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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Termination

☐ Amended return

☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Doing Business As

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

Room/suite

800 8TH STREET NW

City or town, state or country, and ZIP + 4

WASHINGTON, DC 20001

D Employer identification number

52-1844823

E Telephone number

(202) 449-6520

G Gross receipts \$ 40,200,449

F Name and address of Principal Officer

Aryeh Furst

800 8TH STREET NW

WASHINGTON, DC 20001

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

☐ Yes

☒ No

H(b) Are all affiliates included?

☐ Yes

☐ No

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

H(c) Group Exemption Number

I Tax-exempt status

☒ 501(c) ( 3 )

☐ (insert no )

☐ 4947(a)(1) or

☐ 527

J Web site:

☒ www.hillel.org

K Type of organization

☒ Corporation

☐ trust

☐ association

☒ other

L Year of Formation

1984

M State of legal domicile

DC

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities		
		THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO ENHANCE JEWISH LIFE FOR COLLEGE AND UNIVERSITY COMMUNITIES IN NORTH AMERICA AND THROUGHOUT THE WORLD		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	84
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	84
	5	Total number of employees (Part V, line 2a)	5	1,783
	6	Total number of volunteers (estimate if necessary)	6	155
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
			34,242,124	28,478,728
	9	Program service revenue (Part VIII, line 2g)	985,269	598,383
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,381,202	-66,361
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	173,559	164,922
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	36,782,154	29,175,672
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,147,795	8,301,573
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,014,401	9,856,745
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 <u>2,912,723</u> )		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	15,398,557	10,758,836
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	32,560,753	28,917,154
	19	Revenue less expenses Subtract line 18 from line 12	4,221,401	258,518
Net Assets or Fund Balances			Beginning of Year	End of Year
	20	Total assets (Part X, line 16)	47,641,845	42,763,139
	21	Total liabilities (Part X, line 26)	13,636,534	10,909,897
	22	Net assets or fund balances Subtract line 21 from line 20	34,005,311	31,853,242

Part II Signature Block

Please Sign Here

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

\*\*\*\*\*

Signature of officer

2010-05-14

Date

Aryeh Furst CFO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Rosemarie C Warren CPA

Date

Check if self-employed ☐

Preparer's PTIN (See Gen Inst )

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

Goodman & Company LLP

111 Rockville Pike 6th Floor

Rockville, MD 20850

EIN

Phone no (240) 403-3700

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

☒ Yes

☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2008)



Part IIIS

Statement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization’s mission  
Hillel's mission is to enrich the lives of Jewish undergraduate and graduate students so that they may enrich the Jewish people around the world

2

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

YesNo

  
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? . . . . .

YesNo

  
If “Yes,” describe these changes on Schedule O

4

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

4a

(Code ) (Expenses \$ 23,088,513 including grants of \$ 8,301,573 ) (Revenue \$ 23,088,513 )  
PROVIDE DIRECT FUNDING AND SUPPORTING SERVICES TO LOCAL HILLELS AND STUDENTS AT COLLEGES AND UNIVERSITIES THROUGHOUT NORTH AMERICA AND THE WORLD

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e


















Total program service expenses \$ 23,088,513 Must equal Part IX, Line 25, column (B).

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Part IV




Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	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	3	No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any accounts where 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 	6	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	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 	15	Yes
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 	16	No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 	17	Yes
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18	Yes
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21	Yes
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	22	No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	No



Part IV

Checklist of Required Schedules (Continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV . . . . .	28a	No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV . . . . .	28b	No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . . . . .	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . . 	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . . 	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . .	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .	34	No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	35	No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	36	No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI . . . . .	37	No



Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a116		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a1,783		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . <b>Note:</b> <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ? . . . . .	5c		
6a	Did the organization solicit any contributions that were not tax deductible? . . . . .	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? . . . . .	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . .	7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h		No
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders . . . . .	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . .	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b		



Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

1a

Enter the number of voting members of the governing body

1a

84

b

Enter the number of voting members that are independent

1b

84

2

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

2

No

3

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

3

No

4

Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

4

No

5

Did the organization become aware during the year of a material diversion of the organization's assets?

5

No

6

Does the organization have members or stockholders?

6

No

7a

Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

7a

No

b

Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

7b

No

8

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a

the governing body?

8a

Yes

b

each committee with authority to act on behalf of the governing body?

8b

Yes

9a

Does the organization have local chapters, branches, or affiliates?

9a

Yes

b

If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

9b

Yes

10

Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990

10

No

11

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

11

No

Section B. Policies

12a

Does the organization have a written conflict of interest policy? If "No", go to line 13

12a

Yes

b

Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b

Yes

c

Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

12c

Yes

13

Does the organization have a written whistleblower policy?

13

Yes

14

Does the organization have a written document retention and destruction policy?

14

Yes

15

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision

a

The organization's CEO, Executive Director, or top management official?

15a

Yes

b

Other officers or key employees of the organization?

15b

No

Describe the process in Schedule O

16a

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16a

No

b

If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

16b

Section C. Disclosure

17

List the States with which a copy of this Form 990 is required to be filed

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

18

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ own website ☒ another's website ☒ upon request

19

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.

20

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  
The Foundation  
800 8th Street NW  
WASHINGTON, DC 20001  
(202) 449-6520

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

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Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . 1a		28,478,728			
	b	Membership dues . . . . . 1b					
	c	Fundraising events . . . . . 1c					
	d	Related organizations . . . . 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 28,478,728 1f					
	g	Noncash contributions included in lines 1a-1f \$ 1,599,616					
	h	Total (Add lines 1a-1f) . . . . . 28,478,728					
	Program Service Revenue	2a	CONFERENCE REGISTRATIO				
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f . . . . . \$ 598,383					
Other Revenue		3	Investment income (including dividends, interest other similar amounts) . . . . .		532,609		
	4	Income from investment of tax-exempt bond proceeds . . . . .					
	5	Royalties . . . . .					
	6a	Gross Rents	(i) Real 157,978	(ii) Personal	157,978		157,978
	b	Less rental expenses					
	c	Rental income or (loss)	157,978				
	d	Net rental income or (loss) . . . . . 157,978					
	7a	Gross amount from sales of assets other than inventory	(i) Securities 10,425,807	(ii) Other	-598,970	-598,970	
	b	Less cost or other basis and sales expenses	11,024,777				
	c	Gain or (loss)	-598,970				
	d	Net gain or (loss) . . . . . -598,970					
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 . . . . . a					
	b	Less direct expenses . . . . b					
	c	Net income or (loss) from fundraising events . . . .					
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 . . . . . 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	MISCELLANEOUS INCOME	900,099	6,944	6,944		
b							
c							
d	All other revenue _____						
e	Total. Add lines 11a-11d . . . . . \$ 6,944						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . 29,175,672			6,357	0	690,587	



Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).					
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	8,301,573	8,301,573		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	944,421		944,421	
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	7,126,033	3,985,453		1,541,291
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	467,707	238,000	153,074	76,633
9	Other employee benefits . . . . .	694,690	355,498	197,914	141,278
10	Payroll taxes . . . . .	623,894	305,391	204,214	114,289
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .				
c	Accounting . . . . .				
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .				
g	Other . . . . .	1,331,747	748,851	523,105	59,791
12	Advertising and promotion . . . . .	55,407	34,479		20,928
13	Office expenses . . . . .	49,697	13,137	28,646	7,914
14	Information technology . . . . .	177,284	78,402	71,306	27,576
15	Royalties . . . . .				
16	Occupancy . . . . .	684,049	629,222		54,827
17	Travel . . . . .	910,396	808,177	29,535	72,684
18	Payments of travel or entertainment expenses for any Federal, state or local public officials . . . . .				
19	Conferences, conventions and meetings . . . . .	4,238,247	4,201,211	28,857	8,179
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	286,603	265,462	21,141	
23	Insurance . . . . .	88,728	-9,420	98,148	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a	POSTAGE/SHIPPING/DELIVE	1,070,558	10,300	13,280	1,046,978
b	program expense	844,514	844,745	-731	500
c	DEBT SERVICE	406,211	406,211		
d	MISCELLANEOUS	151,973	72,851	32,722	46,400
e	PRINTING	132,014	42,003	12,574	77,437
f	All other expenses	331,408	1,756,967	-1,041,577	-383,982
25	Total functional expenses. Add lines 1 through 24f	28,917,154	23,088,513	2,915,918	2,912,723
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				



**Part X**    **Balance Sheet**

		(A)		(B)		
		Beginning of year		End of year		
Assets	<b>1</b> Cash—non-interest-bearing . . . . .		<b>1</b>			
	<b>2</b> Savings and temporary cash investments . . . . .	6,420,513	<b>2</b>	5,858,810		
	<b>3</b> Pledges and grants receivable, net . . . . .	5,564,868	<b>3</b>	2,786,026		
	<b>4</b> Accounts receivable, net . . . . .	242,232	<b>4</b>	316,113		
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .		<b>5</b>			
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .		<b>6</b>			
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>			
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	221,482	<b>9</b>	132,875		
	<b>10a</b> Land, buildings, and equipment cost basis	<table><tr><td><b>10a</b></td><td>16,419,130</td></tr></table>	<b>10a</b>	16,419,130		
	<b>10a</b>	16,419,130				
	<b>b</b> Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .	<table><tr><td><b>10b</b></td><td>5,128,458</td></tr></table>	<b>10b</b>	5,128,458	11,472,022	<b>10c</b> 11,290,672
	<b>10b</b>	5,128,458				
	<b>11</b> Investments—publicly traded securities . . . . .	2,413,456	<b>11</b>	1,277,036		
	<b>12</b> Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i> . . . . .	20,805,884	<b>12</b>	20,641,337		
	<b>13</b> Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i> . . . . .		<b>13</b>			
<b>14</b> Intangible assets . . . . .		<b>14</b>				
<b>15</b> Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i> . . . . .	501,388	<b>15</b>	460,270			
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	47,641,845	<b>16</b>	42,763,139			
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .	3,619,561	<b>17</b>	2,498,709		
	<b>18</b> Grants payable . . . . .	104,400	<b>18</b>	59,947		
	<b>19</b> Deferred revenue . . . . .	1,590,473	<b>19</b>	98,456		
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>			
	<b>21</b> Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .		<b>21</b>			
	<b>22</b> Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .		<b>22</b>			
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	8,100,000	<b>23</b>	7,800,000		
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>			
	<b>25</b> Other liabilities <i>Complete Part X of Schedule D</i> . . . . .	222,100	<b>25</b>	452,785		
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	13,636,534	<b>26</b>	10,909,897		
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b> Unrestricted net assets . . . . .	6,867,276	<b>27</b>	5,381,330		
	<b>28</b> Temporarily restricted net assets . . . . .	24,958,434	<b>28</b>	23,142,723		
	<b>29</b> Permanently restricted net assets . . . . .	2,179,601	<b>29</b>	3,329,189		
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>					
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>			
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>			
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>			
	<b>33</b> Total net assets or fund balances . . . . .	34,005,311	<b>33</b>	31,853,242		
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	47,641,845	<b>34</b>	42,763,139		

**Part XI**    **Financial Statements and Reporting**

			Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other			
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	<b>2a</b>		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	<b>2b</b>	Yes	
<b>c</b>	If "Yes" to lines 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? . . . . .	<b>2c</b>	Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	<b>3a</b>		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .	<b>3b</b>		



SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.  
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Employer identification number 52-1844823
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Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization )

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>
2	<input type="checkbox"/>	A school described in <b>Section 170(b)(1)(A)(ii).</b> (Attach Schedule E )
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in <b>Section 170(b)(1)(A)(iii).</b> (Attach Schedule H )
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>Section 170(b)(1)(A)(iv).</b> (Complete Part II )
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in <b>Section 170(b)(1)(A)(v).</b>
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
8	<input type="checkbox"/>	A community trust described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
9	<input type="checkbox"/>	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 <b>Section 509(a)(2).</b> (Complete Part III )
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See <b>Section 509(a)(4).</b> (See instructions )
11	<input type="checkbox"/>	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 <b>Section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h a <input type="checkbox"/> Type I      b <input type="checkbox"/> Type II      c <input type="checkbox"/> Type III - Functionally Integrated      d <input type="checkbox"/> Type III - Other
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									



Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	21,741,182	23,915,428	25,915,610	34,242,124	28,478,728	134,293,072
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add line 1-3	21,741,182	23,915,428	25,915,610	34,242,124	28,478,728	134,293,072
<b>5</b> The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						5,982,316
<b>6 Public Support</b> subtract line 5 from line 4						128,310,756

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4	21,741,182	1,006,356	25,915,610	34,242,124	28,478,728	134,293,072
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	518,181	1,006,356	1,389,698	1,539,513	91,617	4,545,365
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )	20,623	44,684	15,256	15,248	6,944	102,755
<b>11 Total Support</b> (Add lines 7 through 10)						138,941,192
<b>12</b> Gross receipts from related activities, etc (See instructions )					<b>12</b>	4,638,166
<b>13 First Five Years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						<input type="checkbox"/>

Computation of Public Support Percentage

<b>14</b> Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	<b>92.350 %</b>
<b>15</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	<b>15</b>	<b>84.150 %</b>
<b>16a 33 1/3% Test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
<b>b 33 1/3% Test - 2007.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
<b>17a 10% Facts and Circumstances Test - 2008.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
<b>b 10% Facts and Circumstances Test - 2007.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
<b>18 Private Foundation.</b> If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input type="checkbox"/>	



Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage		
15Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage		
17Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	
19a33 1/3% Tests - 2008. 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		
b33 1/3% Tests - 2007. 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		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		



Part IV

**Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test



Additional Data

Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099MISC)	(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				
BEATRICE MANDEL , CHAIR	2 00	X		X				0	0	0	
Amy A B BRESSMAN , VICE-CHAIR	2 00	X		X				0	0	0	
DAVID M COHEN , VICE-CHAIR	2 00	X		X				0	0	0	
Andrew Coonin , VICE-CHAIR	2 00	X		X				0	0	0	
StePHEN M GREENBERG , VICE-CHAIR	2 00	X		X				0	0	0	
Carol SMOKLER , VICE-CHAIR	2 00	X		X				0	0	0	
Diane WOHL , VICE-CHAIR	2 00	X		X				0	0	0	
James H SHANE , Treasurer	2 00	X		X				0	0	0	
Bruce SHOLK , Secretary	2 00	X		X				0	0	0	
Edgar M Bronfman , Ex-Officio	2 00	X		X				0	0	0	
NEIL M MOSS , PAST CHAIR	2 00	X						0	0	0	
CHUCK NEWMAN , PAST CHAIR	2 00	X						0	0	0	
MICHAEL B RUKIN , PAST CHAIR	2 00	X						0	0	0	
Randall Kaplan , Past CHAIR	2 00	X						0	0	0	
LISA EISEN , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
EDITH B EVERETT , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
LaURIE BLITZER , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
LYNNE B HARRISON , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Mort Lowenthal , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Karen Moss , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
ThomAS A BLUMBERG , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Philip Cohen , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
SaNDRA CAHN , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
PaUL J CHERNER , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
MarceLO CYNOVICH , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
William Heller , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Lee M Hendler , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Joseph KOHANE , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Barry Levin , EXECUTIVE COMMITTEE	2 00	X						0	0	0	
Dana Raucher , EXECUTIVE COMMITTEE	2 00	X						0	0	0	



Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Andrew SKLOVER , EXECUTIVE COMMITTEE	2 00	X						0	0	0
Carol B Wise , EXECUTIVE COMMITTEE	2 00	X						0	0	0
Joseph Ament , MEMBER	2 00	X						0	0	0
Sandy Baklor , MEMBER	2 00	X						0	0	0
Michelle Blumenberg , MEMBER	2 00	X						0	0	0
Gil Bonwitt , MEMBER	2 00	X						0	0	0
Andrew S Borans , MEMBER	2 00	X						0	0	0
AMy Born , MEMBER	2 00	X						0	0	0
Phillip Brodsky , MEMBER	2 00	X						0	0	0
Edward EA Bromberg , MEMBER	2 00	X						0	0	0
Marshall Brooks , MEMBER	2 00	X						0	0	0
Daniel Burack , MEMBER	2 00	X						0	0	0
Joseph Ciechanover , MEMBER	2 00	X						0	0	0
Bruce Coane , MEMBER	2 00	X						0	0	0
Lee Dranikoff , MEMBER	2 00	X						0	0	0
Nancy Duber , MEMBER	2 00	X						0	0	0
David Einhorn , MEMBER	2 00	X						0	0	0
Michael Epstein , MEMBER	2 00	X						0	0	0
Chaiki Feldman , MEMBER	2 00	X						0	0	0
Daniel Ferman , MEMBER	2 00	X						0	0	0
David Gedzelman , MEMBER	2 00	X						0	0	0
Cassandra Gottlieb , MEMBER	2 00	X						0	0	0
Gary Hirschberg , MEMBER	2 00	X						0	0	0
Sarah Batya Joselow , MEMBER	2 00	X						0	0	0
David Karsenti , MEMBER	2 00	X						0	0	0
Michael Kassen , MEMBER	2 00	X						0	0	0
Adam Kornetsky , MEMBER	2 00	X						0	0	0
Leiba Krantzberg , MEMBER	2 00	X						0	0	0
Mark LAINER , MEMBER	2 00	X						0	0	0
Blossom Leibowitz , MEMBER	2 00	X						0	0	0



Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Searle Mitnick , MEMBER	2 00	X						0	0	0
Edward Marlowe , MEMBER	2 00	X						0	0	0
NORMAN LIPOFF , MEMBER	2 00	X						0	0	0
Stephen OpPENHEIMER , MEMBER	2 00	X						0	0	0
FRED MARGULIES , MEMBER	2 00	X						0	0	0
Sidney Pertnoy , MEMBER	2 00	X						0	0	0
Brette Peyton , MEMBER	2 00	X						0	0	0
Stanley Plotnick , MEMBER	2 00	X						0	0	0
JULIE WISE ORECK , MEMBER	2 00	X						0	0	0
JOSEPH PAPERMAN , MEMBER	2 00	X						0	0	0
Rayna Schaff , MEMBER	2 00	X						0	0	0
KEITH ROSENBLOOM , MEMBER	2 00	X						0	0	0
Morton OWEN SCHAPIRO , MEMBER	2 00	X						0	0	0
LENORE RUBEN , MEMBER	2 00	X						0	0	0
D Graham Sheridan JR , MEMBER	2 00	X						0	0	0
Jenna Silverman , MEMBER	2 00	X						0	0	0
Sharon Margolin Ungerler , MEMBER	2 00	X						0	0	0
Eric Weiser , MEMBER	2 00	X						0	0	0
ROBERT SHLACHTER , MEMBER	2 00	X						0	0	0
David Yaffe , MEMBER	2 00	X						0	0	0
Judy Yudof , MEMBER	2 00	X						0	0	0
LOUIS HOWARD YUSTER , MEMBER	2 00	X						0	0	0
LOIS ZOLLER , MEMBER	2 00	X						0	0	0
WAYNE FIRESTONE , PRESIDENT	35 00			X				339,882	0	41,904
Aryeh Furst , CFO	35 00				X			343,596	0	36,245
Scott Brown , Executive Vice President	35 00				X			216,010	0	33,712
Tim Cohen , Senior Vice President	35 00					X		224,223	0	32,302
Robert M Goldberg , VP External Affairs	35 00					X		192,371	0	29,426
Eran Gasko , VP Institutional Advance	35 00					X		182,479	0	34,021
Jacob Schreiber , Executive Campus Liaison	35 00					X		156,336	0	28,930



Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joy Prevor , VP Development	35 00					X		205,304	0	15,562
Ralph Grunewald , Former Executive VP	35 00						X	115,292	0	7,840



SCHEDULE D

(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008

Open to Public Inspection

**Name of the organization**  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

**Employer identification number**  
  
52-1844823

**Part I**

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

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

**Part II**

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

**1**

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

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area☐ Protection of natural habitat☐ Preservation of certified historic structure☐ Preservation of open space

**2**

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

	Held at the End of the Year
<b>a</b>	

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

**3**

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

**4**

Number of states where property subject to conservation easement is located ▶

**5**

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

☐ **Yes**☐ **No**

**6**

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

**7**

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

**8**

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

☐ **Yes**☐ **No**

**9**

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

**Part III**

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

**1a**

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

**b**

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

**(i)**

Revenues included in Form 990, Part VIII, line 1

▶ \$

**(ii)**

Assets included in Form 990, Part X

▶ \$

**2**

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

**a**

Revenues included in Form 990, Part VIII, line 1

▶ \$

**b**

Assets included in Form 990, Part X

▶ \$

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

Cat No 52283D

Schedule D (Form 990) 2008



Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes ☐ No

Part IV

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

1a

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

☐ Yes ☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes ☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance . . . . .	8,190,456				
b Contributions . . . . .	2,263,644				
c Investment earnings or losses . . . . .	-1,486,184				
d Grants or scholarships . . . . .	0				
e Other expenditures for facilities and programs . . . . .	1,279,430				
f Administrative expenses . . . . .	0				
g End of year balance . . . . .	7,688,486				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 56 550 %

b

Permanent endowment ▶ 43 300 %

c

Term endowment ▶ 0 150 %

3a

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

(i)

unrelated organizations . . . . .

3a(i)

☐ Yes ☐ No

(ii)

related organizations . . . . .

3a(ii)

☐ Yes ☐ No

b

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

3b

☐ Yes ☐ No

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .		2,908,629		2,908,629
b Buildings . . . . .		11,712,448	3,789,521	7,922,927
c Leasehold improvements . . . . .				
d Equipment . . . . .				
e Other . . . . .		1,798,053	1,338,937	459,116
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				11,290,672



**Part VII** Investments—Other Securities. 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
Financial derivatives and other financial products		
Closely-held equity interests		
Other CERTIFICATES OF DEPOSIT	8,943,345	F
Other STATE OF ISRAEL BONDS	182,345	F
Other VANGUARD EQUITY BONDS	1,220,746	F
Other HEDGE FUNDS	5,579,944	F
Other MUTUAL FUNDS	4,714,957	F
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12 )	20,641,337	

**Part VIII** Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13 )		

**Part IX** Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

**Part X** Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
FAIR VALUE OF INTEREST SWAP	452,785
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25 )	452,785

In Part XIV, 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



Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	29,175,672
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	28,917,154
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	258,518
4	Net unrealized gains (losses) on investments	4	-2,153,654
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-256,933
9	Total adjustments (net) Add lines 4 - 8	9	-2,410,587
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,152,069

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	29,175,672
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	29,175,672
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	29,175,672

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	31,327,741
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	Losses reported on Form 990, Part IX, line 25 . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	2,410,587
e	Add lines 2a through 2d . . . . .	2e	2,410,587
3	Subtract line 2e from line 1 . . . . .	3	28,917,154
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	28,917,154

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		Unrealized loss on interest rate swap -230685 unrealized LOSS on split interest agreements -26248
Part XIII, Line 2d - Other Adjustments		UNREALIZED LOSS ON INTEREST RATE SWAP 230685 Unrealized LOSS on split interest agreements 26248 UNREALIZED LOSS ON INVESTMENTS 2153654



## 2008

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

**Employer identification number**

52-1844823

**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 the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance . . . . . ☒ **Yes** ☐ **No**

**2 For grant makers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

**3** Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed )

(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 in region
South America		2	Program services	Jewish Education	128,827
Russia and the newly independent states		0	Program services	Jewish Education	63,700
Middle East		2	Program Service	Jewish Education	324,811
Totals . . . . . ▶		4			517,338



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. Check this box if no one recipient received more than \$5,000 . . . . . ☐

Use Schedule F-1 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 of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Middle East	Program Grant	375,196	Wire & Checks			fmv
			South America	Program Grant	150,000	Wire			fmv
			South America	Program Grant	40,000	Wire			fmv
			South America	Program Grant	49,167	Wire			fmv
			Russia and the Newly Independent States	Program Grant	21,000	Wire			fmv
			Russia and the Newly Independent States	Program Grant	15,000	Wire			fmv
			North America	Program Grant	28,220	Checks			fmv
			North America	Program Grant	22,576	Checks			fmv
			North America	Program Grant	40,520	Checks			fmv
			North America	Program Grant	27,576	Checks			fmv







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

**Schedule F (Form 990) 2008**



Software ID:  
Software Version:  
EIN: 52-1844823  
Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(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)
		Middle East	Program Grant	375,196	Wire & Checks			fmv
		South America	Program Grant	150,000	Wire			fmv
		South America	Program Grant	40,000	Wire			fmv
		South America	Program Grant	49,167	Wire			fmv
		Russia and the Newly Independent States	Program Grant	21,000	Wire			fmv
		Russia and the Newly Independent States	Program Grant	15,000	Wire			fmv
		North America	Program Grant	28,220	Checks			fmv
		North America	Program Grant	22,576	Checks			fmv
		North America	Program Grant	40,520	Checks			fmv
		North America	Program Grant	27,576	Checks			fmv



SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

▶ **Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number  
52-1844823

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

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

a ☒ Mail solicitations

e ☒ Solicitation of non-government grants

b ☒ Email solicitations

f ☒ Solicitation of government grants

c ☒ Phone solicitations

g ☒ Special fundraising events

d ☒ 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 activities? ☐ Yes ☒ No

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

(i) Name 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			
Adams Hussey & Associates	Direct Mail Fund Raiser	Yes		1,978,320	114,000	1,864,320
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.  
AR,AL,AZ,CA,CO,CT,DC,FL,GA,IL,KS,KY,LA,MA,MD,ME,MI,MN,MO,MS,NC,ND,NH,NJ,NM,NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV



Part II Fundraising Events.

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

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			hedge fund event	85th Anniversary	2	(Add col (a) through
			(event type)	Dinner	(total number)	col (c))
				(event type)		
1	Gross receipts . . . . .		226,900	575,862	23,573	826,335
			226,900	575,862	23,573	826,335
2	Less Charitable contributions . . . . .					
3	Gross revenue (line 1 minus line 2) . . . . .					
Direct Expenses	4	Cash Prizes . . . . .				
	5	Non-cash Prizes . . . . .				
	6	Rent/Facility costs . . . . .	11,663			11,663
	7	Other direct expenses . . . . .	27,939	76,547	8,088	112,574
	8	Direct expense summary Add lines 4 through 7 in column (d) . . . . . ▶				124,237
	9	Net income summary Combine lines 3 and 8 in column (d). . . . . ▶				-124,237

Part III Gaming.

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

Revenue			(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	Non-cash prizes . . . . .				
	4	Rent/facility costs . . . . .				
	5	Other direct expenses . . . . .				
6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶					

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers? . . . . .	11	
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? . . . . .	12	



	Yes	No
<b>13</b> Indicate the percentage of gaming activity operated in		
<b>a</b> The organization's facility . . . . . <b>13a</b>		
<b>b</b> An outside facility . . . . . <b>13b</b>		
<b>14</b> Provide the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►		
Address ►		
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . <b>15a</b>		
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
<b>c</b> If "Yes," enter name and address		
Name ►		
Address ►		
<b>16</b> Gaming manager information		
Name ►		
Gaming manager compensation ► \$ _____		
Description of services provided ►		
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
<b>17</b> Mandatory distributions		
<b>a</b> Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . <b>17a</b>		
<b>b</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 ► \$ _____		



## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 52-1844823  
**Name:** HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

## Form 990 Schedule G - Licensed States

[illegible]



Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Grants and Other Assistance to Organizations,  
Governments and Individuals in the U.S.

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

OMB No 1545-0047

2008

Open to Public  
Inspection

Employer identification number  
52-1844823

Part I General Information on Grants and Assistance

1

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

☐ Yes ☒ No

2

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

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

☐

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

2

Enter total number of section 501(c)(3) and government organizations

138

3

Enter total number of other organizations

0



Part III

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

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

Part IV

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

Identifier	Return Reference	Explanation



Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-Yale University80 Wall Street New Haven,CT 06511	06-1257354	501(c)(3)	17,699		fmv		Program Grants
Hillel-University of Hartford200 Bloomfield Avenue GSU 153 West Hartford,CT 06117	06-6068500	501(c)(3)	12,699		fmv		Program Grants
Hillel-University of Connecticut54 North Eagleville Road Storrs,CT 06268	06-6071635	501(c)(3)	5,644		fmv		Program Grants
Hillel-CUNY Queens College Student Union Building 206 65-30 Kissena Boulevard Flushing,NY 11367	11-3285824	501(c)(3)	194,898		fmv		Program Grants
Hillel-CUNY Brooklyn College2901 Campus Road Brooklyn,NY 11210	11-6036253	501(c)(3)	261,204		fmv		Program Grants
Hillel-Stony BrookGloria Mark Snyder Hillel Center Stony Brook Union Ste 201 Stony Brook,NY 117943235	11-6112474	501(c)(3)	178,229		fmv		Program Grants
Hillel-CUNY Hunter College695 Park Ave Hunter East 1317A New York,NY 10021	13-3853221	501(c)(3)	88,203		fmv		Program Grants
Hillel-Syracuse UniversityWinnick Hillel Ctr for Jewish Life 102 Walnut Place Syracuse,NY 13210	16-6065279	501(c)(3)	12,699		fmv		Program Grants
Hillel-SUNY Buffalo520 Lee Entrance Suite 203 UB Commons Amherst,NY 14228	16-6065281	501(c)(3)	12,699		fmv		Program Grants
Hillel-Cornell UniversityG-34 Anabel Taylor Hall Ithaca,NY 14853	16-6068463	501(c)(3)	73,226		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-Baruch College55 Lexington Ave B2-210 New York, NY 10010	20-1274002	501(c)(3)	191,323		fmv		Program Grants
Hillel-WestchesterSarah Lawrence College 1 Mead Way - Box 130 Bronxville, NY 10708	20-1355458	501(c)(3)	105,556		fmv		Program Grants
Hillel-College Staten IslandMulti Faith Center 3A-104 2800 Victory Blvd Staten Island, NY 10314	20-1494532	501(c)(3)	53,135		fmv		Program Grants
Hillel-CA Polytechnic Statec/o Hillel of San Luis Obispo Box 88 San Luis Obispo, CA 93407	20-1744245	501(c)(3)	10,000		fmv		Program Grants
Hillel-Indiana University 730 E Third Street Bloomington, IN 47401	20-2804389	501(c)(3)	37,176		fmv		Program Grants
Hillel Second Generation 20488 West Dixie Highway Aventura, FL 33180	20-8449671	501(c)(3)	12,699		fmv		Program Grants
Hillel-Princeton University70 Washington Road Princeton, NJ 08540	22-6071127	501(c)(3)	28,535		fmv		Program Grants
Hillel Foundation O range CountyBendat Hillel Center 1 Federation Way ste 100 Irvine, CA 92603	23-7172074	501(c)(3)	27,664		fmv		Program Grants
Hillel-Eastern Michigan University965 Washtenaw Avenue Ypsilanti, MI 48197	26-1708791	501(c)(3)	7,019		fmv		Program Grants
Hillel-Ohio State University46 E 16th Avenue Columbus, OH 43201	31-1048567	501(c)(3)	131,423		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-University of CincinnatiRose Warner House 2615 Clifton Avenue Cincinnati, OH 45220	31-6068733	501(c)(3)	12,699		fmv		Program Grants
Hillel-Kent State University202 North Lincoln Street Kent, OH 44240	34-6557290	501(c)(3)	50,199		fmv		Program Grants
Hillel-University of California-Davis328 A Street Davis, CA 95616	36-4499099	501(c)(3)	121,076		fmv		Program Grants
Hillel-Northwestern University629 Foster Street Evanston, IL 60201	36-6143129	501(c)(3)	61,850		fmv		Program Grants
Hillel-Long Island University1 University Plaza S-Bldg 2nd Floor Floor Brooklyn, NY 11201	37-1558345	501(c)(3)	87,640		fmv		Program Grants
Hillel-Michigan State UniversityLester J Morris Hillel Center 360 Charles St East Lansing, MI 48823	38-3034766	501(c)(3)	63,468		fmv		Program Grants
Hillel-University of Michigan1429 Hill Street Ann Arbor, MI 48104	38-6119964	501(c)(3)	38,120		fmv		Program Grants
Hillel-University of Wisconsin-Milwaukee 3035 North Stowell Avenue Milwaukee, WI 53211	39-1445185	501(c)(3)	5,644		fmv		Program Grants
Hillel-University of Wisconsin-Madison611 Langdon Street Madison, WI 53703	39-2035142	501(c)(3)	152,762		fmv		Program Grants
Hillel-University of Minnesota1521 University Avenue SE Minneapolis, MN 55414	41-6038613	501(c)(3)	17,699		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-University of Missouri1107 University Avenue Columbia, MI 65201	43-1600778	501(c)(3)	5,644		fmv		Program Grants
Hillel of Rochester Area CollegesRC Box 270501 Rochester, NY 14627	43-1977667	501(c)(3)	14,199		fmv		Program Grants
Hillel-Washington University6300 Forsyth Boulevard St Louis, MO 63105	43-6065763	501(c)(3)	24,529		fmv		Program Grants
Hillel-University of Kansas940 Mississippi Street Lawrence, KS 66044	48-6121370	501(c)(3)	74,681		fmv		Program Grants
Hillel-University of CA-Berkeley2736 Bancroft Way Berkeley, CA 94704	52-1758790	501(c)(3)	320,138		fmv		Program Grants
Hillel-Hofstra University Student Center 213 A 200 Hempstead Turnpike Hempstead, NY 11549	52-1758794	501(c)(3)	151,737		fmv		Program Grants
Hillel-Ithaca College 1001 Muller Chapel Ithaca, NY 14850	52-1758795	501(c)(3)	5,644		fmv		Program Grants
Hillel-Miami University Beerman Jewish Student Center 11 East Walnut St Oxford, OH 45056	52-1758796	501(c)(3)	5,644		fmv		Program Grants
Hillel-Ohio University21 Mill Street Athens, OH 45701	52-1758797	501(c)(3)	5,644		fmv		Program Grants
Hillel-University of South Florida13102 North 50th Street Tampa, FL 33617	52-1758800	501(c)(3)	30,576		fmv		Program Grants



**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
University of Texas-Austin2105 San Antonio St Abe and Annie Seibel Bldg Austin, TX 787055521	52-1758802	501(c)(3)	194,331		fmv		Program Grants
Hillel-Metropolitan Detroit667 Grosberg Student Center Wayne State U Detroit, MI 48072	52-1758804	501(c)(3)	14,699		fmv		Program Grants
Hillel-University of Nevada Las Vegas2317 Renaissance Drive Las Vegas, NV 89119	52-2178745	501(c)(3)	5,644		fmv		Program Grants
Hillel-George Mason UniversitySUB 1 Room 207 MSN 2C7 4400 University Dr Fairfax, VA 220304444	52-2232458	501(c)(3)	5,644		fmv		Program Grants
Hillel-University of AlbanyChapel House 1400 Washington Avenue Albany, NY 12222	52-2238644	501(c)(3)	27,576		fmv		Program Grants
Hillel-American UniversityKay Spiritual Life Center 440 Mass Avenue Washington, DC 20016	52-6066696	501(c)(3)	19,699		fmv		Program Grants
Hillel-George Washington University2300 H Street NW Washington, DC 20037	52-6081729	501(c)(3)	37,776		fmv		Program Grants
Hillel-University of Virginia1824 University Circle Charlottesville, VA 229031886	54-6061871	501(c)(3)	72,389		fmv		Program Grants
Hillel-Broward & Palm Beach777 Glades Road Bldg LY-3A Boca Raton, FL 33431	56-2472825	501(c)(3)	22,720		fmv		Program Grants
Hillel-Duke University1415 Faber St Box 90936 Durham, NC 277080936	56-6073303	501(c)(3)	10,644		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-University of North Carolina210 West Cameron Avenue Chapel Hill, NC 27510	56-6094521	501(c)(3)	29,419		fmv		Program Grants
Hillel-Florida State University843 West Pensacola Street Tallahassee, FL 32304	59-6194457	501(c)(3)	22,576		fmv		Program Grants
Hillel-Vanderbilt University2421 Vanderbilt Place Nashville, TN 37212	62-6073391	501(c)(3)	5,644		fmv		Program Grants
Hillel-University of Florida2020 W University Avenue Gainesville, FL 32603	65-1090524	501(c)(3)	59,645		fmv		Program Grants
Hillel-Tulane University912 Broadway New Orleans, LA 70118	72-6031116	501(c)(3)	19,699		fmv		Program Grants
Hillel-University of OklahomaUniversity of Oklahoma 494 Elm Avenue Norman, OK 73069	73-6106369	501(c)(3)	6,411		fmv		Program Grants
Hillel-Texas A & M University800 George Bush Drive College Station, TX 77840	74-1398514	501(c)(3)	5,644		fmv		Program Grants
Hillel-Inland and DesertRiverside3947 Ironwood Street San Bernardino, CA 92404	75-3248486	501(c)(3)	5,644		fmv		Program Grants
Hillel-University of Arizona1245 E 2nd Street Tucson, AZ 85719	86-6053800	501(c)(3)	50,719		fmv		Program Grants
Hillel-Arizona State University1012 South Mill Avenue Tempe, AZ 85281	86-6053859	501(c)(3)	12,699		fmv		Program Grants



**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Hillel-University of Washington4745 17th Avenue NE Seattle, WA 98105	91-6067231	501(c)(3)	67,546		fmv		Program Grants
Hillel-University of Oregon1059 Hilyard Street Eugene, OR 97401	93-6037440	501(c)(3)	10,644		fmv		Program Grants
Hillel-San Francisco33 Banbury Drive San Francisco, CA 94132	94-3152892	501(c)(3)	38,699		fmv		Program Grants
Hillel-Claremont Colleges McAlister Center 919 North Columbia Avenue Claremont, CA 91711	95-4575925	501(c)(3)	5,644		fmv		Program Grants
Hillel-LA Pierce & Valley CollegesMilken Jewish Community Campus 22622 Vanowen St West Hills, CA 91307	95-4575928	501(c)(3)	27,576		fmv		Program Grants
Hillel-University of California-Los Angeles 574 Hilgard Avenue Los Angeles, CA 90024	95-4575930	501(c)(3)	218,265		fmv		Program Grants
Hillel-University of Southern CA-Santa Barbara781 Embarcadero del Mar Isla Vista, CA 93111	95-4575931	501(c)(3)	19,199		fmv		Program Grants
Hillel-University of Southern California3300 South Hoover Boulevard Los Angeles, CA 90007	95-4867366	501(c)(3)	17,699		fmv		Program Grants
Hillel-California State University-Northridge 17729 Plummer Street Northridge, CA 91325	95-6134920	501(c)(3)	35,242		fmv		Program Grants
Hillel-Colorado State University2390 South Race Street Denver, CO 80210	52-1758791	501(c)(3)	5,000		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel -San Diego State University5742 Montezuma Road San Diego, CA 92115	33-0519225	501(c)(3)	5,000		fmv		Program Grants
Hazon Inc45 West 36th Street NY, NY 10018	13-4087102	501(c)(3)	5,000		fmv		Program Grants
Hillel-Goucher College1021 Dulaney Road Baltimore, MD 21204	52-0591613	501(c)(3)	5,258		fmv		Program Grants
Hillel - Elon University Campus Box 2700 Elon, NC 27244	52-0591613	501(c)(3)	5,400		fmv		Program Grants
Juniata College Hillel1700 Moore Street Huntingdon, PA 16652	23-1352652	501(c)(3)	5,400		fmv		Program Grants
Hillel-LoyolaOakton1058 W Loyola Avenue Chicago, IL 60606	36-2167761	501(c)(3)	5,644		fmv		Program Grants
Hillel-Dartmouth College5 Occom Ridge Road Hanover, NH 03755	23-6390855	501(c)(3)	5,644		fmv		Program Grants
Hillel-Lehigh University216 Summit Street Bethlehem, PA 18015		501(c)(3)	5,644		fmv		Program Grants
Hillel-Havurah at Wesleyah171 Church Street Middletown, CT 06459	13-3740640	501(c)(3)	5,644		fmv		Program Grants
Hasbara Fellowships520 8th Avenue 20th Floor NY, NY 10018		501(c)(3)	5,800		fmv		Program Grants



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Hillels of Georgia732 Gatewood Road Atlanta, GA 30329	58-2051970	501(c)(3)	6,644		fmv		Program Grants
Hillel-University of Denver Merage Allon Hillel Center 2390 S Race Street Denver, CO 80210	95-1831070	501(c)(3)	7,000		fmv		Program Grants
Hillel-Los Angeles Council 6505 Wilshire Blvd Suite 450 Los Angeles, CA 90048		501(c)(3)	7,699		fmv		Program Grants
Hillel-Trinity College74 Vernon Street Hartford, CT 06106	04-6192704	501(c)(3)	9,911		fmv		Program Grants
Hillel-Mass Inst of Technology40 Massachusetts Avenue W11 Cambridge, MA 02139		501(c)(3)	10,644		fmv		Program Grants
Hillel-University of Illinois-ChicagoLevine Hillel Center 924 S Morgan Street Chicago, IL 60607	36-2167761	501(c)(3)	10,848		fmv		Program Grants
Hillel-University of MD-Baltimore CountyUMBC Hillel The Interfaith Ctr 1000 Hilltop Circle Baltimore, MD 21250	52-0607957	501(c)(3)	11,144		fmv		Program Grants
Hillel-Greater Miami1100 Stanford Drive Coral Gables, FL 33146	52-1758796	501(c)(3)	12,699		fmv		Program Grants
Hillels of Northern New Jersey50 Eisenhower Drive Paramus, NJ 07601	52-1758796	501(c)(3)	12,699		fmv		Program Grants
Hillel-University of Georgia1155 South Milledge Avenue Athens, GA 30606	58-2051970	501(c)(3)	12,699		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-John HopkinsThe Smokler Center 3109 North Charles St Baltimore, MD 21218	58-2051970	501(c)(3)	14,644		fmv		Program Grants
Hillel-Georgetown UniversityGeorgetown University JSA 1314 Leavey Center Washington, DC 20057	53-0196603	501(c)(3)	14,699		fmv		Program Grants
Jewish Federation of Greater Dallas7800 Northaven Road Dallas, TX 75230	75-0800654	501(c)(3)	20,500		fmv		Program Grants
Hillel-Towson University JCC Newell Dining 8000 York Rd Towson, MD 21252	52-0607957	501(c)(3)	20,699		fmv		Program Grants
Hillel-University of PittsburghThe Joseph Stern Building 4607 Forbes Ave Pittsburgh, PA 15213	25-6065236	501(c)(3)	21,032		fmv		Program Grants
Hillel-Philadelphia Commuter2014 North Broad Street Philadelphia, PA 191212305	23-1365179	501(c)(3)	22,576		fmv		Program Grants
Hillel of ColoradoMerage Allon Hillel Center 2390 S Race Street Denver, CO 80210	52-1758791	501(c)(3)	22,576		fmv		Program Grants
Hillels Around Chicago30 S Wells Suite 216-600 Chicago, IL 60606	36-2167761	501(c)(3)	23,683		fmv		Program Grants
Hillel-Greater PhiladelphiaSteinhardt Hall 215 South 39th Street Philadelphia, PA 19104	23-1365179	501(c)(3)	26,340		fmv		Program Grants
Hillel-Penn State University114-117 Pasquerilla Spiritual Ctr University Park, PA 16802	25-6078799	501(c)(3)	26,531		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-Muhlenberg College 2400 Chew Street Allentown, PA 181045564	23-2670541	501(c)(3)	28,077		fmv		Program Grants
Hillel-Emory University 732 Gatewood Road Atlanta, GA 30329	58-2051970	501(c)(3)	31,149		fmv		Program Grants
Hillel-Drew University36 Madison Avenue Madison, NJ 07940	58-2051970	501(c)(3)	32,900		fmv		Program Grants
Hillel-Dickinson College Milton B Asbell Ctr- Jewish Life PO Box 1773 Carlisle, PA 17013	23-1365954	501(c)(3)	33,900		fmv		Program Grants
Hillel-University of PennsylvaniaSteinhardt Hall 215 South 39th Street Philadelphia, PA 19104	23-1365179	501(c)(3)	35,120		fmv		Program Grants
Hillel-Cleveland Hillel 11291 Euclid Avenue Cleveland, OH 44106	34-1187022	501(c)(3)	37,199		fmv		Program Grants
Hillel-University of Illinois-Urbana503 East John Street Champaign, IL 61820	36-2167761	501(c)(3)	52,576		fmv		Program Grants
Hillel-Temple University 2014 North Broad Street Philadelphia, PA 19121	23-1365954	501(c)(3)	97,500		fmv		Program Grants
Hillel-San Francisco State University33 Banbury Drive San Francisco, CA 94132	23-1365954	501(c)(3)	104,217		fmv		Program Grants
Hillel-New York University7 East 10th Street New York, NY 10003	33-7371111	501(c)(3)	121,824		fmv		Program Grants



**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Hillel-Columbia UniversityThe Kraft Center 606 W 115th St New York, NY 10025	33-7371111	501(c)(3)	125,411		fmv		Program Grants
Hillel-University of Chicago5715 South Woodlawn Avenue Chicago, IL 606371602	52-9900027	501(c)(3)	161,995		fmv		Program Grants
Hillel-Binghamton University Union West 208-B Binghamton, NY 13902	01-0569965	501(c)(3)	141,525		fmv		Program Grants
Hillel-Sonoma CountyPO Box 3143 Rohnert Park, CA 949273143	01-0818620	501(c)(3)	29,144		fmv		Program Grants
Hillel-University of Iowa122 East Market Street Iowa City, IA 52245	04-2608467	501(c)(3)	5,644		fmv		Program Grants
Hillel-Harvard University52 Mount Auburn Street Cambridge, MA 02138	04-2620801	501(c)(3)	22,576		fmv		Program Grants
Hillel-Boston University213 Bay State Road Boston, MA 02215	04-2688997	501(c)(3)	22,576		fmv		Program Grants
Hillel Council of New England1320 Centre Street Suite 306 Newton Centre, MA 024582400	04-2688997	501(c)(3)	29,070		fmv		Program Grants
Hillel-Purdue University912 West State Street West Lafayette, IN 47906	20-0633180	501(c)(3)	10,644		fmv		Program Grants
Hillel-Rutgers University93 College Avenue New Brunswick, NJ 08901	26-0177367	501(c)(3)	45,220		fmv		Program Grants



Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-California State University-Long Beach 3801 E Willow Street Long Beach, CA 90815	33-0348561	501(c)(3)	6,744		fmv		Program Grants
Hillel-University of CA - San Diego 5742 Montezuma Road San Diego, CA 92115	33-0519225	501(c)(3)	113,157		fmv		Program Grants
Hillel-Chico BMU Room 213 Box 36 400 West First Street Chico, CA 95929 0755	45-0565454	501(c)(3)	23,683		fmv		Program Grants
Hillel-University of Delaware 47 West Delaware Avenue Newark, DE 19711	51-0331975	501(c)(3)	28,813		fmv		Program Grants
Hillel-University of Maryland 7612 Mowatt Lane College Park, MD 20740	52-0749507	501(c)(3)	110,496		fmv		Program Grants
Hillel-University of Houston 1700 Bissonnet Houston, TX 77005	76-0684042	501(c)(3)	19,199		fmv		Program Grants
Hillel-University of California-Santa Cruz 222 Cardiff Place Santa Cruz, CA 95060	77-0427628	501(c)(3)	100,576		fmv		Program Grants
Hillel-Stanford University 565 Mayfield Avenue Stanford, CA 94305	77-0492512	501(c)(3)	236,199		fmv		Program Grants
Hillel of Silicon Valley 336 East William Street San Jose, CA 95112	77-0575153	501(c)(3)	86,344		fmv		Program Grants
Hillel-University of Central Florida 12321 University Boulevard Orlando, FL 32817	81-0553966	501(c)(3)	37,020		fmv		Program Grants



Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel-University of VermontAllen House 461 Main Street Burlington, VT 05405	81-0554021	501(c)(3)	16,894		fmv		Program Grants
Hillel-Virginia TechPO Box 708 Blacksburg, VA 24063	90-0406012	501(c)(3)	62,039		fmv		Program Grants
Hillel-Binghamton University Union West 208-B Binghamton, NY 13902	01-0569965	501(c)(3)	141,525		fmv		Program Grants
Hillel-Sonoma CountyPO Box 3143 Rohnert Park, CA 949273143	01-0818620	501(c)(3)	29,144		fmv		Program Grants
Hillel-University of Iowa122 East Market Street Iowa City, IA 55245	04-2608467	501(c)(3)	5,644		fmv		Program Grants
Hillel-Harvard University52 Mount Auburn Street Cambridge, MA 02138	04-2620801	501(c)(3)	22,576		fmv		Program GrantsProgram GrantsProgram Grants
Hillel-Boston University213 Bay State Road Boston, MA 02215	04-2688997	501(c)(3)	22,576		fmv		Program GrantsProgram Grants
Hillel Council of New England1320 Centre Street Suite 306 Newton Centre, MA 024582400	04-2688997	501(c)(3)	29,070		fmv		Program Grants



Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number  
52-1844823

Part I		Questions Regarding Compensation	
		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a		
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
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b	No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b	No
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No



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

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WAYNE FIRESTONE	(i) (ii)	313,363		26,519	18,400	23,504	381,786	
Aryeh Furst	(i) (ii)	302,467		41,129	18,400	17,845	379,841	
Scott Brown	(i) (ii)	205,551		10,459	17,567	16,145	249,722	
Tim Cohen	(i) (ii)	224,223			18,032	14,270	256,525	
Robert M Goldberg	(i) (ii)	183,095		9,276	15,156	14,270	221,797	
Eran Gasko	(i) (ii)	176,896		5,583	15,156	18,865	216,500	
Jacob Schreiber	(i) (ii)	156,336			12,835	16,095	185,266	
Joy Prevor	(i) (ii)	187,389		17,915	15,562		220,866	
Ralph Grunewald	(i) (ii)	106,596		8,696		7,840	123,132	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							







Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WAYNE FIRESTONE	(i) (ii)	313,363		26,519	18,400	23,504	381,786	
Aryeh Furst	(i) (ii)	302,467		41,129	18,400	17,845	379,841	
Scott Brown	(i) (ii)	205,551		10,459	17,567	16,145	249,722	
Tim Cohen	(i) (ii)	224,223			18,032	14,270	256,525	
Robert M Goldberg	(i) (ii)	183,095		9,276	15,156	14,270	221,797	
Eran Gasko	(i) (ii)	176,896		5,583	15,156	18,865	216,500	
Jacob Schreiber	(i) (ii)	156,336			12,835	16,095	185,266	
Joy Prevor	(i) (ii)	187,389		17,915	15,562		220,866	
Ralph Grunewald	(i) (ii)	106,596		8,696		7,840	123,132	



SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Non-Cash Contributions

To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 29 or 30.  
Attach to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization  
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number  
52-1844823

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	8	1,599,616	Stock closing value
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 (describe _____)				
26 Other (describe _____)				
27 Other (describe _____)				
28 Other (describe _____)				
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 1-28 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? . . . . .	30a	No
b If "Yes", describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	32a	No
b If "Yes", describe in Part II		
33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II		



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

[illegible]



SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number

52-1844823

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is prepared by our independent auditors. The return is subsequently reviewed by the CFO and the audit chair.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Procedures for Addressing the Conflict of Interest. If the audit committee or board members determine by consensus that a conflict of interest exists, the Interested Person, if present, shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement that involves the conflict of interest. The President or the Audit Committee chairperson shall appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement. If alternatives are investigated, the board or Audit Committee shall determine whether Hillel can obtain a more advantageous transaction or arrangement with reasonable efforts from a person or entity that would not give rise to a conflict of interest. If a more advantageous transaction or arrangement is not reasonably attainable, the board or Audit Committee shall determine by a majority vote of disinterested directors whether the transaction or arrangement is in Hillel's best interest and is fair and reasonable to Hillel, and shall make its decision as to whether to enter into the transaction or arrangement in conformity with such determination. Violations of the Conflicts of Interest Policy. If the board or audit committee has reasonable cause to believe that an Interested Person has failed to disclose actual or possible conflicts of interest, it shall inform the person of the basis for such belief and afford the person an opportunity to explain the alleged failure to disclose. If, after hearing the response and making such further investigation as may be warranted in the circumstances, the board or Audit Committee determines that the person has in fact failed to adequately disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action including removal from the Board.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		A group of the Board of Directors officers meet to discuss the CEO and CFO's Salary.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The Conflict of Interest Policy and governing documents are available on the organization's intranet and the financial statements are available upon request to the public and is also published on public website's such as Guidestar.

Identifier	Return Reference	Explanation
FORM 990 PART XI, LINE 2C		THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.



Form **4562**

Department of the Treasury  
Internal Revenue Service

Depreciation and Amortization  
(Including Information on Listed Property)

▶ See separate instructions.    ▶ Attach to your tax return.

OMB No 1545-0172

**2008**

Attachment  
Sequence No **67**

Name(s) shown on return HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Business or activity to which this form relates  Form 990 Page 10	Identifying number  52-1844823
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses . . . . .	1	250,000
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- . . . . .	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions . . . . .	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property Enter the amount from line 29 . . . . .	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	8	
9 Tentative deduction Enter the <b>smaller</b> of line 5 or line 8 . . . . .	9	
10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 . . . . .	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	12	
13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 .▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions )

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election . . . . .	15	
16 Other depreciation (including ACRS) . . . . .	16	286,603

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2008 . . . . .	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . ▶		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21 Listed property Enter amount from line 28 . . . . .	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr . . . . .	22	286,603
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23	



Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions )		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2008 tax year (see instructions)					
43 A mortization of costs that began before your 2008 tax year				43	
44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report				44	