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

2006
Open to Public Inspection

A F	or the	2006 ca	alendar yea	r, or tax year beginning	07-01-2006 and ending	j 06-30-20	07			
ВС	heck if a	pplicable	Please	C Name of organization Rider University				D Emp	loyer	identification number
Га	ddress ch	ange	use IRS	Rider Offiversity				21-0	0650	678
Γ_{N}	ame cha	nge	label or print or		O box if mail is not delivered t	o street addr	ress) Room/suite	E Telep	hone	number
	nitial retui	_	type. See Specific	2083 Lawrenceville Road				(609	9)89	5-5016
	ınal retur		Instruc-	City or town, state or cou			•	F Accou	ntıng r	nethod Cash Accrual
_			tions.	Lawrenceville, NJ 08648	3099				ther (s	pecify) 🕨
	mended									
ГА	pplication	pending					1			
					and 4947(a)(1) nonexempt schedule A (Form 990 or 99					section 527 organizations for affiliates?
					(,-	1	-		of affiliates
G V	Neb site	e: 🕨 ww	w rider edu				_ H(c) Are all			
J	Organiza	tion type	e (check only	one) 🕨 🔽 🐯 501(c) (3)	◀ (Insert no)) or	, (If "No	," attach	a lıst	See instructions)
					orting organization and its gros	•	- H(d) Te this	a separat	te retu	rn filed by an organization
n	omally i	not more	than 25,000	A return is not required, but	orting organization and its gros if the organization chooses to f	s receipts are ile a return,	covere	d by a gr	oup ru	ling? \(\sum \text{Yes } \sum \text{No} \)
b	e sure to	file a cor	nplete return				I Grou	Exemp	otion	Number 📂
L	Gross re	eceipts	Add lines 6	5b. 8b. 9b. and 10b to li	ne 12 🕨 199,304,636					ganization is not required to 90, 990-EZ, or 990-PF)
	art I				es in Net Assets or	Fund Ba		•		<u> </u>
	1			s, grants, and similar a		i dila be				
	а			onor advised funds .		1a				
	ь			ort (not included on line		1b	4,69	7,534		
	c			oport (not included on li	•	1c		7,917		
	d	Government contributions (grants) (not included on line 1a) 1d 5,594,582								
	e	Total /	add lings 1:	through 1d) (cach # 9	,476,932 noncash \$	893.101	1		1e	10,370,033
	2	-					/ : VII line 93)	-	2	140,535,894
	3	Program service revenue including government fees and contracts (from Part VII, line 93). Membership dues and assessments								110,333,031
	4	Interest on savings and temporary cash investments								2,051,788
	5	Dividends and interest from securities								1,805,966
	6a	Gross rents								1,000,500
	ь			ises		6b		-,,,,,		
	c		•	or (loss) subtract line 6					6c	396,925
业	7			income (describe 🕨)				-	7	
Revenue	8a			n sales of assets	(A) Securities		(B) O ther			
ű				ry	41,846,827	8a	(2) 5 6.161			
	ь	Less cos	st or other bas	sis and sales expenses	38,712,542	8b				
	c	Gain or	·(loss)(atta	ach schedule)	3,134,285	8c				
	d	Netgai	n or (loss)		ns (A) and (B)				8d	3,134,285
	9	Special	l events and	d activities (attach sch	edule) If any amount is fi	om gamin	g, check here 🕨	.r		
	а			·				'		
				rt including \$rted on line 1b)	of	9a				
	ь	Less d	lırect exper	nses other than fundrais	ing expenses	9b				
	С	Netinc	ome or (los	s) from special events	Subtract line 9b from line	9a			9c	
	10a	Gross	sales of inv	entory, less returns and	iallowances	10a				
	ь	Less c	ost of good	ls sold		10b				
	С	Gross pro	ofit or (loss) fi	rom sales of inventory (attac	ch schedule) Subtract line 10b f	rom line 10a			10 c	
	11	Othern	evenue (fro	om Part VII, line 103)				. [11	2,297,203
	12	Total re	evenue A dd	l lines 1e, 2, 3, 4, 5, 6c	, 7 , 8d, 9c, 10c, and 11			. [12	160,592,094
	13	Program	m services	(from line 44, column (l	3))				13	131,545,026
9	14	Manage	ement and o	general (from line 44, co	olumn (C))			.	14	16,630,580
Expenses	15	Fundra	ısıng (from	line 44, column (D)) .				. [15	1,664,169
Ж	16	Payme	nts to affilia	ates (attach schedule)					16	
	17	Total e	xpenses A d	ld lines 16 and 44, colu	mn (A)	<u> </u>	<u> </u>		17	149,839,775
2	18	Excess	or (deficit)) for the year Subtract I	ne 17 from line 12				18	10,752,319
Net Asset	19	Net ass	sets or fund	l balances at beginning	of year (from line 73, col	umn (A))		. [19	96,222,228
<u>n</u>	20	Other	hanges in i	net assets or fund balar	nces (attach explanation)	图		. [20	1,400,788
z 	21	Netass	sets or fund	balances at end of yea	r Combine lines 18, 19, a	and 20 .			21	108,375,335

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.		(A) Total	(B) Program services	(C) Management and general	(D) 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) (cash $$1,726,630$ noncash $$31,883,160$) If this amount includes foreign grants, check here	22b	33,609,790	33,609,790		
23	Specific assistance to individuals (attach schedule)	23	33,003,130	33,003,730		
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	1,466,927	422,193	646,142	398,592
Ь	Compensation of former officers, directors, key employees etc listed in Part V - B (attach schedule)	25b	251,270	246,322	4,948	
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	55,107,495	47,170,761	7,328,721	608,013
27	Pension plan contributions not included on lines 25a, b and c	27	3,400,278	3,031,365	315,916	52,997
28	Employee benefits not included on lines 25a - 27	28	10,428,182	9,026,672	1,200,172	201,338
29	Payroll taxes	29	4,007,722	3,572,905	372,352	62,465
30	Professional fundraising fees	30	.,007,122	2,012,000	372,002	52,100
31	Accounting fees	31	133,750		133,750	
32	Legal fees	32	250,419		250,419	
33	Supplies	33	1,654,591	1,397,913	231,969	24,709
34	Telephone	34	447,758	340,388	103,549	3,821
35	Postage and shipping	35	627,173	498,596	85,368	43,209
36	Occupancy	36	13,389,349	11,612,363	1,703,663	73,323
37	Equipment rental and maintenance	37	1,369,403	666,226	702,265	912
38	Printing and publications	38	1,585,170	1,070,983	444,397	69,790
39	Travel	39	2,215,849	1,888,595	295,922	31,332
40	Conferences, conventions, and meetings	40	879,425	879,425		
41	Interest	41	2,273,732	2,190,216	69,419	14,097
42	Depreciation, depletion, etc (attach schedule)	42	5,289,514	5,097,505	159,214	32,795
43	Other expenses not covered above (itemize)					
а	FOOD SERVICE	43a	5,678,201	5,678,201		
b	OTHER PROFESSIONAL SERVICE FEE	43b	4,280,678	2,607,345	1,646,359	26,974
c	ADVERTISING & PUBLIC RELATIONS	43c	1,187,859	385,174	782,883	19,802
d	COST OF GOODS SOLD	43d	19,007	19,007		
е	ALLO CATIONS AND BAD DEBTS	43e	133,081	133,081		
f	INVESTMENT ADVISORY FEES	43f	153,152		153,152	
g		43g				
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13–15) Tosts Check Fig. 1 f you are following SOP 98-2	44	149,839,775	131,545,026	16,630,580	1,664,169

Pa	rt III Statement of Program Servi	Accomplishments (See the instructions.)	
	·	some people, serves as the primary or sole source of information	•
		on in such cases may be determined by the information presenter	
	erefore, please make sure the return is comple complishments	and accurate and fully describes, in Part III, the organization's pi	ograms and
acc	. omprisiments		
	·	RIDER UNIVERSITY'S PRIMARY MISSION IS TO 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, NONSECTARIAN, COEDUCATIONAL INSTITUTION WITH APPROXIMATELY 5,600 FULL AND PARTTIME STUDENTS ENROLLED IN PROGRAMS	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
		LEADING TO ASSOCIATE, BACCALAUREATE,	
		AND MASTERS DEGREES OR CERTIFICATES OF ADVANCED STUDY IN THE 142-YEAR HISTORY,	
		RIDER EVOLVED FROM A SMALL	
pub		ents in a clear and concise manner State the number of clients served, asurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt cations to others	
а	See Additional Data Table		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ ┌	
_	(Grants and anocations \$) If this amount includes foreign grants, check here 🕨 🦵	
b			
	(Grants and allocations \$) If this amount includes foreign grants, check here 🕨 🦵	
c		,,, ₋	
•			
		_	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ ┌	
d		•	
	(Grants and allocations \$) If this amount includes foreign grants, check here 🕨 🦵	
e	Other program services (attach schedule)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	(Grants and allocations \$) If this amount includes foreign grants, check here 🕨 🦵	

f Total of Program Service Expenses (should equal line 44, column (B), Program services) .

_	rt I\	<u> </u>						
Not	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				(A) Beginning of year		E	(B) End of year
	45	Cash—non-interest-bearing			-2,212,394	45		17,646,126
	46	Savings and temporary cash investments			8,025,971	46		-1,027,007
	47a	Accounts receivable	Accounts receivable 47a 7,033,185					
	ь	Less allowance for doubtful accounts	47b	1,398,300	4,657,519	47c		5,634,882
	48a	Pledges receivable	48a	4,534,150				
	ь	Less allowance for doubtful accounts	48b	13,610	4,617,370	48c		4,520,540
	49	Grants receivable			1,988,930	49		2,183,820
.0	50a	Receivables from current and former office key employees (attach schedule)				50a		
	ь	Receivables from other disqualified persor 4958(c)(3)(B) (attach schedule)				50b		
	51a	Other notes and loans receivable (attach schedule)	=1-	9.548.648				
		Less allowance for doubtful accounts	51a 51b	2,104,941	7,267,616	F4.	9 23	7,443,707
Assets	b	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·	7,207,010	51c 52	1234	7,443,707
4	52 53	Prepaid expenses and deferred charges		F	4,396,169	53	+	3,654,407
	54a	Investments—publicly-traded securities	· · ·	· · · · · · L	67,308,943	54a		68,758,233
	ь	Investments—other securities (attach sch	-	' ' F	5,015,637	54b	1	23,928,128
			iedule)	- Cost Time	5,015,057	340	729	25,926,126
	55a	Investments—land, buildings, and equipment basis	55a	3,190,000				
	Ь	Less accumulated depreciation (attach schedule)	55b		3,190,000	55c	2 5	3,190,000
	56	Investments—other (attach schedule) .			2,043,346	56	195	8,150,636
	57a	Land, buildings, and equipment basis	57a	142,819,271				
	Ь	Less accumulated depreciation (attach schedule)	57b	74,301,668	67,384,917	57c		68,517,603
	58	Other assets, including program-related in (describe)			057			
)	2,585,571	58	%	2,976,755
	59	Total assets (must equal line 74) Add line	s 45 th	rough 58	176,269,595	59		215,577,830
	60	Accounts payable and accrued expenses			11,514,364	60		16,584,783
	61	Grants payable		[61		
	62	Deferred revenue		[8,151,814	62		10,632,961
ر ا	63	Loans from officers, directors, trustees, ar	nd key e	mployees (attach				
		schedule)				63		
ķ;	64a	Tax-exempt bond liabilities (attach sched	ule) .		46,116,430	64a	195	65,056,915
	Ь	Mortgages and other notes payable (attac	h sched	ule)	2,598,168	64b	%	2,492,493
	65	Other liablilities (describe 🕨)	11,666,591	65	% 3	12,435,343
	66	Total liabilities Add lines 60 through 65			80,047,367	66		107,202,495
	Orga	anizations that follow SFAS 117, check here 67 through 69 and lines 73 and 74	► IZ a	nd complete lines				
0 0 0	67	Unrestricted			60,870,438	67		69,401,666
Balances	68	Temporarily restricted			9,279,266	68		11,523,568
Ē	69	Permanently restricted	26,072,524	69		27,450,101		
Fund	Orga	anizations that do not follow SFAS 117, che complete lines 70 through 74						
5	70	Capital stock, trust principal, or current fu		70				
Sets	71	Paid-in or capital surplus, or land, building		71				
₹ 2	72	Retained earnings, endowment, accumulat		72				
Z S	73	Total net assets or fund balances Add Im through 72 (Column (A) must equal line 19		-				
		line 21)		Ĺ	96,222,228			108,375,335
	74	Total liabilities and net assets / fund balance	e ∆dd line	s 66 and 73	176,269,595	74	1	215,577,830

Part	IV-A	Reconciliation of Reventue the instructions.)	ue per Audited Finai	ncial Sta	tements V	Vith Reven	ue per	Return (See
<u> </u>	Total	revenue, gains, and other suppor	rt per audited financial sta	tements			а	130,719,503
ь	A mot	ints included on line a but not on	Part I, line 12					<u></u>
1		nrealized gains on investments		b1		3,890,351		
2		ted services and use of facilities		b2		, ,	1	
3		veries of prior year grants		b3			1	
4		r (specify)					1	
-				b4				
	Addl	ınes b1 through b4			٠		ј ь	3,890,351
c	Subtr	act line b from line a					С	126,829,152
d	A mot	unts included on Part I, line 12, b	ut not on line a					
1		stment expenses not included on				153,152		
	6b .		·	d1		, 		
2	Othe	r (specify) 🕏						
				_ d2		33,609,790]	
	Addl	ines d1 and d2					d	3,890,351
e		revenue (Part I, line 12) Add lin						160,592,094
							e	
		Reconciliation of Expens						
a		expenses and losses per audited					a	116,076,833
b		unts included on line a but not on	•	1	ı			
1		ted services and use of facilities		b1			1	
2		year adjustments reported on Pa	rt I, line	b2				
3		es reported on Part I, line		D2			1	
3		es reported on Part 1, line		Ь3				
4		r (specify)					1	
				_ b4				
	Addl	ınes b1 through b4] ь	
c	Subtr	act line b from line a					С	116,076,833
d	A mot	unts included on Part I, line 17, b	ut not on line a:					
1		stment expenses not included on				153,152		
			•	d1		,		
2	Othe	r (specify)						
				d2		33,609,790	1 1	
	Addl	ines d1 and d2					d	33,762,942
e		expenses (Part I, line 17) Add li						149,839,775
							<u> </u>	
Pan	t V-A	Current Officers, Directo director, trustee, or key em <i>instructions.</i>)	ployee at any time dur	ing the y	ear even if	they were r	not comp	ensated.) (See the
	(A)) Name and address	(B) Title and average hours per week devoted to position		mpensation id, enter -0)	(D) Contribition (D) contrib	efıt plans &	(E) Expense account and other allowances
						plan	S	allowances
See A	aditiona	l Data Table						
				<u> </u>				

Part V-A Current Officers, Direct	ors. Trustees. and Key	v Emplovees (conti	inued)		Yes	No
75a Enter the total number of officers, direc						
meetings			r basiliess at board			
b Are any officers, directors, trustees, o		· —	hest compensated			
employees listed in Schedule A, Part I		,	•			
contractors listed in Schedule A, Part						
relationships? If "Yes," attach a stater	·			75b	Yes	
c Do any officers, directors, trustees, or				736	163	
employees listed in Schedule A, Part I						
contractors listed in Schedule A, Part			•			
tax exempt or taxable, that are related				75c		N o
organization"			inition of related	/50		I NO
If "Yes," attach a statement that include	des the information described	d in the instructions				
d Does the organization have a written c	onflict of interest policy? .			75d	Yes	
Part V-B Former Officers, Direc				isatio	n or C	ther
Benefits (If any former of described below) during benefits in the appropriate	officer, director, trustee, of the year, list that person	or key employee red below and enter the	eived compensation	or ot	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		oense acc ner allowa	count and ances
PHYLLIS FRAKT 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	0	221,542	24,780			0
JOHN BARTON LUEDEKE 📆						
2083 Lawrenceville Road 0 4,94						0
Lawrenceville, NJ 086483099						
Other Information (Co.)						T
Part VI Other Information (See t	<u> </u>				Yes	No
76 Did the organization make a change in its activ	_	rities? If "Yes," attach a				
detailed statement of each change				76		No
77 Were any changes made in the organiz		but not reported to the 1	IRS?	77		No
If "Yes," attach a conformed copy of th	-					
78a Did the organization have unrelated business g	ross income of \$1,000 or more duri	ng the year covered by this	return? • • •	78a	Yes	
b If "Yes," has it filed a tax return on Fo				78b	Yes	
79 Was there a liquidation, dissolution, termination	, or substantial contraction during t	he year? If "Yes," attach				
a statement				79		Νo
80a Is the organization related (other than by associated)	ciation with a statewide or nationwi	de organization) through con	nmon membership,			
governing bodies, trustees, officers, etc , to an	y other exempt or nonexempt orga	nization?		80a		Νo
b If "Yes," enter the name of the organiz	ation 🕨					
,		ıs exempt or no	onexempt			
B1a Enter direct or indirect political expend						
b Did the organization file Form 1120-PO				81b		No

-				l age 2
Par	Other Information (continued)	_	Yes	No
	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		Νo
Ь	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue			
	ın Part I or as an expense ın Part II (See instructions in Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Yes	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
		84b		
	gifts were not tax deductible?			
	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	Dues assessments, and similar amounts from members	- 1		
	Section 162(e) lobbying and political expenditures	-		
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line $85f^7$	85g		
	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		
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0			
b	Gross receipts, included on line 12, for public use of club facilities 86b 0			
37	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)			
	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		Νo
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
20-		990		NO
39a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ► 0, section 4912 ► 0, section 4955 ► 0			
	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		Νο
c	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			
	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter			
	transaction?	89e		Νo
f	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?			
-	, , , , , , , , , , , , , , , , , , ,			
		89f		Νo
_	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, 2006 (See instructions)			1,167
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)		
	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	Νo
	account)?	91b		Νο
	If "Yes," enter the name of the foreign country 🛌			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts			

Se	ction 4947(a)(1) nonexempt charitabl	le trusts filing Form	n 990 in lieu d	of Form 1041— Ch	eck here .			-
an	d enter the amount of tax-exempt i	interest received o	r accrued du	rıng the tax year		▶ 92		
t V	II Analysis of Income-Pro	ducing Activit						
e: <i>E</i>	nter gross amounts unless otherwise	e ındıcated.	Unrelated (A)	business income	 	ction 512, 513, or 514	(E) Related	
			Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt fu Incom	ınctıon
Р	rogram service revenue							
a <u>T</u>	UITION & FEES						113,	,750,74
ь <u>R</u>	OOM & BOARD						25,	,459,64
c <u>0</u>	THER FEES						1,	,325,51
d _								
e _								
f M	edicare/Medicaid payments							
g F	ees and contracts from government	t agencies						
М	embership dues and assessments							
	terest on savings and temporary cash inve	F			14	2,051,788		
D	ividends and interest from securition	es	900000	29	14	1,805,937		
N	et rental income or (loss) from real	lestate						
a d	ebt-financed property							
b n	on debt-financed property				16	396,925		
N	et rental income or (loss) from personal pr	operty						
0	ther investment income							
	ain or (loss) from sales of assets other that	·			18	3,134,285		
	et income or (loss) from special ev	-						
	ross profit or (loss) from sales of ir	´						
0	ther revenue a <u>SCIENTIFIC RS</u>	SCH	541700	22,470				
b B	US CONF CENTER		721000	645,230	03	1,488,440		
c F	ITNESS CENTER		713940	57,137	03	65,169		
d <u>∨</u>	ENDING MACH COMM				03	18,757		
e _								
S	ubtotal (add columns (B), (D), and	(E))		724,866		8,961,301	140,	,535,89
	tal (add line 104, columns (B), (D)					· · · • <u> </u>	150,22	22,06
	ne 105 plus line 1e, Part I, should equ	ual the amount on li	ne 12, Part I.					
	Relationship of Activ							
No F	Explain how each activity for which of the organization's exempt purp					portantly to the ac	complishme	ent
<u>-</u> А	THIS ACTIVITY ENABLES THE				poses			
	PRIMARY TAX EXEMPT PURPOS	SE TO EDUCATE	STUDENTS					
вс	THESE ACTIVITIES PROVIDE	THE BASIC SUPP	ORT FOR UI	NIVERSITY				
	STUDENTS TO CARRY OUT THE	EIR EDUCATIONA	AL PURSUIT	S				
rt 1		Taxable Subs	idiaries a	nd Disregard	ed Entities	(See the instr		
Nan	(A) ne, address, and EIN of corporation,	(B) Percentage of		(C)		(D)	(E) End-of-y	
	partnership, or disregarded entity	ownership interest		Nature of activities		Total income	asset	
		%						
		%						
		%						
_	X Information Regarding			with Daveanal	Banafit Ca	ntracte (See th	-	

Part		nformation Reg controlling organ				d En	ntities Comp	lete only	if the org	anizatio	on is
										Yes	No
106		ie reporting organiza ode? if "Yes," compl				efined	l in section 512	(b)(13) o	f		Νo
		(A) Name and address o controlled entit		Employer I	B) dentification nber		(C) Description of transfer		(I A mount o	D) If transf	er
		Totals									
										Yes	No
107		ie reporting organiza ode? if "Yes," comp				as de	fined in section	512(b)(1	L3) of		Νo
	(A) Name and address of each controlled entity		Employer I	B) dentification mber		(C) Description of transfer		(D) Amount of transfer		er	
		Totals									
108	Did th	ie organization have	a hinding written	contract in effe	ct on August 17 2	006	covering the in	tarasts r	ents	Yes	No
100		ies and annuities de	-		ct on August 17, 2	.000	covering the in	terests, r	ents,		Νo
Pleas	an	der penalties of perjury, d belief, it is true, correc ******						of which pi			
Sign Here		Signature of officer					Date				
		Jonathan Meer Secreta Type or print name and		nent							
Paid Prep	arer's	Preparer's signature			Date		Check If self- empolyed 🕨 🦵	Preparer's	SSN or PTIN (See Gen	Inst W)
Use Only		Firm's name (or yours if self-employed), address, and ZIP + 4	WTAS		•	•		EIN ▶			
			452 Fifth Avenue 23 New York, NY 1001					Phone no	•		

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

OMB No 1545-0047

2006

Name of the organization Rider University

Employer identification number

21-0650678

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 2 of the instructions. List each one. If there are none, enter "None.")

(See page 2 of the instruction	is. List each one. If there ar	e none, enter Non	ie.)	
(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	160,503	23,108	0
STEVEN LORENZET 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	ASSOC DEAN - COL BUS 37 5	153,061	14,391	0
ROBERT ANNIS 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	DEAN, COL OF MUSIC 37 5	159,650	20,443	54,000
WILLIAM AMADIO 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	ASSOC PROFCIS 37 5	150,875	15,310	0
TORI ELAINE HARRISON 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 086483099	HEAD COACH 37 5	149,411	15,615	3,824
Total number of other employees paid over \$50,000	407			

Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II-A (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter ``Non<u>e.")</u>

Morie: /			
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation	
THE SPIEZEL ARCHITECTURAL GROUP			
120 SANHICAN DRIVE	ARCHITECT/CONSTRUCT	193,813	
TRENTON,NJ 08618			
PRICEWATERHOUSECOOPERS LLP			
201 MARKET STREET LOBBY 2	BUSINES PLAN CONSULT	184,610	
PHILADELPHIA, PA 19103			
KPMG LLP			
301 CARNEGIE CENTER SUITE 402	ACCOUNTING/AUDITING	145,750	
PRINCETON, NJ 08540			
KUKOVICH AND ASSOCIATES			
800 PERRY HIGHWAY	GRAPHIC ARTS/DESIGN	114,911	
PITTSBURGH,PA 15229			
C AND G PARTNERS LLC			
116 EAST 16TH STREET	GRAPHIC ARTS/DESIGN	75,850	
NEW YORK, NY 10003			
Total number of others receiving over \$50,000 for			
professional services			

Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals 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	FACILITIES MGMT	394,645
NEW YORK, NY 10038		
GILBANE BUILDING COMPANY		
582 ELMWOOD AVENUE	CONSTRUCTION	533,235
PROVIDENCE, RI 02907		
BRIAN'S TREE SERVICE		
174 LINDBERGH ROAD	LANDSCAPING	96,815
HOPEWELL, NJ 08525		
LARRY AND VINCE CONSTRUCTION COMPAN		
ROBINS STOKES AVENUE	CONSTRUCTION	189,569
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 ► \$ 4,640 (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.)			١
а	Sale, exchange, or leasing property?	2a		Νo
b	Lending of money or other extension of credit?	2b		Νo
С	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			l
	of how the organization determines that recipients qualify to receive payments) 🕏	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	
b	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			
е	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 ▶0			

P	art I	V Reason for Non-Private F	oundation Status	(See pages 4 th	rough 7 of the	instructions.))
cer	ify th	at the organization is not a private foun	dation because it is (Pl	ease check only O	NE applicable bo	x)	
5	Ė	A church, convention of churches, or a	association of churches	Section 170(b)(1)(A)(ı)	ŕ	
6	<u></u>	A school Section 170(b)(1)(A)(ii) (A	lso complete Part V)				
7		A hospital or a cooperative hospital s	ervice organization Sec	tion 170(b)(1)(A)((111)		
8		A federal, state, or local government of	or governmental unit Se	ction 170(b)(1)(A)(v)		
9		A medical research organization opera) Enter the ho	spital's name, city
		and state 🕨					
10	Γ	An organization operated for the bene	fit of a college or univer	sity owned or opera	ated by a govern	mental unit	
		Section 170(b)(1)(A)(iv) (Also comp	ete the Support Schedu	le ın Part IV-A)			
11a	Γ	An organization that normally receive	s a substantial part of it	s support from a g	overnmental unit	or from the ge	neral public
		Section 170(b)(1)(A)(vi) (Also comp	ete the Support Schedu	le ın Part IV-A)			
11b	Γ	A community trust Section 170(b)(1)	(A)(vı) (Also complete	the Support Sched	l ule in Part IV-A)	
12	Γ	An organization that normally receive	(1) more than 33 _{1/3}	% of its support fro	m contributions,	membership fe	ees, and gross
		receipts from activities related to its	harıtable, etc , function	s—subject to certa	aın exceptions, a	nd (2) no more	than 331/3% of
		its support from gross investment inc	ome and unrelated busir	ness taxable incom	ne (less section 5	511 tax) from b	ousinesses
		acquired by the organization after Jun	e 30, 1975 See section	1509(a)(2) (Also	complete the Su l	pport Schedule	ın Part IV-A)
13	Γ	An organization that is not controlled		•	•	•	se meets the
		requirements of section 509(a)(3) Ch	neck the box that descri	bes the type of sup	oporting organiza	tion	
		Type I Type II Type	e III - Functionally Inte	arated \Box T	ype III - Other		
		, , ,		<u> </u>	•	:tti\	
		Provide the following informa	tion about the supporte	(c)		instructions.)	Τ
				Type of	(d) Is the sup		
		(-)	(b)	organization	organization lis		(e)
	lame	(a) (s) of supported organization(s)	Employer ident if icat ion	(described in	supporting org		A mount of
•	·	(3) or supported organization(3)	number	lines 5 through	governing do	cuments?	support?
				12 above or IRC section)	Yes	No	
Гotа				ı		•	
						-	ı
14	\sqcap	An organization organized and operate	ed to test for public safe	ty Section 509(a)	(4) (See page 7	of the instruct	ions)

te: You may use the worksheet in the instructions for convertin					tiiou	of accountin
	2005	(b) 2004	(c) 2003	(d)	2002	(e) Total
Gifts, grants, and contributions received (Do not						
include unusual grants See line 28)						
Membership fees received Gross receipts from admissions, merchandise						
Gross receipts from admissions, merchandise 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						
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						
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						
charge						
Other income Attach a schedule Do not include						
gain or (loss) from sale of capital assets						
Total of lines 15 through 22						
Line 23 minus line 17						
Enter 1% of line 23						
2005 exceeded the amount shown in line 26a Do not file of all these excess amounts c Total support for section 509(a)(1) test Enter line 24, c d Add Amounts from column (e) for lines 22		19 26b	*	26b 26c 26d		
e Public support (line 26c minus line 26d total)			•	26e		
f Public support percentage (line 26e (numerator) divided	l by line 26c	(denominator))	<u> </u>	26f		
Organizations described on line 12: a For amounts in	icluded in lin	es 15, 16, and 1	7 that were receiv	ed fron	na "dısc	qualified person
prepare a list for your records to show the name of, and to	total amount	s received in eac	ch year from, each	"dıs qua	alıfıed p	erson "
Do not file this list with your return. Enter the sum of su	ıch amounts	for each year				
(2005) (2004)		(2003)	`	2002)		
b For any amount included in line 17 that was received from	m each pers	on (other than "d	lisqualified person	s"), pre	pare a l	ıst for your
records to show the name of, and amount received for eac or (2) \$5,000 (Include in the list organizations describe						•
return. After computing the difference between the amou	ınt received	and the larger an	nount described in	(1) or	(2) , ent	er the sum of
these differences (the excess amounts) for each year						
(2005) (2004)		(2003)	(2002)		
c Add Amounts from column (e) for lines 15		16				
17 20		21		•	27c	
d Add Line 27a total and I	line 27b tota			•	27d	
e Public support (line 27c total minus line 27d total)				•	27e	
f Total support for section 509(a)(2) test Enter amount fr	rom line 23,	column (e) 🕨	27f			
g Public support percentage (line 27e (numerator) divided			<u> </u>	27g	<u> </u>	
h Investment income percentage (line 18, column (e) (nun			(denominator)) 🕨	27h	† 	
Unusual Grants: For an organization described in line 10,					02 thro	ugh 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

Pa	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	110
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its	1	103	
50	brochures, catalogues, and other written communications with the public dealing with student admissions,			
		30	Yes	
24	programs, and scholarships?	30	165	
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		,	
	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	_		
32	Does the organization maintain the following			
;	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	Yes	
-	B Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory			
	basis?	32b	Yes	ĺ
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c	Yes	i
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	Yes	
				l
	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			
	Chudantal mahta ay muula sa 2	22-		N.
•	a Students' rights or privileges?	33a		No
	h Admissions policies?	33b		No
	Employment of faculty or administrative staff?	33c		No
•				
	g Scholarships or other financial assistance?	33d		No
		554		110
	e Educational policies?	33e		No
•	E Lucational policies.	336	<u> </u>	I NO
	• Head of facilities 2	33f		N.
1	F Use of facilities?	331	<u> </u>	No
				١
,	g Athletic programs?	33g		No
				١.,
	h Other extracurricular activities?	33h		No
	Tf /Tf /			
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		_		
		-		
34	a Does the organization receive any financial aid or assistance from a governmental agency? 🕏	34a	Yes	
l	h 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			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Pay Proc. 75-50, 1975-2 C.B. 597, covering racial pendicerimination? If "No." attach an explanation	1 25	1 V a c	ı

i Total lobbying expenditures (Add lines **c** through **h.**)

Che	ck 📂 a 🦵 ıf the organızatıon belong	s to an affiliated group Check ►	b If you che	cked	"a" and '	'lımıted	contro	l" provisions apply
		bbbying Expenditures " means amounts paid or incurred)			A ffiliat	(a) ed group tals	,	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influe	nce public opinion (grassroots lobby	ına)	36				organizations
	Total lobbying expenditures to influe	· · · · · · · · · · · · · · · · · · ·	- · · · - ·	37				
38	Total lobbying expenditures (add line	• , , , ,	j'	38				
39	Other exempt purpose expenditures	,		39				
40	Total exempt purpose expenditures	(add lines 38 and 39)		40				
	Lobbying nontaxable amount Enter	•	-					
7.	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 \$50	00 000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,	<i>'</i>	41				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,5	· ·	-				
	Over \$17,000,000	\$1,000,000	00,000					
42	Grassroots nontaxable amount (ente			42				
43	Subtract line 42 from line 36 Enter	•		43				(
	Subtract line 41 from line 38 Enter		-	44				
44	Subtract line 41 from line 38 Enter	-0- II line 41 is more than line 36	-	44				
	Caution: If there is an amount on eith	er line 43 or line 44, you must file Form 4-Year Averaging Period Uno		01(h)			
					llofthefi	ve colun	nne ha	Love
		made a section 501(h) election do no instructions for lines 45 through 50					iiiis be	IOW
		instructions for lines 45 through 50		ıns	tructions)		
		instructions for lines 45 through 50	on page 13 of the	ıns	tructions) ear Avera		
	See the	Instructions for lines 45 through 50	on page 13 of the	e ins	tructions) ear Avera	aging F	Period
45	See the Calendar year (or	Lobi	on page 13 of the bying Expenditure (b)	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
45	See the Calendar year (or fiscal year beginning in) ▶	Lobi (a) 2006	on page 13 of the bying Expenditure (b)	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount	Lobi (a) 2006	on page 13 of the bying Expenditure (b)	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
46	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of l	Lobi (a) 2006	on page 13 of the bying Expenditure (b)	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
46	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of l	Lob (a) 2006 Ine 45(e))	on page 13 of the bying Expenditure (b)	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
46 47 48 49 50	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures	Lob (a) 2006 Ine 45(e))	on page 13 of the bying Expenditure (b) 2005	e ins	ructions uring 4-Ye (c)) ear Avera	aging F	Period (e)
46 47 48 49 50	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TVI-B Lobbying Activity by	Lob (a) 2006 Ine 45(e)) y Nonelecting Public Charities	on page 13 of the bying Expenditure (b) 2005	es Di	ructions uring 4-Ye (c) 2004	ear Avera	aging F (d) 003	Period (e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TVI-B Lobbying Activity by (For reporting only by	Lob (a) 2006 Ine 45(e)) y Nonelecting Public Charitie organizations that did not comp	on page 13 of the bying Expenditure (b) 2005	(Se	e page	ear Avera	aging F (d) 003	Period (e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) > Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TVI-B Lobbying Activity by	Lob (a) 2006 Ine 45(e)) y Nonelecting Public Charitie organizations that did not comput to influence national, state or loc	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, income	(Se	e page	ear Avera	aging F (d) 003	Period (e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TVI-B Lobbying Activity by (For reporting only by lambda) In the year, did the organization atterparts of the year, did the yea	Lob (a) 2006 Ine 45(e)) y Nonelecting Public Charitie organizations that did not comput to influence national, state or loc	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, income	(Se	e page	2 2 1 3 of th	e inst	Period (e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TtVI-B Lobbying Activity by (For reporting only by lambda) In the year, did the organization attempt to influence public opinion on a law of lambda)	Lob (a) 2006 Ine 45(e)) y Nonelecting Public Charitie organizations that did not comput to influence national, state or loc	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, include the use of	(Second	e page	2 2 1 3 of th	e inst	Period (e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures TtVI-B Lobbying Activity by (For reporting only by lambda) In the year, did the organization attempt to influence public opinion on a law of lambda)	Instructions for lines 45 through 50 (a) 2006 Ine 45(e)) Y Nonelecting Public Charities organizations that did not compute to influence national, state or local size of the size of th	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, include the use of	(Second	e page	2 2 1 3 of th	e inst	Period (e) Total
46 47 48 49 50 Pa Duri atte a b	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures **T VI-B** Lobbying Activity by (For reporting only by not	Instructions for lines 45 through 50 (a) 2006 Ine 45(e)) Y Nonelecting Public Charities organizations that did not compute to influence national, state or local egislative matter or referendum, throughout the computer of the computer o	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, include the use of	(Second	e page	2 2 1 3 of th	e inst No No	Period (e) Total
46 47 48 49 50 Pa Durri atte a b c	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures rt VI-B Lobbying Activity by (For reporting only by ng the year, did the organization attempt to influence public opinion on a leich Volunteers Paid staff or management (Include Media advertisements	Instructions for lines 45 through 50 (a) 2006 Ine 45(e)) Y Nonelecting Public Charities organizations that did not compute to influence national, state or localisative matter or referendum, through the public compensation in expenses reported or the public	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, include the use of	(Second	e page	2 2 1 3 of th	e Inst No No No	Period (e) Total
46 47 48 49 50 Pa Durri atte a b c d	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures Tt VI-B Lobbying Activity by (For reporting only by ng the year, did the organization attempt to influence public opinion on a leit Volunteers Paid staff or management (Include Media advertisements Mailings to members, legislators, o	Instructions for lines 45 through 50 (a) 2006 Ine 45(e)) Y Nonelecting Public Charities organizations that did not company to influence national, state or local state o	on page 13 of the bying Expenditure (b) 2005 es lete Part VI-A) cal legislation, include the use of	(Second	e page	2 2 1 3 of th	e Inst No No No No	Period (e) Total
46 47 48 49 50 Pa Duri atte a b c d e	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of lambda) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of lambda) Grassroots lobbying expenditures **TVI-B** Lobbying Activity by (For reporting only by not	Instructions for lines 45 through 50 (a) 2006 Ine 45(e)) Y Nonelecting Public Charities organizations that did not company to influence national, state or local state o	es lete Part VI-A) al legislation, included the use of	(Second	e page	2 2 1 3 of th	e inst No No No No No No	Period (e) Total

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

4,640

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

a Trans	fers from the reporting	g organization to a no	ncharitable exempt organization	of	Y	'es	No
(i)	Cash				51a(i)	T	Νo
(ii)	O ther assets				a(ii)		Νo
b Other	transactions						
(i)	Sales or exchanges of	of assets with a nonch	narıtable exempt organızatıon		b(i)	i	Νo
(ii)	Purchases of assets	from a noncharitable	exempt organization		b(ii)	一	Νo
(iii)	Rental of facilities, ed	quipment, or other as:	sets		b(iii)		Νo
(iv)	Reimbursement arrar	ngements			b(iv)		Νo
(v)	Loans or loan guaran	tees			b(v)		Νο
(vi)	Performance of service	ces or membership oi	fundraising solicitations		b(vi)		Νo
c Sharır	ng of facilities, equipm	ent, mailing lists, oth	er assets, or paid employees		С		Νo
goods	, other assets, or serv	vices given by the rep	ete the following schedule Colur orting organization If the organi mn (d) the value of the goods, ot	zation received less than fair m	arket value		
(a)	(b)	gement, snow in colu	(c)	(d)			
.ine no	A mount involved	Name of noncha	arıtable exempt organization	Description of transfers, tra arrangem		and s	harır
				arrangeni	:1105		-
			with, or related to, one or more t				
	s," complete the follow		nan section 501(c)(3)) or in sect	ion 52/7	·	es	▽
	(a) Name of organiza	ation	(b) Type of organization	(c) Description of rel	ationship		
							—

Software ID: Software Version:

EIN: 21-0650678

Name: Rider University

Form 990, Part III - Program Service Accomplishments:

nun (c)(ber of clients served, publications issued, etc. [se achievements in a clear and concise manner. State the Discuss achievements that are not measurable. (Section 501 empt 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.)
а	Research		1,329,555
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
ь	·	t, comprehensive, teaching oriented institution of higher rt to students through academic and athletic scholarships,	80,196,314
	(Grants and allocations \$ 33,609,793)	If this amount includes foreign grants, check here 🕨 🦵	
С	Auxiliary Enterprises Primary room and board		20,522,337
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
d	Student Services Rider University provides th develop the intellectual and social talents of it	ese services to the entire student community in an effort to is students	18,221,971
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
e	A cademic Support General support to the stud	dents	11,274,849
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	

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	341,495	190,283	45,370
JULIE KARNS 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP FINANCE 50 0	205,311	36,827	0
JONATHAN MEER 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP UNIVersity ADVANCEMENT 50 0	181,096	37,752	6,600
JAMES O'HARA 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP ENROLLMENT MGMT 50 0	158,232	21,043	1,800
JAMES BUSTERUD 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
CHRISTOPHER CAROTHERS 2 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
BONNIE DIMUN 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE-secretary 1 0	0	0	0
HARRY T GAMBLE 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
Nancy Becker 20 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	(C) Compensation	(D) Contributions to	(E) Expense
(A) Name and address	hours per week devoted to position	(If not paid, enter -0-	employee benefit plans & deferred compensation plans	account and other allowances
PETER INVERSO 5 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DANIEL KAPLAN 🕏 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
MICHAEL B KENNEDY 2 083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
PAUL J LANG 5 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DENNIS N LONGSTREET 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
THOMAS LYNCH 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE-vice chairman 1 0	0	0	0
ALFONSE MATTIA 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
TERRY K MCEWEN 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
JUDITHANNE SCOURFIELD MCLAUCHLAN 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

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
THOMAS M MULHARE 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
GERALD P NAGY 📆 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
JUDITH PERSICHILLI 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
GEORGE PRUITT 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
WILLIAM M RUE 5 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
GARY L SHAPIRO 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE-Chairman 1 0	0	0	0
JOHN SPITZNAGEL 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
Gregory A Church 2 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
ARTHUR J STAINMAN 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
Dr Mark C DeMareo 2 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
HOWARD B STOECKEL 2083 Lawrenceville Road Lawrenceville, NJ 086483099	TRUSTEE 1 0	0	0	0
DONALD STEVEN 2083 Lawrenceville Road Lawrenceville, NJ 086483099	VP ACADEMIC AFFAIRS 50 0	198,752	42,366	0

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TY 2006 Cash Grants Paid Schedule

Name: Rider University

Class of Activity	Recipient's name	Address	Amount	Relationship
	FEDERAL		1,107,692	
	STATE		618,938	

TY 2006 Compensation Explanation

Name: Rider University

Person Name	Explanation
MORDECHAI ROZANSKI	Column (D) includes deferred compensation as a retention incentive. Column (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY HOUSE AND CAR. ExpENSES ON A REIMBURSEMENT BASIS only
JULIE KARNS	Column (E) EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY
JONATHAN MEER	Column (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY CAR EXPENSES are ON A REIMBURSEMENT BASIS only
JAMES O'HARA	Column (E) EXPENSES REPRESENT PERSONAL USE OF UNIVERSITY CAR EXPENSES are ON A REIMBURSEMENT BASIS only
DONALD STEVEN	Column (E) EXPENSES ARE ON A REIMBURSEMENT BASIS ONLY



TY 2006 Compensation Explanation

Name: Rider University

Person Name	Explanation
PHYLLIS FRAKT	Column (C) Compensation includes \$95,997 from an Early Retirement Incentive and \$125,545 from Consulting

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TY 2006 Gain/Loss from Sale of Public Securities Schedule

Name: Rider University

EIN: 21-0650678

Gross Sales Price: 11,640,137

Basis: 11,640,771

Sales Expenses:

Total (net): -634

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TY 2006 Investments - Land Schedule

Name: Rider University

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value	l
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TY 2006 Investments - Other Schedule

Name: Rider University

Description	Book Value	Cost/FMV
VARIOUS INVESTMENTS IN		
COMMONFUND PARTNERSHIPS	7,154,640	
COMMERCIAL PAPER	995,996	

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TY 2006 Investments - Securities Schedule

Name: Rider University

Description	Book Value	Cost/FMV
CERTIFICATE OF DEPOSIT - OTHER	375,466	
MONEY MARKET FUND - OTHER	23,552,662	

TY 2006 Mortgages and Notes Payable Schedule

Name: Rider University

EIN: 21-0650678

Total Mortgage Amount: 2492493

1	Item No.
US DEPT OF HOUSING	Lender's Name
	Lender's Title
	Relationship to Insider
758000	Original Amount of Loan
326332	Balance Due
1979-10	Date of Note
2019-05	Maturity Date
	Repayment Terms
3.0	Interest Rate
	Security Provided by Borrower
	Purpose of Loan
	Description of Lender Consideration
	Consideration FMV
 326332 1979-10 2019-05 3.0	Balance Due Date of Note Maturity Date Repayment Terms Interest Rate Security Provided by Borrower Purpose of Loan Description of Lender Consideration

Item No.	2
Lender's Name	US DEPT OF EDUCATION
Lender's Title	
Relationship to Insider	
Original Amount of Loan	3000000
Balance Due	2166161
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	

TY 2006 Non Cash Grants Paid Schedule				
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	31883160			

DLN: 93490134000278

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How Book Value is Determined?

How FMV is Determined?

Date of Gift

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TY 2006 Other Assets Schedule

Name: Rider University

Description	Beginning of Year Amount	End of Year Amount
HELD IN TRUST (CSV LIFE INS,	2,585,571	2,976,755
GOODWILL, ART, ASSETS)		

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TY 2006 Other Changes in Net Assets Schedule

Name: Rider University

Description	Amount
UNREALIZED GAIN-CRNT UNRESTRICTED FUND	388,233
UNREALIZED GAIN-CRNT RESTRICTED FUND	14,234
UNREA LIZED GA IN-TRUE ENDOWMENT	3,386,536
UNREALIZED GAIN-TERM ENDOWMENT	297,336
UNREALIZED GAIN-ANNUITY & LIFE	69,198
UNREALIZED GAIN-PLANT	6,499
UNREALIZED LOSS-QUASI ENDOWMENT	271,685
EFFECT OF ADOPTION OF FASB 158	2,489,563

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TY 2006 Other Expenses Not Included Schedule

Name: Rider University

Description	Amount
SCHOLARSHIPS	33,609,790

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TY 2006 Other Liabilities Schedule

Name: Rider University

Description	Beginning of Year Amount	End of Year Amount
OTHER LIABILIIES	11,666,591	12,435,343
INSURED INDEMNITY PLAN,		
ASSET RETIREMENT OBLIGATION,		
ANNUITIES PAYABLE		

efile GRAPHIC print - L	OO NOT PROCESS	As Filed Data -	DLN: 9	349013400027

TY 2006 Other Notes/Loans Receivable Short Schedule

Name: Rider University

Category/Name	Amount
ALPHA SIGMA LAMBDA	500
SADIE ZIEGLER	929
EOP EMERGENCY LOAN	700
RIDER LOAN FUND	2,132,589
PERKINS LOAN	7,413,930

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TY 2006 Other Revenues Not Included Schedule

Name: Rider University

Description	Amount
SCHOLARSHIP ALLOW-TUITION&FEES	33,348,465
SCHOLARSHIP ALLOW-AUXILIARIES	261,325

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TY 2006 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 2006 Tax-Exempt Bond Liabilities Schedule

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

Item No.	1
Name of Issue	
Purpose	U.S. Dept of Education
Amount Outstanding	272000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
Item No.	2
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	705000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	
Item No.	3
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	422500
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	4
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	295000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	5
Name of Issue	
Purpose	N.J. Edu. Facılıtıes Authority
Amount Outstanding	771831
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	6
Name of Issue	
Purpose	N.J. Edu. Facılıtıes Authority
Amount Outstanding	22920000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

N.J. Edu. Facilities Authority
385402

Item No.	8
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	628815
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	9
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	928867
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

10
N.J. Edu. Facilities Authority
262500

Item No.	11
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	14475000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

Item No.	12
Name of Issue	
Purpose	N.J. Edu. Facilities Authority
Amount Outstanding	22000000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

TY 2006 Employee Compensation Explanation

Name: Rider University

Employee	Explanation
LARRY NEWMAN	Column (E) EXPENSES ARE ON A REINBURSEMENT BASIS Only.
STEVEN LORENZET	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.
WILLIAM AMADIO	Column (E) EXPENSES ARE ON A REINBURSEMENT BASIS Only.
TORI ELAINE HARRISON	Column (E) EXPENSES ARE ON A REINBURSEMENT BASIS Only.

TY 2006 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 2006 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 2006 Self Dealing Statement

Name: Rider University

Line Number	Explanation
	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.

Line Number	Explanation
2d	SEE FORM 990, PART V.