

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization STEVENS INSTITUTE OF TECHNOLOGY		D Employer identification number 22-1487354
	Doing business as		E Telephone number (201) 216-8761
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	ONE CASTLE POINT ON HUDSON		G Gross receipts \$ 529,533,108.
	City or town, state or province, country, and ZIP or foreign postal code HOBOKEN, NJ 07030		
F Name and address of principal officer: JOSEPH CASSIDY ONE CASTLE PT ON HUDSON, HOBOKEN, NJ 07030		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> 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.STEVENS.EDU**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1870** **M** State of legal domicile: **NJ**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO PROVIDE EDUCATIONAL SERVICES, SEE SCHEDULE O.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	33
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	3282
	6 Total number of volunteers (estimate if necessary)	6	684
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	71,341.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	23,091,532.	26,531,269.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	343,314,102.	419,310,878.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,182,908.	17,723,142.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,759,279.	2,884,572.
		375,347,821.	466,449,861.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	106,097,244.	124,990,017.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	157,219,149.	171,162,041.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	114,003.	292,760.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,693,796.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	86,303,187.	118,975,857.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	349,733,583.	415,420,675.	
19 Revenue less expenses. Subtract line 18 from line 12	25,614,238.	51,029,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	910,259,495.	970,720,079.
	22 Net assets or fund balances. Subtract line 21 from line 20	404,779,485.	434,508,801.
	505,480,010.	536,211,278.	

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	Date			
	JOSEPH CASSIDY, AVP FOR FINANCE Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name TESS FANNING	Preparer's signature <i>Tess Fanning</i>	Date 04/18/23	Check if self-employed <input type="checkbox"/>	PTIN P02033722
	Firm's name ▶ KPMG LLP	Firm's EIN ▶ 13-5565207	Phone no. 267-256-7000		
	Firm's address ▶ 1601 MARKET STREET PHILADELPHIA, PA 19103				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization or other filer, see instructions. STEVENS INSTITUTE OF TECHNOLOGY	Taxpayer identification number (TIN) 22-1487354
	Number, street, and room or suite no. If a P.O. box, see instructions. ONE CASTLE POINT ON HUDSON	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. HOBOKEN, NJ 07030	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

LOUIS MAYER, ED.D.

• The books are in the care of ▶ 5 MARINE VIEW PLAZA, SUITE 501 - HOBOKEN, NJ 07030

Telephone No. ▶ 201-216-8761

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning JUL 1, 2021, and ending JUN 30, 2022.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 286,606,294. including grants of \$ 124,990,017.) (Revenue \$ 350,350,786.) EDUCATIONAL INSTRUCTION: IN THE ACADEMIC YEAR 2021-2022, STEVENS' ENROLLMENT WAS 4,064 UNDERGRADUATE STUDENTS AND 4,223 GRADUATE STUDENTS. 929 STUDENTS GRADUATED WITH BACHELOR OF ENGINEERING, SCIENCE, BUSINESS OR ARTS DEGREES, 1,282 STUDENTS RECEIVED MASTER'S IN ENGINEERING, SCIENCE OR BUSINESS ADMINISTRATION. 67 PHD DEGREES WERE ALSO CONFERRED. IN ADDITION, STEVENS COLLABORATED WITH NUMEROUS DOMESTIC AND INTERNATIONAL UNIVERSITIES AND OTHER EDUCATIONAL PROGRAMS TO PROVIDE COURSES AND TRAINING TO INTERNATIONAL STUDENTS. STEVENS EMPHASIZES INNOVATION AND TEACHES ENTREPRENEURSHIP THROUGHOUT ITS CURRICULUM WITH THE AIM OF ENABLING THE INTEGRATION OF TECHNOLOGICAL AND MARKET KNOWLEDGE.

4b (Code:) (Expenses \$ 53,474,879. including grants of \$) (Revenue \$ 47,029,368.) RESEARCH: RESEARCH CENTERS AND CROSS-DISCIPLINARY RESEARCH INITIATIVES WITH AFFILIATED ORGANIZATIONS AND INFRASTRUCTURE. CREATIVE AND ENTREPRENEURIAL RESEARCH IS AN INTEGRAL PART OF THE STEVENS MISSION. THE INSTITUTE HAS BEEN RECOGNIZED BY BOTH THE U.S. DEPARTMENT OF DEFENSE AND THE DEPARTMENT OF HOMELAND SECURITY AS A NATIONAL CENTER OF EXCELLENCE IN THE AREAS OF SYSTEMS ENGINEERING, PORT SECURITY AND INFORMATION ASSURANCE.

4c (Code:) (Expenses \$ 37,102,189. including grants of \$) (Revenue \$ 23,154,485.) STUDENT LIFE: THE UNIVERSITY MAINTAINS A 55 ACRE CAMPUS IN HOBOKEN, NEW JERSEY AND PROVIDES STUDENTS WITH ON CAMPUS AND OFF CAMPUS HOUSING AS WELL AS SEVERAL DINING FACILITIES. CLOSE INTERACTIONS BETWEEN PROFESSORS AND STUDENTS ALLOW FOR GREATER ACADEMIC AND SOCIAL DEVELOPMENT. THERE ARE OVER 182 CLUBS, ORGANIZATIONS AND VARSITY SPORTS THAT OFFER THE STUDENTS AMPLE OPPORTUNITY TO PARTICIPATE, BROADEN AND ENRICH THEIR STUDENT LIFE. THE S.C. WILLIAMS LIBRARY SERVES AS THE UNIVERSITY'S INTELLECTUAL, CULTURAL AND SOCIAL CENTER CAPITALIZING ON A RESOURCEFUL STAFF AND NEW TECHNOLOGIES TO FOSTER A STIMULATING ENVIRONMENT FOR TEACHING, LEARNING AND SCIENTIFIC DISCOVERY.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 377,183,362.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, tax shelter transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (33); 1b Enter the number of voting members included on line 1a, above, who are independent (30); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 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 on Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 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? (X); 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 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? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process on 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? (X); 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 MD, MA, MI, MN, NH, NC, OR, PA, SC
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records LOUIS MAYER, ED.D. - 201-216-8761
5 MARINE VIEW PLAZA, SUITE 501, HOBOKEN, NJ 07030

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) NARIMAN FARVARDIN PRESIDENT/TRUSTEE	55.00 0.00	X		X				1,603,757.	0.	29,141.
(2) CHRISTOPHE PIERRE PROVOST TO 8/31/2021	55.00 0.00				X			586,294.	0.	49,436.
(3) GREGORY PRASTACOS DEAN	55.00 0.00				X			448,855.	0.	53,232.
(4) LOUIS J. MAYER VP OF FINANCE/TREASURER, CFO	55.00 0.00			X				447,310.	0.	47,392.
(5) KATHY L. SCHULZ VP & GENERAL COUNSEL/SECRETARY	55.00 0.00			X				459,076.	0.	34,242.
(6) CONSTANTIN CHASSAPIS VICE PROVOST	55.00 0.00					X		405,595.	0.	47,392.
(7) DILHAN KALYON VICE PROVOST	55.00 0.00				X			382,785.	0.	47,346.
(8) LAURA ROSE VP FOR DEV/ALUM	55.00 0.00				X			369,255.	0.	46,934.
(9) JEAN ZU DEAN	55.00 0.00				X			381,590.	0.	34,242.
(10) GEORGE KORFIATIS PROFESSOR	55.00 0.00					X		363,799.	0.	47,346.
(11) DAVID ZENG VICE PROVOST	55.00 0.00					X		352,539.	0.	50,270.
(12) ELISABETH MCGRATH VP FOR UNIV RELATIONS	55.00 0.00				X			367,777.	0.	29,141.
(13) HADY SALLOUM RESEARCH PROFESSOR	55.00 0.00					X		340,811.	0.	50,270.
(14) MUHAMMAD HAJJ DEPARTMENT CHAIR	55.00 0.00					X		340,608.	0.	47,346.
(15) ROBERT MAFFIA VP FOR FACILITIES/OPERATIONS	55.00 0.00				X			321,677.	0.	53,170.
(16) TEJASH PATEL VP FOR INFORMATION TECHNOLOGY	55.00 0.00				X			352,500.	0.	21,666.
(17) ANTHONY BARRESE INTERIM DEAN AS OF 7/1/21	55.00 0.00				X			282,798.	0.	46,776.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) WARREN PETTY VP FOR HUMAN RES. TO 6/8/2022	55.00 0.00				X			281,557.	0.	23,456.
(19) KEITH G. SHEPPARD FORMER KEY EMPLOYEE	55.00 0.00						X	254,453.	0.	33,175.
(20) JOSEPH E. CASSIDY AVP FINANCE/ASST TREAS	55.00 0.00			X				259,858.	0.	23,168.
(21) JIANMIN QU PROVOST & SVP ACAD AFF AS OF 9/1/21	55.00 0.00			X				223,407.	0.	23,615.
(22) YEHIA MASSOUD FORMER KEY EMPLOYEE	55.00 0.00						X	208,998.	0.	26,919.
(23) DAWN DA SILVA FORMER KEY EMPLOYEE	55.00 0.00						X	200,861.	0.	15,742.
(24) MARYBETH MURPHY FORMER KEY EMPLOYEE	55.00 0.00						X	193,677.	0.	20,828.
(25) YI GUO TRUSTEE/PROFESSOR TO 6/23/2022	55.00 0.00	X						188,799.	0.	23,100.
(26) RAINER MARTINI TRUSTEE/PROFESSOR	55.00 0.00	X						190,301.	0.	14,661.
1b Subtotal								9,808,937.	0.	940,006.
c Total from continuation sheets to Part VII, Section A								285,634.	0.	30,605.
d Total (add lines 1b and 1c)								10,094,571.	0.	970,611.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 380

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
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	X
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	X

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
TISHMAN CONSTRUCTION, 30 KNIGHTSBRIDGE ROAD BLDG 5, 2ND FL, PISCATAWAY, NJ 08854	BUILDING CONTRACTOR	30,828,239.
UG2 LLC, 116 HUNTINGTON AVENUE, 12TH FLOOR, BOSTON, MA 02116	CLEANING SERVICES	3,845,616.
INTEGRATION PARTNERS 12 HARTWELL AVENUE, LEXINGTON, MA 02421	IT SERVICES & EQUIPMENT	2,352,866.
FRANKOSKI CONSTRUCTION CO, INC. 314 DODD STREET, EAST ORANGE, NJ 07017	CONTRACTOR	1,872,050.
EVENSONBEST LLC 625 MADISON AVE, NEW YORK, NY 10022	DELIVERY & INSTALLATION FOR FURNITURE	1,226,140.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 50

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(27) MICHAEL PARENTE FORMER KEY EMPLOYEE	55.00 0.00						X	190,448.	0.	14,060.
(28) TONIANN BIONDOLILLO ASST SEC/EXEC ASST	55.00 0.00			X				93,992.	0.	16,545.
(29) EMILY R. KOVELESKY TRUSTEE AS OF 5/24/22	1.00 0.00	X						1,194.	0.	0.
(30) STEPHEN T. BOSWELL CHAIRMAN/TRUSTEE	3.00 0.00	X		X				0.	0.	0.
(31) SALEEL V. AWSARE TRUSTEE	1.00 0.00	X						0.	0.	0.
(32) LAWRENCE T. BABBIO, JR TRUSTEE	1.00 0.00	X						0.	0.	0.
(33) DEVON E. BROOKS TRUSTEE	1.00 0.00	X						0.	0.	0.
(34) CHARLES J. BUSCARINO TRUSTEE AS OF 12/3/21	1.00 0.00	X						0.	0.	0.
(35) MARY ANNE CANNON TRUSTEE	1.00 0.00	X						0.	0.	0.
(36) KAREN S. CAROLONZA TRUSTEE	1.00 0.00	X						0.	0.	0.
(37) PAM P. CHENG TRUSTEE AS OF 12/3/21	1.00 0.00	X						0.	0.	0.
(38) CRISTIAN S. COLLADO TRUSTEE TO 5/24/22	1.00 0.00	X						0.	0.	0.
(39) THOMAS A. CORCORAN TRUSTEE	1.00 0.00	X						0.	0.	0.
(40) PHILIP P. CROWLEY TRUSTEE	1.00 0.00	X						0.	0.	0.
(41) JOHN R. DEARBORN TRUSTEE	1.00 0.00	X						0.	0.	0.
(42) JOSEPH DEL GUERCIO TRUSTEE	1.00 0.00	X						0.	0.	0.
(43) WILLIAM W. DESTLER TRUSTEE	1.00 0.00	X						0.	0.	0.
(44) JOSEPH G. DIPOMPEO TRUSTEE	1.00 0.00	X						0.	0.	0.
(45) MANUEL S. ESCOBEDO TRUSTEE AS OF 1/25/22	1.00 0.00	X						0.	0.	0.
(46) EMILIO A. FERNANDEZ TRUSTEE TO 12/3/2021	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(47) KAITLIN GILI TRUSTEE	1.00 0.00	X						0.	0.	0.
(48) HERMES O. GONZALEZ-BELLO TRUSTEE	1.00 0.00	X						0.	0.	0.
(49) JOHN "SEAN" J. HANLON IV TRUSTEE	1.00 0.00	X						0.	0.	0.
(50) JOELLE M. HINDS TRUSTEE	1.00 0.00	X						0.	0.	0.
(51) A. MICHAEL LIPPER TRUSTEE	1.00 0.00	X						0.	0.	0.
(52) LISA M. MASCOLO TRUSTEE	1.00 0.00	X						0.	0.	0.
(53) THOMAS J. NATHANSON TRUSTEE	1.00 0.00	X						0.	0.	0.
(54) SAMUEL P. RECKFORD TRUSTEE	1.00 0.00	X						0.	0.	0.
(55) ANNMARIE RIZZO TRUSTEE TO 12/3/2021	1.00 0.00	X						0.	0.	0.
(56) RICHARD R. ROSCITT TRUSTEE	1.00 0.00	X						0.	0.	0.
(57) VIRGINIA P. RUESTERHOLZ TRUSTEE	1.00 0.00	X						0.	0.	0.
(58) JOHN A. SCHEPISI TRUSTEE	1.00 0.00	X						0.	0.	0.
(59) FRANK J. SEMCER TRUSTEE TO 5/24/2022	1.00 0.00	X						0.	0.	0.
(60) LOUIS A. STEINBERG TRUSTEE	1.00 0.00	X						0.	0.	0.
(61) J. SCOTT SWENSEN TRUSTEE	1.00 0.00	X						0.	0.	0.
(62) HAILEY TANNER TRUSTEE	1.00 0.00	X						0.	0.	0.
(63) VICTORIA VELASCO TRUSTEE	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c								285,634.		30,605.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	24,685.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,836,547.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	15,670,037.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 857,504.				
	h Total. Add lines 1a-1f			26,531,269.			
Program Service Revenue	2 a TUITION AND FEES	Business Code					
		611600	349,332,459.	349,332,459.			
	b RESEARCH REVENUE	541610	47,029,368.	47,029,368.			
	c STUDENT HOUSING	611710	14,299,941.	14,299,941.			
	d STUDENT DINING	611710	8,443,907.	8,443,907.			
	e TECHNICAL LEADERSHIP	611600	205,203.	205,203.			
	f All other program service revenue						
g Total. Add lines 2a-2f			419,310,878.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		7,596,862.		71,341.	7,525,521.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		50,175.			50,175.	
	6 a Gross rents	6a	(i) Real	55,415.			
			(ii) Personal				
	b Less: rental expenses	6b	0.				
	c Rental income or (loss)	6c	55,415.				
	d Net rental income or (loss)			55,415.		55,415.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	65,699,936.	7,477,562.		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	63,051,218.	0.			
	c Gain or (loss)	7c	2,648,718.	7,477,562.			
d Net gain or (loss)			10,126,280.		10,126,280.		
8 a Gross income from fundraising events (not including \$ 24,685. of contributions reported on line 1c). See Part IV, line 18	8a		37,870.				
			32,029.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			5,841.		5,841.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a PSE&G INCENTIVE PAY	Business Code					
		900099	678,174.			678,174.	
	b PARKING	812930	449,967.	256,035.		193,932.	
	c COMMISSION ON DINING	900099	158,190.	158,190.			
	d All other revenue		1,486,810.	809,536.		677,274.	
e Total. Add lines 11a-11d			2,773,141.				
12 Total revenue. See instructions			466,449,861.	420,534,639.	71,341.	19,312,612.	

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).

Check if Schedule O contains a response or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	124,990,017.	124,990,017.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	7,636,144.	2,925,405.	4,314,214.	396,525.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	267,918.	267,918.		
7 Other salaries and wages	133,459,171.	119,234,034.	11,486,376.	2,738,761.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,439,930.	6,443,337.	831,583.	165,010.
9 Other employee benefits	14,492,480.	12,551,184.	1,619,868.	321,428.
10 Payroll taxes	7,866,398.	6,812,679.	879,251.	174,468.
11 Fees for services (nonemployees):				
a Management				
b Legal	1,175,490.	802,715.	369,407.	3,368.
c Accounting	443,758.		443,758.	
d Lobbying	197,274.		197,274.	
e Professional fundraising services. See Part IV, line 17	292,760.			292,760.
f Investment management fees	1,129,633.	1,129,633.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	25,390,128.	20,111,213.	4,455,639.	823,276.
12 Advertising and promotion	7,809,636.	7,430,113.	378,897.	626.
13 Office expenses	2,789,897.	1,681,926.	894,205.	213,766.
14 Information technology	7,660,182.	7,090,407.	543,418.	26,357.
15 Royalties				
16 Occupancy	9,072,781.	8,486,785.	578,581.	7,415.
17 Travel	2,039,517.	1,958,346.	58,953.	22,218.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	561,155.	366,452.	150,454.	44,249.
20 Interest	4,837,486.	4,620,515.	216,971.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,424,142.	19,508,078.	916,064.	
23 Insurance	2,425,481.	3,118.	2,422,363.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a RESEARCH CONTRACTS	11,396,384.	11,396,384.		
b REPAIRS & MAINTENANCE	5,159,380.	4,971,772.	171,171.	16,437.
c MATERIALS & SUPPLIES	4,228,361.	3,793,348.	334,100.	100,913.
d BAD DEBT EXPENSE	2,619,978.	2,267,741.	352,237.	
e All other expenses	9,615,194.	8,340,242.	928,733.	346,219.
25 Total functional expenses. Add lines 1 through 24e	415,420,675.	377,183,362.	32,543,517.	5,693,796.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	294,994.	1	21,330,302.
	2 Savings and temporary cash investments	86,582,397.	2	88,201,222.
	3 Pledges and grants receivable, net	17,499,728.	3	11,300,188.
	4 Accounts receivable, net	18,319,109.	4	21,093,331.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	17,145,484.	9	19,332,450.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 735,855,533.		
	b Less: accumulated depreciation	10b 215,440,800.	467,649,347.	10c 520,414,733.
	11 Investments - publicly traded securities	197,937,685.	11	194,536,214.
	12 Investments - other securities. See Part IV, line 11	78,116,900.	12	83,174,181.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	26,713,851.	15	11,337,458.
16 Total assets. Add lines 1 through 15 (must equal line 33)	910,259,495.	16	970,720,079.	
Liabilities	17 Accounts payable and accrued expenses	30,166,676.	17	40,382,676.
	18 Grants payable		18	
	19 Deferred revenue	17,651,739.	19	20,917,418.
	20 Tax-exempt bond liabilities	336,897,890.	20	358,679,256.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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	20,063,180.	25	14,529,451.
	26 Total liabilities. Add lines 17 through 25	404,779,485.	26	434,508,801.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	228,415,104.	27	268,399,505.
	28 Net assets with donor restrictions	277,064,906.	28	267,811,773.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	505,480,010.	32	536,211,278.
33 Total liabilities and net assets/fund balances	910,259,495.	33	970,720,079.	

Form **990** (2021)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	466,449,861.
2	Total expenses (must equal Part IX, column (A), line 25)	2	415,420,675.
3	Revenue less expenses. Subtract line 2 from line 1	3	51,029,186.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	505,480,010.
5	Net unrealized gains (losses) on investments	5	-19,000,193.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,297,725.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	536,211,278.

Part XII Financial Statements and Reporting

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

		Yes	No
1	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 on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	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? _____	X	
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 on Schedule O and describe any steps taken to undergo such audits _____	X	

Form **990** (2021)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	34,755,666.	3,378,407.	12,280,858.	22,786,648.	26,524,934.	99,726,513.
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	34,755,666.	3,378,407.	12,280,858.	22,786,648.	26,524,934.	99,726,513.
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)						18,993,111.
6 Public support. Subtract line 5 from line 4.						80,733,402.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	34,755,666.	3,378,407.	12,280,858.	22,786,648.	26,524,934.	99,726,513.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	5,910,248.	8,695,375.	7,626,495.	4,171,209.	7,693,089.	34,096,416.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,613,674.	3,148,535.	3,035,693.	1,649,162.	2,811,011.	15,258,075.
11 Total support. Add lines 7 through 10						149,081,004.
12 Gross receipts from related activities, etc. (see instructions)					12	1,760,535,240.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	54.15 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	53.33 %
16a 33 1/3% support test - 2021. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. 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 stop here. 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 Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

Part VI

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

Horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 7,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 619,607.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 569,386.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on 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," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

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

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

Name of organization <p style="text-align: center;">STEVENS INSTITUTE OF TECHNOLOGY</p>	Employer identification number <p style="text-align: center;">22-1487354</p>
--	---

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 in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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? Yes No
- 4a Was a correction made? Yes 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 function 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? Yes 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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2021

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 (grassroots 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 border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <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> </tbody> </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?														

Yes 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		253,965.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			253,965.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the 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 carry over lobbying and political campaign activity 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible 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

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE STEVENS INSTITUTE OF TECHNOLOGY HIRED OUTSIDE CONSULTANTS TO

UNDERTAKE LOBBYING ACTIVITIES RELATED TO EDUCATIONAL AND OTHER

MISSION-RELATED INITIATIVES ON ITS BEHALF. STAFF PARTICIPATES IN

ACTIVITIES SUCH AS MEETING WITH NEW JERSEY AND HOBOKEN ELECTED AND

APPOINTED OFFICIALS TO PROMOTE STEVENS AND ITS PRIORITY PROGRAMS AND

Part IV Supplemental Information (continued)

INITIATIVES SUCH AS CAPITAL PROJECTS, RESEARCH, ECONOMIC AND CORPORATE
 ENGAGEMENT, AND VARIOUS SPECIAL INITIATIVES/NEEDS. THEY MONITOR AND
 PROVIDE FEEDBACK ON LEGISLATION AND POLICIES OF INTEREST TO STEVENS'
 OPERATIONS. IN ADDITION, THEY PROVIDE OVERSIGHT TO OUTSIDE CONSULTANTS
 AND ARE DIRECTLY ENGAGED IN ACTIVITIES RELATED TO STEVENS' FEDERAL
 RESEARCH INITIATIVES.

GREGORY TOWNSEND, DIRECTOR OF CORPORATE, GOVERNMENT, AND COMMUNITY
 RELATIONS, IS REGISTERED AS A LOBBYIST IN THE STATE OF NEW JERSEY. HE
 SPENDS APPROXIMATELY 35% OF HIS TIME ON NEW JERSEY-FOCUSED HIGHER
 EDUCATION AND TECHNOLOGY ISSUES.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY **Employer identification number** 22-1487354

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on 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 (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make 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 program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 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" on 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 XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on 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	272,887,000.	225,010,000.	224,304,000.	206,806,000.	183,934,000.
b Contributions	14,472,347.	5,006,650.	2,856,781.	6,994,156.	19,393,944.
c Net investment earnings, gains, and losses	-9,906,243.	50,225,185.	4,103,638.	15,638,833.	9,051,558.
d Grants or scholarships	3,502,583.	3,272,013.	2,523,056.	2,148,623.	2,038,014.
e Other expenditures for facilities and programs	4,676,899.	4,082,822.	3,731,363.	2,986,366.	3,535,488.
f Administrative expenses					
g End of year balance	269,273,622.	272,887,000.	225,010,000.	224,304,000.	206,806,000.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 9.1300 %
 - b Permanent endowment 90.8700 %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | X | |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. 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		1,691,546.		1,691,546.
b Buildings		632,969,239.	161,137,928.	471,831,311.
c Leasehold improvements				
d Equipment		76,713,367.	37,914,320.	38,799,047.
e Other		24,481,381.	16,388,552.	8,092,829.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				520,414,733.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	17,253,077.	END-OF-YEAR MARKET VALUE
(B) TRUSTS HELD BY OTHERS	6,145,972.	END-OF-YEAR MARKET VALUE
(C) SPLIT INTEREST AGREEMENTS	2,293,506.	END-OF-YEAR MARKET VALUE
(D) PRIVATE EQUITY	57,481,626.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	83,174,181.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATION	1,831,845.
(3) ANNUITIES PAYABLE	1,511,667.
(4) ACCRUED POST RETIREMENT BENEFIT	5,063,866.
(5) CONDITIONAL ASSET RETIREMENT	4,608,474.
(6) REFUNDABLE ADVANCES	1,513,599.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	14,529,451.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
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 XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
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	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4:

COLLECTIONS OF ART, HISTORICAL TREASURES AND ARCHIVES STEVENS MAINTAINS A
 COLLECTION OF VARIOUS WORKS OF ART, HISTORICAL TREASURES, ARCHIVES AND
 OTHER SIMILAR ASSETS THAT ARE ON PUBLIC DISPLAY IN ITS LIBRARY AND OTHER
 LOCATIONS ON CAMPUS FOR THE ENRICHMENT AND ENJOYMENT OF VISITORS, FACULTY,
 STAFF AND STUDENTS.

PART V, LINE 4:

ENDOWMENT FUNDS
 THE UNIVERSITY'S ENDOWMENT FUND IS INTENDED TO SUPPORT SCHOLARSHIPS FOR
 UNDERGRADUATE AND GRADUATE STUDENTS AND TO PROVIDE FINANCIAL ASSISTANCE
 FOR PROGRAMS AND SERVICES CONDUCTED BY THE UNIVERSITY.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

INCOME TAXES

THE UNIVERSITY HAS BEEN CLASSIFIED AS AN ORGANIZATION DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND, THEREFORE, IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE CODE AND SIMILAR STATE OF NEW JERSEY TAX PROVISIONS. FEDERAL LAW IMPOSES TAX ON INCOME THAT IS NOT RELATED TO AN ORGANIZATION'S TAX-EXEMPT PURPOSES OR OTHERWISE EXCLUDED UNDER THE CODE AS WELL AS AN EXCISE TAX ON CERTAIN EXCESS COMPENSATION.

THE UNIVERSITY HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS, TO IDENTIFY AND REPORT UNRELATED INCOME, DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS, AND TO REVIEW OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. MANAGEMENT OF THE UNIVERSITY BELIEVES THERE ARE NO UNCERTAIN TAX POSITIONS.

SCHEDULE E
(Form 990)

Schools

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

Part I

	YES	NO
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?	X	
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?	X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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	X	
<i>SEE SUPPLEMENTAL PAGE</i>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ..	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
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?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
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?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on 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	X	

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

Schedule E (Form 990) 2021

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

NONDISCRIMINATION POLICY - PART I, LINE 3

STEVENS INSTITUTE OF TECHNOLOGY'S NONDISCRIMINATION POLICY IS AVAILABLE

ON THE ADMISSIONS APPLICATION WEBPAGE FOR PROSPECTIVE STUDENTS AND IN

THE STUDENT HANDBOOK WHICH IS AVAILABLE ON THE STEVENS WEBSITE AND

AVAILABLE TO ALL STUDENTS AT ORIENTATION AND REGISTRATION. THE

UNIVERSITY'S BYLAWS ALSO CONTAIN STEVENS' NONDISCRIMINATION POLICY.

GOVERNMENTAL FUNDING PART I, LINE 6A

STEVENS INSTITUTE OF TECHNOLOGY RECEIVES FUNDING FROM FEDERAL AND STATE

GOVERNMENTAL SOURCES INCLUDING, BUT NOT LIMITED TO, PELL, FEDERAL

DIRECT LOAN PROGRAMS, FSEOG AND THE NJ TUITION ASSISTANCE GRANT.

ADDITIONALLY, IN THE CURRENT FISCAL YEAR, THE UNIVERSITY RECEIVED

AMERICAN RESCUE ACT HEERF FUNDING.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	1	PROGRAM SERVICES	CONFERENCES/SPEAKING	2,475.
EAST ASIA AND THE PACIFIC	0	5	PROGRAM SERVICES	CONFERENCES/SPEAKING	16,320.
EUROPE	0	37	PROGRAM SERVICES	CONFERENCES/SPEAKING	79,321.
NORTH AMERICA	0	2	PROGRAM SERVICES	CONFERENCES/SPEAKING	2,344.
NORTH AMERICA	0	1	PROGRAM SERVICES	FIELD RESEARCH	228.
EUROPE	0	2	PROGRAM SERVICES	INSTITUTIONAL DEVELOPMENT	1,564.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		32,980,162.
EUROPE	0	0	INVESTMENTS		31,882,261.
3 a Subtotal	0	48			64,964,675.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	48			64,964,675.

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

Schedule F (Form 990) 2021

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE F, PART I - ACCOUNTING METHOD

THE EXPENDITURES REPORTED IN PART I ARE ON THE ACCRUAL METHOD.

SCHEDULE F, PART IV

STEVENS INSTITUTE OF TECHNOLOGY INVESTS IN DOMESTIC AND FOREIGN LIMITED

PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE

FOREIGN INVESTMENT COMPANY OR FOREIGN PARTNERSHIP. TO THE EXTENT THAT

THOSE INVESTMENTS RESULTED IN TRANSFERS OF PROPERTY THAT EXCEEDED THE

APPLICABLE FILING THRESHOLDS, THE FORMS 926, 5471, 8621 AND 8865

ACCOMPANIED THE FILING OF THE UNIVERSITY'S FORM 990-T.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ATHLETICS GOLF OUTING (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	62,555.		62,555.
	2	Less: Contributions	24,685.		24,685.
	3	Gross income (line 1 minus line 2)	37,870.		37,870.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	26,596.		26,596.
	7	Food and beverages	1,003.		1,003.
	8	Entertainment			
	9	Other direct expenses	4,430.		4,430.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				5,841.

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

		(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	Noncash 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. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct 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 conduct 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 conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter 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 of the third party:

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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: EAB GLOBAL INC

(I) ADDRESS OF FUNDRAISER: 1920 EAST PARHAM ROAD, RICHMOND, VA 23228

(I) NAME OF FUNDRAISER: RUFFALO NOEL LEVITZ LLC

(I) ADDRESS OF FUNDRAISER: 1025 KIRKWOOD PKWY SW, CEDAR RAPIDS, IA 52404

(I) NAME OF FUNDRAISER: COPPER REEF ENTERPRISES

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER:

6965 EL CAMINO REAL, STE 105-488, CARLSBAD, CA 92009

(I) NAME OF FUNDRAISER: PENTERA INC.

(I) ADDRESS OF FUNDRAISER:

8650 COMMERCE PARK PLACE, SUITE G, INDIANAPOLIS, IN 46268

PART I, LINE 2B, COLUMN (V):

SCHEDULE G, PART 1, LINE 2A

FUNDRAISING ACTIVITIES

THE UNIVERSITY UTILIZED OUTSIDE VENDORS FOR DIGITAL AND DIRECT MARKETING

SERVICES. IN ADDITION TO THE PROFESSIONAL SERVICE EXPENSES SHOWN IN PART

I, THE UNIVERSITY PAID \$8,457 FOR POSTAGE EXPENSES.

**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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY Employer identification number 22-1487354

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash 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 ▶ _____

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

Schedule I (Form 990) 2021

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS AND GRANTS	5051	122,544,621.	0.		
PRIZES/AWARDS	509	555,974.	0.		
STIPENDS	102	1,889,422.	0.		

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

PART I, LINE 2

GRANTS AND OTHER ASSISTANCE IN U.S.

SCHOLARSHIPS AND GRANTS ARE AWARDED AS FINANCIAL ASSISTANCE TO STUDENTS

ATTENDING STEVENS INSTITUTE OF TECHNOLOGY. DISTRIBUTION AND APPLICATION

OF FINANCIAL ASSISTANCE ARE BASED ON THE SPECIFIC CRITERIA OF EACH

SCHOLARSHIP AND GRANT AND ARE ADMINISTERED CONSISTENT WITH FEDERAL,

STATE, AND INSTITUTIONAL STUDENT AID POLICIES. SITUATIONS SUCH AS

CHANGES IN FINANCIAL NEED, CHANGES IN FEDERAL AID ELIGIBILITY, CHANGES

IN ENROLLMENT AND RECEIPT OF AID FROM OUTSIDE SOURCES MAY AFFECT A

Part IV Supplemental Information

STUDENT'S ELIGIBILITY TO RECEIVE FUNDING. STEVENS' ADMINISTRATION

MONITORS THESE SITUATIONS ON AN ON-GOING BASIS AND MAKES ANY

APPROPRIATE ADJUSTMENTS.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **STEVENS INSTITUTE OF TECHNOLOGY**
 Employer identification number: **22-1487354**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on 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?
b Participate in or receive payment from a supplemental nonqualified retirement plan?
c Participate in or receive payment from an equity-based compensation arrangement?
 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?
 If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on 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?
b Any related organization?
 If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NARIMAN FARVARDIN PRESIDENT/TRUSTEE	(i)	868,957.	710,687.	24,113.	29,000.	141.	1,632,898.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHRISTOPHE PIERRE PROVOST TO 8/31/2021	(i)	568,794.	17,500.	0.	29,000.	20,436.	635,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) GREGORY PRASTACOS DEAN	(i)	438,355.	10,500.	0.	29,000.	24,232.	502,087.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LOUIS J. MAYER VP OF FINANCE/TREASURER, CFO	(i)	429,810.	17,500.	0.	29,000.	18,392.	494,702.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KATHY L. SCHULZ VP & GENERAL COUNSEL/SECRETARY	(i)	441,576.	17,500.	0.	26,100.	8,142.	493,318.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CONSTANTIN CHASSAPIS VICE PROVOST	(i)	392,095.	13,500.	0.	29,000.	18,392.	452,987.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DILHAN KALYON VICE PROVOST	(i)	375,785.	7,000.	0.	29,000.	18,346.	430,131.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LAURA ROSE VP FOR DEV/ALUM	(i)	347,255.	22,000.	0.	26,100.	20,834.	416,189.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JEAN ZU DEAN	(i)	350,052.	12,500.	19,038.	26,100.	8,142.	415,832.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) GEORGE KORFIATIS PROFESSOR	(i)	362,299.	1,500.	0.	29,000.	18,346.	411,145.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DAVID ZENG VICE PROVOST	(i)	340,039.	12,500.	0.	26,100.	24,170.	402,809.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ELISABETH MCGRATH VP FOR UNIV RELATIONS	(i)	345,277.	22,500.	0.	29,000.	141.	396,918.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) HADY SALLOUM RESEARCH PROFESSOR	(i)	338,561.	2,250.	0.	26,100.	24,170.	391,081.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) MUHAMMAD HAJJ DEPARTMENT CHAIR	(i)	336,858.	3,750.	0.	29,000.	18,346.	387,954.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) ROBERT MAFFIA VP FOR FACILITIES/OPERATIONS	(i)	295,777.	17,500.	8,400.	29,000.	24,170.	374,847.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) TEJASH PATEL VP FOR INFORMATION TECHNOLOGY	(i)	335,000.	17,500.	0.	21,525.	141.	374,166.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) ANTHONY BARRESE INTERIM DEAN AS OF 7/1/21	(i)	274,298.	8,500.	0.	28,430.	18,346.	329,574.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) WARREN PETTY VP FOR HUMAN RES. TO 6/8/2022	(i)	259,057.	22,500.	0.	23,315.	141.	305,013.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) KEITH G. SHEPPARD FORMER KEY EMPLOYEE	(i)	251,953.	2,500.	0.	25,051.	8,124.	287,628.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) JOSEPH E. CASSIDY AVP FINANCE/ASST TREAS	(i)	255,858.	4,000.	0.	23,027.	141.	283,026.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) JIANMIN QU PROVOST & SVP ACAD AFF AS OF 9/1/21	(i)	184,143.	0.	39,264.	17,500.	6,115.	247,022.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) YEHIA MASSOUD FORMER KEY EMPLOYEE	(i)	208,998.	0.	0.	14,834.	12,085.	235,917.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(23) DAWN DA SILVA FORMER KEY EMPLOYEE	(i)	194,861.	6,000.	0.	15,601.	141.	216,603.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(24) MARYBETH MURPHY FORMER KEY EMPLOYEE	(i)	193,677.	0.	0.	16,075.	4,753.	214,505.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(25) YI GUO TRUSTEE/PROFESSOR TO 6/23/2022	(i)	188,799.	0.	0.	14,958.	8,142.	211,899.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(26) RAINER MARTINI TRUSTEE/PROFESSOR	(i)	185,334.	4,967.	0.	14,520.	141.	204,962.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(27) MICHAEL PARENTE FORMER KEY EMPLOYEE	(i)	185,581.	4,867.	0.	13,919.	141.	204,508.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COMPENSATION INFORMATION PART I, LINE 1

THE STEVENS INSTITUTE OF TECHNOLOGY GUIDELINES REGARDING SPOUSAL TRAVEL

ARE INCLUDED IN THE STEVENS BUSINESS AND TRAVEL EXPENSE POLICY.

EXPENSES INCURRED FOR ACCOMPANYING COMPANIONS/SPOUSES ARE CONSIDERED

PERSONAL IN NATURE EXCEPT ON OCCASIONS WHEN ATTENDANCE OF A

COMPANION/SPOUSE AT AN EVENT SERVES A BONA FIDE BUSINESS PURPOSE FOR

THE UNIVERSITY AND THE PRESENCE OF THE COMPANION/SPOUSE IS ESSENTIAL

(NOT JUST BENEFICIAL) TO THE EMPLOYEE BEING ABLE TO CARRY OUT THE

BUSINESS PURPOSE FOR THE UNIVERSITY; GIVEN THAT ATTENDANCE IS

ESSENTIAL, THIS IS NOT TAXABLE TO THE EMPLOYEE.

RAINER MARTINI AND MICHAEL PARENTE RECEIVED A TAX GROSS UP PAYMENT FOR

A EMPLOYEE RECOGNITION AWARD. THE PAYMENT WAS TREATED AS TAXABLE

COMPENSATION FOR BOTH INDIVIDUALS.

CAMPUS HOUSING IS PROVIDED FOR THE UNIVERSITY PRESIDENT AND IS USED FOR

PROGRAM AND DEVELOPMENT PURPOSES. THE PRESIDENT IS CONTRACTUALLY

REQUIRED TO LIVE IN CAMPUS HOUSING AND, THEREFORE, IT IS NOT TAXABLE

COMPENSATION TO HIM.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

THE FOLLOWING KEY EMPLOYEE ALSO RECEIVED A HOUSING ALLOWANCE WHICH IS

INCLUDED IN THEIR TAXABLE INCOME:

JIANMIN QU, PROVOST

THERE IS ONE INSTANCE IN WHICH A CLUB MEMBERSHIP IS IN THE NAME OF AN

INDIVIDUAL DUE TO CLUB IMPOSED MEMBERSHIP RULES. THIS MEMBERSHIP IS

SOLELY FOR BUSINESS PURPOSES TO FOSTER RELATIONSHIPS WITHIN THE NEW

YORK METROPOLITAN AREA FOR THE UNIVERSITY.

PERSONAL SERVICES ARE PROVIDED TO THE PRESIDENT IN THE FORM OF

HOUSEKEEPING BY AN EMPLOYEE OF THE PHYSICAL PLANT DEPARTMENT. THE VALUE

OF THESE SERVICES IS INCLUDED AS TAXABLE INCOME AND IS DISCLOSED AS

PART OF HIS SCHEDULE J PART II, COLUMN B (III), OTHER REPORTABLE

COMPENSATION.

INCENTIVE COMPENSATION, PART I, LINE 7

THE STEVENS INCENTIVE COMPENSATION PLAN PROVIDES A MECHANISM TO REWARD

FACULTY AND CERTAIN KEY STAFF FOR EXTRAORDINARY PERFORMANCE OVER A

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PERIOD OF ONE ACADEMIC YEAR WHERE PERMITTED BY LAW. IN CONTRAST TO

MERIT-BASED SALARY INCREASES, ANNUAL INCENTIVES DO NOT INCREASE BASE

SALARY. INCENTIVE COMPENSATION MAY BE AWARDED UPON A FINDING BY

MANAGEMENT THAT AN EMPLOYEE'S WORK HAS BEEN EXTRAORDINARY AND HAS

CLEARLY CONTRIBUTED TOWARD THE GOALS AND MISSION OF STEVENS. INCENTIVE

COMPENSATION, EVEN IN CASES OF EXTRAORDINARY PERFORMANCE, IS NOT

GUARANTEED, AND DECISIONS REGARDING INCENTIVE COMPENSATION WILL BE

SUBJECT TO THE BOARD OF TRUSTEES AND OTHERS' DETERMINATIONS AS TO THE

FINANCIAL RESULTS OF THE UNIVERSITY AND OTHER FACTORS NOT SPECIFIED IN

THE PLAN. INCENTIVE COMPENSATION FOR FACULTY AND STAFF ARE RECOMMENDED

BY MANAGERIAL STAFF, ARE APPROVED BY THE PRESIDENT AND ARE WITHIN

PARAMETERS ESTABLISHED BY THE BOARD OF TRUSTEES. INCENTIVE COMPENSATION

FOR EXECUTIVE LEADERS IS RECOMMENDED BY THE HUMAN RESOURCES COMMITTEE

OF THE BOARD OF TRUSTEES AND APPROVED BY THE HUMAN RESOURCES COMMITTEE

OR FULL BOARD OF TRUSTEES AS PART OF ITS CONSIDERATION OF THE

PRESIDENT, THE TOP FIVE HIGHEST COMPENSATED EMPLOYEES, AND OTHER

DISQUALIFIED PERSONS LISTED IN SCHEDULE O. EACH YEAR, THE HUMAN

RESOURCES COMMITTEE APPROVES THE ANNUAL PERFORMANCE GOALS FOR THE

EXECUTIVE LEADERS AND REVIEWS WITH THE PRESIDENT THE PROCESS FOR

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

DETERMINING THEM FOR EACH OTHER GROUP OR SUB-GROUP OF EMPLOYEES.

COMPENSATION INFORMATION, PART II LINE 4

PART II, LINE 4 CONTAINS INFORMATION ABOUT THE COMPENSATION OF THE

UNIVERSITY'S PRESIDENT, DR. NARIMAN FARVARDIN, PAID DURING THE YEAR.

ALL AMOUNTS WERE PAID PURSUANT TO THE PRESIDENT'S WRITTEN FIVE-YEAR

CONTRACT. IN ADDITION TO HIS ANNUAL BASE SALARY OF \$843,648, THESE

AMOUNTS INCLUDE (I) A ONE-TIME INCENTIVE COMPENSATION PAYMENT OF

\$500,000 ASSOCIATED WITH SPECIFIC METRICS SPECIFIED BY THE UNIVERSITY'S

BOARD OF TRUSTEES AND ACHIEVED OVER THE COURSE OF THE AGREEMENT AND

PAYABLE AT THE END OF THE FIFTH AND FINAL YEAR OF THE AGREEMENT AND

(II) AN ANNUAL INCENTIVE COMPENSATION PAYMENT OF \$210,687 ASSOCIATED

WITH ACHIEVEMENT OF SEPARATE METRICS FOR THE UNIVERSITY'S FISCAL YEAR

ENDED 6/30/2021. ALL INCENTIVE COMPENSATION AMOUNTS WERE BASED UPON

DETERMINATIONS BY THE HUMAN RESOURCES COMMITTEE AND THE FULL BOARD OF

TRUSTEES THAT OBJECTIVE METRICS RELATING TO THE UNIVERSITY'S STRATEGIC

PLAN WERE ACHIEVED BY THE PRESIDENT AND, IN MANY CASES EXCEEDED WITH

EXCEPTIONAL PERFORMANCE. IN ADDITION, SUCH AMOUNTS WERE REVIEWED AND

EVALUATED FOR MARKET COMPARABILITY BY THE UNIVERSITY'S INDEPENDENT

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COMPENSATION CONSULTANT.

Supplemental Information on Tax-Exempt Bonds

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
▶ **Attach to Form 990.** ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization **STEVENS INSTITUTE OF TECHNOLOGY** Employer identification number **22-1487354**

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) Pooled financing	
						Yes	No	Yes	No	Yes	No
A NJ EDU FAC AUTH STEVENS ISSUE 2020 SERIES A	22-1829511	6460666L9	03/11/20	209,648,096.	NEW CONSTRUCTION & RENOVATION		X		X		X
B NJ EDU FAC AUTH STEVENS ISSUE 2017 SERIES A	22-1829511	646066M31	04/04/17	132,589,361.	1998 & 2007 REFUND/CAP. PROJ		X		X		X
C NJ EDU FAC AUTH CAPITAL IMP SERIES 2016B	22-1829511	646066F54	12/20/16	30,676,062.	FINANCING NEW CONSTRUCTION		X		X	X	
D											

Part II Proceeds										
	A		B		C		D			
1 Amount of bonds retired			10,480,000.		1,362,181.					
2 Amount of bonds legally defeased										
3 Total proceeds of issue	209,648,096.		132,589,361.		17,575,574.					
4 Gross proceeds in reserve funds										
5 Capitalized interest from proceeds										
6 Proceeds in refunding escrows										
7 Issuance costs from proceeds	1,000,262.		911,558.		141,074.					
8 Credit enhancement from proceeds										
9 Working capital expenditures from proceeds										
10 Capital expenditures from proceeds	191,592,779.		76,000,000.		17,434,500.					
11 Other spent proceeds	17,055,055.		55,677,803.							
12 Other unspent proceeds										
13 Year of substantial completion	2022		2021		2018					
	Yes	No	Yes	No	Yes	No	Yes	No		
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X	X			X				
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X		X				
16 Has the final allocation of proceeds been made?	X		X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X					

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

Schedule K (Form 990) 2021

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		
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		
3a Are there any management or service contracts that may result in private business use of bond-financed property?	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		
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? ...	X		X					
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		%		%		%		%
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		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X			X	X			
b Exception to rebate?		X		X		X		
c No rebate due?		X	X			X		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		

Part IV Arbitrage (continued)	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		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?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	X		X		X			

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

SCHEDULE K, PART I, BOND ISSUES

1. NJ EDU FAC AUTH STEVENS ISSUE 2020 SERIES A: THESE BONDS WERE ISSUED IN THE PAR AMOUNT OF \$174,315,000 TO FINANCE: (A) THE CONSTRUCTION, RENOVATION AND EQUIPPING OF THE NEW STUDENT HOUSING AND UNIVERSITY CENTER; (B) FINANCE CAPITAL PROJECTS FOR CONSTRUCTION, RENOVATION, EXPANSION AND EQUIPPING OF CERTAIN ADDITIONAL UNIVERSITY RESEARCH AND EDUCATION BUILDINGS; AND (C) FUND CAPITALIZED INTEREST FOR THE 2020 SERIES A BONDS. TOTAL PROCEEDS OF THE ISSUANCE WERE \$209,648,096 OF WHICH \$38,600,000 WERE USED TO REPAY A LINE OF CREDIT USED FOR CAPITAL EXPENDITURES PRIOR TO THE COMPLETION OF THE ISSUANCE. THE UNIVERSITY GRANTED A PLEDGE OF AND LIEN ON TUITION AS SECURITY FOR THIS LOAN.

2. NJ EDU FAC AUTH STEVENS ISSUE 2017 SERIES A: THESE BONDS WERE ISSUED IN THE PAR AMOUNT OF \$132,589,361 FOR REFUNDING AND LEGAL DEFEASANCE OF THE 1998 SERIES I AND 2007 SERIES A BONDS AND TO FINANCE: (A) THE CONSTRUCTION, RENOVATION AND EQUIPPING OF THE NEW RESEARCH AND ACADEMIC BUILDINGS COMPRISING THE ACADEMIC GATEWAY COMPLEX; (B) THE CONSTRUCTION, RENOVATION AND EXPANSION OF THE EXISTING BABBIO GARAGE; (C) THE CONSTRUCTION, RENOVATION, EXPANSION AND EQUIPPING OF CERTAIN ADDITIONAL FACILITIES AT THE UNIVERSITY FOR RESEARCH AND EDUCATION; (D)

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

PRECONSTRUCTION COSTS RELATED TO A PROPOSED COMBINED STUDENT RESIDENCE
AND UNIVERSITY FACILITY.

3. NJ EDU FAC AUTH CAPITAL IMP SERIES 2016B: THESE BONDS WERE ISSUED
PURSUANT TO A LEGISLATIVELY CREATED STATE-BACKED PROGRAM TO FINANCE
CAPITAL IMPROVEMENTS FOR NEW JERSEY COLLEGES AND UNIVERSITIES. THE
BONDS ARE REPAYABLE IN PART BY STATE APPROPRIATIONS. NJEFA BOND
PROCEEDS OF \$142,715,000 WERE RECEIVED FROM A SINGLE ISSUANCE WHICH WAS
GRANTED IN VARYING AMOUNTS TO COLLEGES LOCATED IN NEW JERSEY. STEVENS
RECEIVED A TOTAL OF \$17,434,500 WHICH REQUIRES THAT THE UNIVERSITY PAY
ONE HALF (50%) OF THE DEBT SERVICE OF THE UNDERLYING BONDS. THE
\$17,434,500 IS TO BE USED TO FINANCE A PORTION OF THE CONSTRUCTION OF
THE ACADEMIC GATEWAY COMPLEX. STEVENS PRINCIPAL PORTION IS \$8,522,585
AND IS RECORDED ON THE BOOKS AS LONG TERM DEBT, PAYABLE OVER 20 YEARS.
SCHEDULE K, PART II, LINE 1 AMOUNT OF BONDS RETIRED IS A RESULT OF
PRINCIPAL PAYMENTS BY THE UNIVERSITY PURSUANT TO AGREEMENTS WITH THE
AUTHORITY.

PART III, PRIVATE BUSINESS USE, LINES 4 & 5

THE UNIVERSITY HAS SERVICE CONTRACTS AND RESEARCH AGREEMENTS THAT MAY
RESULT IN PRIVATE BUSINESS USE. THESE AMOUNTS WERE DETERMINED TO BE
WITHIN THE PERMITTED LEVELS OVER THE LIFE OF EACH BOND, THEREFORE, A
PERCENTAGE WAS NOT DISCLOSED. ADDITIONALLY, THE UNIVERSITY HAS RETAINED
KPMG TO CONSULT AND ADVISE ON THE CURRENT PRIVATE BUSINESS USE; THIS
REVIEW SHOULD BE COMPLETED FOR THE FISCAL YEAR ENDED JUNE 30, 2023.

PART IV, ARBITRAGE REBATE, LINE 2B

ISSUE 2017 SERIES A BONDS - SINCE THESE BONDS WERE PART OF A STATE
BACKED GRANT PROGRAM, ALTHOUGH THE NJEFA RECEIVES ANNUAL ARBITRAGE
REPORT ON THE ENTIRE ISSUANCE, THERE IS NOT A REPORT FOR STEVENS'
SPECIFICALLY. STEVENS WOULD NOT BE SUBJECT TO ARBITRAGE ON THE ISSUE AS
STEVENS' DOES NOT RECEIVE INTEREST INCOME ON THE EARNINGS WHICH GO
DIRECTLY TO THE STATE. FOR THE GRANT PROGRAMS, IN THE EVENT OF POSITIVE
ARBITRAGE, THE STATE OF NJ (TREASURY) WOULD BE RESPONSIBLE FOR THE
PAYMENT.

PART IV, ARBITRAGE REBATE, LINE 2C

AN ARBITRAGE REBATE AND YIELD RESTRICTION ANALYSIS WAS PERFORMED BY BLX
FOR NJ EDU FAC AUTH STEVENS ISSUE 2017 SERIES A FOR THE PERIOD FROM
APRIL 4, 2017 THROUGH JUNE 30, 2021. BASED UPON THE REPORT NO PAYMENT
IS DUE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **STEVENS INSTITUTE OF TECHNOLOGY**
Employer identification number: **22-1487354**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	1	1.	FMV
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	15	774,628.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
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 (MODEL)	X	1	45,000.	FMV
26 Other (MISC EQUIP.)	X	2	37,875.	FMV
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 V, Donee Acknowledgement: **29**

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a	X	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 9

NON-CASH CONTRIBUTIONS

TO THE EXTENT THAT THE UNIVERSITY RECEIVES CONTRIBUTIONS OF PUBLICLY

TRADED SECURITIES, THE UNIVERSITY'S INVESTMENT BROKERAGE BANK IS TASKED

WITH PROMPTLY SELLING THOSE SECURITIES.

SCHEDULE M, LINE 32

THE UNIVERSITY USES VARIOUS GALLERIES TO FACILITATE THE SALE OF ART.

THE UNIVERSITY IS REPORTING IN PART I, COLUMN B, THE NUMBER OF ITEMS

RECEIVED.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

FORM 990, ITEM C, NAME OF ORGANIZATION

THE FULL LEGAL NAME OF THE UNIVERSITY IS THE TRUSTEES OF THE STEVENS

INSTITUTE OF TECHNOLOGY. STEVENS INSTITUTE OF TECHNOLOGY IS REGISTERED

IN THE STATE OF NEW JERSEY AS A "DOING BUSINESS NAME".

COVID-19 IMPACT

THE CONTINUED SPREAD OF THE CORONAVIRUS (COVID-19) AROUND THE WORLD HAS

CAUSED SIGNIFICANT VOLATILITY IN THE U.S. AND INTERNATIONAL MARKETS.

WHILE THE UNIVERSITY DID EXPERIENCE UNREALIZED LOSSES TO THE MARKET

VALUE OF ITS ENDOWMENT ASSETS DURING THE FISCAL YEAR ENDED JUNE 30,

2022, THE EFFECT WAS NOT MATERIAL DUE TO CONTINUED CONTRIBUTIONS.

STUDENTS WERE ABLE TO RETURN TO CAMPUS AND CONTINUED GOVERNMENT GRANTS

PROVIDED RELIEF FOR THE STUDENT AND COVID-19 RELATED EXPENSES. THERE

IS, HOWEVER, UNCERTAINTY AROUND THE BREADTH AND DURATION OF BUSINESS

DISRUPTIONS RELATED TO COVID-19, AS WELL AS ITS IMPACT ON THE U.S. AND

INTERNATIONAL ECONOMIES AND, AS SUCH, WHILE IT MAY HAVE AN IMPACT ON

THE FUTURE OPERATIONS, IT IS NOT EXPECTED TO BE MATERIAL.

ORGANIZATION'S MISSION

STEVENS INSTITUTE OF TECHNOLOGY WAS FOUNDED IN 1870. THE UNIVERSITY

IS A NON-PROFIT RESEARCH UNIVERSITY OFFERING MORE THAN 35

UNDERGRADUATE MAJORS INCLUDING PROGRAMS IN ENGINEERING, THE SCIENCES,

COMPUTER SCIENCE, BUSINESS, AND THE HUMANITIES; AND GRADUATE LEVEL

COURSES IN A RANGE OF DISCIPLINES LEADING TO THE MASTERS AND PHD

DEGREES. ACADEMIC RESEARCH IS CARRIED OUT AT EVERY LEVEL OF THE

UNIVERSITY. THE MISSION OF THE UNIVERSITY IS ACCOMPLISHED BY THE

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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ACHIEVEMENT OF THE FOLLOWING CORE GOALS: PROVIDING STUDENTS WITH A BROAD-BASED, MULTIDISCIPLINARY LEARNING EXPERIENCE IN THE SCIENCES, ENGINEERING, BUSINESS AND LIBERAL ARTS WHILE STRESSING THE FUNDAMENTAL CONCEPTS, TECHNIQUES AND ATTITUDES THAT UNDERLIE DIFFERENT BRANCHES OF TECHNOLOGY; PROMOTING THE PERSONAL DEVELOPMENT OF THE STUDENT, DEMONSTRATED BY A SENSE OF ETHICAL RESPONSIBILITY, AWARENESS OF THE SOCIETAL IMPACT OF THEIR PROFESSIONS, DEVELOPMENT OF LEADERSHIP AND TEAM SKILLS, AND A LOVE OF LEARNING; CREATING KNOWLEDGE THROUGH WORLD-CLASS RESEARCH WITH A DISTINCT IMPACT IN FOCUSED AREAS OF NATIONAL IMPORTANCE; NURTURING AN INNOVATIVE ENVIRONMENT WHEREIN STUDENTS, FACULTY AND COLLEAGUES IN INDUSTRY CONTRIBUTE TO THE PROCESS OF CONCEPTION, DESIGN AND MARKETPLACE REALIZATION OF NEW TECHNOLOGIES.

FORM 990, PART VI, SECTION A, LINE 2:

FAMILY RELATIONSHIP

TWO OF STEVENS' TRUSTEES ARE RELATED BY MARRIAGE. TRUSTEE KAREN CAROLONZA IS THE STEP-DAUGHTER-IN-LAW OF TRUSTEE FRANK SEMCER.

ALL SUCH RELATIONSHIPS ARE DISCLOSED AS PART OF STEVENS' ANNUAL CONFLICT OF INTEREST DISCLOSURE PROCESS AND REPORTED TO THE AUDIT AND RISK COMMITTEE AND TO THE BOARD OF TRUSTEES. MITIGATION EFFORTS WILL BE EMPLOYED BY THE SECRETARY TO THE BOARD AND THE CHAIRMAN OF THE BOARD, IF NEEDED, TO AVOID ANY IMPACT ON STEVENS RELATING TO THESE RELATIONSHIPS.

FORM 990, PART VI, SECTION A, LINE 3:

GOVERNING BODY AND MANANGEMENT

STEVENS' BOARD OF TRUSTEES DELEGATED TO A PROMINENT INVESTMENT BANK THE

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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MANAGEMENT OF STEVENS' ENDOWMENT PURSUANT TO CONTRACTS WHICH ADDRESS THE SCOPE OF THE DELEGATION OF AUTHORITY, MONITORING BY STEVENS' MANAGEMENT AND THE BOARD, AND REPORTING, AMONG OTHER MATTERS. PURSUANT TO THE BY-LAWS OF THE UNIVERSITY AND THE CHARTER OF THE EXECUTIVE COMMITTEE, THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF TRUSTEES IN CERTAIN INSTANCES.

FORM 990, PART VI, SECTION A, LINE 4:

GOVERNING DOCUMENTS

THE EXECUTIVE COMMITTEE CHARTER WAS AMENDED ON DECEMBER 3, 2021 TO REFLECT ITS MEMBERSHIP CONSISTS OF THE CHAIRS OF ALL BOARD COMMITTEES AND THE CHAIRMAN OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 REVIEW

THIS FORM 990 WAS PREPARED BY MEMBERS OF FINANCE AND LEGAL OFFICES OF THE UNIVERSITY TOGETHER WITH ITS OUTSIDE TAX AND ACCOUNTING FIRM SPECIALIZING IN HIGHER EDUCATION. THIS FORM 990 WAS THEN PRESENTED TO THE AUDIT AND RISK COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW AND APPROVAL. FOLLOWING THIS PROCESS AND ANY MODIFICATIONS RECOMMENDED BY THE AUDIT AND RISK COMMITTEE, THE FORM 990 WAS PRESENTED TO A MEETING OF THE FULL BOARD OF TRUSTEES OF THE UNIVERSITY AND APPROVED IN ACCORDANCE WITH THE BY-LAWS OF THE UNIVERSITY.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST

THE UNIVERSITY'S CONFLICT OF INTEREST POLICY REQUIRES ONGOING COMPLIANCE AND SELF-REPORTING OF CONFLICTS. IT ALSO PROVIDES FOR COMPLETION OF AN

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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ANNUAL DISCLOSURE FORM BY ALL TRUSTEES, OFFICERS, CERTAIN STAFF POSITIONS

AND FACULTY. EACH DISCLOSURE FORM IS REVIEWED BY THE OFFICE OF AUDIT, RISK

AND COMPLIANCE, AND DISCLOSURE FORMS FOR TRUSTEES AND OFFICERS ARE REVIEWED

BY THE OFFICE OF GENERAL COUNSEL; ALL CONFLICTS OF INTEREST ARE REPORTED TO

THE AUDIT AND RISK COMMITTEE OF THE BOARD AND TO THE BOARD OF TRUSTEES.

INFORMATION DISCLOSED IN THE DISCLOSURE FORMS WHICH INDICATES THE PRESENCE

OF A CONFLICT IS REVIEWED, DISCUSSED WITH RELEVANT PERSONNEL AND, IF

NECESSARY, THE CONFLICT IS ELIMINATED OR MANAGED PURSUANT TO A CONFLICT

MANAGEMENT PLAN OR DEVICE SUPERVISED BY THE CHAIRMAN OF THE BOARD OF

TRUSTEES OR THE CHAIRMAN OF THE AUDIT COMMITTEE, WITH ADVICE FROM THE

OFFICE OF AUDIT, RISK AND COMPLIANCE AND THE GENERAL COUNSEL. IN ADDITION,

CONFLICTS ARE IDENTIFIED BY THE OFFICERS OF THE UNIVERSITY AND STAFF AT

OTHER LEVELS OF THE UNIVERSITY AS THEY ARISE FROM TIME TO TIME AND ARE

REFERRED TO THE OFFICE OF AUDIT, RISK AND COMPLIANCE AND THE GENERAL

COUNSEL FOR FURTHER ANALYSIS AND RESOLUTION. CERTAIN CONFLICTS RELATING TO

RESEARCH ACTIVITIES MAY BE MANAGED BY THE EXECUTIVE DIRECTOR OF THE OFFICE

OF SPONSORED PROGRAMS, WITH ADVICE FROM THE OFFICE OF AUDIT, RISK AND

COMPLIANCE AND THE GENERAL COUNSEL.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION

THE COMPENSATION OF THE PRESIDENT AND FIVE HIGHEST COMPENSATED EMPLOYEES OF

THE UNIVERSITY WAS APPROVED BY AN INDEPENDENT HUMAN RESOURCES COMMITTEE OF

THE BOARD OF TRUSTEES AND THE FULL BOARD OF TRUSTEES, IN EACH CASE ACTING

AT MEETINGS DULY HELD.

IN ADDITION TO APPROVING THE PRESIDENT'S COMPENSATION FOR CALENDAR YEAR

2021, THE COMPENSATION FOR THE FOLLOWING 5 ADDITIONAL POSITIONS WERE

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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APPROVED:

PROVOST AND UNIVERSITY VICE PRESIDENT

CHIEF FINANCIAL OFFICER, VICE PRESIDENT FOR FINANCE AND TREASURER

DEAN OF ENGINEERING AND SCIENCE

VICE PRESIDENT, GENERAL COUNSEL AND SECRETARY

DEAN OF SCHOOL OF BUSINESS

WITH RESPECT TO THE FOLLOWING ADDITIONAL POSITIONS, THE HUMAN RESOURCES

COMMITTEE OF THE BOARD OF TRUSTEES, ACTING ON BEHALF OF THE BOARD OF

TRUSTEES, APPROVED THE COMPENSATION AT DULY HELD MEETINGS OF THE COMMITTEE.

THE BOARD WAS FULLY INFORMED OF THE COMMITTEE'S ACTIONS:

VICE PRESIDENT FOR DEVELOPMENT AND ALUMNI ENGAGEMENT

VICE PRESIDENT FOR FACILITIES AND CAMPUS OPERATIONS

VICE PRESIDENT FOR ENROLLMENT MANAGEMENT AND STUDENT AFFAIRS

VICE PRESIDENT FOR INFORMATION TECHNOLOGY AND CIO

VICE PRESIDENT FOR COMMUNICATIONS AND MARKETING

VICE PRESIDENT FOR HUMAN RESOURCES

VICE PRESIDENT FOR GOVERNMENT AND COMMUNITY RELATIONS, CHIEF OF STAFF

FACULTY TRUSTEE (2)

ALL SUCH COMPENSATION WAS DETERMINED BASED UPON RECOMMENDATIONS FROM THE

PRESIDENT (EXCEPT WITH RESPECT TO THE PRESIDENT, WHOSE COMPENSATION IS

RECOMMENDED BY THE BOARD OF TRUSTEES, AND THE DEANS AND FACULTY, WHOSE

COMPENSATION IS RECOMMENDED BY THE PROVOST). THE UNIVERSITY RETAINS THE

SERVICES OF A NATIONALLY PROMINENT COMPENSATION CONSULTING FIRM TO PERFORM

A BIENNIAL COMPREHENSIVE COMPENSATION ASSESSMENT OF THE SALARIES OF ALL

Name of the organization STEVENS INSTITUTE OF TECHNOLOGY	Employer identification number 22-1487354
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MEMBERS OF THE SENIOR ADMINISTRATION, INCLUDING THE PRESIDENT. THIS STUDY INCLUDES A COMPARISON OF THE UNIVERSITY'S SALARIES WITH A CORE GROUP OF PEER INSTITUTIONS. THE RESULTS OF THE STUDY ARE REVIEWED AND DISCUSSED ANNUALLY WITH THE BOARD'S HUMAN RESOURCES COMMITTEE AND THE BOARD OF TRUSTEES, AS THOSE BODIES APPROVE EXECUTIVE COMPENSATION. THE SECRETARY TO THE BOARD OF TRUSTEES OR THE VICE PRESIDENT OF HUMAN RESOURCES TOOK CONTEMPORANEOUS MINUTES OF EACH MEETING OF THE BOARD AT WHICH THESE COMPENSATION DECISIONS WERE MADE. NEITHER OF THEM TOOK MINUTES WITH RESPECT TO THEIR OWN COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19:

DISCLOSURE

THE GOVERNING DOCUMENTS OF THE UNIVERSITY TOGETHER WITH CHARTERS FOR EACH COMMITTEE OF THE BOARD OF TRUSTEES, THE CONFLICT OF INTEREST POLICY AND THE FINANCIAL STATEMENTS OF THE UNIVERSITY ARE ALL MADE AVAILABLE ON THE UNIVERSITY'S WEBSITE (WWW.STEVENS.EDU). IN ADDITION, A VARIETY OF OTHER DOCUMENTS AND MATERIALS REGARDING THE UNIVERSITY AND ITS OPERATIONS AS WELL AS THE OTHER POLICIES OF THE UNIVERSITY, ARE ALSO AVAILABLE ON THE WEBSITE.

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES:

EQUITY	187,028,285
FIXED INCOME	7,507,929
TOTAL	194,536,214

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

POST-RETIREMENT BENEFIT CHANGES	-355,929.
UNCOLLECTIBLE CONTRIBUTIONS	-428,530.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	-400,810.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **STEVENS INSTITUTE OF TECHNOLOGY** Employer identification number **22-1487354**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, PART IV, COLUMN (C)

CASTLE POINT HOLDINGS, INC., LISTED ON SCHEDULE R, PART IV, IS A

HOLDING COMPANY WITH A MINORITY INTEREST IN INACTIVE SUBSIDIARIES.

SCHEDULE R, PART IV, COLUMN (C)

THE CHARITABLE REMAINDER TRUST/UNITRUSTS LISTED ON PART IV, LINE 2 HAVE

THE FOLLOWING LEGAL DOMICILES:

CA

MD

NC

NJ