

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) 2006

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 2020

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

A Check box if address changed

Name of organization (Check box if name changed and see instructions)

D Employer identification number (Employees' trust, see instructions)

B Exempt under section

Print or Type

STEVENS INSTITUTE OF TECHNOLOGY

- X 501(C) 3
408(e) 220(e)
408A 530(a)
529(a)

Number, street, and room or suite no. If a P O box, see instructions

22-1487354

ONE CASTLE POINT ON HUDSON

E Unrelated business activity code (See instructions)

City or town, state or province, country, and ZIP or foreign postal code

520000 710000

HOBOKEN, NJ 07030

C Book value of all assets at end of year

F Group exemption number (See instructions)

845,203,088.

G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses 2 Describe the only (or first) unrelated trade or business here ATHLETIC FACILITY PUBLIC USE

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of LOUIS MAYER, ED. D. Telephone number 201-216-8761

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

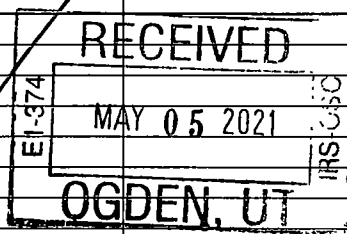


Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, etc.

For Paperwork Reduction Act Notice, see instructions. Form 990-T (2019)

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4

15

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32-39 for Unrelated Business Taxable Income.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40-45 for Tax Computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46a-56 for Tax and Payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, and Yes/No. Includes lines 57-59 for Statements Regarding Certain Activities.

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 taxpayer) is based on all information of which preparer has any knowledge

Sign Here: Signature of officer (Phillip Groff), Date (4/15/21), Title (CFO, VP FIN, TREASUR)

Paid Preparer Use Only: Print/Type preparer's name (PHILLIP GROFF), Preparer's signature, Date (4/1/2021), Firm's name (KPMG LLP), Firm's EIN (13-5565207), Firm's address (345 PARK AVENUE, NEW YORK, NY 10154-0102)

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **ESTIMATED UNRELATED SALES**

<b>1</b> Inventory at beginning of year	<b>1</b>		<b>6</b> Inventory at end of year	<b>6</b>	
<b>2</b> Purchases	<b>2</b>		<b>7</b> Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2.	<b>7</b>	
<b>3</b> Cost of labor	<b>3</b>		<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	<b>Yes</b>	<b>No</b>
<b>4a</b> Additional section 263A costs (attach schedule)	<b>4a</b>				
<b>b</b> Other costs (attach schedule)	<b>4b</b>				
<b>5</b> Total. Add lines 1 through 4b	<b>5</b>				X

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

<b>1</b> Description of property		
(1)		
(2)		
(3)		
(4)		
<b>2</b> Rent received or accrued		
<b>(a)</b> From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	<b>(b) Total deductions</b> Enter here and on page 1, Part I, line 6, column (B)
<b>(c) Total income</b> Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).		

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

<b>1</b> Description of debt-financed property		<b>2</b> Gross income from or allocable to debt-financed property	<b>3.</b> Deductions directly connected with or allocable to debt-financed property	
			<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
<b>4</b> Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	<b>5</b> Average adjusted basis of or allocable to debt-financed property (attach schedule)	<b>6.</b> Column 4 divided by column 5	<b>7</b> Gross income reportable (column 2 x column 6)	<b>8</b> Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b>			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
<b>Total dividends-received deductions</b> included in column 8				

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table with 6 columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income (loss), 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5.

Nonexempt Controlled Organizations

Table with 5 columns: 7 Taxable Income, 8 Net unrelated income (loss), 9 Total of specified payments made, 10 Part of column 9 that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column 10.

Totals section for Schedule F with instructions for adding columns 5 and 10, and 6 and 11.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

Table with 5 columns: 1 Description of income, 2 Amount of income, 3 Deductions directly connected, 4 Set-asides, 5 Total deductions and set-asides.

Totals section for Schedule G with instructions for entering data on page 1, Part I.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 columns: 1 Description of exploited activity, 2 Gross unrelated business income, 3 Expenses directly connected, 4 Net income (loss), 5 Gross income from activity, 6 Expenses attributable, 7 Excess exempt expenses.

Totals section for Schedule I with instructions for entering data on page 1, Part I and Part II.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs.

Totals section for Schedule J with instruction to carry to Part II, line (5).

**Part II** Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2. Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> . . . . . ▶						
<b>Totals, Part II (lines 1-5)</b> . . . . . ▶	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26

**Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)**

1 Name	2 Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total</b> Enter here and on page 1, Part II, line 14 . . . . . ▶			

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income from an  
Unrelated Trade or Business**

OMB No 1545-0047

**2019**

For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 2020

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for  
501(c)(3) Organizations Only

Name of the organization

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

Unrelated Business Activity Code (see instructions) ▶ 520000

Describe the unrelated trade or business ▶ PARTNERSHIP INVESTMENT

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance ▶	1 c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit Subtract line 2 from line 1c	3		
4 a	Capital gain net income (attach Schedule D)	4 a	3,361.	3,361.
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4 b	-5,749.	-5,749.
c	Capital loss deduction for trusts	4 c		
5	Income (loss) from a partnership or an S corporation (attach statement) <u>ATCH 3</u>	5	-31,552.	-31,552.
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions, attach schedule)	12		
13	<b>Total.</b> Combine lines 3 through 12	13	-33,940.	-33,940.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions ) (Deductions must be directly connected with the unrelated business income )

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	250.
20	Depreciation (attach Form 4562)	20	
21	Less depreciation claimed on Schedule A and elsewhere on return	21 a	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule) <u>ATCH 4</u>	27	2,532.
28	<b>Total deductions</b> Add lines 14 through 27	28	2,782.
29	Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	29	-36,722.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	
31	<b>Unrelated business taxable income</b> Subtract line 30 from line 29	31	-36,722.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2019

ATTACHMENT 1

PART I - LINE 12 - OTHER INCOME  
ATHLETICS - OPEN/LESSONS - PUBLIC

50,808.

PART I - LINE 12 - OTHER INCOME

50,808.

ATTACHMENT 2

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES	1,688.
OTHER DIRECT EXPENSES	18,168.

PART II - LINE 27 - OTHER DEDUCTIONS	<u>19,856.</u>
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## PARTNERSHIP INVESTMENT

SCHEDULE M - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS V LP	-263.
ENDOWMENT PRIVATE EQUITY PARTNERS IV, LP	-7.
KKR NORTH AMERICA FUND XI (CAGE), LP	-4,107.
KKR NORTH AMERICA FUND XI (INDIGO) LP	-4,831.
KKR NORTH AMERICA FUND XI	-577.
KKR NORTH AMERICA FUND XI (PLATINUM), LP	-10,340.
KKR NORTH AMERICA FUND XI (POTAMOI), LP	192.
KKR NORTH AMERICA FUND XI (SAGE), LP	-6.
KKR NORTH AMERICA FUND XI (WAVE), LP	-3,822.
KKR NORTH AMERICAN FUND XI (TRAIN), LP	-6,379.
PLAINS ALL AMERICAN PIPELINE, LP	-1,412.
INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS	<u>-31,552.</u>

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

2,532.

PART II - LINE 27 - OTHER DEDUCTIONS

2,532.

Stevens Institute of Technology  
 EIN: 22-1487354  
 FYE: 6/30/2020  
 Net Operating Loss Carryover  
 Form 990-T

Pre-2018 Net Operating Losses

Tax Year	NOL Generated	NOL Utilized In		NOL Carryover
		PY	CY	
6/30/2009	(47,939)	38,501	-	(9,438)
6/30/2010	(41,688)	-	-	(41,688)
6/30/2011	(19,530)	-	-	(19,530)
6/30/2012	(29,288)	-	-	(29,288)
6/30/2013	(10,310)	-	-	(10,310)
6/30/2014	(17,911)	-	-	(17,911)
6/30/2015	(4,478)	-	-	(4,478)
6/30/2016	(9,612)	-	-	(9,612)
6/30/2017	(51,026)	-	-	(51,026)
6/30/2018	(36,672)	-	-	(36,672)
Total	(268,454)	38,501	-	(229,953)

Partnership Investment - NAICS Code: 520000

Tax Year	NOL Generated	NOL Utilized In		NOL Carryover
		PY	CY	
6/30/2019	(167,196)	-	-	(167,196)
6/30/2020	(36,722)	-	-	(36,722)
Total	(203,918)	-	-	(203,918)

Stevens Institute of Technology  
EIN: 22-1487354  
FYE: 6/30/2020  
Capital Loss Carryover Form 990-T

Tax Year	NOL Generated	NOL Utilized	NOL Expired	NOL Carryover
6/30/2015	(30,069)	3,494	(26,575)	-
6/30/2016	-	-	-	-
6/30/2017	(383)	-	-	(383)
6/30/2018	(29,727)	-	-	(29,727)
6/30/2019	-	-	-	-
6/30/2020	-	-	-	-
Total	(60,179)	3,494	(26,575)	(30,110)

**SCHEDULE D  
(Form 1120)**

**Capital Gains and Losses**

OMB No 1545-0123

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T

▶ Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information

**2019**

Name

STEVENS INSTITUTE OF TECHNOLOGY

Employer identification number

22-1487354

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ▶  Yes  No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss

**Part I Short-Term Capital Gains and Losses (See instructions.)**

See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . . . . .				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .				
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 . . . . .				<b>4</b>
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 . . . . .				<b>5</b>
<b>6</b> Unused capital loss carryover (attach computation) . . . . .				<b>6</b> ( )
<b>7</b> Net short-term capital gain or (loss) Combine lines 1a through 6 in column h . . . . .				<b>7</b>

**Part II Long-Term Capital Gains and Losses (See instructions)**

See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . . . .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .	3,361.			3,361.
<b>11</b> Enter gain from Form 4797, line 7 or 9 . . . . .				<b>11</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 . . . . .				<b>12</b>
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 . . . . .				<b>13</b>
<b>14</b> Capital gain distributions (see instructions) . . . . .				<b>14</b>
<b>15</b> Net long-term capital gain or (loss) Combine lines 8a through 14 in column h . . . . .				<b>15</b> 3,361.

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) . . . . .				<b>16</b> 3,361.
<b>17</b> Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) . . . . .				<b>17</b> 3,361.
<b>18</b> Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns . . . . .				<b>18</b> 3,361.

Note. If losses exceed gains, see *Capital Losses* in the instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2019

JSA  
9E1801 1 000

1159JW 2231 1/26/2021 4:15:29 PM V 19-7.7F

3239596

PAGE 95

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

STEVENS INSTITUTE OF TECHNOLOGY

22-1487354

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

**Part II** Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions) For short-term transactions, see page 1

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed of (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	KKR NORTH AMERICA FUND XI (INDIGO)			3,361				3,361
<p><b>2 Totals</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶</p>								
				3,361				3,361

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis See Column (g) in the separate instructions for how to figure the amount of the adjustment