵	
b			
c	(Grants and allocations \$	If this amount includes foreign grants, check here 🕨 🦵	
	(Grants and allocations \$	If this amount includes foreign grants, check here 🕨 🦵	
d	(Grants and allocations \$	Ti tills amount includes loreign grants, check here	
	(Grants and allocations \$	If this amount includes foreign grants, check here 🕨 🦵	
	Other program services (attach schedule) (Grants and allocations \$	If this amount includes foreign grants, check here 🕨 🦵	
f	Total of Program Service Expenses (should equal lin	ne 44, column (B), Program services) 🕨	143,433,748

Part IV Balance Sheets (See the instruction
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Pa	art IV	Balance Sheets (See the instru	ctions	s.)				
Not	te:	Where required, attached schedules and amou column should be for end-of-year amounts on		thin the description	( <b>A</b> ) Beginning of year			(B) End of year
45		Cash—non-interest-bearing	52,662	45		91,509		
	46	Savings and temporary cash investments	16,566,457	46		22,344,941		
			1					
		Accounts receivable	47a	6,430,761	5 00 4 000			4.040.400
	Ь	Less allowance for doubtful accounts	47b	1,788,273	5,634,882	47c	+	4,642,488
	48a	Pledges receivable	48a	7,539,623				
	Ь	Less allowance for doubtful accounts	r doubtful accounts 48b 11,254					7,528,369
	49	Grants receivable	<u> </u>		2,183,820	49		1,673,727
	50a	Receivables from current and former office				<b>50</b> -		
	ь	key employees (attach schedule) Receivables from other disqualified person 4958(c)(3)(B) (attach schedule)	efined under section		50a 50b			
	51a	Other notes and loans receivable (attach schedule)	1					
ø.		Less allowance for doubtful accounts	51a 51b	10,022,930	7,443,707	51c	<b>4</b> €∓1	7.837.977
Assets	52	Inventories for sale or use	210	2,104,933	7,443,707	510	123	1,037,977
4	53	Prepaid expenses and deferred charges .			3,654,407	53	+-	4,044,366
		Investments—publicly-traded securities		· Cost FMV	68,758,233	54a	+-	58,879,260
		Investments—other securities (attach sch		' ' ' H	23,928,128	54b	<b>193</b>	21,522,252
	55a	Investments—land, buildings, and	20,020,120	345	<del>  _</del>			
		equipment basis	55a	3,190,000				
	b	Less accumulated depreciation (attach schedule)	55b		3,190,000	55c	<b>%</b> 3	3,190,000
	56	Investments—other (attach schedule) .			8,150,636	56	25	12,239,397
	57a	Land, buildings, and equipment basis	57a	150,195,399				
	b	Less accumulated depreciation (attach schedule)	57b	79,121,229	68,517,603	57c		71,074,170
	58	Other assets, including program-related in	vestme	ents				
		(describe ►	2,976,755	58	<b>%</b>	2,642,138		
	59	Total assets (must equal line 74) Add line	c 15 th	rough 58	215,577,830	59		217,710,594
	60	Accounts payable and accrued expenses			16,584,783	60	+-	17,253,623
	61	Grants payable		<b> </b>	,	61	+	,===,===
	62	Deferred revenue		ŀ	10,632,961	62	1	9,241,443
e)	63	Loans from officers, directors, trustees, an	d key e	mployees (attach				_
I		schedule)				63		
<b>!</b> ;	64a	Tax-exempt bond liabilities (attach schedu	ıle) .	[	65,056,915	64a	193	62,575,313
	Ь	Mortgages and other notes payable (attach	sched	ule) [	2,492,493	64b	%	2,381,510
	65	Other liablilities (describe 🟲		)	12,435,343	65	95	13,374,287
	66	<b>Total liabilities</b> Add lines 60 through 65			107,202,495	66		104,826,176
	Orga	nnizations that follow SFAS 117, check here					1	<u></u>
_		67 through 69 and lines 73 and 74						
8	67	Unrestricted		ŀ	69,401,666		—	70,844,862
Balances	68	Temporarily restricted		ŀ	11,523,568	68	+	10,978,041
<u></u>	69	Permanently restricted	27,450,101	69	+-	31,061,515		
Fund	Orga	anizations that do not follow SFAS 117, chec complete lines 70 through 74						
5	70	Capital stock, trust principal, or current fur		70				
ets.	71	Paid-in or capital surplus, or land, building,		71				
Assa	72	Retained earnings, endowment, accumulate		72				
Net	73	Total net assets or fund balances Add line through 72 (Column (A) must equal line 19						
		line 21)			108,375,335		+	112,884,418 217,710,594
	1 /4	Total liabilities and net assets / fund balances	E Add line	s nn and / t	Z15.577 830	/4	1	Z17.71U 594

Par	t IV-A	Reconciliation of Revenuthe instructions.)	ue per Audited Finar	ncial Sta	tements V	Vith Reven	ue per	Return (See
<u> </u>	Total	revenue, gains, and other suppor	t per audited financial stat	tements			а	132,963,759
b	A mou	ints included on line <b>a</b> but not on	Part I, line 12					
1		nrealized gains on investments		Ь1		-5,415,959		
2		ted services and use of facilities		b2		, ,	1	
3	Recov	veries of prior year grants		b3			1	
4		(specify)					1	
	 A dd I	ines <b>b1</b> through <b>b4</b>		b4	<u> </u>		 	-5,415,959
c		act line <b>b</b> from line <b>a</b> .					c	138,379,718
d		ints included on Part I, line 12, bu						133,5,7,10
1		tment expenses not included on				177,158		
				d1			]	
2	Other	(specify) 💆						
				_ d2	]	36,204,174	4	
		ines <b>d1</b> and <b>d2</b>					d	-5,415,959
e		revenue (Part I, line 12) Add line					<sub>e</sub>	174,761,050
Par		Reconciliation of Expens		ncial St	atements	With Eyne		r Return
a		expenses and losses per audited					a	128,454,677
b		ints included on line <b>a</b> but not on						
1		ted services and use of facilities	·	Ь1				
2	Prior	year adjustments reported on Par				193,118	1	
3		es reported on Part I, line		b2			-	
,	20 .			Ь3			1	
4	Other	(specify)		<b>b4</b>				
	A dd I	ines <b>b1</b> through <b>b4</b>		·	·		ь	193,118
с	Subtr	act line <b>b</b> from line <b>a</b> .					с	128,261,559
d		ints included on Part I, line 17, bi						<u> </u>
1		tment expenses not included on l				177,158		
			,	d1		,		
2	Other	(specify)		d2		36,204,174		
	— — A dd I	nes <b>d1</b> and <b>d2</b> .		. <u></u>			d	36,381,332
e	Total	expenses (Part I, line 17) Add li	nes <b>c</b> and					164,642,891
	d.						e	
Par	t V-A	Current Officers, Director director, trustee, or key empinstructions.)				they were r	not comp	
	(A)	Name and address	<b>(B)</b> Title and average hours per week devoted to position		mpensation i <b>d, enter -0)</b>	(D) Contribi employee ben- deferred com plan:	efit plans & pensation	<b>(E)</b> Expense account and other allowances
See A	dditiona	l Data Table						

Jilli 990 (2007)						Page C
Part V-A Current Officers, Director	s, Trustees, and Key	y Employees (conti	inued)		Yes	No
<b>5a</b> Enter the total number of officers, director	rs, and trustees permitted	to vote on organization	n business at board			
meetings		<u> </u>				
<b>b</b> Are any officers, directors, trustees, or ke	ey employees listed in For	m 990, Part V-A, or hig	hest compensated			
employees listed in Schedule A , Part I , oi	highest compensated pro	ofessional and other ind	ependent			
contractors listed in Schedule A , Part II-	A or II-B, related to each	other through family or	business			
relationships? If "Yes," attach a statemer	nt that identifies the indivi	duals and explains the	relationship(s) 🤁 .	75b	Yes	
c Do any officers, directors, trustees, or ke	y employees listed in Forr	n 990, Part V-A, or hig	hest compensated			
employees listed in Schedule A, Part I, oi	highest compensated pro	ofessional and other ind	ependent			
contractors listed in Schedule A, Part II-	A or II-B, receive comper	nsation from any other o	organizations, whether			
tax exempt or taxable, that are related to organization"	the organization? See the	instructions for the de	finition of "related 	75c		No
If "Yes," attach a statement that includes	the information described	d in the instructions				
<b>d</b> Does the organization have a written conf	lict of interest policy? .			75d	Yes	
Part V-B Former Officers, Director Benefits (If any former officescribed below) during the benefits in the appropriate of the company of the	cer, director, trustee, e year, list that person	or key employee red below and enter the	eived compensation	or otl	her bei	nefits
(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans		pense acc ner allowa	count and ances
HYLLIS FRAKT <b>5</b> 083 Lawrenceville Road awrenceville, NJ 086483099	0	95,997	9,153			0
OHN BARTON LUEDEKE 📆						
083 Lawrenceville Road	0	0	186			0
awrenceville, NJ 086483099						
art VI Other Information (See the	instructions )					
		utios? If "Voc." attach a		1	Yes	No
•	<del>-</del>	nnescii tes, anacii a				l
detailed statement of each change				76		No
7 Were any changes made in the organizing		but not reported to the	IRS?	77		No
If "Yes," attach a conformed copy of the c						
<b>8a</b> Did the organization have unrelated business gross				78a	Yes	
<b>b</b> If "Yes," has it filed a tax return on <b>Form</b>				78b	Yes	<u> </u>
<b>9</b> Was there a liquidation, dissolution, termination, or	substantial contraction during t	he year? If "Yes," attach				
a statement				79		No
<b>0a</b> Is the organization related (other than by association			• •			
governing bodies, trustees, officers, etc , to any ot	her exempt or nonexempt orga	nızatıon?		80a		Νo
<b>b</b> If "Yes," enter the name of the organization	on <b>►</b>					
		ıs Fexempt <b>or</b> Fno	onexempt			
• <b>1a</b> Enter direct or indirect political expenditu		1 1				
<b>b</b> Did the organization file <b>Form 1120-POL</b> fo		<u> </u>		81b		No

	220 (2007)			raye /
Par	t VI Other Information (continued)		Yes	No
32a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		No
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
ь	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Yes	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year			
c	Dues assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures 85d			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <b>85f</b>			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line $85f^{?}$	85g		
h	If section $6033(e)(1)(A)$ dues notices were sent, does the organization agree to add the amount on line $85f$ to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
06	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0	6511		<del> </del>
86 L	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0 Gross receipts, included on line 12, for public use of club facilities 86b 0	-		
ь 87	501(c)(12) orgs. Enter a Gross income from members or shareholders 87a 0			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		No
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
	section 4911 ►			
b	501(c)(3) and $501(c)(4)$ orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		No
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization • 0			
e	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?			
		89e		No
f	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?			
		89f		Νο
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		89g		
90a	List the states with which a copy of this return is filed 🕨 NJ			
	Number of employees employed in the pay period that includes March 12, 2007 (See instructions)			1,263
91a	The books are in care of ► WILLIAM ROELL Telephone no ► (609)	896-5	009	
	2083 LAWRENCEVILLE ROAD  Located at ► LAWRENCEVILLE, NJ ZIP + 4 ► 086483099			
ь	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		Yes	No
	account)?	91b		No
	If "Yes," enter the name of the foreign country 🛌			
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			

Form 9	990 (2007)									Page <b>8</b>
Part	VI Other Information (cont	tinued)							Yes	No
С	At any time during the calendar year,	, dıd the organızat	ion maintain	an office outside o	f the United	States?	ı	91	с	No
	If "Yes," enter the name of the foreigi	n country ►								
92	Section 4947(a)(1) nonexempt charitab	le trusts filing Fori	m 990 ın lıeu	of Form 1041—Ch	eck here .					<b>►</b> □
	and enter the amount of tax-exempt	interest received	or accrued d	uring the tax year		. ▶	92			
Part	VIII Analysis of Income-Pro	ducing Activi	ties <i>(See</i>	the instruction	ıs.)	•		•		
Not e:	Enter gross amounts unless otherwise	e indicated.		business income	Excluded by s	ection 512,	, 513,	or 514	(E	
			( <b>A</b> ) Business code	<b>(B)</b> Amount	<b>(C)</b> Exclusion code		(D) nount		Relate exempt f incor	unction
93	Program service revenue									
а	TUITION & FEES								124	4,388,549
b	ROOM & BOARD								27	7,417,542
С	OTHER FEES									2,134,732
d	STUDY TOURS									1,674,498
e										
f	Medicare/Medicaid payments									
	Fees and contracts from governmen									
94	Membership dues and assessments	_								
95	Interest on savings and temporary cash inve				14		1,84	3,614		
96	Dividends and interest from securiti		900000	169	14			3,385		
97	Net rental income or (loss) from real									
	debt-financed property									
	non debt-financed property				16		40	6,207		
98	Net rental income or (loss) from personal pr							•		
99	Other investment income									
100	Gain or (loss) from sales of assets other tha				18		1,29	9,776		
101	Net income or (loss) from special ev	ents								
102	Gross profit or (loss) from sales of in									
103	Other revenue a SCIENTIFIC RS	SCH	541700	20,528						
b	BUS CONF CENTER		721000	709,376	03		31	4,248		
	FITNESS CENTER		713940	69,349	03			8,292		
	VENDING MACH COMM				03			0,717		
e	VENDING MACH COMM				03			0,717		
104	Subtotal (add columns (B), (D), and	/E\\		799,422			5 14	6,239	15'	 5,615,321
	Total (add line 104, columns (B), (D)			. , , , , , , ,			- J-	0,200		60,982
	Line 105 plus line 1e, Part I, should eq		Ine 12 Part I			• •	•		101,5	00,302
	VIII Relationship of Activ		·		at Durnos	es (Se	e the	e inst	ructions	<u> </u>
	No. Explain how each activity for which									
₹	of the organization's exempt purp	•		• •		•				
93A										
93B										
93D	THIS ACTIVITY ALLOWS THE U	JNIVERSITY TO	CARRY OUT	ITS PRIMARY						
Par	IX Information Regarding	Tavabla Sub	cidiarios	and Digragard	ad Entitio	5 (500	tho	inctr	uctions	<del></del>
	(A)	(B)	Julailes	_	eu Liititie	5 (366 		IIISU (	(E	
N	lame, address, and EIN of corporation, partnership, or disregarded entity	Percentage of ownership interest		<b>(C)</b> Nature of activities		Tota	<b>(D)</b> Il incom	ne	End-of asse	•
	partnership, or disregarded entity	· · · · · · · · · · · · · · · · · · ·	%						4330	-13
		Q	%							
			%							
Dar	t X Information Regarding		%  secciated	with Parcanal	Ranofit C	ontraci	tc //	Sec #		
Fall	<b>TX</b> Information Regarding instructions.)	, italisters As	ssocialed '	with Personal	Delietit C	onu ac	ra (2	ee in	e	
(a)	Did the organization, during the year, receive	any funds, directly o	r indirectly, to p	ay premiums on a per	sonal benefit o	ontract?			┌ Yes	<b>V</b> No
	Did the organization, during the year,		• • • • •						ڝes	ר No
	: If "Yes" to (b), file Form 8870 and				_					
		· · · · · · · · · · · · · · · · · · ·								

					Yes	No	
106	Did the reporting organization <b>make</b> any the Code? if "Yes," complete the sched		lefined in section 5	12(b)(13) of		No	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description transfer		(D) of transf	er	
a							
b							
с							
	Totals						
					Yes	No	
107	Did the reporting organization <b>receive</b> a the Code? if "Yes," complete the sched		as defined in secti	on 512(b)(13) of		No	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description transfer	OT I	(D) A mount of transfer		
a							
b							
с							
	Totals						
					Yes	No	
108	Did the organization have a binding writ royalties and annuities described in que	estion 107 above?				No	
	Under penalties of perjury, I declare that I had belief, it is true, correct, and complete	nave examined this return, including accompa Declaration of preparer (other than officer) is	anying schedules and st s based on all informati	atements, and to the best on of which preparer has a	of my kno ny knowle	wledge dge	
Please			2009-	04-02			
Sign Here	Signature of officer Date						
	Julie Karns VP Finance Type or print name and title						
Paid	Preparer's signature	Date	Check if self-empolyed	Preparer's SSN or PTIN (	See Gen I	inst W)	
гераг	er's Firm's name (or yours WTAS LLC			EIN Þ			
Jse Or	If self-employed), address, and ZIP + 4 452 Fifth Avenue	23rd Floor		LIN F			

New York, NY 10018

OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

#### Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization Rider University

**Employer identification number** 

21-0650678

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.")

(SSS Page 1 St all Strict assess	Tor Elect cach offer In there are	·	· · ·	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
LARRY NEWMAN   2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	DEAN-COL OF BUS ADM 37 5	184,965	23,138	0
BORIS VILIC 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	ASSOC DN/COL CONT SD 37 5	148,400	14,351	0
ROBERT ANNIS  2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	DEAN, COL OF MUSIC 37 5	165,784	20,428	54,000
DONALD WYGAL SR 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	ASSOC PROF - ACCT 37 5	147,913	15,267	0
JAMES RIGGS 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	PROFESSOR, BIOLOGY 37 5	147,760	15,552	0
Total number of other employees paid over \$50,000	447			

Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II-A (See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

Notice )		
(a) Name and address of each independent contractor paid more than \$50,000	( <b>b)</b> Type of service	(c) Compensation
THE SPIEZEL ARCHITECTURAL GROUP		
120 SANHICAN DRIVE	ARCHITECT/CONSTRUCT	1,196,652
TRENTON,NJ 08618		
PEPPER HAMILTON LLP		
2001 MARKET STREET LOBBY 2	LEGAL SERVICES	583,395
PHILADELPHIA, PA 19103		
KPMG LLP		
301 CARNEGIE CENTER SUITE 402	ACCOUNTING/AUDITING	158,000
PRINCETON, NJ 08540		
KUKOVICH AND ASSOCIATES		
800 PERRY HIGHWAY	MARKETING/DESIGN	142,879
PITTSBURGH,PA 15229		
PROSKAUER ROSE LLP		
1585 BROADWAY	LEGAL SERVICES	228,486
NEW YORK, NY 100368299		
Total number of others receiving over \$50,000 for 6		
professional services		
Deal TT D Common and the City City City of Daid Today and		. •

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
TOWN SPORTS INTERNATIONAL		
30 CLIFF STREET	REC CENTER MGMT	221,517
NEW YORK, NY 10038		
MARK SLAFKOVSKY		
848 YARDVILLE-ALLENTOWN ROAD	CONSTRUCTION	400,974
YARDVILLE, NJ 08620		
BRIAN'S TREE SERVICE	_	
174 LINDBERGH ROAD	LANDSCAPING	126,713
HOPEWELL, NJ 08525		
LARRY AND VINCE CONSTRUCTION COMPAN		
ROBINS STOKES AVENUE	CONSTRUCTION	429,481
TRENTON,NJ 08609		
Total number of other contractors receiving over		
\$50,000 for other services		

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt			
	to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in			l
	connection with the lobbying activities ► \$ 4,898 (Must equal amounts on line 38, Part VI-A, or line			l
	ı of Part VI-B )	1	Yes	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			l
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the			l
	lobbying activities			l
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			l
	substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with			l
	any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or			l
	principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			l
а	Sale, exchange, or leasing property?	2a		Νo
b	Lending of money or other extension of credit?	2b		Νo
c	Furnishing of goods, services, or facilities?	2c	Yes	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		Νo
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation			I
	of how the organization determines that recipients qualify to receive payments ) $^{2\!\!\!\!/}$	3a	Yes	
ь	Did the organization have a section 403(b) annuity plan for its employees?	3b	Yes	
C	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3с		Νo
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Νo
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	Yes	
Ь	Did the organization make any taxable distributions under section 4966?	4b		Νo
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		Νo
d	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

P	art I	Reason for Non-Private	Foundation Status	(See pages 4 th	rough 7 of the	instructions.)		
Icer	ify th	at the organization is not a private foun	dation because it is (P	lease check only <b>C</b>	<b>NE</b> applicable bo	ох )		
5	Γ	A church, convention of churches, or	association of churches	Section 170(b)(1	)(A )(ı)			
6	<u>  -</u>	A school Section 170(b)(1)(A)(ii) (A	(Also complete Part V )					
7	Γ	A hospital or a cooperative hospital s	ervice organization Sec	ction 170(b)(1)(A)	(111)			
8	$\vdash$	A federal, state, or local government	or governmental unit Se	ection 170(b)(1)(A	)(v)			
9	Γ	A medical research organization oper	ated in conjunction with	a hospital Section	n 170(b)(1)(A)(ıı	ı) Enter the hos	spital's name, city,	
10	Γ	An organization operated for the bene Section 170(b)(1)(A)(iv) (Also comp	=		ated by a govern	mental unit		
11a	Γ	An organization that normally receive Section 170(b)(1)(A)(vi) (Also comp	•	· · · · -	overnmental unit	or from the ger	eral public	
11b	Γ	A community trust Section 170(b)(1	)(A)(vı) (Also complete	the <b>Support Sched</b>	<b>lule</b> ın Part IV-A	)		
12	Γ	An organization that normally receive receipts from activities related to its its support from gross investment incacquired by the organization after Jun	charitable, etc , function ome and unrelated busi	ns—subject to certa ness taxable incom	ain exceptions, a ne (less section	and <b>(2) no more</b> 511 tax) from b	than 331/3% of usinesses	
13	Γ	An organization that is not controlled requirements of section 509(a)(3)					e meets the	
		Type I Type II Type	e III - Functionally Inte	grated $\Gamma$ T	ype III - Other			
		Provide the following informa	tion about the supporte	ed organizations. (s	see page 7 of the	instructions.)		
ı	lame(	(a) (s) of supported organization(s)	(b) Employer ident if icat ion number	(c) Type of organization (described in lines 5 through 12 above or	(d) Is the sup organization li supporting org governing do	ported sted in the janization's	(e) Amount of support?	
				IRC section)	Yes	No		
				1				
Tota						Þ		

An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions )

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (a) 2006 **(b)** 2005 (c) 2004 Calendar year (or fiscal year beginning in) (d) 2003 (e) Total Gifts, grants, and contributions received (Do not include unusual grants See line 28 ) Membership fees received 16 Gross receipts from admissions, merchandise 17 sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose Gross income from interest, dividends, amounts 18 received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities 19 not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without Other income Attach a schedule Do not include 22 gain or (loss) from sale of capital assets Total of lines 15 through 22 Line 23 minus line 17 24 25 Enter 1% of line 23 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a **b** Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test Enter line 24, column (e) 26c d Add Amounts from column (e) for lines 26d e Public support (line 26c minus line 26d total) 26e f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals ) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2006) (2005) (2004) (2003) 27c e Public support (line 27c total minus line 27d total) 27e f Total support for section 509(a)(2) test Enter amount from line 23, column (e) 🕨 | 27f | a Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005,

prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Sche	dule A (Form 990 or 990-EZ) 2007		Р	age <b>5</b>
Pa	rt V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29	Yes	
30	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?	30	Yes	
31	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	1	l	
	that makes the policy known to all parts of the general community it serves?	31	Yes	
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
	THE POLICY HAS BEEN PUBLISHED ON OUR WEBSITE AT WWW RIDER EDU	4		
32	Does the organization maintain the following		l	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	Yes	
Ŀ	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory	ļ		ļ
	basis?	32b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c	Yes	
c	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		Νο
Ŀ	Admissions policies?	33b		No
	Employment of faculty or administrative staff?	33c		Νo
			İ	
c	Scholarships or other financial assistance?	33d		No
_				
•	Educational policies?	33e		No
				<u> </u>
	Use of facilities?	33f		No
•				
_	Athletic programs?	33g		No
	, · · · · · · · · · · · · · · · · · · ·		<u>                                       </u>	
	Other extracurricular activities?	33h		No.
ľ	o their extractamental detrytices	33		110 
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
	•	┥		
		-		
	•	1		
34a	Does the organization receive any financial aid or assistance from a governmental agency? 🕏	34a	Yes	
	- 5555 the organization receive any intended and or assistance from a governmental agency.	-	<del>                                     </del>	
L	Has the organization's right to such aid ever been revoked or suspended?	34b		No
-	If you answered "Yes" to either 34a or b, please explain using an attached statement		<del>                                     </del>	<del>-</del>
	2. , 22 2			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
33	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	  Yes	
	5. A.S. 1. 105 7.5 50, 157.5 2.5 5.57, covering facial nonalise minimation. It into, attach an explanation	55	1 , 53	I

#### Page **6** Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed **ONLY** by an eligible organization that filed Form 5768)

		bbying Expenditures s" means amounts paid or incurred )		<b>(a)</b> Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influe	nce public opinion (grassroots lobbying)	36		
37	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)	37		
38	Total lobbying expenditures (add line	es 36 and 37)	38		
39	9 Other exempt purpose expenditures 39				
40	Total exempt purpose expenditures	(add lines 38 and 39)	40		
41	Lobbying nontaxable amount Enter t	he amount from the following table—			
	If the amount on line 40 is—	The lobbying nontaxable amount is—			
	Not over \$500,000	20% of the amount on line 40			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
42	Grassroots nontaxable amount (ente	r 25% of line 41)	42		
43	Subtract line 42 from line 36 Enter	-0- ıf lıne 42 ıs more than lıne 36	43		0
44	Subtract line 41 from line 38 Enter	-0- if line 41 is more than line 38	44		0

#### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions )

		Lobbying Expenditures During 4-Year Averaging Period				
	Calendar year (or fiscal year beginning in) ▶	(a) 2007	<b>(b)</b> 2006	(c) 2005	( <b>d</b> ) 2004	<b>(e)</b> Total
45	Lobbying nontaxable amount					
46	Lobbying ceiling amount (150% of line 45(e))					
47	Total lobbying expenditures					
48	Grassroots nontaxable amount					
49	Grassroots ceiling amount (150% of line 48(e))					
50	Grassroots lobbying expenditures					

#### Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- Paid staff or management (Include compensation in expenses reported on lines c through h.)
- Media advertisements
- Mailings to members, legislators, or the public
- Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

_	0	0	404,01101/
	Yes	No	A mount
		Νo	
	·	Νo	
	Yes		4,89
		•	4,89

## Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

Solic) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations a Transfers from the reporting organization to a noncharitable exempt organization of a (ii)
(i) Cash (ii) Other assets b Other transactions (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Reimburs ement arrangements (b(iv) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vii) Rental of facilities, equipment, mailing lists, other assets, or paid employees (vii) Performance of services or membership or fundraising solicitations (vii) Performance of services or membership or fundraising solicitations (vii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services or membership or fundraising solicitations (viii) Performance of services
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(v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (c) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (d) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) (b) (c) (d) Description of transfers, transactions, and sharing arrangements  (a) Name of noncharitable exempt organization arrangements
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transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) (b) Amount involved Name of noncharitable exempt organization arrangements  Description of transfers, transactions, and sharing arrangements  Amount involved Name of noncharitable exempt organization  Amount involved
(a) (b) (c) Name of noncharitable exempt organization (c) Description of transfers, transactions, and sharing arrangements  Description of transfers, transactions, and sharing arrangements  Description of transfers, transactions, and sharing arrangements
a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations
a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations
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Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  • Yes  • Yes
(a) (b) (c) Name of organization Type of organization Description of relationship

Software ID: Software Version:

**EIN:** 21-0650678

Name: Rider University

#### Form 990, Part III - Program Service Accomplishments:

number of clients served, publications issued, etc	pose achievements in a clear and concise manner. State the . Discuss achievements that are not measurable. (Section 501 exempt charitable trusts must also enter the amount of grants	Program Service Expenses (Required for 501(c) (3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
Research		
(Grants and allocations \$ )	If this amount includes foreign grants, check here 🕨 🦵	1,410,149
OTHER		
(Grants and allocations \$ )	If this amount includes foreign grants, check here 🟲 🦵	31,274
,	nt, comprehensive, teaching oriented institution of higher port to students through academic and athletic scholarships,	86,526,912
(Grants and allocations \$ 36,204,174)	If this amount includes foreign grants, check here 🟲 🦵	
Auxiliary Enterprises Primary room and boar	rd	
		24,003,252
(Grants and allocations \$ )	If this amount includes foreign grants, check here 🕨 🦵	
Student Services Rider University provides develop the intellectual and social talents of	these services to the entire student community in an effort to fits students	10.625.257
		19,625,257
(Grants and allocations \$ )	If this amount includes foreign grants, check here 🕨 🦵	
Academic Support General support to the st	udents	
(Grants and allocations \$ )	If this amount includes foreign grants, check here 🕨 🦵	11,836,904

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MORDECHAI ROZANSKI 🕏 2083 Lawrenceville Road Lawrenceville, NJ 086483099	PRESIDENT 50 0	430,493	67,154	47,079
JULIE KARNS  2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP FINANCE 50 0	235,314	29,980	0
JONATHAN MEER <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP UNIVERSITY ADVANCEMENT 50 0	200,270	34,738	7,210
JAMES O'HARA 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP ENROLLMENT MGMT 50 0	189,089	24,205	1,800
DONALD STEVEN <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	PROVOST & VP ACADEMIC AFFAIRS 50 0	215,671	42,016	0
JAMES BUSTERUD <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
CHRISTOPHER CAROTHERS <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
JAMES DICKERSON  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DR BONNIE DIMUN  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE - Secretary	0	0	0
Nancy Becker 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
PETER INVERSO  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DANIEL KAPLAN <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
MICHAEL B KENNEDY 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
THOMAS LYNCH 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE - VICE CHAIR 1 0	0	0	0
ALFONSE MATTIA 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
TERRY K MCEWEN 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DR JUDITHANNE SCOURFIELD MCLAUCHLAN 2000 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
NELSON S MEAD JR 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
THOMAS M MULHARE 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
JUDITH PERSICHILLI <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0- .)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DR GEORGE PRUITT <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
WILLIAM M RUE  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
GARY L SHAPIRO  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE - CHAIRMAN OF THE BOARD 1 0	0	0	0
JOHN SPITZNAGEL  2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
Gregory A Church <b>5</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
ARTHUR J STAINMAN <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
Dr Mark C DeMareo 🕏 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
HOWARD B STOECKEL <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
ERNESTINE LAZENBY GAST <b>2</b> 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
KAREN A LICITRA 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0

#### Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0- .)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DR ELI MORDECHAI 🕏 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0

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#### **TY 2007 Cash Grants Paid Schedule**

Name: Rider University

Class of Activity	Recipient's name	Address	Amount	Relationship
	FEDERAL			
	STATE			

### **TY 2007 Compensation Explanation**

Name: Rider University

Person Name	Explanation
MORDECHAI ROZANSKI	COLUMN (C) INCLUDES PERFORMANCE BONUS COLUMN (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY HOUSE AND CAR EXPENSES ON A REIMBURSEMENT BASIS ONLY
JULIE KARNS	COLUMN (C) INCLUDES PERFORMANCE BONUS COLUMN (E) EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY
JONATHAN MEER	COLUMN (C) INCLUDES PERFORMANCE BONUS COLUMN (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY CAR EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY
JAMES O'HARA	COLUMN (C) INCLUDES PERFORMANCE BONUS COLUMN (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY CAR EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY
DONALD STEVEN	COLUMN (C) INCLUDES PERFORMANCE BONUS COLUMN (E) EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY



### **TY 2007 Compensation Explanation**

Name: Rider University

Person Name	Explanation
PHYLLIS FRAKT	COLUMN (C) COMPENSATION INCLUDES \$95,997 FROM AN EARLY RETIREMENT INCENTIVE

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#### TY 2007 Gain/Loss from Sale of Public Securities Schedule

Name: Rider University

**EIN:** 21-0650678

**Gross Sales Price:** 52,515,701

**Basis:** 51,215,925

**Sales Expenses:** 

**Total (net):** 1,299,776

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#### **TY 2007 Investments - Land Schedule**

**Name:** Rider University

	Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value	
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#### **TY 2007 Investments - Other Schedule**

**Name:** Rider University

Description	Book Value	Cost/FMV
REAL ESTATE	2,164,583	
VENTURE CAPITAL	658,355	
PRIVATE EQUITY	136,846	
ABSOLUTE RETURN	8,969,630	
NATURAL RESOURCES	84,681	
OTHER ALTERNATIVES	225,302	

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#### **TY 2007 Investments - Securities Schedule**

Name: Rider University

Description	Book Value	Cost/FMV
MONEY MARKET FUND - OTHER	5,570,189	
GOVERNMENT SECURITIES - OTHER	996,112	
GUARANTEED INVESTMENT CONTRACT - OTHER	14,955,951	

### **TY 2007 Mortgages and Notes Payable Schedule**

Name: Rider University

**EIN:** 21-0650678

**Total Mortgage Amount: 2381510** 

Item No.	1
Lender's Name	US DEPT OF HOUSING
Lender's Title	
Relationship to Insider	
Original Amount of Loan	758000
Balance Due	302716
Date of Note	1979-10
Maturity Date	2019-05
Repayment Terms	
Interest Rate	3.0
Security Provided by Borrower	
Purpose of Loan	
Description of Lender Consideration	
Consideration FMV	

Item No.	2
Lender's Name	US DEPT OF EDUCATION
Lender's Title	
Relationship to Insider	
Original Amount of Loan	3000000
Balance Due	2078794
Date of Note	1993-05
Maturity Date	2023-05
Repayment Terms	
Interest Rate	5.5
Security Provided by Borrower	
Purpose of Loan	
Description of Lender Consideration	
Consideration FMV	

	Name: Rider University EIN: 21-0650678		
Item No.	1		
Class of Activity			
Donee's Name	INSTITUTION		
Donee's Address			
Amount (FMV)			
Relationship			
Description			
Book Value			
How Book Value is Determined?			
How FMV is Determined?			
Date of Gift			

DLN: 93490093005019

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**TY 2007 Non Cash Grants Paid Schedule** 

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#### **TY 2007 Other Assets Schedule**

Name: Rider University

Description	Beginning of Year Amount	End of Year Amount
CSV LIFE INS, GOODWILL, ART,	2,976,755	2,642,138
ASSETS HELD IN TRUST		

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#### **TY 2007 Other Changes in Net Assets Schedule**

Name: Rider University

Description	Amount
UNREALIZED GAIN-PLANT	1,842
UNREALIZED LOSS-CRNT UNRESTRICTED FUND	57,673
UNREALIZED LOSS-CRNT RESTRICTED FUND	8,631
UNREALIZED LOSS-TRUE ENDOWMENT	3,958,529
UNREALIZED LOSS-TERM ENDOWMENT	238,777
UNREALIZED LOSS-QUASI ENDOWMENT	958,991
UNREALIZED LOSS-ANNUITY & LIFE	195,199
PENSION A DJUSTMENT	193,118

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# **TY 2007 Other Expenses Not Included Schedule**

Name: Rider University

Description	Amount
SCHOLARSHIPS	36,204,174

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#### **TY 2007 Other Liabilities Schedule**

Name: Rider University

Description	Beginning of Year Amount	End of Year Amount
OTHER LIABILIIES	12,435,343	13,374,287
REFUND GOVERNMENT LOAN FUNDS,		
SELF INSURED INDEMNITY PLAN,		
ASSET RETIREMENT OBLIGATION,		
ANNUITIES PAYABLE		

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# TY 2007 Other Notes/Loans Receivable Short Schedule

Name: Rider University

Category/Name	Amount
ALPHA SIGMA LAMBDA	
SADIE ZIEGLER	
EOP EMERGENCY LOAN	400
RIDER LOAN FUND	1,928,886
PERKINS LOAN	8,079,740
RIDER LOAN FUND CLEARING	13.904

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## **TY 2007 Other Revenues Not Included Schedule**

Name: Rider University

Description	Amount
SCHOLARSHIP ALLOW-TUITION&FEES	35,993,909
SCHOLARSHIP ALLOW-AUXILIARIES	210,265



#### **TY 2007 Relationship Schedule**

Name: Rider University

Person Name / Business Name	Title or Role	Person Name 2 / Business Name 2	Title or Role 2	Relationship
MICHAEL B KENNEDY	TRUSTEE		Partner	professional service provider

### **TY 2007 Tax-Exempt Bond Liabilities Schedule**

Name: Rider University **EIN:** 21-0650678

Item No.	1
Name of Issue	
Purpose	US Dept of Education Sr E
Amount Outstanding	860000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
,	
Item No.	2
Name of Issue	
Purpose	US Dept of Education Sr F
Amount Outstanding	247000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
Item No.	3
Name of Issue	
Purpose	NJ Edu Fac Auth 1971 Sr A
Amount Outstanding	485000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	4
Name of Issue	
Purpose	NJ Edu Fac Auth Cap Proj Ph I
Amount Outstanding	402500
<b>Unexpeded Bond Proceeds</b>	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	5
Name of Issue	
Purpose	NJ Edu Fac Auth Cap Proj Ph II
Amount Outstanding	280000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	6
Name of Issue	
Purpose	NJ Edu Fac Auth Ser 2001A
Amount Outstanding	700964
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	7
Item No.	/
Name of Issue	
Purpose	NJ Edu Fac Auth 1992 Ser D/Ser 2002A
Amount Outstanding	21295000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

	1
Item No.	8
Name of Issue	
Purpose	NJ Edu Fac Auth Cap Proj Ph III
Amount Outstanding	373295
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	9
Name of Issue	
Purpose	NJ Edu Fac Auth Cap Proj Ph IV
Amount Outstanding	609062
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
1	

Item No.	10
Name of Issue	
Purpose	NJ Edu Fac Auth Sr 2003A
Amount Outstanding	859992
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
<u>r</u>	•

Item No.	11
Name of Issue	
Purpose	NJ Edu Fac Auth Cap Proj Ph IV
Amount Outstanding	252500
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	12
Name of Issue	
Purpose	NJ Edu Fac Auth 2004 Sr A
Amount Outstanding	14210000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	13
Name of Issue	
Purpose	NJ Edu Fac Auth 2007 Sr A
Amount Outstanding	22000000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

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### **TY 2007 Employee Compensation Explanation**

Name: Rider University

Employee	Explanation	
LARRY NEW MAN	COLUMN (E) EXPENSES ARE ON A REINBURSEMENT BASIS ONLY.	
BORIS VILIC	COLUMN (E) EXPENSES ARE ON A REINBURSEMENT BASIS ONLY.	
ROBERT ANNIS	COLUMN (E) INCLUDES THE FAIR MARKET VALUE OF CAMPUS HOUSING OF \$54,000; ADDITIONAL EXPENSES ARE ON A REINBURSEMENT BASIS ONLY.	
DONALD WYGAL SR	COLUMN (E) EXPENSES ARE ON A REINBURSEMENT BASIS ONLY.	
JAMES RIGGS	COLUMN (E) EXPENSES ARE ON A REINBURSEMENT BASIS ONLY.	

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#### **TY 2007 Non Electing Public Charities Statement**

Name: Rider University

**EIN:** 21-0650678

Statement: THE UNIVERSITY PAYS ANNUAL ASSOCIATION DUES TO THE

ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW JERSEY. AMONG OTHER SERVICES, THIS ASSOCIATION DOES

LOBBY ON BEHALF OF SECTOR NEEDS.

## TY 2007 Explanation of Receipt or Revocation of Government Financial Aid

Name: Rider University

**EIN:** 21-0650678

Statement: FINANCIAL AID IS RECEIVED FROM THE STATE OF NEW JERSEY IN

THE FORM OF ANNUAL GRANT UNDER THE STATE OF NEW JERSEY INDEPENDENT COLLEGE AND UNIVERSITY ASSISTANCE ACT WITH THE APPLICABLE REQUIREMENTS SET FORTH I N.J.S.A. 18:72B-15

ET SEQ AND J.J.A.C. 9:14-1 ET SEQ.

### **TY 2007 Scholarship Award Statement**

Name: Rider University

**EIN:** 21-0650678

Statement: SCHOLARSHIPS ARE AWARDED ON THE BASIS OF FINANCIAL NEED

AND ACADEMIC MERIT.

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### **TY 2007 Self Dealing Statement**

Name: Rider University

Line Number	Explanation
2c	THE PRESIDENT OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO CAMPUS AS A CONDITION OF HIS EMPLOYMENT. THE VALUE IS INCLUDED IN FORM 990, PART V-A. THE DEAN OF WESTMINSTER COLLEGE OF THE ARTS IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE PRINCETON CAMPUS AS A CONDITION OF EMPLOYMENT. THE VALUE IS INCLUDED IN FORM 990, SCHEDULE A, PART I.
2d	SEE FORM 990, PART V.