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<p>Form 990</p>  <p>Department of the Treasury Internal Revenue Service</p>	<p>Return of Organization Exempt From Income Tax</p> <p>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</p> <p>▶ The organization may have to use a copy of this return to satisfy state reporting requirements</p>	<p>OMB No 1545-0047</p> <p>2009</p> <p>Open to Public Inspection</p>

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010				
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE		D Employer identification number 52-1844823
		Doing Business As		E Telephone number (202) 449-6520
		Number and street (or P O box if mail is not delivered to street address) 800 8TH STREET NW	Room/suite	G Gross receipts \$ 36,794,099
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001		
	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ www.hillel.org				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> 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 net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3 9	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 9	
	5	Total number of employees (Part V, line 2a)	5 1,59	
	6	Total number of volunteers (estimate if necessary)	6 15	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 28,478,728	Current Year 22,214,283
	9	Program service revenue (Part VIII, line 2g)	598,383	175,460
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-66,361	-183,823
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	164,922	172,602
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,175,672	22,378,522
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	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)	9,856,745	8,139,544
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
b		Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 3,174,771		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	10,758,836	9,465,880
18		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	28,917,154	25,459,962
19		Revenue less expenses Subtract line 18 from line 12	258,518	-3,081,440
Net Assets or Fund Balances				Beginning of Current Year
	20	Total assets (Part X, line 16)	42,763,139	41,242,258
	21	Total liabilities (Part X, line 26)	10,909,897	10,562,433
	22	Net assets or fund balances Subtract line 21 from line 20	31,853,242	30,679,825

Part II Signature Block	
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
	<div> <div>*****</div> <div>Signature of officer</div> </div> <div> <div>2011-05-16</div> <div>Date</div> </div>
	<div> <div>Aryeh Furst Executive Vice President and CFO</div> <div>Type or print name and title</div> </div>
Paid Preparer's Use Only	<div> <div>Preparer's signature</div> <div>Bert L Swain CPA</div> <div>Date</div> <div> <div>Check if self-employed</div> <div><input type="checkbox"/></div> </div> <div>Preparer's identifying number (see instructions)</div> </div>
	<div> <div>Firm's name (or yours if self-employed), address, and ZIP + 4</div> <div> <div>Dixon Hughes Goodman LLP</div> <div>111 Rockville Pike 6th Floor</div> <div>Rockville, MD 20850</div> </div> </div> <div> <div>EIN</div> <div>Phone no (240) 403-3700</div> </div>

Part III

Statement of Program Service Accomplishments

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 and 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?

Yes

✓

No

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

3

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

Yes

✓

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 19,733,955 including grants of \$ 7,854,538) (Revenue \$ 191,928)

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

\$ 19,733,955

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 similar funds or 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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes					
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes					
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.							
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.							
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.							
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.							
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.							
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.							
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes					
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <table><tr><td>Yes</td><td>No</td></tr><tr><td></td><td>No</td></tr></table>	Yes	No		No			
Yes	No							
	No							
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A		No				
13	Is the organization a school 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 United States?	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 United States? 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 U S ? 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 U S ? If "Yes," complete Schedule F, Part III 	16	Yes					
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 	17	Yes					
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18	Yes					
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19		No				
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No				

Part IV

Checklist of Required Schedules (continued)

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

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	1a	100	
		1b	0	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1c	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				
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	2a	1,599	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
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	Yes
b If "Yes," enter the name of the foreign country ▶ CJ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			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 line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			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 receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			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	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	99	
b	Enter the number of voting members that are independent	1b	99	
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	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	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?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
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
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	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 , AL , AR , AZ , CA , CO , CT , 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
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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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 ▶ Aryeh Furst 800 8th Street NW WASHINGTON, DC 20001 (202) 449-6520

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

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

Form 990 (2009)

1b	Total	1,821,844	0	223,478
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization▶23

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

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶0		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	22,214,283				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f			22,214,283			
Program Service Revenue			Business Code					
	2a	CONFERENCE REGISTRATIO	900,099	175,460	175,460			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			175,460			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		278,993			278,993	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
		156,134						
		156,134						
	d	Net rental income or (loss)		156,134			156,134	
	7a	(i) Securities		(ii) Other				
		13,952,761						
		14,415,577						
		-462,816						
	d	Net gain or (loss)		-462,816			-462,816	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a				
		Less direct expenses		b				
	c	Net income or (loss) from fundraising events . . .						
	9a	Gross income from gaming activities See Part IV, line 19		a				
		Less direct expenses		b				
c	Net income or (loss) from gaming activities . . .							
10a	Gross sales of inventory, less returns and allowances		a					
	Less cost of goods sold		b					
c	Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS INCOME		900,099	16,468	16,468			
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			16,468				
12	Total revenue. See Instructions			22,378,522	191,928	0	-27,689	

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	7,854,538	7,854,538		
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	965,933		965,933	
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	5,991,153	3,112,618	1,306,821	1,571,714
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	177,712	105,012	23,378	49,322
9	Other employee benefits	517,239	259,363	119,194	138,682
10	Payroll taxes	487,507	214,031	169,425	104,051
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	1,480,469	822,106	576,077	82,286
12	Advertising and promotion	10,363	602		9,761
13	Office expenses	37,591	6,972	23,295	7,324
14	Information technology	128,910	45,645	62,708	20,557
15	Royalties				
16	Occupancy	670,975	670,975		
17	Travel	560,753	436,950	37,489	86,314
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,905,104	2,874,760	17,644	12,700
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	306,477	262,103	44,374	
23	Insurance	94,853	16,502	78,351	
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	1,210,919	6,247	12,775	1,191,897
b	program expense	870,476	871,944	-1,468	
c	DEBT SERVICE	373,558	373,558		
d	MISCELLANEOUS	202,457	24,859	-20,812	198,410
e	Bad Debt Expense	175,000		175,000	
f	All other expenses	437,975	1,775,170	-1,038,948	-298,247
25	Total functional expenses. Add lines 1 through 24f	25,459,962	19,733,955	2,551,236	3,174,771
26	Joint costs. Check here <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	1	Cash—non-interest-bearing					1	
	2	Savings and temporary cash investments				5,858,810	2	5,073,386
	3	Pledges and grants receivable, net				2,786,026	3	3,591,880
	4	Accounts receivable, net				316,113	4	485,945
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use					8	
	9	Prepaid expenses and deferred charges				132,875	9	137,600
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	16,667,025				
	b	Less accumulated depreciation	10b	5,435,804	11,290,672	10c	11,231,221	
	11	Investments—publicly traded securities				1,277,036	11	3,857
	12	Investments—other securities See Part IV, line 11				20,641,337	12	20,277,738
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11				460,270	15	440,631
	16	Total assets. Add lines 1 through 15 (must equal line 34)				42,763,139	16	41,242,258
Liabilities	17	Accounts payable and accrued expenses				2,498,709	17	2,556,476
	18	Grants payable				59,947	18	66,712
	19	Deferred revenue				98,456	19	143,696
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties				7,800,000	23	7,400,000
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities Complete Part X of Schedule D				452,785	25	395,549
	26	Total liabilities. Add lines 17 through 25				10,909,897	26	10,562,433
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets				5,381,330	27	5,523,096
	28	Temporarily restricted net assets				23,142,723	28	21,739,826
	29	Permanently restricted net assets				3,329,189	29	3,416,903
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds					30	
	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other funds					32	
	33	Total net assets or fund balances				31,853,242	33	30,679,825
	34	Total liabilities and net assets/fund balances				42,763,139	34	41,242,258

Part XI **Financial Statements and Reporting**

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Employer identification number 52-1844823
--	--

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

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

- 1

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

(i) 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	23,915,428	25,915,610	34,242,124	28,478,728	22,214,283	134,766,173
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	23,915,428	25,915,610	34,242,124	28,478,728	22,214,283	134,766,173
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,470,311
6 Public Support. Subtract line 5 from line 4						129,295,862

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	23,915,428	1,389,698	34,242,124	28,478,728	22,214,283	134,766,173
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,006,356	1,389,698	1,539,513	91,617	-27,689	3,999,495
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	44,684	15,256	15,248	6,944	16,468	98,600
11 Total support (Add lines 7 through 10)						138,864,268

12

Gross receipts from related activities, etc (See instructions)

12

3,859,512

13

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

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	93 110 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	93 840 %

- 16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part 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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 through 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 \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 June 30, 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						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. 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% support tests—2008. 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. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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

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

1

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

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

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

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

1a

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

b

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

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

2

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

a

Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b

Assets included in Form 990, Part X ▶ \$ _____

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

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	7,688,486	8,190,456			
b Contributions	676,942	2,263,644			
c Investment earnings or losses	850,831	-1,486,184			
d Grants or scholarships					
e Other expenditures for facilities and programs	599,919	1,279,430			
f Administrative expenses					
g End of year balance	8,616,340	7,688,486			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 57.120 %

b

Permanent endowment ▶ 39.660 %

c

Term endowment ▶ 3.220 %

3a

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

(i) unrelated organizations

(ii) related organizations

b

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

	Yes	No
3a(i)		No
3a(ii)		No
3b		

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) Accumulated depreciation	(d) Book value
1a Land		2,908,629		2,908,629
b Buildings		11,712,448	3,412,376	8,300,072
c Leasehold improvements				
d Equipment		2,045,948	2,023,428	22,520
e Other				0
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				11,231,221

Schedule D (Form 990) 2009

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	122,378,522
2	Total expenses (Form 990, Part IX, column (A), line 25)	225,459,962
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-3,081,440
4	Net unrealized gains (losses) on investments	41,855,556
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	852,467
9	Total adjustments (net) Add lines 4 - 8	91,908,023
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-1,173,417

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	124,291,314
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a1,912,792	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e1,912,792	
3	Subtract line 2e from line 13	322,378,522
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	522,378,522

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	125,464,731
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d4,769	
e	Add lines 2a through 2d2e4,769	
3	Subtract line 2e from line 13	325,459,962
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	525,459,962

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Hillel's endowments consist of funds established for various programmatic purposes.
Part XI, Line 8 - Other Adjustments		Unrealized GAIN on interest rate swap 57236 unrealized LOSS on split interest agreements -4769
Part XIII, Line 2d - Other Adjustments		UNREALIZED LOSS ON INTEREST RATE SWAP 4769

OMB No 1545-0047

2009

**Open to Public
Inspection**

Employer identification number
52-1844823

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2009

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 (Form 990) if additional space is needed.

[illegible]

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 11

3 Enter total number of other organizations or entities

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Program Services	Russia and the Newly Independent States	2	110,166	Wire			
Program Services	Middle East and North Africa	3	134,950	Wire and Checks			
Program Services	South America	1	30,641	Wire			

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

Schedule F (Form 990) 2009

Additional Data

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

Form 990 Schedule F Part II - Grants 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)
		North America	Program Services	32,120	Checks			FMV
		North America	Program Services	22,610	Checks			FMV
		North America	Program Services	33,388	Checks			FMV
		North America	Program Services	23,649	Checks			FMV
		Middle East and North Africa	Program Services	268,563	Checks			FMV
		Middle East and North Africa	Program Services	206,505	Checks			FMV
		South America	Program Support	10,000	Wire			FMV
		Middle East and North Africa	Program Support	28,439	Wire			FMV
		Middle East and North Africa	Program Support	981,303	Wire			FMV
		South America	Program Services	239,364	Wire			FMV
		South America	Program Services	77,204	Wire			FMV
		South America	Program Services	150,891	Wire			FMV
		Middle East and North Africa	Program Support	758,835	Wire & Checks			FMV
		Russia and the Newly Independent States	Program Services	201,688	Wire			FMV
		Middle East and North Africa	Program Support	464,497	Wire			FMV
		Russia and the Newly Independent States	Program Support	15,000	Wire			FMV
		Middle East and North Africa	Program Support	260,940	Wire			FMV
		South America	Program Support	10,000	Wire			FMV
		Europe	Program Support	36,585	Wire			FMV

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

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.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☒ Mail solicitations

b ☒ Internet and e-mail solicitations

c ☒ Phone solicitations

d ☒ In-person solicitations

e ☒ Solicitation of non-government grants

f ☒ Solicitation of government grants

g ☒ Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising 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		1,984,834	114,000	1,870,834
Total ▶				1,984,834	114,000	1,870,834

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.

AK,AL,AR,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.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		HEDGE FUND EVENT (event type)	GALA (event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	395,365	754,686	1,150,051
	2	Less Charitable contributions	395,365	754,686	1,150,051
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs	2,520	12,668	15,188
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	95,544	245,754	341,298
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			356,486
	11	Net income summary Combine lines 3, column d, and line 10. ▶			-356,486

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

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

		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
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►			
Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ►			
Address ►			
16	Gaming manager information		
Name ►			
Gaming manager compensation ► \$ _____			
Description of services provided ►			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
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 ► \$		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

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" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

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

2

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

135

3

Enter total number of other organizations

Part III

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

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

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
American University Hillel Kay Spiritual Life Center 4400 Massachusetts Avenue NW Washington,DC 20016	52-6066696	501(c)(3)	12,699	0	FMV		Program Grants
Ben & Esther Rosenbloom Hillel Center at the University of Maryland7612 Mowatt Lane College Park,MD 20740	52-0749507	501(c)(3)	193,705	0	FMV		Program Grants
Berkeley Hillel2736 Bancroft Way Berkeley,CA 94704	52-1758790	501(c)(3)	285,197	0	FMV		Program Grants
B'nai B'rith Hillel Foundation Gloria Mark Snyder Hillel Center Stony Brook Union Suite 201 Stony Brook,NY 11794	11-6112474	501(c)(3)	171,229	0	FMV		Program Grants
B'nai B'rith Hillel Foundation at Ohio State University46 E 16th Avenue Columbus,OH 43201	31-1048567	501(c)(3)	214,969	0	FMV		Program Grants
B'nai B'rith Hillel Foundation at Princeton70 Washington Road Princeton,NJ 08540	22-6071127	501(c)(3)	18,786	0	FMV		Program Grants
B'nai B'rith Hillel Foundation of Queens CollegeStudent Union Building 206 65-30 Kissena Boulevard Flushing,NY 11367	11-3285824	501(c)(3)	176,225	0	FMV		Program Grants
B'nai B'rith Hillel House at Boston University213 Bay State Road Boston,MA 02215	32-0293118	501(c)(3)	22,576	0	FMV		Program Grants
Brown Hillel Foundation80 Brown Street Providence,RI 02906	05-6019146	501(c)(3)	51,066	0	FMV		Program Grants
CA Polytechnic Statec/o Hillel of San Luis Obispo Box 88 San Luis Obispo,CA 93407	20-1744245	501(c)(3)	10,000	0	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
California State University-Northridge17729 Plummer Street Northridge, CA 91325	95-6134920	501(c)(3)	22,576	0	FMV		Program Grants
Center for Jewish Campus Life (Hillel at Stanford)565 Mayfield Avenue Stanford, CA 94305	77-0492512	501(c)(3)	235,399	0	FMV		Program Grants
Central Florida Hillel4250 Alafaya Trail Ste 212-363 Oviedo, FL 32765	81-0553966	501(c)(3)	29,520	0	FMV		Program Grants
Claremont CollegeMcAlister Center 919 North Columbia Avenue Claremont, CA 91711	95-4575925	501(c)(3)	5,644	0	FMV		Program Grants
Cleveland Hillel11291 Euclid Avenue Cleveland, OH 44106	34-1187022	501(c)(3)	14,255	0	FMV		Program Grants
Cornell HillelG-34 Anabel Taylor Hall Cornell University Ithaca, NY 14853	16-6068463	501(c)(3)	43,500	0	FMV		Program Grants
CUNY Hunter College695 Park Ave Hunter East 1317A Hunter College New York, NY 10021	13-3853221	501(c)(3)	94,273	0	FMV		Program Grants
Dartmouth CollegeRoth Center for Jewish Life 5 Oocom Ridge Road Hanover, NH 03755		501(c)(3)	5,644	0	FMV		Program Grants
Dickinson CollegeMilton B Asbell Ctr-Jewish Life PO Box 1773 Carlisle, PA 17013		501(c)(3)	22,811	0	FMV		Program Grants
Drew University36 Madison Avenue Madison, NJ 07940		501(c)(3)	15,400	0	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
Duke University1415 Faber St Box 90936 Durham, NC 27708	56-6094521	501(c)(3)	5,644	0	FMV		Program Grants
Elon UniversityCampus Box 2700 Elon, NC 27244	34-6557290	501(c)(3)	7,711	0	FMV		Program Grants
Emory University732 Gatewood Road Atlanta, GA 30329		501(c)(3)	15,436	0	FMV		Program Grants
Four Community Hillel House (Hillel at Kent State University)613 E Summit Street Kent, OH 44240		501(c)(3)	74,038	0	FMV		Program Grants
Franklin & Marshall College645 College Avenue PO Box 3003 Lancaster, PA 17604	65-1090524	501(c)(3)	8,658	0	FMV		Program Grants
Gainsville Hillel Inc2020 W University Avenue University of Florida Gainesville, FL 32603		501(c)(3)	61,320	0	FMV		Program Grants
George Mason University HillelSUB 1 Room 207 MSN 2C7 4400 University Drive Fairfax, VA 22030	52-2232458	501(c)(3)	6,284	0	FMV		Program Grants
Georgetown University Georgetown University JSA 1314 Leavey Center Washington, DC 20057	53-0196603	501(c)(3)	12,699	0	FMV		Program Grants
Goucher College1021 Dulaney Road Baltimore, MD 21204	52-1758796	501(c)(3)	6,978	0	FMV		Program Grants
Greater Miami Hillel Foundation Inc1100 Stanford Drive Coral Gables, FL 33146	52-1758796	501(c)(3)	25,844	0	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
Greater PortlandP O Box 1547 Portland,OR 97207	80-0221753	501(c)(3)	5,644	0	FMV		Program Grants
Havurah at Wesleyah171 Church Street Middletown,CT 06459	23-1365179	501(c)(3)	5,644	0	FMV		Program Grants
Hillel - Temple University 2014 North Broad Street Philadelphia,PA 19121		501(c)(3)	111,815	0	FMV		Program Grants
Hillel at Baruch55 Lexington Ave B2-210 New York, NY 10010	20-4777751	501(c)(3)	198,361	0	FMV		Program Grants
Hillel at Binghamton University Union West 208-B Binghamton, NY 13902	01-0569965	501(c)(3)	134,032	0	FMV		Program Grants
Hillel at Davis and Sacramento328 A Street Davis, CA 95616	36-4499099	501(c)(3)	100,687	0	FMV		Program Grants
Hillel at FSU Foundation Inc 843 West Pensacola Street Tallahassee, FL 32304	59-6194457	501(c)(3)	22,576	0	FMV		Program Grants
Hillel at Ithaca College953 Danby Rd-Muller Chapel Ithaca, NY 14850	52-1758795	501(c)(3)	5,644	0	FMV		Program Grants
Hillel at Syracuse University Winnick Hillel Ctr for Jewish Life 102 Walnut Place Syracuse, NY 13210	16-6065279	501(c)(3)	12,699	0	FMV		Program Grants
Hillel at the College of Staten IslandMulti Faith Center 3A-104 2800 Victory Blvd Staten Island, NY 10314	26-0212010	501(c)(3)	78,781	0	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 at The George Washington University2300 H Street NW Washington, DC 20037	52-6081729	501(c)(3)	25,326	0	FMV		Program Grants
Hillel at Virginia TechPO Box 708 Blacksburg, VA 24063	90-0406012	501(c)(3)	29,353	0	FMV		Program Grants
Hillel Council of New England1320 Centre Street Suite 306 Newton Centre, MA 02459	04-2688997	501(c)(3)	28,970	0	FMV		Program Grants
Hillel Foundation for Jewish Campus Life West Hartford Jewish Center200 Bloomfield Avenue GSU 153 West Hartford, CT 06117	06-6068500	501(c)(3)	13,799	0	FMV		Program Grants
Hillel Foundation at Eastern Michigan University965 Washtenaw Avenue Ypsilanti, MI 48197	26-1708791	501(c)(3)	6,644	0	FMV		Program Grants
Hillel Foundation at Indiana University IncHelene G Simon Hillel Center 730 E Third Street Bloomington, IN 47401	20-2804389	501(c)(3)	26,409	0	FMV		Program Grants
Hillel Foundation at Ohio University21 Mill Street Athens, OH 45701	52-1758797	501(c)(3)	11,644	0	FMV		Program Grants
Hillel Foundation at the University of Oregon Inc1059 Hilyard Street Eugene, OR 97401	93-6037440	501(c)(3)	5,644	0	FMV		Program Grants
Hillel Foundation at the University of Rhode Island6 Fraternity Circle Kingston, RI 02881	05-6019148	501(c)(3)	189,644	0	FMV		Program Grants
Hillel Foundation at the Universtiy of Arizona1245 E 2nd Street Tucson, AZ 85719	86-6053800	501(c)(3)	27,525	0	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 Foundation for Jewish Life520 Lee Entrance Suite 210 Amherst, NY 14228	16-6065281	501(c)(3)	12,699	0	FMV		Program Grants
Hillel Foundation for Jewish Life at University of Washington4745 17th Avenue NE Seattle, WA 98105	91-6067231	501(c)(3)	43,718	0	FMV		Program Grants
Hillel Foundation of Cambridge Inc52 Mount Auburn Street Cambridge, MA 02138	04-2620801	501(c)(3)	23,676	0	FMV		Program Grants
Hillel Foundation of New Orleans912 Broadway New Orleans, LA 70118	72-6031116	501(c)(3)	116,169	0	FMV		Program Grants
Hillel House at the University of MassachusettsAmherst388 N Pleasant Street 15 Amherst, MA 01002	04-3110103	501(c)(3)	29,597	0	FMV		Program Grants
Hillel Jewish Student Center at Arizona State1012 South Mill Avenue Tempe, AZ 85281	86-6053859	501(c)(3)	12,699	0	FMV		Program Grants
Hillel Milwaukee3035 North Stowell Avenue Milwaukee, WI 53211	39-1445185	501(c)(3)	5,644	0	FMV		Program Grants
Hillel of Broward and Palm Beach777 Glades Road Bldg LY-3A Boca Raton, FL 33431	56-2472825	501(c)(3)	28,220	0	FMV		Program Grants
Hillel of Chico101 Salem Street 160 Chico, CA 95928	45-0565454	501(c)(3)	23,200	0	FMV		Program Grants
Hillel of ColoradoMerage Allon Hillel Center 2390 S Race Street Denver, CO 80210	52-1758791	501(c)(3)	22,711	0	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 of Metropolitan Detroit 667 Grosberg Student Center Bldg Wayne State University Detroit, MI 48202	52-1758804	501(c)(3)	21,750	0	FMV		Program Grants
Hillel of Silicon Valley 336 East William Street San Jose, CA 95112	77-0575153	501(c)(3)	87,164	0	FMV		Program Grants
Hillel of Sonoma County PO Box 3143 Rohnert Park, CA 94927	01-0818620	501(c)(3)	28,844	0	FMV		Program Grants
Hillel Second Generation 20488 West Dixie Highway Aventura, FL 33180	20-8449671	501(c)(3)	12,699	0	FMV		Program Grants
Hillel The Foundation for Jewish Cmpus Life North Carolina State University 210 West Cameron Avenue Chapel Hill, NC 27510	56-6094521	501(c)(3)	12,689	0	FMV		Program Grants
Hillel The Foundation for Jewish Campul Life (Hillel of Greater Long Beach) 3801 E Willow Street Long Beach, CA 90815	33-0348561	501(c)(3)	5,644	0	FMV		Program Grants
Hillel The Foundation for Jewish Campus Life 1107 University Avenue Columbia, MO 65201	43-1600778	501(c)(3)	5,644	0	FMV		Program Grants
Hillel The Foundation for Jewish Campus Life at the Pennsylvania State Uni 114-117 Pasquerilla Spiritual Ctr University Park, PA 16802	38-3829311	501(c)(3)	23,737	0	FMV		Program Grants
Hillels Around Chicago 30 S Wells Suite 216-600 Chicago, IL 60606		501(c)(3)	30,076	0	FMV		Program Grants
Hillels of Georgia 732 Gatewood Road Atlanta, GA 30329		501(c)(3)	5,644	0	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
Hillels of Northern New Jersey50 Eisenhower Drive Paramus,NJ 07601	52-1758800	501(c)(3)	12,699	0	FMV		Program Grants
Hillels of the Florida Suncoast 13102 North 50th Street Tampa,FL 33617		501(c)(3)	30,788	0	FMV		Program Grants
Hillels of WestchesterMain PO Box 8 Purchase,NY 10577	20-1355458	501(c)(3)	102,756	0	FMV		Program Grants
Hillel-The Foundation for Jewish Campus Life54 North Eagleville Road Storrs,CT 06268	06-6071635	501(c)(3)	5,644	0	FMV		Program Grants
Hillel-Washington & Lee Commerce School 110 Lexington,VA 24450	52-1758794	501(c)(3)	9,000	0	FMV		Program Grants
Hofstra UniversityStudent Center 213 A 200 Hempstead Turnpike Hempstead,NY 11549		501(c)(3)	151,987	0	FMV		Program Grants
Houston Hillel Inc1700 Bissonnet Houston,TX 77005	76-0684042	501(c)(3)	13,149	0	FMV		Program Grants
Inland and DesertRiverside 3947 Ironwood Street San Bernardino,CA 92404	75-3248486	501(c)(3)	5,644	0	FMV		Program Grants
JCC of Northern Virginia8900 Little River Turnpike Fairfax,VA 22031	23-1365179	501(c)(3)	7,000	0	FMV		Program Grants
Jewish Campus Activities Board (Hillel of Greater Philadelphia)Steinhardt Hall 215 South 39th Street Philadelphia,PA 19104		501(c)(3)	17,125	0	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
Jewish Campus Activities Board (University of Pennsylvania)Steinhardt Hall 215 South 39th Street Philadelphia, PA 19104	23-1365179	501(c)(3)	190,383	0	FMV		Program Grants
Jewish Campus Life Fund Inc (Columbia Hillel)The Kraft Center 606 W 115th St New York, NY 10025	23-7077182	501(c)(3)	110,761	0	FMV		Program Grants
John HopkinsThe Smokler Center 3109 North Charles Street Baltimore, MD 21218	52-1758796	501(c)(3)	9,744	0	FMV		Program Grants
Joseph Slifka Center for Jewish Life at Yale80 Wall Street New Haven, CT 06511	06-1257354	501(c)(3)	15,374	0	FMV		Program Grants
JUFJ Federation of Metropolitan Chicago30 South Wells Street Chicago, IL 60606	48-6121370	501(c)(3)	24,231	0	FMV		Program Grants
Kansas University Hillel Foundation722 New Hampshire St Lawrence, KS 66044		501(c)(3)	152,815	0	FMV		Program Grants
Kelly School of Bus at Indiana Univ1275 East Tenth Street Bloomington, IN 47405	95-4575928	501(c)(3)	5,420	0	FMV		Program Grants
LA Pierce & Valley Colleges Milken Jewish Community Campus 22622 Vanowen St West Hills, CA 91307		501(c)(3)	22,576	0	FMV		Program Grants
Lehigh University (allocations only)216 Summit Street Bethlehem, PA 18105	38-3034766	501(c)(3)	6,444	0	FMV		Program Grants
Lester and Jewell Morrison Hillel Jewish Student Center 360 Charles St East Lansing, MI 48823		501(c)(3)	52,263	0	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
Long Island University1 University Plaza S-building 2nd Floor Brooklyn, NY 11201	37-1558345	501(c)(3)	87,640	0	FMV		Program Grants
Los Angeles Council6505 Wilshire Blvd Suite 450 Los Angeles, CA 90048	95-1831070	501(c)(3)	32,699	0	FMV		Program Grants
LoyolaO akton1058 W Loyola Avenue Chicago,IL 60606	36-6143129	501(c)(3)	11,744	0	FMV		Program Grants
Muhlenberg College2400 Chew Street Allentown, PA 18104		501(c)(3)	7,294	0	FMV		Program Grants
New York University7 East 10th Street New York, NY 10003		501(c)(3)	97,024	0	FMV		Program Grants
Northwestern University629 Foster Street Evanston,IL 60201		501(c)(3)	52,264	0	FMV		Program Grants
Philadelphia Commuter2014 North Broad Street Philadelphia, PA 19121	23-1365179	501(c)(3)	22,576	0	FMV		Program Grants
Rochester Area Hillel FoundationUniversity of Rochester Interfaith Chapel Rochester, NY 14627	43-1977667	501(c)(3)	17,699	0	FMV		Program Grants
Rutgers Hillel Corporation93 College Avenue New Brunswick, NJ 08901	26-0177367	501(c)(3)	34,407	0	FMV		Program Grants
San Francisco Hillel Jewish Student Center33 Banbury Drive San Francisco, CA 94132	94-3152892	501(c)(3)	112,190	0	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
Santa Cruz Hillel Foundation 222 Cardiff Place Santa Cruz, CA 95060	77-0427628	501(c)(3)	96,851	0	FMV		Program Grants
Smith CollegeHelen Hills Chapel Northampton, MA 01063	43-6065763	501(c)(3)	5,644	0	FMV		Program Grants
St Louis Hillel at Washington University6300 Forsyth Boulevard St Louis, MO 63105		501(c)(3)	17,210	0	FMV		Program Grants
Tanger Hillel Brooklyn College2901 Campus Road Brooklyn, NY 11210	11-6036253	501(c)(3)	220,429	0	FMV		Program Grants
Texas A & M University800 George Bush Drive College Station, TX 77840	74-1395814	501(c)(3)	5,644	0	FMV		Program Grants
Texas Hillel Foundation2105 San Antonio St Abe and Annie Seibel Building Austin, TX 78705	52-1758802	501(c)(3)	166,254	0	FMV		Program Grants
The Hillel Foundation at Miami UniversityBeerman Jewish Student Center 11 East Walnut Street Oxford, OH 45056	31-6068732	501(c)(3)	5,644	0	FMV		Program Grants
The Hillel Foundation at Purdue University Inc912 West State Street West Lafayette, IN 47906	20-0633180	501(c)(3)	5,644	0	FMV		Program Grants
The Hillel Foundation of Orange County4255 Campus Drive Ste 250 Irvine, CA 92612	23-7172074	501(c)(3)	20,743	0	FMV		Program Grants
The Hillel Jewish Center at the University of Virginia 1824 University Circle Charlottesville, VA 22903	54-6061871	501(c)(3)	14,699	0	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
The Hillel Jewish University Center of PittsburghThe Joseph Stern Building 4607 Forbes Ave Pittsburgh, PA 15213	25-6065236	501(c)(3)	19,125	0	FMV		Program Grants
Towson UniversityJCC Newell Dining 8000 York Rd Towson, MD 21252	52-1758796	501(c)(3)	15,419	0	FMV		Program Grants
University at Albany Hillel Chapel House 1400 Washington Avenue Albany, NY 12222	52-2238644	501(c)(3)	22,576	0	FMV		Program Grants
University of California-Los Angeles574 Hilgard Avenue Los Angeles, CA 90024	95-4575930	501(c)(3)	199,671	0	FMV		Program Grants
University of CA -San Diego 5742 Montezuma Road San Diego, CA 92115	33-0519225	501(c)(3)	75,889	0	FMV		Program Grants
University of Chicago5715 South Woodlawn Avenue Chicago, IL 60637	36-2167761	501(c)(3)	59,606	0	FMV		Program Grants
University of Delaware47 West Delaware Avenue Newark, DE 19711	58-2051970	501(c)(3)	131,421	0	FMV		Program Grants
University of Georgia1155 South Milledge Avenue Athens, GA 30606		501(c)(3)	12,699	0	FMV		Program Grants
University of Illinois-Chicago Levine Hillel Center 924 S Morgan Street Chicago,IL 60607	36-2167761	501(c)(3)	7,423	0	FMV		Program Grants
University of Illinois-Urbana 503 East John Street Champaign,IL 61820	36-2167761	501(c)(3)	47,448	0	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
University of Iowa Louis Shulman Hillel Foundation 122 East Market Street Iowa City,IA 52245	42-6084674	501(c)(3)	5,644	0	FMV		Program Grants
University of MD-Baltimore CountyUMBC Hillel The Interfaith Ctr 1000 Hilltop Circle Baltimore,MD 21250	52-1758796	501(c)(3)	9,844	0	FMV		Program Grants
University of Michigan1429 Hill Street Ann Arbor,MI 48104	38-6119964	501(c)(3)	42,462	0	FMV		Program Grants
University of Minnesota Hillel Foundation 1521 University Avenue SE Minneapolis,MN 55414	41-6138613	501(c)(3)	12,699	0	FMV		Program Grants
University of Southern California3300 South Hoover Boulevard Los Angeles,CA 90007	81-0554021	501(c)(3)	26,199	0	FMV		Program Grants
University of Southern CA - Santa Barbara781 Embarcadero del Mar Isla Vista,CA 93111		501(c)(3)	16,924	0	FMV		Program Grants
University of Vermont Hillel Allen House 461 Main Street Burlington,VT 05405		501(c)(3)	15,502	0	FMV		Program Grants
University of Wisconsin Hillel Foundation 611 Langdon Street Madison,WI 53703	39-2035142	501(c)(3)	117,553	0	FMV		Program Grants
Vanderbilt Hillel Inc2421 Vanderbilt Place Nashville,TN 37212	62-6073391	501(c)(3)	10,244	0	FMV		Program Grants
BRANDEIS UNIVERSITYPO BOX 549110 BRANDEIS UNIVERSITY MS 205 WALTHAM,MA 02454	27-3185784	501(c)(3)	15,316	0	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
MASS INST OF TECHNOLOGY40 MASSACHUSETTS AVENUE W11 CAMbridge,MA 02139		501(c)(3)	5,644	0	FMV		Program Grants
NORTHEASTERN UNIVERSITY70 SAINT STEPHEN STREET BOSTON,MA 02115		501(c)(3)	5,644	0	FMV		Program Grants
TUFTS UNIVERSITY GRANOFF FAMILY HILLEL CENTER TUFTS UNIVERSITY MEDFORD,MA 02155		501(c)(3)	101,978	0	FMV		Program Grants
UNIVERSITY OF CINCINNATIROSE WARNER HOUSE 2615 CLIFTON AVENUE CINCINNATI,OH 45220		501(c)(3)	12,699	0	fMV		Program Grants
UNIVERSITY OF NEVADA LAS VEGAS2317 RENAISSANCE DRIVE LAS VEGAS,NV 89119		501(c)(3)	5,644	0	FMV		Program Grants

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Employer identification number 52-1844823
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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		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax idemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	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		
<input checked="" type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c Participate in, or receive payment from, an equity-based compensation arrangement?		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?		No
b Any related organization?		No
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?		No
b Any related organization?		No
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		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		No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?		

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) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
WAYNE FIRESTONE	(i)	327,873	0	19,423	17,077	18,951	383,324	0
	(ii)	0	0	0	0	0	0	0
Aryeh Furst	(i)	298,909	0	33,130	17,125	18,491	367,655	0
	(ii)	0	0	0	0	0	0	0
scott brown	(i)	227,179	0	0	13,672	14,916	255,767	0
	(ii)	0	0	0	0	0	0	0
tim cohen	(i)	223,433	0	0	13,500	14,916	251,849	0
	(ii)	0	0	0	0	0	0	0
matthew braman	(i)	189,222	0	0	0	10,860	200,082	0
	(ii)	0	0	0	0	0	0	0
eran gasko	(i)	180,849	0	0	11,242	19,592	211,683	0
	(ii)	0	0	0	0	0	0	0
robert goldberg	(i)	181,854	0	0	11,026	14,916	207,796	0
	(ii)	0	0	0	0	0	0	0
david raphael	(i)	139,972	0	0	8,719	18,475	167,166	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

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

Name of the organization
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	9	64,230	Average Daily 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 ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?				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.

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493136033191

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Employer identification number 52-1844823
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		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 15a		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 websites such as Guidestar.

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		There were no changes from the prior year.

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment
Sequence No 67

Department of the Treasury
Internal Revenue Service

See separate instructions. Attach to your tax return.

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	

6	(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 smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2008 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 2010 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	307,346

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 2009	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 2009 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	

Non-Res Prop Type 1 count 0 Non-Res Prop Type 2 count 0 Non-Res Prop Totals count 0

Part IV Summary (see instructions)

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 instructions	22	307,346
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	

21 Listed proper

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?						Yes No			24b If "Yes," is the evidence written?			Yes 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 (do not 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)												
Note: 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 2009 tax year (see instructions)									
43 A mortization of costs that began before your 2009 tax year							43		
44 Total. Add amounts in column (f) See the instructions for where to report							44		

Additional Data

Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Beatrice S Mandel CHAIRMAN	2 00	X		X				0	0	0
Amy A B BRESSMAN VICE-CHAIR	2 00	X		X				0	0	0
stEPHEN M GREENBERG VICE-CHAIR	2 00	X		X				0	0	0
LyNNE B HARRISON VICE-CHAIR	2 00	X		X				0	0	0
Adam Kornetsky 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 Assistant Treasurer	2 00	X		X				0	0	0
David M Cohen Secretary	2 00	X		X				0	0	0
Edgar M Bronfman Ex-O fficio	2 00	X						0	0	0
Randall Kaplan Ex-O fficio	2 00	X						0	0	0
MICHAEL B RUKIN PAST CHAIR	2 00	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
LaURIE BLITZER EXECUTIVE COMMITTEE	2 00	X						0	0	0
ThoMAS A BLUMBERG 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
Philip H Cohen EXECUTIVE COMMITTEE	2 00	X						0	0	0
MarceLO CYNOVICH EXECUTIVE COMMITTEE	2 00	X						0	0	0
Lee Dranikoff EXECUTIVE COMMITTEE	2 00	X						0	0	0
Edith B Everett EXECUTIVE COMMITTEE	2 00	X						0	0	0
William Heller EXECUTIVE COMMITTEE	2 00	X						0	0	0
Barry L Levin EXECUTIVE COMMITTEE	2 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mort Lowenthal EXECUTIVE COMMITTEE	2 00	X						0	0	0
Karen Moss eEXECUTIVE COMMITTEE	2 00	X						0	0	0
Dana Raucher eEXECUTIVE COMMITTEE	2 00	X						0	0	0
AnDREW SKLOVER EXECUTIVE COMMITTEE	2 00	X						0	0	0
Jeffrey Summit EXECUTIVE COMMITTEE	2 00	X						0	0	0
Carol B Wise EXECUTIVE COMMITTEE	2 00	X						0	0	0
Lawrence S Bacow MEMBER	2 00	X						0	0	0
Sandy Baklor MEMBER	2 00	X						0	0	0
Harry Baumgarten MEMBER	2 00	X						0	0	0
Michelle Blumenberg 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 E A 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
Nancy Duber MEMBER	2 00	X						0	0	0
Barry Effron MEMBER	2 00	X						0	0	0
David Einhorn MEMBER	2 00	X						0	0	0
Iris Feinberg MEMBER	2 00	X						0	0	0
Daniel Ferman MEMBER	2 00	X						0	0	0
Hannah Fisher-Arfer MEMBER	2 00	X						0	0	0
David GedZELMAN MEMBER	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
Jane Gellman MEMBER	2 00	X						0	0	0	
Cassandra GOTTLIEB MEMBER	2 00	X						0	0	0	
Alex Halberstein MEMBER	2 00	X						0	0	0	
Walter Harrison MEMBER	2 00	X						0	0	0	
Gary Hirschberg MEMBER	2 00	X						0	0	0	
Ari Israel MEMBER	2 00	X						0	0	0	
Sarah Batya Joselow MEMBER	2 00	X						0	0	0	
Deborah Kallick 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	
Leiba Krantzberg MEMBER	2 00	X						0	0	0	
Mark LAINER MEMBER	2 00	X						0	0	0	
Scott Lefton MEMBER	2 00	X						0	0	0	
Danielle Leshaw MEMBER	2 00	X						0	0	0	
David Levy MEMBER	2 00	X						0	0	0	
NORMAN LIPOFF MEMBER	2 00	X						0	0	0	
FREDerick MARGULIES MEMBER	2 00	X						0	0	0	
Edward Marlowe MEMBER	2 00	X						0	0	0	
Robert W Matanky MEMBER	2 00	X						0	0	0	
Marla Meyers MEMBER	2 00	X						0	0	0	
Larry Moneta MEMBER	2 00	X						0	0	0	
STEPHEN OPPENHEIMER 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	
Lee Perlman MEMBER	2 00	X						0	0	0	

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

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sidney Pertnoy MEMBER	2 00	X						0	0	0
Brette Peyton MEMBER	2 00	X						0	0	0
Sarah Rapoport MEMBER	2 00	X						0	0	0
Russ Robinson MEMBER	2 00	X						0	0	0
Keith Rosenbloom MEMBER	2 00	X						0	0	0
Barbara Roswell MEMBER	2 00	X						0	0	0
Lindsey Ryb MEMBER	2 00	X						0	0	0
Nina Sandler MEMBER	2 00	X						0	0	0
Morton Owen Schapiro MEMBER	2 00	X						0	0	0
Robert Shlachter MEMBER	2 00	X						0	0	0
Jordan Sills MEMBER	2 00	X						0	0	0
Jenna Silverman MEMBER	2 00	X						0	0	0
Adam Simon MEMBER	2 00	X						0	0	0
Edgar Snyder MEMBER	2 00	X						0	0	0
Andy Sternlieb MEMBER	2 00	X						0	0	0
Bluma Stoller MEMBER	2 00	X						0	0	0
Susan Turnbull MEMBER	2 00	X						0	0	0
Sharon Margolin Ungerleider MEMBER	2 00	X						0	0	0
Carey Wolchok 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				347,296	0	36,028
Aryeh Furst CFO	35 00				X			332,039	0	35,616

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
scott brown executive vp	35 00				X			227,179	0	28,588
tim cohen senior vp	35 00					X		223,433	0	28,416
matthew braman vp of information technology	35 00					X		189,222	0	10,860
eran gasko vp institutional advancement	35 00					X		180,849	0	30,834
robert goldberg vp campus development	35 00					X		181,854	0	25,942
david raphael executive campus liaison	35 00					X		139,972	0	27,194

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
POSTAGE/SHIPPING/DELIVE	1,210,919	6,247	12,775	1,191,897
program expense	870,476	871,944	-1,468	
DEBT SERVICE	373,558	373,558		
MISCELLANEOUS	202,457	24,859	-20,812	198,410
Bad Debt Expense	175,000		175,000	