

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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization  
RIDER UNIVERSITY

Doing Business As

Number and street (or P O box if mail is not delivered to street address)Room/suite

2083 LAWRENCEVILLE ROAD

City or town, state or country, and ZIP + 4  
LAWRENCEVILLE, NJ 086483099

F Name and address of principal officer  
DR MORDECHAI ROZANSKI  
2083 LAWRENCEVILLE ROAD  
LAWRENCEVILLE, NJ 086483099

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW RIDER EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1865

M State of legal domicile NJ

Part I	Summary																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities RIDER UNIVERSITY IS A PRIVATE, NOT-FOR-PROFIT INSTITUTION FOUNDED IN 1865</div></div>																								
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																								
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2013-05-15

Date

Type or print name and title

JULIE A KARNS TREASURER AND VP FINANCE

Paid Preparer's Use Only

Preparer's signature

Garrett Higgins

Date

2013-05-15

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00543209

Firm's name (or yours if self-employed), address, and ZIP + 4

O'CONNOR DAVIES LLP  
665 FIFTH AVENUE  
NEW YORK, NY 10022

EIN

27-1728945

Phone no

(212) 286-2600

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization’s mission

SEE SCHEDULE O FOR CONTINUATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code ) (Expenses \$ 110,191,527 including grants of \$ 49,414,605 ) (Revenue \$ 82,691,419 )
INSTRUCTION RIDER UNIVERSITY IS AN INDEPENDENT, COMPREHENSIVE, TEACHING ORIENTED INSTITUTION OF HIGHER LEARNING THE UNIVERSITY OFFERS FINANCIAL SUPPORT TO STUDENTS THROUGH ACADEMIC AND ATHLETIC SCHOLARSHIPS, GRANTS, AND STUDENT WORKSTUDY PROGRAMS RIDER UNIVERSITY IS CURRENTLY ORGANIZED INTO FOUR COLLEGES - THE COLLEGE OF LIBERAL ARTS, EDUCATION, AND SCIENCES, THE COLLEGE OF BUSINESS ADMINISTRATION, THE COLLEGE OF CONTINUING STUDIES, AND THE WESTMINSTER COLLEGE OF THE ARTS THE PRIVATE UNIVERSITY CURRENTLY SERVES APPROXIMATELY 4,700 UNDERGRADUATES STUDENTS AND APPROXIMATELY 1,100 GRADUATE STUDENTS IN 69 UNDERGRADUATE AND 25 GRADUATE PROGRAMS FULL-TIME FACULTY NUMBER 250, WITH 96% HOLDING A DOCTORATE OR THE HIGHEST DEGREE IN THEIR FIELD RIDER IS ACCREDITED BY THE MIDDLE STATES ASSOCIATION OF COLLEGES AND SCHOOLS AND ALSO HOLDS SPECIALIZED ACCREDITATION WITH THESE PRESTIGIOUS EDUCATIONAL ORGANIZATIONS - AACSB INTERNATIONAL (THE ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS) - RIDER IS AMONG THE SELECT BUSINESS SCHOOLS TO HAVE ATTAINED THIS DISTINCTION AND THE ONLY SCHOOL IN NEW JERSEY TO HOLD THE SPECIALIZED AACSB ACCREDITATION IN ACCOUNTING - NCATE - ELEMENTARY AND SECONDARY EDUCATION PROGRAMS AND THEIR APPLICABLE GRADUATE PROGRAMS ON BOTH CAMPUSES ARE ACCREDITED BY THE NATIONAL COUNCIL FOR THE ACCREDITATION OF TEACHER EDUCATION - NASM - THE UNDERGRADUATE AND GRADUATE MUSIC PROGRAMS OF WESTMINSTER CHOIR COLLEGE ARE ACCREDITED BY THE NATIONAL ASSOCIATION OF SCHOOLS OF MUSIC - CACREP - RIDER'S GRADUATE PROGRAM IN COUNSELING SERVICES IN THE SCHOOL OF EDUCATION HOLDS NATIONAL ACCREDITATION FROM THE COUNCIL FOR ACCREDITATION OF COUNSELING AND RELATED EDUCATION PROGRAMS - NASP - THE SCHOOL PSYCHOLOGY PROGRAM IN THE SCHOOL OF EDUCATION IS ACCREDITED BY THE NATIONAL ACCREDITATION OF SCHOOL PSYCHOLOGISTS - AMERICAN CHEMICAL SOCIETY - RIDER'S CHEMISTRY PROGRAM IS ACCREDITED BY THE AMERICAN CHEMICAL SOCIETY	

4b	(Code ) (Expenses \$ 29,117,140 including grants of \$ ) (Revenue \$ 37,908,083 )
AUXILIARY ENTERPRISES PRIMARY ROOM AND BOARD RIDER UNIVERSITY HAS A LAWRENCEVILLE CAMPUS AND A PRINCETON CAMPUS THE LAWRENCEVILLE CAMPUS HOUSES APPROXIMATELY 2,400 STUDENTS IN THIRTEEN RESIDENCE HALLS AND SIX GREEK HOUSES THE LAWRENCEVILLE CAMPUS OFFERS FACILITIES FOR DINING AND SNACKING FOR STUDENTS, FACULTY, STAFF AND GUESTS AT DALY’S DINING HALL, THE CRANBERRY CAFE, THE BRONC DINER, STARBUCKS, POD EXPRESS AND THE C-STORE THE PRINCETON CAMPUS HOUSES APPROXIMATELY 200 STUDENTS IN THREE RESIDENCE HALLS THE PRINCETON CAMPUS OFFERS THE DINING COMMONS AND THE WCC PUB FOR MEALS AND SNACKS FOR STUDENTS, FACULTY, STAFF AND GUESTS	

4c	(Code ) (Expenses \$ 24,298,547 including grants of \$ ) (Revenue \$ 33,059,939 )
STUDENT SERVICES RIDER UNIVERSITY PROVIDES THESE SERVICES TO THE ENTIRE STUDENT COMMUNITY IN AN EFFORT TO DEVELOP THE INTELLECTUAL AND SOCIAL TALENTS OF ITS STUDENTS THESE SERVICES INCLUDE ADMISSIONS, ATHLETICS, GREEK LIFE, CAREER SERVICES, COUNSELING CENTER, HEALTH SERVICES, FINANCIAL AID, AND RECREATION PROGRAMS	

	(Code ) (Expenses \$ 17,791,331 including grants of \$ ) (Revenue \$ 24,206,400 )
ACADEMIC SUPPORT (EXPENSES \$15,889,690 INCLUDING GRANTS OF \$0)(REVENUE \$21,619,078) - GENERAL SUPPORT TO THE STUDENTS THESE INCLUDE ACADEMIC INFORMATION TECHNOLOGY, DEAN'S OFFICES, LIBRARIES, THEATER, ART GALLERY, TV STUDIO, AND OTHER SIMILAR ACADEMIC ACTIVITIES RESEARCH (EXPENSES \$1,901,641 INCLUDING GRANTS OF \$0)(REVENUE \$2,587,322) - RESEARCH PERFORMED BY FACULTY AND STUDENTS	

4d	Other program services (Describe in Schedule O )
	(Expenses \$ 17,791,331 including grants of \$ ) (Revenue \$ 24,206,400 )

4e	Total program service expenses \$ 181,398,545
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Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>		
		<div>YesNo</div>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	<div>1a358</div>
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<div>1b0</div>
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<div>1cYes</div>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	<div>2a3,491</div>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<div>2bYes</div>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<div>3aYes</div>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<div>3bYes</div>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	<div>4aNo</div>
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<div>5aNo</div>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<div>5bNo</div>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<div>5c</div>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	<div>6aNo</div>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<div>6b</div>
7	Organizations that may receive deductible contributions under section 170(c).	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<div>7aYes</div>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<div>7bYes</div>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<div>7cNo</div>
d	If "Yes," indicate the number of Forms 8282 filed during the year.	<div>7d</div>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<div>7eNo</div>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<div>7fNo</div>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<div>7g</div>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<div>7h</div>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<div>8</div>
9	Sponsoring organizations maintaining donor advised funds.	
a	Did the organization make any taxable distributions under section 4966?	<div>9a</div>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	<div>9b</div>
10	Section 501(c)(7) organizations. Enter	
a	Initiation fees and capital contributions included on Part VIII, line 12.	<div>10a</div>
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<div>10b</div>
11	Section 501(c)(12) organizations. Enter	
a	Gross income from members or shareholders.	<div>11a</div>
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	<div>11b</div>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<div>12a</div>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<div>12b</div>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	<div>13a</div>
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	<div>13b</div>
c	Enter the aggregate amount of reserves on hand.	<div>13c</div>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	<div>14aNo</div>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<div>14b</div>

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
15c	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK, AZ, CO, KY, ME, MD, MA, MI, NH, NY, OH, OK, OR, WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	JENNIFER POTTER 2083 LAWRENCEVILLE RD LAWRENCEVILLE, NJ 086483099 (609) 896-5009

Check if Schedule O contains a response to any question in this Part VII ☒

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

Form **990** (2011)

## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	3,310,616	0	791,012

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 223

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

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SLAFKOVSKY MARK 848 YARDVILLE-ALLENTOWN ROAD TRENTON, NJ 08618	CONSTRUCTION SERVICES	891,329
THE SPIEZLE ARCHITECTURAL GROUP 120 SANHICAN DRIVE TRENTON, NJ 08618	ARCHITECTURAL SERVICES	554,259
UNIVERSITY ATHLETIC MANAGEMENT 385 OXFORD VALLEY ROAD YARDLEY, PA 19067	MGMT FEE FOR SRC	507,268
PEPPER HAMILTON LLP 301 CARNEGIE CENTER SUITE 400 PRINCETON, NJ 08543	LEGAL SERVICES	378,002
BRIAN'S TREE SERVICE 174 LINDBERGH ROAD HOPEWELL, NJ 08525	LANDSCAPING SERVICES	347,682
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>10</b>		



Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues . . . . .	1b						
	c	Fundraising events . . . . .	1c	180,518					
	d	Related organizations . . . .	1d						
	e	Government grants (contributions)	1e	3,242,896					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,653,160					
	g	Noncash contributions included in lines 1a-1f \$ 589,160							
	h	Total. Add lines 1a-1f . . . . .		14,076,574					
Program Service Revenue			Business Code						
	2a	TUITION AND FEES	611310	150,789,146	150,789,146				
	b	ROOM AND BOARD	611310	30,578,275	30,578,275				
	c	OTHER FEES	611130	5,553,788	5,553,788				
	d	STUDY TOURS	611310	5,361,547	5,361,547				
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f . . . . .		192,282,756					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		1,659,352		-22,927	1,682,279		
	4	Income from investment of tax-exempt bond proceeds . .							
	5	Royalties . . . . .							
	6a	Gross rents	(i) Real	(ii) Personal					
			267,909	44,603					
			b	Less rental expenses	0	0			
			c	Rental income or (loss)	267,909	44,603			
	d	Net rental income or (loss) . . . . .		312,512		44,603	267,909		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
			46,596,647						
			b	Less cost or other basis and sales expenses	46,005,253				
			c	Gain or (loss)	591,394				
	d	Net gain or (loss) . . . . .		591,394			591,394		
	8a	Gross income from fundraising events (not including \$ 180,518 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a	94,578					
			b	Less direct expenses . . . . .	106,026				
			c	Net income or (loss) from fundraising events . .	-11,448			-11,448	
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a						
			b	Less direct expenses . . . . .					
			c	Net income or (loss) from gaming activities . .					
	10a	Gross sales of inventory, less returns and allowances . . . . .	a						
			b	Less cost of goods sold . . . . .					
			c	Net income or (loss) from sales of inventory . .					
Miscellaneous Revenue		Business Code							
11a	BUSINESS CONF CENTER	721000	1,376,428		935,823	440,605			
b	VENDING MACHINE COMMIS	722210	35,521			35,521			
c	SCIENTIFIC RESEARCH	541700	33,678		33,678				
d	All other revenue . . . . .		61,492		27,748	33,744			
e	Total. Add lines 11a-11d . . . . .		1,507,119						
12	Total revenue. See Instructions . . . . .		210,418,259	192,282,756	1,018,925	3,040,004			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns  
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)  
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	49,414,605	49,414,605		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,434,788	1,201,570	846,178	387,040
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	72,378,292	63,383,311	8,157,276	837,705
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,460,190	2,930,592	493,112	36,486
9	Other employee benefits	12,751,010	10,799,409	1,817,148	134,453
10	Payroll taxes	5,717,374	4,842,303	814,784	60,287
11	Fees for services (non-employees)				
a	Management				
b	Legal	264,760		264,760	
c	Accounting	120,274		120,274	
d	Lobbying	6,474		6,474	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	165,686		165,686	
g	Other	6,130,627	5,157,221	942,285	31,121
12	Advertising and promotion	1,080,359	443,138	607,629	29,592
13	Office expenses	5,046,510	2,977,638	2,003,707	65,165
14	Information technology	4,666,782	4,374,175	243,139	49,468
15	Royalties				
16	Occupancy	10,614,146	10,057,592	552,856	3,698
17	Travel	5,046,068	4,658,993	348,326	38,749
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,060,927	883,540	155,773	21,614
20	Interest	2,508,375	2,371,290	137,085	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,297,595	8,998,212	299,383	
23	Insurance	923,136	150,642	772,494	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a	FOOD SERVICE	6,901,545	6,901,545		
b	LOSS DEFEASANCE OF DEBT	3,420,313		3,420,313	
c	MISCELLANEOUS	1,081,510	980,938	73,039	27,533
d	ALLOCATION AND BAD DEBT	689,895	184,817	505,078	
e					
f	All other expenses	690,472	687,014		3,458
25	Total functional expenses. Add lines 1 through 24f	205,871,713	181,398,545	22,746,799	1,726,369
26	Joint costs. Check here if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			31,838	1	25,966
	2	Savings and temporary cash investments . . . . .			19,213,762	2	20,282,054
	3	Pledges and grants receivable, net . . . . .			13,445,313	3	17,657,292
	4	Accounts receivable, net . . . . .			5,493,501	4	3,492,158
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .			8,120,422	7	7,646,200
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			4,130,707	9	2,505,464
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D . . . . .	10a	219,344,764			
	b	Less: accumulated depreciation . . . . .	10b	105,376,910	106,632,128	10c	113,967,854
	11	Investments—publicly traded securities . . . . .			47,064,897	11	49,157,326
	12	Investments—other securities. See Part IV, line 11 . . . . .			12,722,237	12	10,717,618
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			2,309,217	15	3,092,474
	16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			219,164,022	16	228,544,406
Liabilities	17	Accounts payable and accrued expenses . . . . .			19,149,767	17	21,836,631
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			4,973,414	19	9,773,485
	20	Tax-exempt bond liabilities . . . . .			53,938,010	20	54,986,046
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			177,257	21	57,851
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			2,013,863	23	1,878,717
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .			16,092,487	25	16,487,703
	26	Total liabilities. Add lines 17 through 25 . . . . .			96,344,798	26	105,020,433
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			66,886,679	27	61,730,630
	28	Temporarily restricted net assets . . . . .			21,915,644	28	27,349,201
	29	Permanently restricted net assets . . . . .			34,016,901	29	34,444,142
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			122,819,224	33	123,523,973
	34	Total liabilities and net assets/fund balances . . . . .			219,164,022	34	228,544,406

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	210,418,259
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	205,871,713
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	4,546,546
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	122,819,224
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-3,841,797
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	123,523,973

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII ☒

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant?	Yes	
<b>c</b>	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization RIDER UNIVERSITY	Employer identification number  21-0650678
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)
- |          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |
- | (i)<br>Name of supported organization | (ii)<br>EIN | (iii)<br>Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv)<br>Is the organization in col (i) listed in your governing document? |    | (v)<br>Did you notify the organization in col (i) of your support? |    | (vi)<br>Is the organization in col (i) organized in the U S ? |    | (vii)<br>Amount of support? |
|---------------------------------------|-------------|---|---|----|--|----|---|----|-----------------------------|
|                                       |             |   | Yes   | No | Yes  | No | Yes   | No |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
| Total                                 |             |   |   |    |  |    |   |    |                             |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2011

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions )					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage						
14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))		14				
15 Public Support Percentage for 2010 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions						

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation



SCHEDULE C  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

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

Name of the organization RIDER UNIVERSITY	Employer identification number  21-0650678
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	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	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		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
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														
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														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

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 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	<b>a</b> Volunteers?		No	
	<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
	<b>c</b> Media advertisements?		No	
	<b>d</b> Mailings to members, legislators, or the public?		No	
	<b>e</b> Publications, or published or broadcast statements?		No	
	<b>f</b> Grants to other organizations for lobbying purposes?		No	
	<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		3,696
	<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		9,700
	<b>i</b> Other activities? If "Yes," describe in Part IV	Yes		6,049
<b>j</b> Total lines 1c through 1i			19,445	
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	PART II-B, LINE 1(B) AND LINE 1(G) - PAID STAFF AND DIRECT CONTACT THE PRESIDENT MET WITH KEY LEGISLATORS AND POLICYMAKERS IN AN EFFORT TO ADVOCATE ON BEHALF OF THE STUDENTS AT RIDER UNIVERSITY WHO RECEIVE FINANCIAL SUPPORT FROM THE STATE AND FEDERAL GOVERNMENT. PART II-B, LINE 1(H) - SPEECHES, LECTURES. THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW JERSEY (AICUNJ) IS COMMITTED TO THE ADVANCEMENT OF INDEPENDENT HIGHER EDUCATION IN NEW JERSEY. IT SERVES AS A LIAISON WITH THE STATE AND FEDERAL GOVERNMENT ON BEHALF OF THE INDEPENDENT SECTOR. THE PRESIDENT OF RIDER UNIVERSITY ATTENDED AICUNJ MEETINGS THROUGHOUT FISCAL YEAR 2012 AND SUPPORTED ITS EFFORTS TO ADVOCATE ON BEHALF OF RIDER AND THE INDEPENDENT SECTOR. PART II-B, LINE 1(I) - OTHER LOBBYING ACTIVITIES. THE UNIVERSITY PAYS ANNUAL ASSOCIATION DUES TO THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW JERSEY (AICUNJ) AND TO THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES. AMONG OTHER SERVICES, THESE ASSOCIATIONS LOBBY ON BEHALF OF SECTOR NEEDS.

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

Department of the Treasury  
Internal Revenue Service

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization RIDER UNIVERSITY	Employer identification number 21-0650678
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)  

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
► \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

(ii)

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .	54,217,784	48,854,412	46,094,754	58,413,122
b	Contributions . . . . .	393,521	991,104	814,027	1,240,540
c	Investment earnings or losses . . . . .	-1,173,168	7,435,943	3,745,295	-11,078,488
d	Grants or scholarships . . . . .	1,251,792	1,199,947	1,036,603	1,645,629
e	Other expenditures for facilities and programs . . . . .	690,559	1,863,728	763,061	834,791
f	Administrative expenses . . . . .				
g	End of year balance . . . . .	51,495,786	54,217,784	48,854,412	46,094,754

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 23 600 %

b

Permanent endowment ▶ 76 400 %

c

Term endowment ▶ 0 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

3a(i)

Yes

No

(ii) related organizations . . . . .

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .	3,325,000	253,359		3,578,359
b Buildings . . . . .		153,018,693	70,569,962	82,448,731
c Leasehold improvements . . . . .				
d Equipment . . . . .		14,788,575	11,370,336	3,418,239
e Other . . . . .		47,959,137	23,436,612	24,522,525
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				113,967,854

Schedule D (Form 990) 2011



Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	210,418,259
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	205,871,713
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,546,546
4	Net unrealized gains (losses) on investments	4	-2,710,045
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,131,752
9	Total adjustments (net) Add lines 4 - 8	9	-3,841,797
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	704,749

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements . . . . .	1	158,127,923
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	-2,710,045
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	-2,710,045
3	Subtract line 2e from line 1 . . . . .	3	160,837,968
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	165,686
b	Other (Describe in Part XIV) . . . . .	4b	49,414,605
c	Add lines 4a and 4b . . . . .	4c	49,580,291
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	210,418,259

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements . . . . .	1	157,423,174
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	1,131,752
e	Add lines 2a through 2d . . . . .	2e	1,131,752
3	Subtract line 2e from line 1 . . . . .	3	156,291,422
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	165,686
b	Other (Describe in Part XIV) . . . . .	4b	49,414,605
c	Add lines 4a and 4b . . . . .	4c	49,580,291
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	205,871,713

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	THE UNIVERSITY IS A CUSTODIAN OF SEVERAL AGENCY ACCOUNTS TOTALING \$57,851. THE AGENCY ACCOUNTS PRIMARILY RELATE TO STUDENT ORGANIZATIONS FOR WHICH THE UNIVERSITY HOLDS THE FUNDS FOR EACH ORGANIZATION UNTIL SUCH TIME AS A CHECK REQUEST IS SUBMITTED BY THE ORGANIZATION FOR REIMBURSEMENT. THIS AMOUNT IS RECORDED AS A LIABILITY ON THE UNIVERSITY'S BALANCE SHEET.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT SPENDING POLICY SUPPORTS SCHOLARSHIPS, GRANTS, FACILITIES, AND PROGRAMS, IN ACCORDANCE WITH THE UNIVERSITY'S MISSION AND DONOR'S RESTRICTIONS.
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF PENSION -1,131,752
		PART X - OTHER LIABILITIES - UNCERTAIN TAX POSITIONS UNDER FIN 48. THE UNIVERSITY IS AN ORGANIZATION DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND THEREFORE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE CODE. ACCORDINGLY, THE UNIVERSITY IS NOT SUBJECT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE. THE UNIVERSITY RECOGNIZES THE EFFECTS OF INCOME TAX PROVISIONS ONLY IF THOSE PROVISIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. NO PROVISION FOR INCOME TAXES WAS REQUIRED IN 2012 AND 2011. PART XII, LINE 4B - OTHER AMOUNTS INCLUDED ON FORM 990, PART VIII, LINE 12, BUT NOT ON LINE 1. SCHOLARSHIP ALLOWANCE - TUITION AND FEES \$49,124,621 SCHOLARSHIP ALLOWANCE - AUXILIARIES \$289,984 PART XIII, LINE 2D - OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25. CHANGE IN VALUE OF PENSION <\$1,131,752> PART XIII, LINE 4B - OTHER AMOUNTS INCLUDED ON FORM 990, PART IX, LINE 25, BUT NOT ON LINE 1. SCHOLARSHIP ALLOWANCE - TUITION AND FEES \$49,124,621 SCHOLARSHIP ALLOWANCE - AUXILIARIES \$289,984

Additional Data

Software ID:  
Software Version:  
EIN: 21-0650678  
Name: RIDER UNIVERSITY

Form 990, Schedule D, Part X, - Other Liabilities

1	(a) Description of Liability	(b) Amount
	US GOVERNMENT GRANTS REFUNDABLE	5,160,622
	ASSET RETIREMENT OBLIGATION	3,976,371
	EMPLOYEE AND RETIREE MEDICAL SELF-INSURED LIABILITY	3,493,527
	STUDENT DEPOSITS AND CREDIT BALANCES	1,143,460
	ANNUITIES PAYABLE	1,363,993
	BUSINESS CONFERENCE DEPOSITS	371,253
	UNCLAIMED CHECKS	35,676
	NJ SALES TAX PAYABLE	21,553
	CAPITAL LEASE	894,431
	OTHER LIABILITIES	26,817



SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13,  
or Form 990-EZ, Part VI, line 48.  
► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
RIDER UNIVERSITY

Employer identification number

21-0650678

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain If you need more space, use Part II

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II

- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

**Part III Supplemental Information**

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY PUBLICIZED ITS RACIALLY NONDISCRIMINATORY POLICY IN ALL OF THE UNIVERSITY'S STUDENT APPLICATIONS, STUDENT CATALOGS, AND THE SOURCE (STUDENT HANDBOOK). THE POLICY IS ALSO LISTED ON THE UNIVERSITY'S WEB PAGE (WWW.RIDER.EDU).
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVED THE FOLLOWING FEDERAL AND STATE OF NEW JERSEY STUDENT FINANCIAL ASSISTANCE: FEDERAL DIRECT STUDENT LOAN PROGRAM \$39,245,382; FEDERAL PELL GRANT PROGRAM \$4,931,861; FEDERAL PERKINS LOAN PROGRAM \$780,530; FEDERAL WORK-STUDY \$606,571; FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM \$420,573; FEDERAL STUDENT SUPPORT SERVICES \$43,395; TOTAL FEDERAL STUDENT FINANCIAL ASSISTANCE \$46,028,312. STATE OF NEW JERSEY - N.J. - COLLEGE LOANS TO ASSIST STATE STUDENTS \$5,990,091; N.J. - TUITION AID GRANT \$6,033,302; N.J. - DISTINGUISHED SCHOLARS \$28,365; N.J. - EDUCATIONAL OPPORTUNITY FUND \$647,360; TOTAL STATE OF NEW JERSEY STUDENT FINANCIAL ASSISTANCE \$12,699,118; TOTAL STUDENT FINANCIAL ASSISTANCE \$58,727,430.



**1**

(i) Method of valuation (book, FMV, appraisal, other)

**3** Enter total number of other organizations or entities . . . . .

## Part III

[illegible]

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

**Part V**   **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 INVESTMENTS ARE REVIEWED BY THE INVESTMENT COMMITTEE OF THE BOARD OF TRUSTEES, AS WELL AS BY RIDER'S INVESTMENT MANAGER

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
RIDER UNIVERSITY

Employer identification number  
21-0650678

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

b

☐ Internet and e-mail solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total . . . . . ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.



Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
			<u>RACQUET AND TENNIS</u>	<u>ATHLETICS GOLF GALA</u>	<u>7</u>	(Add col (a) through col (c))	
			(event type)	(event type)	(total number)		
1	Gross receipts	. . . .	81,885	55,885	137,326	275,096	
2	Less Charitable contributions	. . . .	63,935	36,670	79,913	180,518	
3	Gross income (line 1 minus line 2)	. . . .	17,950	19,215	57,413	94,578	
Direct Expenses	4	Cash prizes	. . . .				
	5	Non-cash prizes	. . . .	4,962	1,416	6,378	
	6	Rent/facility costs	. . . .		2,212	2,212	
	7	Food and beverages	. . . .	25,710	16,632	37,899	
	8	Entertainment	. . . .		2,400	2,400	
	9	Other direct expenses	. . . .	3,214	3,201	8,380	
	10	Direct expense summary Add lines 4 through 9 in column (d). . . . . ▶					( 106,026 )
	11	Net income summary Combine lines 3 and 10 in column (d). . . . . ▶					-11,448

Part III Gaming.

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			( )
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

<div>a</div> <div>The organization's facility</div>	13a	
<div>b</div> <div>An outside facility</div>	13b	

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
RIDER UNIVERSITY

Employer identification number  
21-0650678

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE UNIVERSITY HAS ESTABLISHED POLICIES, PROCEDURES AND CONTROLS OVER THE AWARDING, DISBURSING AND MONITORING OF STUDENT FINANCIAL AID OR ASSISTANCE TO INDIVIDUAL STUDENTS IN COMPLIANCE WITH FEDERAL AND STATE OF NEW JERSEY REGULATIONS AND REQUIREMENTS IN ADDITION, THE UNIVERSITY HAS AN ANNUAL EXTERNAL AUDIT PERFORMED IN ACCORDANCE WITH U S OFFICE OF MANAGEMENT AND BUDGET CIRCULAR A-133 AND NEW JERSEY OFFICE OF MANAGEMENT AND BUDGET CIRCULAR 04-04

Software ID:  
Software Version:  
EIN: 21-0650678  
Name: RIDER UNIVERSITY

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
FEDERAL DIRECT STUDENT LOAN PROGRAM	3596	39,245,382	0		
FEDERAL PELL GRANT PROGRAM	1271	4,931,861	0		
FEDERAL PERKINS LOAN PROGRAM	1206	780,530	0		
FEDERAL WORK-STUDY	776	606,571	0		
FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT	737	420,573	0		
FEDERAL STUDENT SUPPORT SERVICES	37	43,395	0		
N J - COLLEGE LOANS TO ASSIST STATE STUDENTS	330	5,990,091	0		
N J - TUITION AID GRANT	899	6,033,302	0		
N J - DISTINGUISHED SCHOLARS	24	28,365	0		
N J - EDUCATIONAL OPPORTUNITY FUND	202	647,360	0		
RIDER UNIVERSITY ATHLETIC, MERIT AND NEED BASED FINANCIAL AID	4182	48,410,088	0		

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
RIDER UNIVERSITY

Employer identification number  
  
21-0650678

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MORDECHAI ROZANSKI	(i)	514,442	0	21,096	126,660	66,392	728,590	0
	(ii)	0	0	0	0	0	0	0
(2) JULIE A KARNS	(i)	287,413	0	7,818	21,659	2,762	319,652	0
	(ii)	0	0	0	0	0	0	0
(3) DONALD A STEVEN	(i)	241,385	0	11,040	19,383	14,382	286,190	0
	(ii)	0	0	0	0	0	0	0
(4) JONATHAN MEER	(i)	219,993	0	6,757	17,653	82,037	326,440	0
	(ii)	0	0	0	0	0	0	0
(5) JAMES O'HARA	(i)	215,294	0	1,800	17,045	9,406	243,545	0
	(ii)	0	0	0	0	0	0	0
(6) LARRY M NEWMAN	(i)	193,096	0	0	16,401	13,809	223,306	0
	(ii)	0	0	0	0	0	0	0
(7) WILLIAM N ROELL	(i)	180,550	0	0	15,017	3,244	198,811	0
	(ii)	0	0	0	0	0	0	0
(8) ROBERT L ANNIS	(i)	179,136	0	700	14,611	76,627	271,074	0
	(ii)	0	0	0	0	0	0	0
(9) PATRICIA MOSTO	(i)	165,907	0	0	13,532	9,003	188,442	0
	(ii)	0	0	0	0	0	0	0
(10) ANTHONY CAMPBELL	(i)	160,510	0	0	12,315	31,700	204,525	0
	(ii)	0	0	0	0	0	0	0
(11) IRA B SPROTZER	(i)	181,876	0	0	9,785	60,860	252,521	0
	(ii)	0	0	0	0	0	0	0
(12) MARGARET O'REILLY-ALLEN	(i)	179,685	0	0	11,648	19,955	211,288	0
	(ii)	0	0	0	0	0	0	0
(13) JAMES E RIGGS	(i)	175,035	0	0	10,130	27,798	212,963	0
	(ii)	0	0	0	0	0	0	0
(14) BORIS VILIC	(i)	171,743	0	0	14,139	20,271	206,153	0
	(ii)	0	0	0	0	0	0	0
(15) MAURY R RANDALL	(i)	171,383	0	0	12,564	19,842	203,789	0
	(ii)	0	0	0	0	0	0	0

Part IIISupplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 4B	
SUPPLEMENTAL INFORMATION	PART III	PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$66,392 OF PRESIDENT MORDECHAI ROZANSKI INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE PROVIDED TO THE PRESIDENT. THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 57% OF NONTAXABLE BENEFITS. THE PRESIDENT OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE LAWRENCEVILLE CAMPUS AS A CONDITION OF HIS EMPLOYMENT. PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$1,963 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF MORDECHAI ROZANSKI. PART I, LINE 4B PRESIDENT MORDECHAI ROZANSKI PARTICIPATES IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN (457 (F) PLAN). DEFERRED COMPENSATION CONTRIBUTIONS OF \$91,784 WERE MADE DURING THIS COMPENSATION PERIOD AND WILL VEST AND BE DISTRIBUTED AT HIS RETIREMENT. PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$76,627 OF ROBERT L ANNIS INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE PROVIDED TO THE DEAN & DIRECTOR OF THE WESTMINSTER COLLEGE OF THE ARTS. THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 63% OF NONTAXABLE BENEFITS. THE DEAN & DIRECTOR OF THE WESTMINSTER COLLEGE OF THE ARTS OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE PRINCETON CAMPUS AS A CONDITION OF HIS EMPLOYMENT. PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$1,070 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF ROBERT L ANNIS. PART II, COLUMN (D) APPROXIMATELY 33% OF ROBERT L ANNIS' NONTAXABLE BENEFITS AMOUNT REPRESENTS TUITION REMISSION. PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$31,700 OF ANTHONY CAMPBELL INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE PROVIDED TO THE ASSOCIATE VP STUDENT AFFAIRS/DEAN OF STUDENTS. THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 91% OF NONTAXABLE BENEFITS. THE ASSOCIATE VP STUDENT AFFAIRS/DEAN OF STUDENTS OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE LAWRENCEVILLE CAMPUS AS A CONDITION OF HIS EMPLOYMENT. PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$11,784 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF JONATHAN MEER. PART II, COLUMN (D) APPROXIMATELY 60% OF JONATHAN MEER'S NONTAXABLE BENEFITS AMOUNT OF \$82,037 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) APPROXIMATELY 68% OF IRA B SPROTZER'S NONTAXABLE BENEFITS AMOUNT OF \$60,860 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) APPROXIMATELY 90% OF JAMES E RIGGS' NONTAXABLE BENEFITS AMOUNT OF \$27,798 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) NONTAXABLE BENEFITS, EXCLUSIVE OF THE ITEMS NOTED ABOVE, REPRESENT THE VALUE OF HEALTH CARE BENEFITS WHICH VARY BY INDIVIDUAL BENEFIT ELECTIONS.



Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.								OMB No 1545-0047	
									2011	
	Department of the Treasury Internal Revenue Service Name of the organization RIDER UNIVERSITY	Employer identification number 21-0650678							Open to Public Inspection	

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	6460652M3	04-14-2012	55,203,833	CAPITAL IMPROVEMENTS UNIVERSITY FACILITIES, REFUND PRIOR BONDS, ISSUANCE COST		X		X		X
B NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605NBU7	10-09-2003	1,525,353	FIRE SUPPRESSION SYSTEM INSTALLATION		X		X	X	
C NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LWX2	08-10-2005	1,648,393	REFUND PRIOR POOLED FINANCING OF THE ISSUER		X		X	X	
D NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LZ84	10-26-2006	1,482,186	REFUND PRIOR POOLED FINANCING OF THE ISSUER		X		X	X	

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds defeased								
3	Total proceeds of issue	55,208,754		1,525,353		1,648,393		1,482,186	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow	44,612,175				380,308		1,233,666	
7	Issuance costs from proceeds	517,383							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	439,468		1,525,353					
11	Other spent proceeds					1,268,085		248,521	
12	Other unspent proceeds	9,639,727							
13	Year of substantial completion	2014		2004		2005		2004	
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
		X			X		X		X
15	Were the bonds issued as part of an advance refunding issue?	X			X	X		X	
16	Has the final allocation of proceeds been made?		X	X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	X			X		X	X	
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X						X	
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	1 000 %		1 000 %				59 600 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %					
6	Total of lines 4 and 5	1 000 %		1 000 %				59 600 %	
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X			X	X	

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X	X			X
2	Is the bond issue a variable rate issue?		X		X		X		X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X	X		X	
6	Did the bond issue qualify for an exception to rebate?	X			X		X		X

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . . ☐ Yes ☒ No

Part VI

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
	PART II, QUESTION (3)	AMOUNT LISTED DIFFERS FROM THE ISSUE PRICE LISTED IN PART I, COLUMN (E) DUE TO EARNINGS ON INVESTMENT PROCEEDS
	PART V	THE ORGANIZATION IMPLEMENTED REVISED WRITTEN PROCEDURES TO UNDERTAKE CORRECTIVE ACTION SHORTLY AFTER THE COMPLETION OF THE REPORTING PERIOD APPLICABLE TO THIS FORM
	ENTITY I, PART I, BOND A, COLUMN F	BONDS REFUNDED BY SERIES 2012A SERIES 2007C (ISSUED 6/21/07), SERIES 2004A (ISSUED 6/17/04)
	ENTITY I, PART I, BOND C, COLUMN F	BONDS REFUNDED BY HECIF 2005 HECIF 2002A (ISSUED 11/21/2002)
	ENTITY I, PART I, BOND D, COLUMN F	BONDS REFUNDED BY HECIF 2006 ISSUER'S HECIF 2002A (ISSUED 3/14/00), HECIF 2000B (ISSUED 3/14/00) HECIF 2002A (ISSUED 11/21/2002), HECIF 2004A (ISSUED 4/14/04)
	ENTITY I, PART I, COLUMN (E) AND PART II, QUESTIONS (3) AND (10)	AMOUNT IN PART I, COLUMN(E) AND PARTS II, QUESTIONS (3) AND (10) FOR THE ISSUES CITED (BONDS B, C, AND D) REFLECT ONLY THE AMOUNT RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS
	ENTITY I, PART III, BOND A, QUESTIONS (4),(5),(6)	THE AMOUNT LISTED ONLY INCLUDES PRIVATE USE PERCENTAGE APPLICABLE TO THE ORGANIZATION'S PORTION OF THE HECIF 2004A BONDS ALL OTHER BONDS REFUNDED BY THE HECIF 2006 ISSUE WERE ISSUED PRIOR TO JANUARY 1, 2003 AND THEREFORE HAVE BEEN EXCLUDED FROM PART III OF THIS SCHEDULE
	ENTITY II, PART I, COLUMN (E) AND PART II, QUESTIONS (3) AND (10)	AMOUNT IN PART I, COLUMN(E) AND PARTS II, QUESTIONS (3) AND (10) FOR THE ISSUES CITED (BOND A) REFLECT ONLY THE AMOUNT RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
RIDER UNIVERSITY

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number  
21-0650678

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	64605LNM6	04-14-2004	540,000	RENOVATIONS AND FIRE SUPRESSION SYSTEM INSTALLATION	X			X	X	

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	57,500							
2	Amount of bonds defeased	165,449							
3	Total proceeds of issue	540,868							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	540,868							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2005							
		Yes	No						
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	X							
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	59 600 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %							
6	Total of lines 4 and 5	59 600 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?		X						

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . . ☐ Yes ☒ No

Part VI

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
RIDER UNIVERSITY

Employer identification number  
21-0650678

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	36	589,160	MEAN PRICE-GIFT DATE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ►( )				
27 Other ►( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .				Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .				Yes
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	THE UNIVERSITY USES A THIRD PARTY (MERRILL LYNCH) TO PROCESS THE SALE OF STOCK GIFTS

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization RIDER UNIVERSITY	Employer identification number  21-0650678
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Identifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	990, PART III, LINE 1 - CONTINUED	RIDER'S VISION RIDER UNIVERSITY WILL BE A LEADER IN A AMERICAN HIGHER EDUCATION CELEBRATED FOR EDUCATING TALENTED STUDENTS FOR CITIZENSHIP, LIFE AND CAREER SUCCESS IN A DIVERSE AND INTERDEPENDENT WORLD RIDER WILL ACHIEVE DISTINCTIVENESS BY FOCUSING ON STUDENTS FIRST, BY CULTIVATING LEADERSHIP SKILLS, BY AFFIRMING TEACHING AND LEARNING THAT BRIDGES THE THEORETICAL AND THE PRACTICAL AND BY FOSTERING A CULTURE OF ACADEMIC EXCELLENCE RIDER'S MISSION RIDER ATTRACTS AND GRADUATES TALENTED AND MOTIVATED STUDENTS WITH DIVERSE BACKGROUNDS FROM ACROSS THE NATION AND AROUND THE WORLD AND PUTS THEM AT THE CENTER OF OUR LEARNING AND LIVING COMMUNITY AS A LEARNER-CENTERED UNIVERSITY DEDICATED TO THE EDUCATION OF THE WHOLE STUDENT, RIDER PROVIDES STUDENTS THE INTELLECTUAL RESOURCES AND BREADTH OF STUDENT LIFE OPPORTUNITIES OF A COMPREHENSIVE UNIVERSITY WITH THE PERSONAL ATTENTION AND CLOSE STUDENT-FACULTY INTERACTIONS OF A LIBERAL ARTS COLLEGE THROUGH A COMMITMENT TO HIGH QUALITY TEACHING, SCHOLARSHIP AND EXPERIENTIAL OPPORTUNITIES, FACULTY ON BOTH CAMPUSES PROVIDE UNDERGRADUATE AND GRADUATE STUDENTS RIGOROUS AND RELEVANT PROGRAMS OF STUDY TO EXPAND THEIR INTELLECTUAL, CULTURAL AND PERSONAL HORIZONS AND DEVELOP THEIR LEADERSHIP SKILLS OUR HIGHLY REGARDED PROGRAMS IN THE ARTS, SOCIAL SCIENCES, SCIENCES, MUSIC, BUSINESS AND EDUCATION CHALLENGE STUDENTS TO BECOME ACTIVE LEARNERS WHO CAN ACQUIRE, INTERPRET, COMMUNICATE AND APPLY KNOWLEDGE WITHIN AND ACROSS DISCIPLINES TO FOSTER THE INTEGRATIVE THINKING REQUIRED IN A COMPLEX AND RAPIDLY CHANGING WORLD RIDER ATTRACTS HIGHLY QUALIFIED FACULTY, STAFF AND ADMINISTRATORS WITH DIVERSE BACKGROUNDS WHO CREATE AN ENVIRONMENT WHICH INSPIRES INTELLECTUAL AND SOCIAL ENGAGEMENT, STIMULATES INNOVATION AND SERVICE AND ENCOURAGES PERSONAL AND PROFESSIONAL DEVELOPMENT AS KEY MEMBERS OF OUR UNIVERSITY COMMUNITY, IT IS THEIR COMMITMENT TO OUR VALUES, VISION AND MISSION THAT WILL ENSURE RIDER'S SUCCESS THE UNIVERSITY'S INSTITUTIONAL IDENTITY WILL CONTINUE TO REFLECT THE STRENGTHS OF ITS PEOPLE, HISTORY, LOCATION AND SHARED VALUES, AMONG WHICH ARE A COMMITMENT TO DIVERSITY, SOCIAL AND ETHICAL RESPONSIBILITY AND COMMUNITY THE SUCCESS OF OUR GRADUATES WILL BE DEMONSTRATED BY THEIR PERSONAL AND CAREER ACHIEVEMENTS AND BY THEIR CONTRIBUTIONS TO THE CULTURAL, SOCIAL AND ECONOMIC LIFE OF THEIR COMMUNITIES, THE NATION AND THE WORLD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE OF THE UNIVERSITY'S BOARD OF TRUSTEES PERFORMED A REVIEW OF THE FORM 990 AND ALL APPLICABLE SCHEDULES PRIOR TO SUBMISSION AS PART OF AN AUDIT COMMITTEE MEETING. IN ADDITION, THE FORM 990 AND ALL APPLICABLE SCHEDULES WERE POSTED ON THE UNIVERSITY'S INTRANET FOR THE ENTIRE BOARD OF TRUSTEES TO REVIEW PRIOR TO SUBMISSION.



Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	<p>THE UNIVERSITY HAS A WRITTEN CONFLICT OF INTEREST POLICY , AND AN ANNUAL COMPLIANCE REVIEW PROCESS WHICH INCLUDES - SOLICIT FEEDBACK FROM DIVISION HEADS ON PROPOSED STAFF IN THEIR UNITS WHO SHOULD PARTICIPATE IN THE ANNUAL REPORTING AND REVIEW PROCESS ANY INDIVIDUAL WHO IS CONSIDERED TO HAVE SIGNIFICANT RESPONSIBILITY FOR INSTITUTIONAL OPERATIONS OR PURCHASING IS INCLUDED THE POLICY REQUIRES THAT PERSONS INVOLVED IN DECISION MAKING DISCLOSE FINANCIAL OR OTHER INTERESTS-EITHER CURRENT OR PROPOSED- THAT IMPAIR OR MAY APPEAR TO IMPAIR THEIR INDEPENDENT, UNBIASED JUDGEMENT - DISTRIBUTE THE CONFLICT OF INTEREST POLICY AND QUESTIONNAIRE FOR DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST TO ALL INDIVIDUALS SO IDENTIFIED IN 2012, 127 INDIVIDUALS (OFFICERS, TRUSTEES, COACHES, AND ADMINISTRATORS) RECEIVED AND COMPLETED THE CONFLICT QUESTIONNAIRE - REVIEW OF ALL CONFLICT QUESTIONNAIRE RESPONSES BY THE UNIVERSITY BOARD OF TRUSTEES' HUMAN RESOURCES COMMITTEE, WHICH SERVES AS THE CONFLICT COMMITTEE UNDER THE UNIVERSITY'S BY LAWS THE HUMAN RESOURCES COMMITTEE REPORTS ITS FINDINGS TO THE BOARD OF TRUSTEES, WHICH IS RESPONSIBLE FOR ACTING ON THE COMMITTEE'S FINDINGS - IN PARTICULAR ON ANY CONFLICT THAT MIGHT BE IDENTIFIED BY POLICY , ANY PROPOSED BUSINESS RELATIONSHIP BETWEEN A TRUSTEE OR THEIR RELATED ENTITY MUST BE EVALUATED AND ACTED ON PRIOR TO ITS POTENTIAL IMPLEMENTATION NO SUCH RELATIONSHIP CURRENTLY EXISTS - ANY BOARD MEMBER WITH A CONFLICT WILL RECUSE HIMSELF/HERSELF FROM ANY VOTES REGARDING THE MATTER</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE SENIOR COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES ENGAGES AN INDEPENDENT CONSULTING FIRM TO ANNUALLY UNDERTAKE A REASONABLENESS REVIEW OF TOP MANAGEMENT COMPENSATION. TOP MANAGEMENT INCLUDES THE INSTITUTION'S PRESIDENT AND VICE PRESIDENTS. THE REASONABLENESS REVIEW INCLUDES CONSIDERATION OF COMPARABILITY DATA PREPARED BY THE CONSULTANTS WHICH IS PROVIDED TO ALL COMMITTEE MEMBERS AND TO ALL MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES. THE BENCHMARK DATA CONSIDERED INCLUDES BOTH SALARY AND TOTAL COMPENSATION INFORMATION. CONTEMPORANEOUS MINUTES ARE MAINTAINED FOR BOTH THE SENIOR COMPENSATION COMMITTEE OF THE BOARD AND FOR THE FULL BOARD OF TRUSTEES MEETINGS. THE UNIVERSITY CONSISTENTLY UTILIZES HIGHER EDUCATION BENCHMARKING DATA TO ASSESS THE REASONABLENESS OF KEY EMPLOYEES' COMPENSATION. FACULTY COMPENSATION IS GOVERNED BY A COLLECTIVE BARGAINING AGREEMENT.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VII	MICHAEL B. KENNEDY RECEIVES NO COMPENSATION FOR HIS WORK AS A TRUSTEE. THE REPORTED COMPENSATION IS ONLY FOR HIS WORK AS A RIDER UNIVERSITY ADJUNCT LECTURER. TERRY K. MCEWEN RECEIVES NO COMPENSATION FOR HIS WORK AS A TRUSTEE. THE REPORTED COMPENSATION IS ONLY FOR HIS WORK AS A RIDER UNIVERSITY ADJUNCT LECTURER.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -2,710,045 CHANGE IN VALUE OF PENSION -1,131,752 TOTAL TO FORM 990, PART XI, LINE 5 -3,841,797

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	RIDER UNIVERSITY DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE YEAR

Additional Data

Software ID:  
Software Version:  
EIN: 21-0650678  
Name: RIDER UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	17,791,331	including grants of \$ (Revenue \$ 24,206,400 )
ACADEMIC SUPPORT (EXPENSES \$15,889,690 INCLUDING GRANTS OF \$0)(REVENUE \$21,619,078) - GENERAL SUPPORT TO THE STUDENTS THESE INCLUDE ACADEMIC INFORMATION TECHNOLOGY, DEAN'S OFFICES, LIBRARIES, THEATER, ART GALLERY, TV STUDIO, AND OTHER SIMILAR ACADEMIC ACTIVITIES RESEARCH (EXPENSES \$1,901,641 INCLUDING GRANTS OF \$0)(REVENUE \$2,587,322) - RESEARCH PERFORMED BY FACULTY AND STUDENTS			

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RALPH ANDERSON JR TRUSTEE	1 00	X						0	0	0
ALBERTO BAPTISTE TRUSTEE	1 00	X						0	0	0
NANCY H BECKER TRUSTEE	1 00	X						0	0	0
ROBERT CHRISTIE TRUSTEE	1 00	X						0	0	0
GREGORY A CHURCH TRUSTEE	1 00	X						0	0	0
MARK C DEMAREO TRUSTEE	1 00	X						0	0	0
E BRUCE DIDONATO TRUSTEE	1 00	X						0	0	0
BONNIE S DIMUN TRUSTEE	1 00	X						0	0	0
MOLLY O'NEIL FRANK TRUSTEE	1 00	X						0	0	0
HARRY T GAMBLE TRUSTEE	1 00	X						0	0	0
ERNESTINE LAZENBY GAST TRUSTEE	1 00	X						0	0	0
MICHAEL HENNESSY TRUSTEE	1 00	X						0	0	0
PETER INVERSO TRUSTEE	1 00	X						0	0	0
MICHAEL B KENNEDY TRUSTEE/ADJUNCT LECTURER	19 00	X						19,817	0	316
THOMAS J LYNCH TRUSTEE	1 00	X						0	0	0
THOMAS MARINO TRUSTEE	1 00	X						0	0	0
TERRY K MCEWEN TRUSTEE/ADJUNCT LECTURER	19 00	X						4,140	0	66
DONALD MONKS TRUSTEE	1 00	X						0	0	0
ELI MORDECHAI TRUSTEE	1 00	X						0	0	0
GERRY NAGY TRUSTEE	1 00	X						0	0	0
CHRISTOPHER NIKOLICH TRUSTEE	1 00	X						0	0	0
LEWIS PEPPERMAN TRUSTEE	1 00	X						0	0	0
GARY PRUDEN TRUSTEE	1 00	X						0	0	0
CARL REICHEL TRUSTEE	1 00	X						0	0	0
WILLIAM M RUE TRUSTEE	1 00	X						0	0	0



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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MIKA RYAN SECRETARY	1 00	X		X				0	0	0
ASHOK B SHAH TRUSTEE	1 00	X						0	0	0
GARY SHAPIRO VICE CHAIR	1 00	X		X				0	0	0
ARTHUR J STAINMAN TRUSTEE	1 00	X						0	0	0
HOWARD B STOECKEL CHAIR	1 00	X		X				0	0	0
MORDECHAI ROZANSKI PRESIDENT	50 00			X				535,538	0	193,052
JULIE A KARNS VP FINANCE & TREASURER	50 00			X				295,231	0	24,421
DONALD A STEVEN PROVOST AND VP ACADEMIC AFFAIRS	50 00			X				252,425	0	33,765
JONATHAN MEER VP UNIVERSITY ADVANCEMENT	50 00			X				226,750	0	99,690
JAMES O'HARA VP ENROLLMENT MANAGEMENT	50 00				X			217,094	0	26,451
LARRY M NEWMAN DEAN COLLEGE OF BUSINESS ADMINISTRATION	37 50				X			193,096	0	30,210
WILLIAM N ROELL SR ASSOCIATE VP FINANCE AND CONTROLLER	37 50				X			180,550	0	18,261
ROBERT L ANNIS DEAN AND DIRECTOR WCA	37 50				X			179,836	0	91,238
PATRICIA MOSTO DEAN COLLEGE OF LIBERAL ARTS, EDUCATION, SCIENCE	37 50				X			165,907	0	22,535
ANTHONY CAMPBELL ASSOC VP STUDENT AFFAIRS/DEAN STUDENTS	37 50				X			160,510	0	44,015
IRA B SPROTZER CHAIR, MARKETING, ADVERTISING LEGAL STUDIES	37 50					X		181,876	0	70,645
MARGARET O'REILLY-ALLEN CHAIR, ACCOUNTING	37 50					X		179,685	0	31,603
JAMES E RIGGS PROFESSOR, BIOLOGY	37 50					X		175,035	0	37,928
BORIS VILIC DEAN COLLEGE OF CONTINUING STUDIES	37 50					X		171,743	0	34,410
MAURY R RANDALL CHAIR, FINANCE AND ECONOMICS	37 50					X		171,383	0	32,406