

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

- B Check if applicable
Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization RIDER UNIVERSITY
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
2083 LAWRENCEVILLE ROAD
City or town, state or province, country, and ZIP or foreign postal code
LAWRENCEVILLE, NJ 086483099
F Name and address of principal officer
DR GREGORY DELL'OMO
2083 LAWRENCEVILLE ROAD
LAWRENCEVILLE, NJ 086483099

D Employer identification number 21-0650678
E Telephone number (609) 896-5000
G Gross receipts \$ 294,973,659
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number

I Tax-exempt status
501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

J Website: WWW RIDER EDU

K Form of organization
Corporation Trust Association Other

L Year of formation 1865

M State of legal domicile NJ

Part I Summary

1 Briefly describe the organization's mission or most significant activities
RIDER UNIVERSITY IS A PRIVATE, NOT-FOR-PROFIT INSTITUTION FOUNDED IN 1865
2 Check this box 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) 23
4 Number of independent voting members of the governing body (Part VI, line 1b) 23
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 3,211
6 Total number of volunteers (estimate if necessary) 554
7a Total unrelated business revenue from Part VIII, column (C), line 12 944,107
7b Net unrelated business taxable income from Form 990-T, line 34 -365,540

Table with columns: Revenue, Expenses, Net Assets or Fund Balances, Prior Year, Current Year, Beginning of Current Year, End of Year. Rows include contributions, program service revenue, investment income, grants paid, salaries, and total assets/liabilities.

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: JAMES P HARTMAN VP FINANCE AND TREASURER
Date: 2019-05-15

Paid Preparer Use Only
Print/Type preparer's name: GARRETT M HIGGINS
Preparer's signature: GARRETT M HIGGINS
Date: 2019-05-15
Check if self-employed
Firm's name: PKF O'CONNOR DAVIES LLP
Firm's EIN: 27-1728945
Firm's address: 665 FIFTH AVENUE NEW YORK, NY 10022
Phone no: (212) 286-2600

Part III Statement of Program Service Accomplishments

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

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 No

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 135,408,040 including grants of \$ 76,971,714) (Revenue \$ 101,487,817)

See Additional Data

4b (Code) (Expenses \$ 27,120,982 including grants of \$) (Revenue \$ 47,101,639)

See Additional Data

4c (Code) (Expenses \$ 19,298,467 including grants of \$ 630,303) (Revenue \$ 33,502,029)

See Additional Data

(Code) (Expenses \$ 17,226,492 including grants of \$ 34,785) (Revenue \$ 29,917,472)

ACADEMIC SUPPORT (EXPENSES \$15,845,600 INCLUDING GRANTS \$0) (REVENUE \$27,519,325) - GENERAL SUPPORT TO THE STUDENTS THESE INCLUDE ACADEMIC INFORMATION TECHNOLOGY, DEAN'S OFFICES, LIBRARIES, THEATER, ART GALLERY, TV STUDIO, AND OTHER SIMILAR ACADEMIC ACTIVITIES RESEARCH (EXPENSES \$1,380,892 INCLUDING GRANTS \$34,785) (REVENUE \$2,398,147) - RESEARCH PERFORMED BY FACULTY AND STUDENTS

4d Other program services (Describe in Schedule O)
(Expenses \$ 17,226,492 including grants of \$ 34,785) (Revenue \$ 29,917,472)

4e Total program service expenses ► 199,053,981

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 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? If "Yes," complete Schedule C, Part II	Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9 Did the organization report an amount in Part X, line 21 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? If "Yes," complete Schedule D, Part IV	Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	Yes	
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? If "Yes," complete Schedule F, Parts II and IV		No
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? If "Yes," complete Schedule F, Parts III and IV		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
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>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	Yes	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		No
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		No
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		No
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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 columns for question number, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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

Check if Schedule O contains a response 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 (23), 1b (23), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 (States), 18 (Website), 19 (Documents), 20 (Records).

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 dotted 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)	(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			
See Additional Data Table										

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)	3,075,905	0	519,910

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 ▶ 229		
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ELLUCIAN COMPANY LP 62590 COLLECTION CENTER DR CHICAGO, IL 60693	INFORMATION TECHNOLOGY	1,673,968
PRICEWATERHOUSECOOPERS 4040 W BOY SCOUT BLVD TAMPA, FL 33607	ADVISORY SERVICES	453,117
PEPPER HAMILTON LLP 301 CARNEGIE CTR STE 400 PRINCETON, NJ 08540	LEGAL	340,683
PROSKAUER ROSE LLP 1585 BROADWAY NEW YORK, NY 10036	LEGAL	202,259
KAUFMAN HALL AND ASSOCIATES 5202 OLD ORCHARD RD STE N700 SKOKIE, IL 60077	STRATEGIC PLANNING	185,821

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 ▶ 15	
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Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 5,000			
	b Membership dues	1b			
	c Fundraising events	1c 209,779			
	d Related organizations	1d			
	e Government grants (contributions)	1e 2,943,496			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 12,738,750			
	g Noncash contributions included in lines 1a-1f \$ _____	336,427			
	h Total. Add lines 1a-1f		15,897,025		

Program Service Revenue			Business Code			
	2a TUITION AND FEES		611310	176,950,648	176,950,648	
b ROOM AND BOARD		611310	30,856,479	30,856,479		
c OTHER PROGRAM SERVICE REVENUE		611310	4,172,176	4,172,176		
d STUDY TOURS		611310	29,654	29,654		
e _____						
f All other program service revenue						
g Total. Add lines 2a-2f			212,008,957			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,979,507		-20,782	2,000,289	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		38,748			38,748	
	6a Gross rents	(i) Real	(ii) Personal				
		315,242	46,641				
	b Less rental expenses	0	0				
	c Rental income or (loss)	315,242	46,641				
	d Net rental income or (loss)			361,883	46,641	315,242	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		62,777,962					
	b Less cost or other basis and sales expenses	61,004,731					
	c Gain or (loss)	1,773,231					
	d Net gain or (loss)			1,773,231	101,230	1,672,001	
	8a Gross income from fundraising events (not including \$ 209,779 of contributions reported on line 1c) See Part IV, line 18	a	115,364				
	b Less direct expenses	b	178,765				
c Net income or (loss) from fundraising events			-63,401		-63,401		
9a Gross income from gaming activities See Part IV, line 19	a						
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a BUSINESS CONF CENTER	721000	1,732,232		796,945	935,287		
b FITNESS CENTER	713940	32,536		20,073	12,463		
c VENDING MACHINE COMMISSION	722210	29,445			29,445		
d All other revenue							
e Total. Add lines 11a-11d			1,794,213				
12 Total revenue. See Instructions			233,790,163	212,008,957	944,107	4,940,074	

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	34,785	34,785		
2 Grants and other assistance to domestic individuals See Part IV, line 22	77,602,017	77,602,017		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,206,430	865,447	1,041,462	299,521
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	71,175,589	60,946,286	9,648,395	580,908
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,081,403	2,622,908	430,703	27,792
9 Other employee benefits	13,717,045	12,084,331	1,517,747	114,967
10 Payroll taxes	5,984,648	5,038,057	883,786	62,805
11 Fees for services (non-employees)				
a Management	393,310	393,310		
b Legal	1,156,638	200	1,156,438	
c Accounting	168,000		168,000	
d Lobbying	8,599		8,599	
e Professional fundraising services See Part IV, line 17	53,117			53,117
f Investment management fees	258,870		258,870	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,592,537	2,343,387	3,249,150	
12 Advertising and promotion	1,111,071	429,972	638,097	43,002
13 Office expenses	3,694,221	2,829,452	780,900	83,869
14 Information technology	5,619,252	4,135,608	1,362,160	121,484
15 Royalties				
16 Occupancy	8,550,074	8,392,310	157,764	
17 Travel	3,190,059	2,809,984	351,003	29,072
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	950,723	830,953	119,770	
20 Interest	1,438,034	746,435	691,599	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,007,330	9,665,079	342,251	
23 Insurance	1,399,846	286,014	1,113,712	120
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD SERVICE	5,522,770	5,522,770		
b BAD DEBT	1,041,460	134,047	907,413	
c BOOKS, PERIODICALS, SUB	1,031,047	1,017,225	12,155	1,667
d DUES AND MEMBERSHIPS	643,425	282,721	360,704	
e All other expenses	1,046,203	40,683	661,741	343,779
25 Total functional expenses. Add lines 1 through 24e	226,678,503	199,053,981	25,862,419	1,762,103
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 <input type="checkbox"/> 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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	26,490	1	26,490
	2 Savings and temporary cash investments	29,759,434	2	33,262,490
	3 Pledges and grants receivable, net	6,510,526	3	12,665,763
	4 Accounts receivable, net	5,374,446	4	3,006,403
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,358,774	9	2,466,609
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	275,230,900		
	b Less accumulated depreciation	156,114,956		
	11 Investments—publicly traded securities	33,201,337	11	73,644,389
	12 Investments—other securities See Part IV, line 11	25,184,667	12	26,006,715
	13 Investments—program-related See Part IV, line 11	4,666,872	13	4,595,225
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	1,621,759	15	1,533,263
16 Total assets. Add lines 1 through 15 (must equal line 34)	225,963,829	16	276,323,291	
Liabilities	17 Accounts payable and accrued expenses	19,809,190	17	21,732,251
	18 Grants payable		18	
	19 Deferred revenue	8,093,122	19	4,461,819
	20 Tax-exempt bond liabilities	40,814,854	20	80,323,942
	21 Escrow or custodial account liability Complete Part IV of Schedule D	194,642	21	322,613
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,092,612	23	910,498
	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	13,593,417	25	13,789,462
	26 Total liabilities. Add lines 17 through 25	83,597,837	26	121,540,585
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	78,887,230	27	81,680,948
	28 Temporarily restricted net assets	20,631,077	28	25,447,457
	29 Permanently restricted net assets	42,847,685	29	47,654,301
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	142,365,992	33	154,782,706
	34 Total liabilities and net assets/fund balances	225,963,829	34	276,323,291

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	233,790,163
2	Total expenses (must equal Part IX, column (A), line 25)	2	226,678,503
3	Revenue less expenses Subtract line 2 from line 1	3	7,111,660
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	142,365,992
5	Net unrealized gains (losses) on investments	5	-706,056
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 in Schedule O)	9	6,011,110
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	154,782,706

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 in 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	2a		No
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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes	
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 in Schedule O	2c	Yes	
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?	3a	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 21-0650678

Name: RIDER UNIVERSITY

Form 990 (2017)

Form 990, Part III, Line 4a:

INSTRUCTION RIDER UNIVERSITY IS AN INDEPENDENT, COMPREHENSIVE, TEACHING ORIENTED INSTITUTION OF HIGHER LEARNING THE UNIVERSITY OFFERS FINANCIAL SUPPORT TO STUDENTS THROUGH ACADEMIC AND ATHLETIC SCHOLARSHIPS, GRANTS AND STUDENT WORKSTUDY PROGRAMS RIDER UNIVERSITY IS CURRENTLY ORGANIZED INTO FIVE COLLEGES - THE COLLEGE OF LIBERAL ARTS AND SCIENCES, THE COLLEGE OF EDUCATION AND HUMAN SERVICES, THE COLLEGE OF BUSINESS ADMINISTRATION, THE COLLEGE OF CONTINUING STUDIES, AND THE WESTMINSTER COLLEGE OF THE ARTS THE PRIVATE UNIVERSITY CURRENTLY SERVES APPROXIMATELY 4,100 UNDERGRADUATE STUDENTS AND 1,000 GRADUATE STUDENTS IN 71 UNDERGRADUATE AND 28 GRADUATE PROGRAMS CONTINUED ON SCHEDULE O THE UNIVERSITY ALSO OFFERS 27 UNDERGRADUATE AND GRADUATE CERTIFICATIONS FULL-TIME FACULTY NUMBER 248, WITH 99% HOLDING A DOCTORATE OR THE HIGHEST DEGREE IN THEIR FIELD RIDER IS REGIONALLY ACCREDITED BY THE MIDDLE STATES COMMISSION ON HIGHER EDUCATION AND ALSO HOLDS SPECIALIZED ACCREDITATION WITH THESE PRESTIGIOUS EDUCATIONAL ORGANIZATIONS - AACSB INTERNATIONAL (ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS) - RIDER IS AMONG THE SELECT BUSINESS SCHOOLS TO HAVE ATTAINED THIS DISTINCTION AND THE ONLY SCHOOL IN NEW JERSEY TO HOLD THE SPECIALIZED AACSB ACCREDITATION IN ACCOUNTING - NCATE - ELEMENTARY AND SECONDARY EDUCATION PROGRAMS AND THEIR APPLICABLE GRADUATE PROGRAMS ON BOTH CAMPUSES ARE ACCREDITED BY THE NATIONAL COUNCIL FOR THE ACCREDITATION OF TEACHER EDUCATION - NASM - THE UNDERGRADUATE AND GRADUATE MUSIC PROGRAMS OF WESTMINSTER CHOIR COLLEGE ARE ACCREDITED BY THE NATIONAL ASSOCIATION OF SCHOOLS OF MUSIC - CACREP - RIDER'S GRADUATE COUNSELING SERVICES PROGRAM IN THE SCHOOL OF EDUCATION HOLDS NATIONAL ACCREDITATION FROM THE COUNCIL FOR ACCREDITATION OF COUNSELING AND RELATED EDUCATION PROGRAMS - NASP - THE SCHOOL PSYCHOLOGY PROGRAM IN THE SCHOOL OF EDUCATION IS ACCREDITED BY THE NATIONAL ACCREDITATION OF SCHOOL PSYCHOLOGISTS - AMERICAN CHEMICAL SOCIETY - RIDER'S CHEMISTRY PROGRAM IS ACCREDITED BY THE AMERICAN CHEMICAL SOCIETY

Form 990, Part III, Line 4b:

STUDENT SERVICES RIDER UNIVERSITY PROVIDES THESE SERVICES TO THE ENTIRE STUDENT COMMUNITY IN AN EFFORT TO DEVELOP THE INTELLECTUAL AND SOCIAL TALENTS OF ITS STUDENTS THESE SERVICES INCLUDE ADMISSIONS, ATHLETICS, GREEK LIFE, CAREER SERVICES, COUNSELING CENTER, HEALTH SERVICES, FINANCIAL AID, AND RECREATION PROGRAMS

Form 990, Part III, Line 4c:

AUXILIARY ENTERPRISES PRIMARY ROOM AND BOARD RIDER UNIVERSITY HAS A LAWRENCEVILLE CAMPUS AND A PRINCETON CAMPUS THE LAWRENCEVILLE CAMPUS HOUSES APPROXIMATELY 2,100 STUDENTS IN THIRTEEN RESIDENCE HALLS AND SIX GREEK HOUSES THE LAWRENCEVILLE CAMPUS OFFERS FACILITIES FOR DINING AND SNACKING FOR STUDENTS, FACULTY, STAFF AND GUESTS AT DALY'S DINING HALL, CRANBERRY'S, STARBUCKS, ANDREW J'S AND SWEIGART EXPRESS THE PRINCETON CAMPUS HOUSES APPROXIMATELY 170 STUDENTS IN THREE RESIDENCE HALLS THE PRINCETON CAMPUS OFFERS THE DINING COMMONS AND THE WCC PUB FOR MEALS AND SNACKS FOR STUDENTS, FACULTY, STAFF AND GUESTS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
ROBERT SCHIMEK CHAIR	1 00	X		X				0	0	0
JOHN GUARINO VICE CHAIR	1 00	X		X				0	0	0
CHRISTOPHER NIKOLICH SECRETARY	1 00	X		X				0	0	0
ALBERTO BAPTISTE TRUSTEE	1 00	X						0	0	0
LOUISE HALL BEARD TRUSTEE THRU MAY 2018	1 00	X						0	0	0
F CHRISTOPHER CAROTHERS TRUSTEE	1 00	X						0	0	0
ROBERT CHRISTIE TRUSTEE	1 00	X						0	0	0
JEFFREY CORNELIUS TRUSTEE	1 00	X						0	0	0
MARK C DEMAREO TRUSTEE THRU DEC 2017	1 00	X						0	0	0
E BRUCE DIDONATO TRUSTEE	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
MOLLY O'NEIL FRANK TRUSTEE	1 00	X						0	0	0
MICHAEL B KENNEDY TRUSTEE	1 00	X						0	0	0
THOMAS LYNCH TRUSTEE	1 00	X						0	0	0
THOMAS MARINO TRUSTEE	1 00	X						0	0	0
TERRY MCEWEN TRUSTEE	1 00	X						0	0	0
THOMAS M MULHARE TRUSTEE	1 00	X						0	0	0
GARY NEUBECK TRUSTEE	1 00	X						0	0	0
LEWIS PEPPERMAN TRUSTEE	1 00	X						0	0	0
DENISE PETITTA TRUSTEE	1 00	X						0	0	0
BARRY RABNER TRUSTEE	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
WILLIAM M RUE TRUSTEE	1 00	X						0	0	0
COLLEEN SHAPIRO TRUSTEE	1 00	X						0	0	0
GARY SHAPIRO TRUSTEE	1 00	X						0	0	0
ARTHUR J STAINMAN TRUSTEE	1 00	X						0	0	0
ALAN WEXLER TRUSTEE	1 00	X						0	0	0
GREGORY G DELL'OMO PRESIDENT	50 00			X				480,801	0	81,826
JULIE A KARNS VP FINANCE & TREASURER	50 00			X				268,356	0	63,499
DONNAJEAN A FREDEEN PROVOST/VP ACADEMIC AFFAIRS	50 00			X				255,086	0	36,289
JONATHAN MEER VP UNIVERSITY ADVANCEMENT THRU JAN 2018	50 00			X				222,027	0	43,701
DEBORA Z STASOLLA VP STRATEGIC INITIATIVES & PLANNING	50 00			X				150,149	0	24,918

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
MARK A SOLOMON VP LEGAL AFFAIRS & GENERAL COUNSEL	50 00			X				142,339	0	24,754
CYNTHIA NEWMAN DEAN SCHOOL OF BUSINESS	37 50				X			227,275	0	51,487
JONATHAN H MILLEN DEAN COLLEGE LIBERAL ARTS & SCIENCES	37 50				X			190,198	0	61,003
JAMES P O'HARA VP ENROLLMENT MANAGEMENT THRU SEPT 2017	37 50				X			161,832	0	15,198
KEVIN A BAGGETT BASKETBALL COACH	37 50					X		218,467	0	32,665
GARY M BROSVIC PROFESSOR PSYCHOLOGY	37 50					X		196,990	0	24,175
SHARON SHERMAN DEAN SCHOOL OF EDUCATION	37 50					X		194,693	0	19,211
LARRY M NEWMAN ASS PROFESSOR MARKETING/ADVERTISING	37 50					X		186,611	0	27,438
MARY E HAYWOOD-SULLIVAN ASS PROFESSOR ACCOUNTING	37 50					X		181,081	0	13,746

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
RIDER UNIVERSITY

Employer identification number

21-0650678

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	

16a 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2016. 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

17a 10%-facts-and-circumstances test—2017. 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

b 10%-facts-and-circumstances test—2016. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part 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

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. 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—2016. 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 on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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)	1	
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 (explain in detail in Part VI)		
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 1-1/2% 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 .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 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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 21-0650678

Name: RIDER UNIVERSITY

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)

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017
Open to Public Inspection

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 the organization RIDER UNIVERSITY	Employer identification number 21-0650678
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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 (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

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-
1				
2				
3				
4				
5				
6				

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(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)).

	(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?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,974
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		5,591
i Other activities?	Yes		8,599
j Total Add lines 1c through 1i			16,164
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the 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 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

Return Reference	Explanation
PART II-B, LINE 1	PART II-B, LINE 1(B) AND 1(G) - PAID STAFF AND DIRECT CONTACT THE PRESIDENT MET WITH KEY LEGISLATORS AND POLICYMAKERS IN AN EFFORT TO ADVOCATE ON BEHALF OF THE STUDENTS AT RIDER UNIVERSITY WHO RECEIVE FINANCIAL SUPPORT FROM THE STATE AND FEDERAL GOVERNMENT PART II-B, LINE 1(H) - SPEECHES, LECTURES THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW JERSEY (AICUNJ) IS COMMITTED TO THE ADVANCEMENT OF INDEPENDENT HIGHER EDUCATION IN NEW JERSEY IT SERVES AS A LIAISON WITH THE STATE AND FEDERAL GOVERNMENT ON BEHALF OF THE INDEPENDENT SECTOR THE PRESIDENT OF RIDER UNIVERSITY ATTENDED AICUNJ MEETINGS, AS WELL AS OTHER INDUSTRY ASSOCIATION MEETINGS, THROUGHOUT FISCAL YEAR 2018 AND SUPPORTED ITS EFFORTS TO ADVOCATE ON BEHALF OF RIDER AND THE INDEPENDENT SECTOR PART II-B, LINE 1(I) - OTHER LOBBYING ACTIVITIES THE UNIVERSITY PAYS ANNUAL ASSOCIATION DUES TO THE ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES IN NEW JERSEY (AICUNJ), TO THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES (NAICU), AND TO THE INDEPENDENT COLLEGE FUND OF NEW JERSEY (ICFNJ) AMONG OTHER SERVICES, THESE ASSOCIATIONS LOBBY ON BEHALF OF SECTOR NEEDS

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.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
RIDER UNIVERSITY

Employer identification number
21-0650678

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 (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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 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 8/17/06, 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? Yes No

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)? Yes No

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 SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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 are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 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 in 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	57,307,247	55,014,641	56,381,872	66,010,968	56,355,808
b Contributions	1,591,882	1,137,210	2,605,904	1,169,330	3,602,610
c Net investment earnings, gains, and losses	4,162,599	6,336,806	-1,455,717	-58,850	8,103,084
d Grants or scholarships	2,895,013	2,693,180	2,065,856	1,641,425	1,350,429
e Other expenditures for facilities and programs	434,092	2,488,230	451,562	9,098,151	700,105
f Administrative expenses					
g End of year balance	59,732,623	57,307,247	55,014,641	56,381,872	66,010,968

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 6 730 %
 - b** Permanent endowment ▶ 93 270 %
 - c** Temporarily restricted endowment ▶ 0 %
- 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 | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 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	3,330,000	253,359		3,583,359
b Buildings		193,251,399	107,359,908	85,891,491
c Leasehold improvements				
d Equipment		23,326,804	12,559,608	10,767,196
e Other		55,069,338	36,195,440	18,873,898
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				119,115,944

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) ALTERNATIVES PRIVATE EQUITY	4,937,365	F
(B) ALTERNATIVES DOMESTIC EQUITY	2,738,922	F
(C) ALTERNATIVES INTERNATIONAL EQUITY	6,663,277	F
(D) ALTERNATIVES FIXED INCOME	2,379,289	F
(E) ALTERNATIVES PRIVATE REAL ASSETS	5,205,297	F
(F) ALTERNATIVES FLEXIBLE CAPITAL	3,318,024	F
(G) OTHER ALTERNATIVES	764,541	F
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	26,006,715	

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. (Column (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	
See Additional Data Table	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	13,789,462

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 FIN 48 (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	158,246,716
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-706,056
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	3,048,726
e	Add lines 2a through 2d	2e	2,342,670
3	Subtract line 2e from line 1	3	155,904,046
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	258,870
b	Other (Describe in Part XIII)	4b	77,627,247
c	Add lines 4a and 4b	4c	77,886,117
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	233,790,163

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	145,830,002
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	101,893
e	Add lines 2a through 2d	2e	101,893
3	Subtract line 2e from line 1	3	145,728,109
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	258,870
b	Other (Describe in Part XIII)	4b	80,691,524
c	Add lines 4a and 4b	4c	80,950,394
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	226,678,503

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

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

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

1 (a) Description of Liability	(b) Book Value
US GOVERNMENT GRANTS REFUNDABLE	3,669,168
ASSET RETIREMENT OBLIGATION	5,064,078
EMPLOYEE AND RETIREE MEDICAL SELF-INSURED LIABILITY	1,897,997
STUDENT DEPOSITS AND CREDIT BALANCES	928,677
ANNUITIES PAYABLE	705,543
BUSINESS CONFERENCE DEPOSITS	42,604
UNCLAIMED CHECKS	71,056
CAPITAL LEASE	1,315,064
NEW JERSEY SALES TAX PAYABLE	2,528
OTHER LIABILITIES	92,747

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE UNIVERSITY IS A CUSTODIAN OF SEVERAL AGENCY ACCOUNTS TOTALING \$322,613 THE AGENCY ACCOUNTS PRIMARILY RELATE TO STUDENT ORGANIZATIONS FOR WHICH THE UNIVERSITY HOLDS THE FUNDS FOR EACH ORGANIZATION UNTIL SUCH TIME AS A CHECK REQUEST IS SUBMITTED BY THE ORGANIZATION FOR REIMBURSEMENT THIS AMOUNT IS RECORDED AS A LIABILITY ON THE UNIVERSITY'S BALANCE SHEET

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ENDOWMENT SPENDING POLICY SUPPORTS SCHOLARSHIPS, GRANTS, FACILITIES, AND PROGRAMS, IN ACCORDANCE WITH THE UNIVERSITY'S MISSION AND DONOR'S RESTRICTIONS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE UNIVERSITY IS AN ORGANIZATION DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND, THEREFORE, IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE CODE ACCORDINGLY, THE UNIVERSITY IS NOT SUBJECT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE THE UNIVERSITY RECOGNIZES THE EFFECTS OF INCOME TAX PROVISIONS ONLY IF THOSE PROVISIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED NO PROVISION FOR INCOME TAXES WAS REQUIRED IN 2018 AND 2017

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF PENSION 3,048,726

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIP ALLOWANCE - TUITION AND FEES 76,971,714 SCHOLARSHIP ALLOWANCE - AUXILIARIES 6 30,303 CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST 25,230

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	WRITE-OFF OF CONTRIBUTION RECEIVABLE 101,893

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIP ALLOWANCE - TUITION AND FEES 76,971,714 SCHOLARSHIP ALLOWANCE - AUXILIARIES 6 30,303 POSTRETIREMENT ACTUARIAL ADJUSTMENT 3,089,507

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2017

Open to Public Inspection

▶ **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.**

▶ **Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Department of the Treasury

Name of the organization
RIDER UNIVERSITY

Employer identification number

21-0650678

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?	Yes	
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?	Yes	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.	Yes	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	Yes	
5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		No
6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.	Yes	No
7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.	Yes	

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 (see instructions).

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	A GENERAL STATEMENT OF NON-DISCRIMINATION IS INCLUDED IN ALL ADVERTISEMENTS, IN NEWSPAPERS OF GENERAL CIRCULATION, OTHER PRINTED MEDIA RELATING TO THE RECRUITMENT OF STUDENTS AND EMPLOYEES, AND ON THE UNIVERSITY'S WEBSITE
SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVED THE FOLLOWING FEDERAL AND STATE OF NEW JERSEY STUDENT FINANCIAL ASSISTANCE FEDERAL FEDERAL DIRECT STUDENT LOAN PROGRAM \$39,087,003 FEDERAL PELL GRANT PROGRAM \$5,903,976 FEDERAL PERKINS LOAN PROGRAM \$832,878 FEDERAL WORK-STUDY \$555,185 FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT \$329,962 FEDERAL STUDENT SUPPORT SERVICES \$40,500 TOTAL FEDERAL STUDENT FINANCIAL ASSISTANCE \$46,749,504 STATE OF NEW JERSEY N J - TUITION AID GRANT \$9,358,613 N J - GOVERNOR'S URBAN SCHOLARS \$8,500 N J - STARS II \$30,000 N J - EDUCATIONAL OPPORTUNITY FUND \$645,525 TOTAL STATE OF NEW JERSEY STUDENT FINANCIAL ASSISTANCE \$10,042,638 TOTAL STUDENT FINANCIAL ASSISTANCE \$56,792,142

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
RIDER UNIVERSITY

Employer identification number

21-0650678

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to 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 region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			6,088,539
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			6,088,539

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, do not file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* Yes No

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).

Return Reference	Explanation
PART I, LINE 3	INVESTMENTS ARE REVIEWED BY THE INVESTMENT SUBCOMMITTEE OF THE BUSINESS AFFAIRS COMMITTEE OF THE BOARD OF TRUSTEES, AS WELL AS BY RIDER'S INVESTMENT MANAGER

Return Reference	Explanation
SCHEDULE F, PART IV, LINE 1, LINE 3 AND LINE 4	THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 926, FORM 5471, FORM 8621 AND FORM 8865 BECAUSE IT DOES NOT MEET THE APPLICABLE FILING THRESHOLD REQUIREMENT AND/OR OWNERSHIP REQUIREMENT

Additional Data

Software ID:

Software Version:

EIN: 21-0650678

Name: RIDER UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		5,575,364
NORTH AMERICA	0	0	INVESTMENTS		513,175

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
RIDER UNIVERSITY

Employer identification number
21-0650678

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 WILSON-BENNETT TECHNOLOGY INC 140 PROFESSIONAL DRIVE SUITE 2 CABOT, AR 720238675	CONSULTS ON PHONATHON PROGRAM		No	170,745	53,117	117,628
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				170,745	53,117	117,628

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

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

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)
		RACQUET AND TENNIS (event type)	CBA HALL OF FRAME (event type)	6 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	81,345	79,350	164,448	325,143
	2 Less Contributions	59,745	59,625	90,409	209,779
	3 Gross income (line 1 minus line 2)	21,600	19,725	74,039	115,364
Direct Expenses	4 Cash prizes				
	5 Noncash prizes		1,075	15,724	16,799
	6 Rent/facility costs		21,228	24,406	45,634
	7 Food and beverages	30,270		56,751	87,021
	8 Entertainment	150		3,500	3,650
	9 Other direct expenses	4,671	13,927	7,063	25,661
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				178,765
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-63,401

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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	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		%
b	An outside facility		%

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 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).

Return Reference	Explanation
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Schedule I (Form 990)

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

OMB No 1545-0047
2017
Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization RIDER UNIVERSITY

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 21-0650678

Part I

General Information on Grants and Assistance

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Row 1: (1) PRINCETON UNIVERSITY, 21-0634501, 501(C)(3), 32,966, RESEARCH.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1
3 Enter total number of other organizations listed in the line 1 table 0

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
See Additional Data Table					
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	THE UNIVERSITY HAS ESTABLISHED POLICIES, PROCEDURES, AND CONTROLS OVER THE AWARDING, DISBURSING, AND MONITORING OF STUDENT FINANCIAL AID OR ASSISTANCE TO INDIVIDUAL STUDENTS IN COMPLIANCE WITH FEDERAL AND STATE OF NEW JERSEY REGULATIONS AND REQUIREMENTS IN ADDITION, THE UNIVERSITY HAS AN EXTERNAL AUDIT PERFORMED IN ACCORDANCE WITH TITLE 2 U S CODE OF FEDERAL REGULATIONS PART 200 (UNIFORM GUIDANCE) AND NEW JERSEY OFFICE OF MANAGEMENT AND BUDGET CIRCULAR 15-08 THE UNIVERSITY HAS PROCEDURES AND CONTROLS IN PLACE OVER THE AWARDING, DISBURSING, AND MONITORING OF SUBAWARDS MADE TO ORGANIZATIONS THESE INCLUDE REVIEWING THE ANNUAL FINANCIAL STATEMENT AND SINGLE AUDIT REPORTS OF THE ORGANIZATION AND REVIEWING ALL SUPPORTING DOCUMENTATION INCLUDING INVOICES RECEIVED BY THE ORGANIZATION

Additional Data

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

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FEDERAL AMERICORPS EDUCATION AWARDS	15	12,298			
FEDERAL BUILDING TEACHER LEADERSHIP CAPACITY	27	39,985			
FEDERAL MATHEMATICS AND SCIENCE PARTNERSHIP PROGRAM	23	35,730			
FEDERAL STUDENT SUPPORT SERVICES PROGRAM	33	40,500			
FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT	919	329,962			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
N J - EDUCATIONAL OPPORTUNITY FUND	125	616,970			
NSF NOYCE GROW YOUR OWN PIPELINE	2	4,740			
NSF NOYCE PARTICIPANT SUPP COSTS	7	50,960			
RESTRICTED AID USED FOR SCHOLARSHIPS	548	2,237,266			
RIDER UNIVERSITY ATHLETIC, MERIT AND NEED-BASED FINANCIAL AID	3778	74,229,806	3,800	COST	MUGS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

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.**
▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
RIDER UNIVERSITY

Employer identification number
21-0650678

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/>	First-class or charter travel	<input checked="" type="checkbox"/>	Housing allowance or residence for personal use
<input type="checkbox"/>	Travel for companions	<input type="checkbox"/>	Payments for business use of personal residence
<input 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 type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3	Indicate which, if any, of the following the filing 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 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?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
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.	4c	No
Only 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?	5a	No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No
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?	6a	No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
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.	8	No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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.

Return Reference	Explanation
FORM 990, SCHEDULE J	<p>PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$9,186 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF JONATHAN MEER. THIS AMOUNT IS NONTAXABLE TO THE RECIPIENT. PART I, LINE 1A, PART II, COLUMN (D) RIDER UNIVERSITY HAS PAID \$12,460 IN SOCIAL CLUB MEMBERSHIP DUES FOR UNIVERSITY BUSINESS PURPOSES ON BEHALF OF PRESIDENT GREGORY G. DELL'OMO. THIS AMOUNT IS NONTAXABLE TO THE RECIPIENT. PART I, LINE 1A, PART II, COLUMN (D) THE NONTAXABLE BENEFITS AMOUNT OF \$58,076 OF PRESIDENT GREGORY G. DELL'OMO INCLUDES THE MARKET VALUE OF THE UNIVERSITY RESIDENCE PROVIDED TO THE PRESIDENT. THE MARKET VALUE OF THE UNIVERSITY RESIDENCE IS APPROXIMATELY 50% OF NONTAXABLE BENEFITS. THE PRESIDENT OF THE UNIVERSITY IS REQUIRED TO ACCEPT LODGING AND LIVE ADJACENT TO THE LAWRENCEVILLE CAMPUS AS A CONDITION OF HIS EMPLOYMENT. PART II, COLUMN (D) APPROXIMATELY 54% OF JULIE A. KARNS' NONTAXABLE BENEFITS AMOUNT OF \$49,882 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) APPROXIMATELY 62% OF CYNTHIA NEWMAN'S NONTAXABLE BENEFITS AMOUNT OF \$40,733 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) APPROXIMATELY 56% OF JONATHAN MILLEN'S NONTAXABLE BENEFITS AMOUNT OF \$51,253 REPRESENTS TUITION REMISSION. PART II, COLUMN (D) NONTAXABLE BENEFITS, EXCLUSIVE OF THE ITEMS NOTED ABOVE, REPRESENT THE VALUE OF THE HEALTH CARE BENEFITS WHICH VARY BY INDIVIDUAL BENEFIT ELECTIONS.</p>

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047

2017

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
 ▶ **Attach to Form 990.**
 ▶ **Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
 Internal Revenue Service
 Name of the organization
 RIDER UNIVERSITY

Employer identification number
 21-0650678

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	6460652M3	04-04-2012	55,203,833	CAPITAL IMPROVEMENTS TO UNIVERSITY'S FACILITIES AND REFUNDING OF PRIOR BONDS		X		X		X
B	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	646066DG2	04-29-2014	200,975,862	ADVANCE REFUND PRIOR POOLED FINANCINGS		X		X	X	
C	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511		07-26-2016	20,805,115	CURRENT REFUND PRIOR POOLED FINANCINGS		X		X	X	
D	NJ EDUCATIONAL FACILITIES AUTHORITY	22-1829511	646066F54	12-20-2016	30,676,062	TO RENOVATE SPACE WITHIN THE SCIENCE AND TECHNOLOGY BUILDING		X		X	X	

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	18,680,000		41,111		122,013		10,352	
2	Amount of bonds legally defeased								
3	Total proceeds of issue	55,305,595		176,230		2,181,224		1,002,561	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	570,340							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	10,037,181							
11	Other spent proceeds	44,698,075		176,230		2,181,224		1,002,561	
12	Other unspent proceeds								
13	Year of substantial completion	2015							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X			X	X			X
15	Were the bonds issued as part of an advance refunding issue?	X		X			X		X
16	Has the final allocation of proceeds been made?	X		X		X			X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X		X	
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X		X	
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	1 300 %		59 600 %		59 600 %		0 %	
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 ▶	1 000 %		0 %		0 %		0 %	
6 Total of lines 4 and 5	2 300 %		59 600 %		59 600 %		0 %	
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		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		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		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X	X		X		X	
b Exception to rebate?	X			X	X			X
c No rebate due?	X			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		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?	X			X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		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 is not available under applicable regulations?	X		X		X		X	

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

Return Reference	Explanation
FORM 990, SCHEDULE K	<p>ENTITY 1 BOND A, PART I, BOND ISSUES (A) ISSUER NAME NJ EDUCATIONAL FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE CAPITAL IMPROVEMENTS TO UNIVERSITY'S FACILITIES AND REFUNDING OF PRIOR BONDS BOND B, PART I, BOND ISSUES (A) ISSUER NAME NJ EDUCATIONAL FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE ADVANCE REFUND PRIOR POOLED FINANCINGS BOND C, PART I, BOND ISSUES (A) ISSUER NAME NJ EDUCATIONAL FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE CURRENT REFUND PRIOR POOLED FINANCINGS BOND D, PART I, BOND ISSUES (A) ISSUER NAME NJ EDUCATIONAL FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE TO RENOVATE SPACE WITHIN THE SCIENCE AND TECHNOLOGY BUILDING BOND A, PART I(F) BONDS REFUNDED BY SERIES 2012A SERIES 2007C (ISSUED 6/21/07), SERIES 2004A (ISSUED 6/17/04), SERIES 2002A (ISSUED 04/03/02) BOND A, PART II, LINE 3 AMOUNT LISTED DIFFERS FROM THE ISSUE PRICE LISTED IN PART I(E) DUE TO INVESTMENT EARNINGS ACCRUED BOND A, PART III, LINE 7 AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6 THE ORGANIZATION HAS NOT UNDER TAKEN AN ANALYSIS OF THE PRIVATE SECURITY TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS REPORTED IN PART III, LINE 6, IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE BOND A, PART IV, LINE 2(B) THE PORTION OF THE SERIES 2012A BOND PROCEEDS USED FOR CURRENT REFUNDING MET THE 6-MONTH SPENDING EXCEPTION BOND A, PART IV, LINE 2(C) THE MOST RECENT 5TH YEAR REBATE REPORT WAS PREPARED BY HAWKINS DELAFIELD & WOOD LLP AND DATED JULY 27, 2015 BOND B, PART I(F) THE BONDS REFUND THE BORROWER'S HECIF SERIES 2004 A (ISSUED 04/14/2014) BOND B, PART II REFLECTS ONLY THE AMOUNTS RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS BOND B, PART II, LINE 1 AMOUNT SHOWN REPRESENTS THE BONDS RETIRED THAT ARE ALLOCABLE TO THE BORROWER'S PORTION OF DEBT SERVICE RESPONSIBILITY BOND B, PART III, LINE 7 ALTHOUGH THE PRIVATE USE PERCENTAGE WITH RESPECT TO THE BORROWER'S PORTION OF THE BONDS EXCEEDS 5%, THE BORROWER'S PORTION OF THE BONDS REPRESENTS LESS THAN 5% OF THE BONDS ACCORDINGLY, ANY PRIVATE PAYMENTS WITH RESPECT TO THE BORROWER'S PORTION OF THE BONDS SHOULD NOT EXCEED 5% OF THE BONDS BOND C, PART I(F) BONDS CURRENTLY REFUNDED HECIF SERIES 2006 A (ISSUED 10/26/2006) AND HECIF SERIES 2005 A (ISSUED 08/10/2005) BOND C, PART II REFLECTS ONLY THE AMOUNTS RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS BOND C, PART III, LINES 4 & 5 REFLECTS ONLY THE PRIVATE USE PERCENTAGE APPLICABLE TO THE PORTION OF THE BONDS AND THE HECIF SERIES 2004 A BONDS (WHICH WERE REFUNDED BY THE HECIF 2006 A BONDS) ALLOCABLE TO</p>

Return Reference	Explanation
FORM 990, SCHEDULE K	<p>O THE BORROWER ISSUED AFTER JANUARY 1, 2003 ALL OTHER BONDS ISSUED PRIOR JANUARY 1, 2003 HAVE BEEN EXCLUDED FROM PART III ON THIS SCHEDULE BOND C, PART III, LINE 7 ALTHOUGH THE PRIVATE USE PERCENTAGE WITH RESPECT TO THE BORROWER'S PORTION OF THE BONDS EXCEEDS 5%, THE BORROWER'S PORTION OF THE BONDS REPRESENTS LESS THAN 5% OF THE BONDS ACCORDINGLY, ANY PRIVATE PAYMENTS WITH RESPECT TO THE BORROWER'S PORTION OF THE BONDS SHOULD NOT EXCEED 5% OF THE BONDS BOND C, PART IV, LINES 2(B) & 2(C) BONDS HAVE MET THE 6-MONTH EXCEPTION TO RE BATE AND, THEREFORE, NO PAYMENT TO THE IRS WILL EVER BECOME DUE ON THE BONDS BOND D, PART II REFLECTS ONLY THE AMOUNT RECEIVED BY RIDER UNIVERSITY WITH RESPECT TO ITS PORTION OF THE POOLED BONDS BOND D, PART II, LINE 1 AMOUNT SHOWN REPRESENTS THE BONDS RETIRED THAT ARE ALLOCABLE TO THE BORROWER'S PORTION OF DEBT SERVICE RESPONSIBILITY BOND D, PART II, LINE 3 AMOUNT LISTED DIFFERS FROM THE ISSUE PRICE LISTED IN PART I(E) DUE TO INVESTMENT EARNINGS ACCRUED BOND D, PART III, LINE 7 AS PROVIDED IN TREASURY REGULATION SECTION 1 41 -4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6 THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS REPORTED IN PART III, LINE 6, IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE</p>

Return Reference	Explanation
ENTITY 2	BOND A, PART 1, BOND ISSUES (A) ISSUER NAME NJ EDUCATIONAL FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE CAPITAL IMPROVEMENTS TO UNIVERSITY'S FACILITIES BOND A, PART II, LINE 3 AMOUNT LISTED DIFFERS FROM THE ISSUE PRICE LISTED IN PART I(E) DUE TO INVESTMENT EARNINGS ACCRUED BOND A, PART III, LINE 7 AS PROVIDED IN TREASURY REGULATION SECTION 1 141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6 THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS REPORTED IN PART III, LINE 6, IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047

2017

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization RIDER UNIVERSITY

Employer identification number 21-0650678

Part I Bond Issues

Table with columns: (a) Issuer name, (b) Issuer EIN, (c) CUSIP #, (d) Date issued, (e) Issue price, (f) Description of purpose, (g) Defeased (Yes/No), (h) On behalf of issuer (Yes/No), (i) Pool financing (Yes/No). Row 1: NJ EDUCATIONAL FACILITIES AUTHORITY, 22-1829511, 646066Z94, 11-30-2017, 44,228,160, CAPITAL IMPROVEMENTS TO UNIVERSITY'S FACILITIES.

Part II Proceeds

Table with columns: A, B, C, D. Rows 1-13: Amount of bonds retired, Amount of bonds legally defeased, Total proceeds of issue (44,354,177), Gross proceeds in reserve funds, Capitalized interest from proceeds (162,653), Proceeds in refunding escrows, Issuance costs from proceeds (480,483), Credit enhancement from proceeds, Working capital expenditures from proceeds, Capital expenditures from proceeds, Other spent proceeds (83,540), Other unspent proceeds (43,627,501), Year of substantial completion. Rows 14-17: Questions about bond issuance and record keeping.

Part III Private Business Use

Table with columns: A, B, C, D. Rows 1-2: Questions about partnership/LLC ownership and lease arrangements for private business use.

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		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?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %							
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %							
6 Total of lines 4 and 5	0 %							
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		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							

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						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?		X						
c No rebate due?		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						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?	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 is not available under applicable regulations?	X							

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2017

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**

▶ **Attach to Form 990.**

▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
RIDER UNIVERSITY

Employer identification number
21-0650678

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	13	336,427	MEAN PRICE-GIFT DATE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
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 is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

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.

Return Reference	Explanation
PART I, COLUMN (B)	RIDER UNIVERSITY IS REPORTING THE NUMBER OF CONTRIBUTORS WHO MADE STOCK DONATIONS DURING THE FISCAL YEAR

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

2017

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service
Name of the organization
RIDER UNIVERSITY

Employer identification number

21-0650678

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	COLLEEN AND GARY SHAPIRO HAVE A FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BOARD OF TRUSTEES REVISED THE BY-LAWS OF THE UNIVERSITY EFFECTIVE JUNE 2018 IN WHICH A 5TH ADMINISTRATIVE OFFICER WAS ADDED

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE UNIVERSITY HAS A WRITTEN CONFLICT OF INTEREST POLICY, AND AN ANNUAL COMPLIANCE REVIEW PROCESS WHICH INCLUDES - SOLICIT FEEDBACK FROM DIVISION HEADS ON PROPOSED STAFF IN THEIR UNITS WHO SHOULD PARTICIPATE IN THE ANNUAL REPORTING AND REVIEW PROCESS ANY INDIVIDUAL WHO IS CONSIDERED TO HAVE SIGNIFICANT RESPONSIBILITY FOR INSTITUTIONAL OPERATIONS OR PURCHASING IS INCLUDED THE POLICY REQUIRES THAT PERSONS INVOLVED IN DECISION MAKING DISCLOSE FINANCIAL OR OTHER INTERESTS - EITHER CURRENT OR PROPOSED - THAT IMPAIR OR MAY APPEAR TO IMPAIR THEIR INDEPENDENT, UNBIASED JUDGMENT - DISTRIBUTE THE CONFLICT OF INTEREST POLICY AND QUESTIONNAIRE FOR DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST TO ALL INDIVIDUALS SO IDENTIFIED IN 2018, 116 INDIVIDUALS (OFFICERS, TRUSTEES, COACHES, AND ADMINISTRATORS) RECEIVED AND COMPLETED THE CONFLICT QUESTIONNAIRE - REVIEW OF ALL CONFLICT QUESTIONNAIRE RESPONSES BY THE UNIVERSITY BOARD OF TRUSTEES' HUMAN RESOURCES COMMITTEE, WHICH SERVES AS THE CONFLICT COMMITTEE UNDER THE UNIVERSITY'S BYLAWS THE HUMAN RESOURCES COMMITTEE REPORTS ITS FINDINGS TO THE BOARD OF TRUSTEES, WHICH IS RESPONSIBLE FOR ACTING ON THE COMMITTEE'S FINDINGS - IN PARTICULAR ON ANY CONFLICT THAT MIGHT BE IDENTIFIED BY POLICY, ANY PROPOSED BUSINESS RELATIONSHIP BETWEEN A TRUSTEE OR THEIR RELATED ENTITY MUST BE EVALUATED AND ACTED ON PRIOR TO ITS POTENTIAL IMPLEMENTATION NO SUCH RELATIONSHIP CURRENTLY EXISTS - ANY BOARD MEMBER WITH A CONFLICT WILL RECUSE HIMSELF/HERSELF FROM ANY VOTES REGARDING THE MATTER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE SENIOR COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES ENGAGES AN INDEPENDENT CONSULTING FIRM TO UNDERTAKE A REASONABLENESS REVIEW OF TOP MANAGEMENT COMPENSATION. TOP MANAGEMENT INCLUDES THE INSTITUTION'S PRESIDENT AND VICE PRESIDENTS. THE REASONABLENESS REVIEW INCLUDES CONSIDERATION OF COMPARABILITY DATA PREPARED BY THE CONSULTANTS WHICH IS PROVIDED TO ALL COMMITTEE MEMBERS AND TO ALL MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES. THE BENCHMARK DATA CONSIDERED INCLUDES BOTH SALARY AND TOTAL COMPENSATION INFORMATION. CONTEMPORANEOUS MINUTES ARE MAINTAINED FOR BOTH THE SENIOR COMPENSATION COMMITTEE OF THE BOARD AND FOR THE FULL BOARD OF TRUSTEES MEETINGS. THIS PROCESS WAS LAST UNDERTAKEN IN OCTOBER 2018. THE UNIVERSITY CONSISTENTLY UTILIZES HIGHER EDUCATION BENCHMARKING DATA TO ASSESS THE REASONABLENESS OF KEY EMPLOYEES' COMPENSATION. FACULTY COMPENSATION IS GOVERNED BY A COLLECTIVE BARGAINING AGREEMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF PENSION 3,048,726 CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST -25,230 WRITE-OFF OF CONTRIBUTION RECEIVABLE -101,893 POSTRETIREMENT ACTUARIAL ADJUSTMENT 3,089,507

990 Schedule O, Supplemental Information

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