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DLN: 93493187010015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form

Open to Public

Δ Fo	the.	2013 ca	lendar year, or tax year beginning	0 and its instructions is at <u>ww</u>						
		applicable	C Name of organization	7 09-01-2013 , 2013, and end	illig 00	-J1-201 4	D Emplo	yer idei	ntification number	
		hange	Hofstra University				11-16	3000	5	
— Nar		_	Doing Business As					30900	,	
— _{Inıt}		_			I					
Ten			128 Hofstra University	ail is not delivered to street address)	Room/	suite	E Telepho	ne num	ber	
_		return	100E Phillips Hall Suite City or town, state or province, cour	atny and ZID or foreign neetal code			(516)	463-6	820	
_			Hempstead, NY 11549	ntry, and ZIP or foreign postal code						
Арр	licatio	n pending				1			6 633,928,140	
			F Name and address of prin				s this a group ubordinates?	return	for	
			Hofstra University			•	uborumates,		1 16514 110	
			Hempstead, NY 11549				re all subordi	nates	┌ Yes ┌ No	
T Tax	-exen	npt status	5	nsert no.)	527		icluded? : "No " attach	a list	(see instructions)	
_		<u> </u>		113CTC 110 / 1 4547(d)(1) 01 / 5	727	-				
J W	ebsit	e:⊫ wv	ww hofstra edu			H(c)	Group exempt	ion nur	nber ►	
K Forn	of or	rganızatıo	n 🔽 Corporation 🗌 Trust 🦳 Associatio	n		L Year	of formation 19	35 M	State of legal domicile N	
Pa	rt I	Sun	nmary							
		•	describe the organization's mission	n or most significant activities	5					
		INSTIT	UTION OF HIGHER LEARNING							
<u>ĕ</u>										
E										
Governance	2	Check	this box 🔰 if the organization dis	scontinued its operations or di	sposed	d of more th	an 25% of its	net as	sets	
	3	Number	of voting members of the govern	ing body (Part VI line 1a)				з	3	
න ගු			of independent voting members of					4	3	
¥			umber of individuals employed in a					5	7,12	
Activities &			umber of volunteers (estimate if n					6	30	
۹,			nrelated business revenue from P					7a	1,523,62	
			elated business taxable income fi					7b	, ,	
							Prior Year		Current Year	
	8	Cont	ributions and grants (Part VIII, lii			32,006,0	066	30,444,248		
Revenue	9		am service revenue (Part VIII, li				418,635,2	209	434,855,483	
e Ac	10	Inves	stment income (Part VIII, column	(A), lines 3, 4, and 7d)			18,487,841		26,168,51	
芷	11	Othe	r revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 1	1e)		197,1	.70	-101,520	
	12		revenue—add lines 8 through 11			ine	469,326,2	86	491,366,72	
	13						92,920,2		103,290,72	
	14		fits paid to or for members (Part I				32,320,2	0	103,230,72	
	15		res, other compensation, employe					<u> </u>		
82	13	5-10		247,268,8	250,179,209					
Expenses	16a	Profe	ssional fundraising fees (Part IX,			0	(
ਡਿੰ	b	Total f	undraising expenses (Part IX, column (D)	, line 25) 🕨 <mark>4,594,610</mark>						
_	17	Othe	r expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e) .			100,342,3	301	102,764,069	
	18	Total	expenses Add lines 13-17 (mus	st equal Part IX, column (A), lı	ne 25)		440,531,416 456,233			
,	19	Reve	nue less expenses Subtract line	18 from line 12		- 	28,794,8		35,132,722	
८०% ४०%						Begin	ning of Curre	nt	End of Year	
Set afai	20	Total	assets (Part X, line 16)		_	.	923,204,4	91	995,110,462	
Not Assets or Fund Balances	21		liabilities (Part X, line 26)			`.├──	390,628,6		391,609,914	
8 <u>8 8</u>	22		ssets or fund balances Subtract				532,575,8		603,500,548	
Par	t II		nature Block				, ,		, ,	
ny kr	owle	dge and	perjury, I declare that I have exa belief, it is true, correct, and com knowledge) is based on			
Sign		Sign	nature of officer				2015-07-02 Date			
3igii Here		Cat	herine Hennessy VP Financial Affairs & Tr	easurer						
			e or print name and title	ouddi Ci						
		<u>''</u>	Print/Type preparer's name	Preparer's signature		Date	Check If	PTIN		
Paid	l	-	Firm's name ►	<u> </u>			self-employed Firm's EIN ►			
Pre	oare	er					I IIIII 5 LIN F			
Use			Fırm's address 📂				Phone no			

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

┌ Yes ┌ No

Part TV	Checklist o	f Required	Schedules
	CHECKHISLO	Reduired	Sciledules

			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 (see instructions)? $^{f colored}$	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III"	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
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	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥌	13	Yes	
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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 (see instructions)	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? <i>If "Yes," complete Schedule G, Part II</i>	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	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

CI I	Check if Schedule O contains a response or note to any line in this Part V			г
	Check in Schedule O contains a response of note to any fine in this part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 756			
)	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
:	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	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 (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	22	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line $3b$, provide an explanation in Schedule O	3a 3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		163	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
•	organization solicit any contributions that were not tax deductible as charitable contributions?			IN
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	76	Vaa	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
			1	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?		1	
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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.

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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 governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
	ation B. Balinia a (This Continue D. Constant information about a disignature sized by the Internal D			
<u> 5</u> e	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>event</u>	<u>ie Coa</u>	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	re Coa Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

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 made these available. Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►CATHERINE HENNESSY VP FINANC HOFSTRA UNIVERSITY Hempstead,NY 115491280 (516) 463-6820

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	Name and Title Average Position (do not check Reportable Reportable nours per more than one box, unless compensation compe						(E) Reportable compensation		(F) Estima amount o	ited f other							
		any hours and a director/trustee) organization (W- organizations								from related organizations (V	_{/-}	compens from t						
		for related organizations below dotted line)	Individual truste or director	Institutional Trustee	Officei		Highest compensated employee	Former	2/1099-MISC) 2/1099-MIS		2/1099-MISC		organizati relati organiza	on and ed				
			å: e:	rustee			ensated											
1b	Sub-Total				•			•				+						
c d	Total from continuation sheet Total (add lines 1b and 1c).	s to Part VII, S	ection A	١.	•	•	•			7,414,394		0		1,014,237				
2	Total number of individuals (in \$100,000 of reportable compe	-					d abov	e) wl	l ho receive		an	<u> </u>		1,011,237				
													Yes	No				
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highes	t compen	sated employee	3		No				
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? If "Yes," complete Schedule J for such individual									4	Yes								
5	Did any person listed on line 1 services rendered to the organ									anızatıon • • •	or individual for	5		No				
Se	ection B. Independent Co	ntractors																
1	Complete this table for your fiv		ensated	d ınde	epen	dent	contr	acto	rs that rec	eived mo	re than \$100,000	of						
		ation Report co									thin the organizat		tax year					
	N	(A) ame and husiness:	address					compensation from the organization Report compensation for the calendar year ending with or within the organization (A) (B) Name and business address Description of services										

Structure Tone, 770 Broadway 9th Floor NEW YORK NY 10003 1,374,028 Jeca Associates Inc, 23 Knight Road PO Box 4240 WAYNE NJ 07474 Construction 1,174,007 Musco Corporation, 100 1st Ave West - PO Box 808 OSKALOOSA IA 52577 Lighting Install 956,763 Veterans Transportation Co Inc, 20 Lynnn Place VALLEY STREAM NY 11580 Bus Service 936,850

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization >54

Contributions, Gifts, Grants and Other Similar Amounts	14
Contributio and Other	1 (
Program Service Revenue	2
	3 4 5
	6
	7
Revenue	8
Other I	9
	10
	•
	11

Form 99		-						Page 9
Part V	/##	Statement o	o f Revenue ule O contains a respon:	se or note to any lir	ne in this Part VIII			
		Oncer in Senior	are o contamb a respon		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>ω 2</u>	1a	Federated cam	paigns 1a					
Grants	ь	Membership du	es 1b					
يَ قِ	С	Fundraising eve	ents 1c	880,512				
Giffs, iilar A	d	Related organiz	zations 1d					
m, G	е	Government grant	s (contributions) 1e	9,847,375				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	19,716,361				
ntrib d Oth	g	1a-1f \$	ons included in lines	1,900,344				
<u>က</u> မာ	h	Total. Add lines	s 1 a - 1 f	- 1 · 1 · ▶	30,444,248			
<u> </u>			-	Business Code				
۲en	2a	TUITION & FEES		611600	377,564,489	377,564,489		
22	Ь	SALES& SVC AUX E		812900	41,509,814	40,015,106	1,494,708	
MCA	C	SALES& SVC ED DF		900099	2,674,684	2,674,684		
Program Serwoe Revenue	d	OTHER SOURCE EI	D SV	900099	13,106,494	13,106,494		
	e	All other progra						
Ş	f	All other progra	am service revenue					
	g		s 2a – 2f		434,855,481			
	3		ome (including dividend ar amounts)		9,858,623		28,921	9,829,702
	4		stment of tax-exempt bond p		0			
	5	Royalties		🕨	0			
		_	(ı) Real	(II) Personal				
	6a	Gross rents Less rental	227,322 50,230					
	b	expenses	ŕ					
	С	Rental income or (loss)	177,092	0				
	d	Net rental inco	me or (loss)	•	177,092			177,092
		Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	158,194,789					
	ь	Less cost or other basis and	141,884,900					
		sales expenses						
	C	Gain or (loss)	16,309,889		16,309,889			16,309,889
ψ	d 8a		rom fundraising		10,309,009			10,303,003
Other Revenue		\$880	s reported on line 1c)					
ŭ.		See Fait IV, III	a	332,331				
ih e	ь	Less direct ex	penses b	615,661				
δ	С	Net income or (loss) from fundraising e	vents 🛌	-283,330			-283,330
	9a	Gross income f	rom gaming activities ne 19					
		See Fait IV, III	a	15,346				
	ь	Less direct ex	penses b	10,628				
	С	Net income or (ے loss) from gamıng actıv)	ities	4,718			4,718
	10a	Gross sales of						
		returns and allo	owances . a					
	ь	Less cost of q	oods sold b					
	С		(loss) from sales of inve	ntory 🛌	О			
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	С							
	d	All other reven	ue [
	е	Total. Add lines	s 11a-11d	▶	0			
	12	Total revenue.	See Instructions	· · · •	491,366,721	433,360,773	1,523,629	26,038,071

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)

Secti	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All	l other organizati	ions must compl	ete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u></u>	<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, b, 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 United States See Part IV, line 21	27,633	27,633		
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	103,263,088	103,263,088		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	, ,		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,165,862	1,525,176	4,287,577	353,109
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	181,014,777	160,443,482	18,454,375	2,116,920
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	16,601,442	14,201,333	2,181,107	219,002
9	Other employee benefits	34,240,339	28,655,908	5,120,221	464,210
10	Payroll taxes	12,156,789	10,448,351	1,548,974	159,464
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	347,917	53,786	293,381	750
C	Accounting	284,583		284,583	
d	Lobbying	40,365		40,365	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	3,237,177		3,237,177	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,551,125	3,343,979	1,026,671	180,475
12	Advertising and promotion	2,578,811	431,348	2,147,463	100,175
13	Office expenses	23,399,180	20,202,713	2,681,452	515,015
14	Information technology	6,185,198	4,372,507	1,812,691	313,013
15	Royalties	0,103,130	4,372,307	1,012,031	
16	Occupancy	12,326,390	11,626,916	686,707	12,767
17	Travel	12,270,303	11,127,941	787,202	355,160
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	12,270,303	11,127,941	787,202	333,100
19	Conferences, conventions, and meetings	531,961	380,846	150,339	776
20	Interest	4,092,654	3,934,428	158,226	
21	Payments to affiliates	4,032,034	3,331,120	130,220	
22	Depreciation, depletion, and amortization	18,082,551	13,991,883	4,090,668	
23	Insurance	4,842,351	256,981	4,585,370	_
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	1,012,001	250,701	1,1333,1373	
а	BAD DEBT AND COLLECTION COST	2,365,162	2,196,030	169,132	
b	CREDIT CARD FEES	232,086	232,086		
c	CO-SPONSORED INCOME SHARE	1,071,972	1,071,972		
d	MEDICAL SCHOOL STIPENDS	716,832	716,832		
e	All other expenses	5,607,451	1,454,110	3,936,379	216,962
25	Total functional expenses. Add lines 1 through 24e	456,233,999	393,959,329	57,680,060	4,594,610
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Check if Schedule O contains a response or note to any line i	n this P	art X			
		·			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			100,996,613	2	114,044,241
	3	Pledges and grants receivable, net			14,638,289	3	16,774,520
	4	Accounts receivable, net			7,156,930	4	6,933,265
	5	Loans and other receivables from current and former officers employees, and highest compensated employees. Complete Schedule L	Part II	of	0	5	0
Assets	6	Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, an and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul	d contri employ	buting employers			0
Š	7	Notes and loans receivable, net			6,166,727	7	7,844,231
4	8	Inventories for sale or use			364,763		321,997
	9	Prepaid expenses and deferred charges			5,786,053		4,766,394
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	• • 579,966,607	, ,		1,1 55,55 1
	ь	Less accumulated depreciation	10b	289,841,380	261,985,046	10c	290,125,227
	11	Investments—publicly traded securities			290,792,159	11	299,101,625
	12	Investments—other securities See Part IV, line 11			189,079,266	12	237,318,029
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			46,238,645	15	17,880,933
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			923,204,491		995,110,462
	17	Accounts payable and accrued expenses			20,524,500	17	28,376,914
	18	Grants payable			0		0
	19	Deferred revenue			107,766,242		111,412,941
	20	Tax-exempt bond liabilities			188,512,552		184,538,285
	21	Escrow or custodial account liability Complete Part IV of Sc			632,517	21	630,282
Liabilities	22	Loans and other payables to current and former officers, dire key employees, highest compensated employees, and disqua	ctors, tr		·		,
ap		persons Complete Part II of Schedule L			О	22	0
	23	Secured mortgages and notes payable to unrelated third part	ies .		3,981,308	23	3,396,033
	24	Unsecured notes and loans payable to unrelated third parties	s		0	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete F	Part X of	f Schedule	00.044.557		22.255.452
		D			69,211,557	25	63,255,459
	26	Total liabilities. Add lines 17 through 25			390,628,676	26	391,609,914
or Fund Balance	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			342,169,122	27	385,229,872
<u>ಣ</u>					76,005,941	28	91,648,372
<u> </u>	28	Temporarily restricted net assets			114,400,752	29	126,622,304
ĭ	29	Permanently restricted net assets			114,400,752	29	120,022,304
표		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	nere F	and			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
As:	32	Retained earnings, endowment, accumulated income, or othe				32	
Net /	33	Total net assets or fund balances			532,575,815		603,500,548
Ż	34	Total liabilities and net assets/fund balances			923,204,491	34	995,110,462
			- •	-	1,25 ., .01	'	Form 900 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		491,3	366,721
2	Total expenses (must equal Part IX, column (A), line 25)	2		456,2	233,999
3	Revenue less expenses Subtract line 2 from line 1	3		35,1	132,722
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		532,5	575,815
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		35,7	792,011
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		603,5	500,548
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
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?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 11-1630906

Name: Hofstra University

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

Compensated Employees, and Inde	pendent Cor	itracto	rs			, .	,			
(A)	(B)			(C)				(D)	(E)	(F)
Name and Title	Average	Posit	ion (do no				Reportable	Reportable	Estimated amount
	hours per	more th						compensation	compensation	of other
	week (list any hours	perso and a						from the organization (W-	from related	compensation from the
	for related		ı		_			2/1099-MISC)	organizations (W- 2/1099-MISC)	organization and
	organizations	옥호	5	Office	Keş emploşee	등림	Former	2/1033-11130)	2/1033-11130)	related
	below	율률	Institutional	쬬	0	통환	ΙĒ			organizations
	dotted line)	[월문	∄	<u> -</u>	Ř	S &	<u> </u> 4			
		ăä	[울		ĕ	@8				
		≅] =		90	종				
		Individual trustee or director	[2		_	≗				
		"	Trustee			Highest compensated employee				
			"			2				
Alan J Bernon	3 0									
Trustee		×								
Tejınder Bındra	2 0	-								
	20	Х								
Trustee										
Mr Robert F Dall	2 0	×								
Trustee		_ ^								
Mrs Helene Fortunoff	2 0									
Trustee	1	×								
Martin B Greenberg	2 0	-								
		x	1							
Trustee	 	ļ	<u> </u>				-			
Dr Leo A Guthart	2 0	×	1							
Trustee										
Mr Peter S Kalıkow	2 0] ,								
Trustee		×								
Arthur J Kremer Esq	2 0									
		Х								
Trustee Mrs Karen L Lutz										
MIS Kalefi L Lutz	2 0	X								
Trustee										
Mr David S Mack	2 0									
Trustee		X								
Janıs M Meyer Esq	2 0									
Trustee		X								
Mr John D Miller	2 0									
	20	Х								
Trustee										
Manlyn B Monter	2 0	×								
Trustee										
Ms Martha S Pope	2 0] ,								
Trustee		×								
James E Quinn	2 0									
Total		X								
Trustee Mr Edwin C Reed	2.0									
MI LUWIN C Reed	2 0	x								
Trustee										
Robert Rosenthal	2 0	l x	1							
Trustee		^	L							
Mr Frank G Zarb	2 0									
Trustee	1	X								
Debra A Sandler	2 0									
	20	X								
Trustee										
Thomas J Sanzone	2 0	l x								
Trustee										
Joseph Sparacio	2 0									
Trustee		×								
Peter G Schiff	2 0									
]	х								
Trustee Steven J Freiberg	2 0	-	\vdash							
Seven 5 Freiberg		×								
Trustee		<u> </u>								
Arno H Fried	2 0	x								
Trustee	1	^								
Diana E Lake	2 0									
Trustee	1	X								
	1				1	1	1	I	I	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (D) (E) (F) (C) Position (do not check Name and Title Average Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and 970 Highest compensated employee Former Individual trustee or director organizations related Institutional below organizations emplo) ee dotted line) Trustee Julio A Portalatin 2 0 Χ Trustee Stuart Rabinowitz 60 0 Χ Χ 1,031,105 0 73,239 President Kenneth Brodlieb 2 0 Χ Trustee James D'Addario 2 0 Х Trustee Michael Seiman 2 0 Χ Trustee Leonard H Shapiro 2 0 Χ Trustee M Patricia Adamski 60 0 Х 0 460,623 75,989 Sr VP for Plan & Adm Herman A Berliner 60 0 Х 414,633 0 73,239 Provost and Sr VP Melissa Connolly 60 0 Х 0 262,606 61,614 VP Univ Relations Dolores Fredrich 60 0 Χ 448,561 0 51,833 VP for Legal Affairs Richard V Guardino Jr 60 0 Χ 0 246,439 28,342 VP Business Devel Catherine Hennessy 60 0 Х 487,818 0 62,457 VP Finance and Treas Sandra Johnson 60 0 Χ 268,014 0 31,317 VP for Student Aff Robert W Juckiewicz 60 0 Х 313,316 0 62,457 VP for Info Tech Alan Kelly 60 0 Χ 302,236 0 61,823 VP for Development Joseph Barkwill 60 0 Χ 270,260 0 49,979 VP of Facilities Jessica Eads 60 0 Χ 255,915 0 48,271 VP for Enrollment Management Stephanie Bushey 60 0 Χ 203,096 0 41,938 VP for Inst Research & Assess Jeffrey Hathaway 60 0 Χ 418,533 0 36,359 **VP Athletics** Lawrence Smith 60 0 Χ 571,715 0 24,126 Dean, School of Medicine David Burghardt 60 0 0 Х 329,967 68,818 Co-Director, Stem Research Veronica Catanese 60 0 Х 384,639 0 56,082 Vice Dean, School of Medicine Patrick Socci 60 0 329,779 Х 0 33,115 Dean, School of Business Eric Lane 60 0

Χ

Dean, Law School

415,139

0

73,239

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As Filed Data -

DLN: 93493187010015

OMB No 1545-0047

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

2013

Open to Public Inspection

	<u>www.irs.gov/form990</u> .	
Name of the organization		Employ
Hofstra University		
		1

Employer identification number

11-1630906

	rt I			blic Charity Sta						nstructions	s.	
he o	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one be	ox)			
1	Γ	A chur	ch, conventi	on of churches, or as	ssociation of	churches d	escribed in s e	ection 170(l	b)(1)(A)(i).			
2	<u> </u>	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedu	ule E)					
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	ation descri	ıbed ın sectio	n 170(b)(1)	(A)(iii).			
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in sec	ction 170(b)(1)(A)(iii).	Enter the	
_	_			ty, and state								
5	J	_	•	erated for the benefi	_	or universi	ty owned or o	perated by a	a government	tal unit des	cribed in	
	_			A)(iv). (Complete P	•							
6	<u> </u>			local government or	_							
7	ı	_		at normally receives		•	support from	a governme	ental unit or fi	rom the ger	neral publi	С
8	\vdash	described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)										
9	<u></u>		•	at normally receives			•	•	outions mem	hershin fee	s and arn	5 5
-	•	_		ities related to its ex					•	-	-	
				oss investment inco	•	-			• •			;
								•		,		
10	Г	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	Ė			ganized and operated						o carry out	the purpo	ses of
	·	one or the box	more public that descri	ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ibed in secti ization and d	ion 509(a)(1) complete line) or section s 11e throu	509(a)(2) S	ee section !	509(a)(3)	.Check
e f g	I	other the section of the ocheck the Since A	nan foundatı 1509(a)(2) rganızatıon thıs box	ox, I certify that the on managers and othe received a written do 2006, has the organi	her than one	or more pub	olicly support	ed organızat Type I, Typ	tions describ	ed in sectio	on 509(a)	(1) or
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii)		Yes	No
		and (111) below, the	governing body of th	ie supported	organızatıor	٦?			119	g(i)	
		(ii) A fa	amıly memb	er of a person descri	bed in (i) abo	ove?				119	g(ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11 g	J(iii)	
h		Provide	the followi	ng information about	the supporte	ed organizat	ıon(s)		_			
(i) Name of supported organization		rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(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 organizat col (i) org in the U	ion in anized	mon	mount of letary oport
				instructions))	Yes	No	Yes	No	Yes	No		
											1	
											1	
Γota	ı										1	

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 29,874,337 35,101,082 28,342,305 32,006,066 30,444,248 155,768,038 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 29,874,337 35,101,082 28,342,305 32,006,066 30,444,248 155,768,038 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 14,736,100 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 141,031,938 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (a) 2009 (f) Total beginning in) 🟲 35,101,082 Amounts from line 4 29,874,337 28,342,305 32,006,066 30,444,248 155,768,038 Gross income from interest, dividends, payments received on securities loans, rents, royalties 7,836,537 8,427,673 9,263,679 10,576,265 10,057,024 46,161,178 and income from similar sources Net income from unrelated business activities, whether or 28,709 44,684 425,200 105,264 354,214 958,071 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 386,670 318,359 318,925 375,068 347,657 1,746,679 capital assets (Explain in Part IV) 11 Total support (Add lines 7 204,633,966 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 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 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 68 920 % Public support percentage for 2012 Schedule A, Part II, line 14 15 0 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. 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 - 2012. 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

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 000 o	000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493187010015

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Hofstra University 11-1630906 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2013						Page 2		
Pä	art III-A Complete if the organization	is exemp	t under	section 501(c)(3) and fil	ed Form 5768	(election		
_	under section 501(h)). Check ► If the filing organization belongs to a	on offiliated	aroup (and	List in Dort IV or	ah affiliated are	un mambaria nam	o addraca EIN		
~	expenses, and share of excess lobb			iistiii Paitiv ea	ich ammateu gro	up member s nam	e, address, ETN		
<u>B</u>	Check ► ☐ if the filing organization checked bo	x A and "lim	ited contro	ol" provisions ap	oly				
	Limits on Lobbying E (The term "expenditures" means ar			l.)		(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence public of	opinion (gras	s roots lob	bying)					
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)					
c	Total lobbying expenditures (add lines 1a and 1	b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1	c and 1d)							
f	Lobbying nontaxable amount Enter the amount is columns	from the follo	wing table	ın both					
	If the amount on line 1e, column (a) or (b) is:	The lobbyi	ing nontax	able amount is:					
	Not over \$500,000	20% of the	amount on lir	ne 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the	e excess over \$500,	000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the	e excess over \$1,00	0,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the	excess over \$1,500	000				
	Over \$17,000,000	\$1,000,000							
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)							
h	Subtract line 1g from line 1a If zero or less, ent	er-0-							
i	Subtract line 1f from line 1c If zero or less, ente	er-0-							
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line	1ı, dıd the	organization file	Form 4720 rep	eporting Yes No			
	4-Year Av (Some organizations that made a columns below. See t Lobbying Exp	section 5 he instruc	01(h) el ctions fo	r lines 2a thr	have to cor ough 2f on p		ne five		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total		
<u>2a</u>	Lobbying nontaxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots nontaxable amount								

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has I filed Form 5768 (election under section 501(h)).	TOP				<u> </u>
For o	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ		Yes	No	An	noun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		1			
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?	Yes				
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?	Yes			4	0,365
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			1	.0,464
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes				
i	O ther activities?		Νo			
j	Total Add lines 1c through 1i				5	0,829
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		_			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sec	ctio	n
			_	-	es/	No
1	Were substantially all (90% or more) dues received nondeductible by members?		⊢	1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a	<u> </u>			
Ь	Carryover from last year	2b				
	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information		l			
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grount II-B, line 1 Also, complete this part for any additional information	ıp lıst),	, Part II	-A, lın	e 2,	and
	Return Reference Explanation					
	The University paid membership dues to the Commission on Independe (CICU) CICU has estimated that 5 89% of its operating budget relates year, the portion of the dues related to lobbying activities was \$4,365 (recommendation of CICU, the University will mail individual letters to oil issues relating to private higher education. The University paid \$36,000 NYS legislation and regulation and in addressing other state issues.	s to lob On occ fficials O to a l	bying ac asion, a to lend aw firm	tivitie t the its sup to advi	s Fo port se o	or the on on
Sche	Represents salary allocations for Officers and direct lobbying expenses direct contact with NY State officials and their staff	as rep	orted to	NY St	ate f	or

Belledale e (Form 330 of	-		rage -r
Part IV Suppler	nental Information <i>(continu</i>	ed)	
Return Referer	ce	Explanation	
-			
-			

Schedule D (Form 990) 2013

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DLN: 93493187010015

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

emal Rever	nue Service and its instruct	tions is at <u>www.irs.gov/10/11/990</u> .			Inspect	(O)	
	f the organization University		Emp	loyer ident if ica	tion numbe	er	
			11-	1630906			
Part I			unds	or Accounts	. Complet	te ıf	the
	organization answered "Yes" to Form 990	(a) Donor advised funds	1 6	(b) Funds and o	ther accou	nts	
Tot	al number at end of year		<u> </u>	(2)			13
Agg	gregate contributions to (during year)				:	187	,525
Agg	gregate grants from (durıng year)				:	155	,255
Agg	gregate value at end of year				1,:	176	,113
	the organization inform all donors and donor advisors are the organization's property, subject to the or		nor advi	ısed	✓ Yes	Г	No
use	d the organization inform all grantees, donors, and d ed only for charitable purposes and not for the bene nferring impermissible private benefit?				✓ Yes	_	No
Part II		the organization answered "Yes" t	n Forn	n 990 Part IV	,	•	
 	rpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space mplete lines 2a through 2d if the organization held a	or education)	certifie	d historic struc	ture		
	sement on the last day of the tax year	·					
				Held at the	End of the	Yea	ır
	tal number of conservation easements		2a				
	tal acreage restricted by conservation easements		2b				
	mber of conservation easements on a certified histo	, ,	2c				
his	mber of conservation easements included in (c) acc toric structure listed in the National Register		2d				
	mber of conservation easements modified, transferi tax year >	rea, releasea, extinguisnea, or terminate	ea by tr	ne organization	auring		
Nui	mber of states where property subject to conservat	ion easement is located 🛌					
	es the organization have a written policy regarding forcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	violations, and	☐ Yes	Γ	No
Sta ►	aff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easer	ments o	during the year			
A m	nount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s during	g the year			
Do	es each conservation easement reported on line 2(d section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)	┌ Yes	Г	No
bal	Part XIII, describe how the organization reports co ance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia					
art II	Organizations Maintaining Collection Complete if the organization answered "Y		or Otl	her Similar <i>i</i>	Assets.		
wor	the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asse rvice, provide, in Part XIII, the text of the footnote t	ets held for public exhibition, education,	or rese	arch in furthera			
b Ift wor	the organization elected, as permitted under SFAS 1 rks of art, historical treasures, or other similar asservice, provide the following amounts relating to thes	l 16 (ASC 958), to report in its revenue ets held for public exhibition, education,	statem	nent and balance		IC	
(i)	Revenues included in Form 990, Part VIII, line 1			► \$			
(ii)	Assets included in Form 990, Part X						
Ift	the organization received or held works of art, historowing amounts required to be reported under SFAS						
Rev	venues included in Form 990, Part VIII, line 1			F \$			
	sets included in Form 990, Part X			•			
~ >:	Joes meradea mir omi JJO, i ait A			- Ψ			

Par	Organizations Maintaining Co	llections of Art,	, Hist	orical	Treas	ures, or Otl	ner Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	_ `		<u>-</u>	-	e of its
а	Public exhibition		d	┌ Lo	an or ex	change progra	ns	
b	Scholarly research		e	Г о	ther			
С	Preservation for future generations							
4	Provide a description of the organization's c Part XIII	ollections and explai	n how	they fu	rther the	organızatıon's	exempt purpose	ın
5	During the year, did the organization solicit						sımılar	F F
Day	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang						"Vas" to Farm (Γ Yes No
FeII	Part IV, line 9, or reported an ar					on answered	res to rolling	790,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse	s not	✓ Yes
b	If "Yes," explain the arrangement in Part XI	II and complete the	followi	ng tabl	е	_		
							An	nount
С	Beginning balance					10		632,517
d	Additions during the year					10		1,358,741
e	Distributions during the year					16	+	1,360,976
f	Ending balance					11		630,282
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					✓ Yes
b	If "Yes," explain the arrangement in Part XI	II Check here if the	explar	nation h	as been	provided in Pa	rt XIII	<u></u>
Pa	rt V Endowment Funds. Complete							()=
1-	Paginning of year balance	(a)Current year 360,482,191		or year 318,447,		1wo years back (d) Three years back 237,406,746	(e)Four years back 206,571,265
1a b	Beginning of year balance	14,870,914		20,031,		40,340,425	7,987,754	22,931,193
C	Net investment earnings, gains, and losses	11,070,511		20,031,	-	10,310,123	7,307,731	
	Net investment earnings, gams, and losses	53,436,587		37,290,	_	24,434,066	34,727,954	19,722,698
d	Grants or scholarships	5,215,509		3,962,	393	3,853,799	3,439,431	3,267,481
е	Other expenditures for facilities and programs	8,736,599		8,523,		7,470,907	7,533,684	6,504,413
f	Administrative expenses	3,138,507		2,802,	_	2,164,798	1,986,588	2,046,516
g	End of year balance	411,699,077		360,482,		318,447,738	267,162,751	237,406,746
2	Provide the estimated percentage of the cur	·	e (line	1g, co	lumn (a)) held as		
а	Board designated or quasi-endowment 🕨	52 400 %						
b	Permanent endowment 🕨 28 000 %							
c	Temporarily restricted endowment ► 19 The percentages in lines 2a, 2b, and 2c sho	600 % uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiza	ition th	at are	held and	administered	or the	
	organization by						200	Yes No
	(i) unrelated organizations(ii) related organizations						3a(
b	If "Yes" to 3a(II), are the related organization			 hedule	R? .			
4	Describe in Part XIII the intended uses of t	•					L	
Par	t VI Land, Buildings, and Equipme		he org	ganıza	tion ans	swered 'Yes'	to Form 990, Pa	art IV, line
	11a. See Form 990, Part X, line	10.		(a) Cost	or other	(b)Cost or othe	r (c) Accumulated	(d) Book value
	Description of property				estment)	basis (other)	depreciation	(d) book value
1-	Land					12 207 7	-1	12 207 754
			-			13,307,7		13,307,751
	Buildings		.			412,217,9	199,220,00	1 212,997,907
	Equipment		. -			90,328,5	9 69,160,07	7 21,168,442
	Other					64,112,4		+
	I. Add lines 1a through 1e (Column (d) must o			nn (B). I	ine 10(c)		21,401,29	290,125,227
		,	,	(-)//	= = (= /	· ·) (Form 990) 2013

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to Form	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of value	
(Including name of security) (1)Financial derivatives		Cost or end-of-year ma	rket value
(2)Closely-held equity interests			
Other			
See Additional Data Table			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	237,318,029		
Part VIII Investments—Program Related. C	omplete if the organization	n answered 'Yes' to Forn	n 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of value	ation
		Cost or end-of-year ma	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990	, Part IV , line 11d See For	
(a) Desc	ription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. Complete if the org	anızatıon answered 'Yes' to	o Form 990, Part IV, line	e 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value		
Federal income taxes	0		
OTHER LIABILITIES	8,967,359		
US GOVT GRANTS REFUNDABLE	2,788,845		
LIABILITY FOR POSTRETIREMENT	47,038,480		
ASSET RETIREMENT OBLIGATION	4,460,775		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 63,255,459		
2 Liability for uncertain tay positions In Part VIII provid		a avannization's financial et	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	oer R	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	420,841,214
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a 35,343,596		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	35,974,758
3	Subtract line 2e from line 1	3	384,866,456
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 3,237,177		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	106,500,265
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	491,366,721
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	350,364,896
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	631,162
3	Subtract line 2e from line 1	3	349,733,734
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 3,237,177		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	106,500,265
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	456,233,999

Part XIII Supplemental Information

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

Return Reference	Explanation
Part III, Line 1a	The University maintains an art collection, which consists of works of art, including prints, painting, photographs, and sculptures that are held for the purpose of public exhibition, education, and research Each item is cataloged, preserved, and cared for, and activities verifying their existence and assessing their condition are performed by the Museum Director The art collection is not recognized as an asset on the statement of financial position
Part III, Line 4	The daily, annual and long-range operations of the Hofstra University Museum are consonant with the missions of the University and consistent with the governance of the University Just as the University holds a public trust and acts for the public good pursuant to its Charter by the Regents of the University of the State of New York, so does the Hofstra University Museum hold a public trust and acts in the public good as an agency of the University through its exhibitions, its permanent collection, its public and educational programming, as well as its interpretative, scholarly activities and publications
Part X	Income generated that is unrelated to the University's exempt purpose is subject to tax. The University believes it did not have any material tax liability nor any significant uncertain tax positions for the years ended August 31, 2014 and 2013. Accordingly, no provision for income taxes has been reflected in the University's financial statements.
Reconciliation of Revenue - Other	Part XII, Line 2d represent amounts included on Line 1, but not on Form 990, Part VIII, Line 12 and is made up of the following Rental Expenses 4,874 Gaming Expenses 10,628 Fundraising Expenses 615,660 Total 631,162 Part XII, Line 4b represent amounts included on Form 990, Part VIII, Line 12, but not on Line 1 and is made up of the following Scholarships of \$103,263,088
Part XIII, Line 2d and Line 4b	Part XIII, Line 2d represent amounts included on Line 1, but not on Form 990, Part IX, Line 25 and is made up of the following Rental Expenses 4,874 Gaming Expenses 10,628 Fundraising Expenses 615,660 Total 631,162 Part XIII, Line 4b represent amounts included on Form 990, Part IX, Line 25, but not on Line 1 and is made up of the following Scholarships of \$103,263,088
Part I	There are no instances in which a donor has the right to provide advice on the investment of endowment funds. There are no instances in which the donor has the right to select how and to whom the funds are distributed. In 13 cases, the spending and distribution is recommended by a committee in which the donor has the right to be a member, or the selection of the recipient is made in consultation with the donor. In all instances the University approves the scholarship recipient, and in no instance is there a relationship between the donor and the recipient. The aggregate value of the 13 funds is \$1,176,113, representing 0.3% of the total endowment value at August 31, 2014.
Schedule D, Part V	The University endowment funds are used to support student scholarships, professorships, facilities and other programs

Part XIII Supplemental Information (continued)									
Return Reference	Explanation								
Part IV, Line 1b	The University maintains custody of agency funds for various student and other university related groups								

Schedule D (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 11-1630906

Name: Hofstra University

Form 990	, Schedule	D,	Part	VII	-	Investments	Other	Securities
		•						

(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(3)O ther		<u> </u>
(A) ENDOWMENT-EQUITY FUND	88,275,481	F
(B) ENDOWMENT-FIXED INCOME FUND	43,807,040	F.
(5) 2113 6 111 211 111 211 211 211 211 211 211 2	10,00,00	·
(C) ENDOWMENT-HEDGE FDS/PRIV EQTY	75,751,542	F
(D) ENDOW SPLIT INT-CASH&CASH EQUI	19,848	F
		_
(E) OTHER-CASH&CASH EQUIV	627,227	F
(F) ENDOWMENT - REAL ESTATE	14,276,378	F
(G) ENDOWMENT - OTHER	607,686	F
(H)OTHER-EQUITY	2,410,037	E E
(11) 5 111211 2 9 5 2 1 1	2,110,037	·
(I) OTHER-FIXED INCOME	4,687,187	F
		_
(J) OTHER-HEDGE FUND/PVT EQUITY	6,855,603	<u> </u>

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As Filed Data -

DLN: 93493187010015

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

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

Open to Public Inspection

	me of the organization Stra University Employer identif				cation number				
JISCIC	,	11-1630906							
Paı	tI			YES	NO				
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes					
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student additional communications.								
	programs, and scholarships?		2	Yes					
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadd the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes					
4	Does the organization maintain the following?		-						
	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes					
b	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes					
c	Copies of all catalogues, brochures, announcements, and other written communications to the puwith student admissions, programs, and scholarships?	ıblıc dealıng	4c	Yes					
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes					
	If you answered "No" to any of the above, please explain If you need more space, use Part II								
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		Νo				
b	Admissions policies?		5b		No				
c	Employment of faculty or administrative staff?		5c		Νo				
d	Scholarships or other financial assistance?		5d		Νo				
	Educational policies?		5e		Νo				
_	Use of facilities?		5f		Νo				
_	Athletic programs?		5g		No				
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		<u>5h</u>		No				
			1						
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No				
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa		7	Yes					
	5 1		1 /	ı res l	l				

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also complete this part to provide any other additional information (see instructions)

Return Reference	Explanation
Schedule E, Part I, Line 3	The nondiscriminatory policy is publicized through recruitment publications, student bulletins and website
Schedule E, Part 1, Line 6	The University received government support from Federal, New York State and local sources

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493187010015

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization Hofstra University				Employer ident	ification number			
Toistia Offiversity				11-1630906				
Part I General Information "Yes" to Form 990, Part			e United States. Co	omplete if the organiza	ation answered			
For grantmakers.Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pı	ocedures for monitorii	ng the use of its grant	s and other			
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ice is needed)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region			
(1) See Add'l Data		-						
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continuation sheets to Part I		5			75,134,804			
c Totals (add lines 3a and 3b)		5			75,134,804			

			ived more than \$5,0					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
			ted above that are re or counsel has pro					
3 Enter total nu	mber of other or	ganızatıons or en	tities					

Schedule F (Form 990) 2013

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

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> ~</u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	⊽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> ~</u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	V	Yes	Г	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	<u>~</u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	√	No

Schedule F (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 11-1630906

Name: Hofstra University

Schedule F (Form 990) 2013

Page **5**

Part V Supplemental Information

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		4	Program Services	Study Abroad Program	801,709
South Asia			Program Services	Study Abroad Program	2,373
East Asia and the Pacific		1	Program Services	Study Abroad Program	128,138

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
South America			Program Services	Study Abroad Program	113,214					
Sub-Saharan Africa			Program Services	Study Abroad Program	150,186					
Central America and the Caribbean			Program Services	Study Abroad Program	495					

Form 990 Schedule F	orm 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
Central America and the Caribbean			Investments		73,827,709					
South America			Program Services	Recruitment	32,263					
East Asia and the Pacific			Program Services	Recruitment	43,901					

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or conducted in region (by agents in type) (i.e., fundraising, region program services, specific		(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
South Asia			Program Services	Recruitment	750					
Europe (Including Iceland and Greenland)			Program Services	Recruitment	28,546					
Central America and the Caribbean			Program Services	Recruitment	399					

Form 990 Schedule F	Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
Middle East and North Africa			Grantmakıng	Subrecipients	5,121					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493187010015

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

Supplemental Information Regarding

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

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

Open to Public Inspection

	ne of the organization stra University						Employer iden	tirication number
поі:	stra University						11-1630906	
Pa		tivities. Completers are not required			ion answered "Yes" s part.	to Form	990, Part IV,	line 17.
1	Indicate whether the organ	nization raised funds	through ar	ny of the	following activities Ch	eck all th	at apply	
а	Mail solicitations			e	Solicitation of no	n-govern	ment grants	
b	Internet and email sol	ıcıtatıons		f	Solicitation of go	vernment	grants	
c	Phone solicitations			g	Special fundraisir	ng events		
d	✓ In-person solicitations	5						
2a	Did the organization have a or key employees listed in							√ Yes √ N
b	If "Yes," list the ten higher to be compensated at leas			fundraise	rs) pursuant to agreem	nents und	er which the fun	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(or r	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
1	Development GuildDDI	See Part IV		No			71,049	
2	Royall Company	See part IV		No			129,370	
3								
4								
5								
6								
7								
8								
9								
10								
Tota	al			.			200,419	
3	List all states in which the registration or licensing		tered or li	censed to	o solicit contributions (or has be	en notified it is o	exempt from
ΑК,	CO, DC, MD, MA, MI, NV, N	IH, ND, SC, WA						

Sche Pa i		more than \$15,000 of fundr	aising event contribut								
		events with gross receipts o	(a) Event #1 2014 Gala Ball (event type)	(b) Event #2 2013 Sub Divers (event type)	(c) O ther events 15 (total number)	(d) Total events (add col (a) through col (c))					
₽	1	Gross receipts	643,921	166,676	395,676	1,206,273					
Revenue	2	Less Contributions	501,921	131,926	242,275	876,122					
ě	3	Gross income (line 1 minus line 2)	142,000			330,151					
	4	Cash prizes	112,550			0					
	5	Noncash prizes			-	0					
Expenses	6	Rent/facility costs	215,603								
8	7	Food and beverages .	88,950								
Direct E	8	Entertainment	10,250	12,904	610	23,764					
출	9	Other direct expenses .	23,737	2,395	28,601	54,733					
	10	(610.400)									
	11 Net income summary Subtract line 10 from line 3, column (d)										
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo						
Reveilue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))					
Rev	1	Gross revenue			15,346						
e S	2	Cash prizes			0	0					
benses	3	Non-cash prizes			9,956	9,956					
页	4	Rent/facility costs			0	0					
Direct	5	Other direct expenses			672	672					
	6	Volunteer labor	Г Yes% Г Nо	☐ Yes	✓ Yes						
	7	Direct expense summary Add line	s 2 through 5 in column ((d)		10,628					
	8	Net gaming income summary Sub-	tract line 7 from line 1, co	olumn (d)		4,718					
9 a b	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states?										
10a b		re any of the organization's gaming Yes," explain				· · I Yes I · No					

Does	es the organization operate gaming activities	s with nonmembers	s [?]	· · ▼ Yes 下 No		
12			st or a member of a partnership or other entity			
13	Indicate the percentage of gaming activit			Yes I* No		
а		•		13a 100 000 %		
b	An outside facility			13b %		
14	Enter the name and address of the persor	who prepares the	organization's gaming/special events books	and records		
	Name James Spero					
	Address 128 Hofstra University Hempstead, NY 11549					
15a b	Does the organization have a contract wit	th a third party from		· · · · 「Yes 「No		
	amount of gaming revenue retained by the	e third party 🏲 💲 _				
С	If "Yes," enter name and address of the t	hird party				
	Name ▶					
	Nume P					
	Address 🟲					
16	Gaming manager information					
	Name NONE					
	Gaming manager compensation 🟲 \$					
	Description of services provided					
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions	pi0,00	, independent contractor			
а	•	aw to make charita	able distributions from the gaming proceeds to	1		
	retain the state gaming license?			▼ Yes		
b	Enter the amount of distributions required	l under state law d	listributed to other exempt organizations or sp	pent		
	in the organization's own exempt activities	<u> </u>	·			
Pa		15c, 16, and 17	planations required by Part I, line 2b, configurations required by Part I, line 2b, configurations are supplied that part I, line 2b, configurations are supplied to the part I. I are supplied to the part II. I are supplied to the part I. I are supplied to the part I are supplied to the p			
	Return Reference	•	Explanation			
Sche	ledule G. Fait III		ed prizes donated to the University which were	not reported as gifts on the books		
	nedule G, Part I bu an an	the University The University contracted with Development Guild/DDI to consult on fundraising for Capital Campaign, but not involved in direct solicitation. The University contracted with Royall & Company to execute annual giving campaigns, including development of communications, production of materials and mailing/emailing of communications.				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

(Form 990)

Department of the Treasury

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

DLN: 93493187010015

Open to Public

Internal Revenue Service Name of the organization	► Inform	mation about Schedule I	(Form 990) and its ins	tructions is at <u>www.ir</u> :	s.gov/form990.	Employer identifi	ication number
Hofstra University						11-1630906	
 Does the organization mathe selection criteria use Describe in Part IV the organization 	d to award the grants organization's procedu her Assistance to	stantiate the amount of to or assistance?	e of grant funds in the Organizations in	United States the United States		ganization answered	▽ Yes I I "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	· ·	(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
(1) American Cancer Society 75 Davids Drive Hauppauge,NY 11788	16-0743902	501(c)(3)	20,133				Contribution
(2) Long Island Volunteer Center 58 Hilton Avenue Hempstead, NY 11550	11-3146795	501(c)(3)	7,500				Contribution
2 Enter total number of sec3 Enter total number of oth							2

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. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance			
(1) Total Student Financial Aid (See breakdown below)								
(2) Athletic Student Financial Aid	272	5,211,651		NA	NA			
(3) Undergraduate Student Financial A	Ard 5124	79,070,069		NA	NA			
(4) Graduate Student Financial Aid	1474	18,981,368		NA	NA			
(5) Room and Board Grants		2,647,510		NA	NA			
Part IV Supplemental Info	rmation. Provide the info	rmation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.			
Return Reference Ex								

Part IV Supplemental II	nformation. Provide the information required in Part 1, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
	The University carefully selects qualified 501(c)3 tax exempt organizations for its contributions and provides support for worthy projects and events in which the University has an interest
	Schedule I, Part III The University has financial aid available in many forms, including scholarships and grants. The eligibility for financial aid is based upon student's achievement and promise, academic credentials and financial need.

Schedule I (Form 990) 2013

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DLN: 93493187010015

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization Hofstra University

Employer identification number

11-1630906

Pa	rt I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	굣	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	hat apply				
	✓ Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	nt?	4a		No
ь	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		No
	Participate in, or receive payment from, an equity-t			4c		No
	If "Yes" to any of lines 4a-c, list the persons and p					
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	n Regula	itions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9		e rebutt	able presumption procedure described in Regulations	-		INU
,	section 53 4958-6(c)?	ic reputti	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported 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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	All items identified on Line 1a are included as compensation on both the employee's W2 and on Form 990, Schedule J A payment for personal services, reimbursing for a personal accountant, was provided to an officer
Part I, Line 1b	Payment or reimbursement is pursuant to a written agreement
D	In accordance with IRS regulations, items reported in columns C and D include University contributions to group retirement and nontaxable group benefits paid by the University These items include the University's contribution to a group pension plan, with rates varying based on length of service, as limited by IRS regulations, the University-paid portion of group health care benefits (cost vary by employee selected plan), and the University-paid costs of other nontaxable benefits including life and disability insurance. All group benefits apply equally to all employees

Schedule J (Form 990) 2013

Software ID: **Software Version:**

EIN: 11-1630906

Name: Hofstra University

Form 990, Schedule J,	Part!	<u> 11 - Officers, Direc</u>	:tors, Trustees, K€	y Employees, and	I Highest Compens	sated Employees	<u>; </u>	
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Stuart Rabinowitz President	(I) (II)		60,000	257,545	39,397 0	33,842 0	1,104,344	0
M Patrıcıa Adamskı Sr VP for Plan & Adm	(I) (II)	I	30,000	50,991	39,397 0	36,592 0	536,612	0 0
Herman A Berliner Provost and Sr VP	(I) (II)		, 0	42,983	39,397 0	33,842 0	487,872	0
Melissa Connolly VP Univ Relations	(I) (II)		30,000	10,290	26,182 0	35,432 0	324,220	0
Dolores Fredrich VP for Legal Affairs	(I) (II)		30,000	39,778	29,601 0	22,232	500,394	0
Richard V Guardino Jr VP Business Devel	(I) (II)		, 0	8,706	27,443 0	899 0	274,781	0
Catherine Hennessy VP Finance and Treas	(I) (II)		30,000	39,110	29,601 0	32,856 0	5 550,275 0	0 0
Sandra Johnson VP for Student Aff	(I) (II)		, 0	11,840	29,601 0	1,716 0	299,331	0
Robert W Juckiewicz VP for Info Tech	(I) (II)		, 0	20,127	29,601 0	32,856 0	375,773	0
Alan Kelly VP for Development	(I) (II)		20,000	6,718	29,601 0	32,222 0	2 364,059 0	0
Joseph Barkwill VP of Facilities	(I) (II)		7 25,000 0 0	10,423	27,747 0	22,232 0	320,239	0
Jessica Eads VP for Enrollment Management	(I) (II)		25,000	15,249	26,039 0	22,232 0	304,186	0
Stephanie Bushey VP for Inst Research & Assess	(ı) (ıı)		20,000	12,263	19,747 0	22,191 0	245,034	0
Jeffrey Hathaway VP Athletics	(I) (II)		, 0	23,000	13,023	23,336 0	454,892	0 0
Lawrence Smith Dean, School of Medicine	(I) (II)		, 0	29,692	23,226 0	900	595,841	0
David Burghardt Co- Director, Stem Research	(I) (II)) 0	o	126,709	35,152 0	33,666 0	398,785	0
Veronica Catanese Vice Dean, School of Medicine	(I) (II)		0	/	23,226 0	32,856 0	440,721	0
Patrick Socci Dean, School of Business	(I) (II)	304,803	0 0		23,226 0	9,889 0	362,894 0	0
Eric Lane Dean, Law School	(I) (II)) 364,277) 0	0 0	1	1	33,842 0	488,378	0 0

DLN: 93493187010015

OMB No 1545-0047

Schedule K

(Form 990)

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions. ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization Hofstra University

Department of the Treasury

Internal Revenue Service

Employer identification number

11-1630906

											10303	00			
P	art I Bond Issues			_											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	(f) Descriptio	n of purpose	(g) De	feased		On alf of uer		Pool icing
										Yes	No	Yes	No	Yes	No
A	Town of Hempstead IDA Series 2007	11-3237317	424674DM8	05-17-2007	25,5	15,700		Construction & Renov of Facilities			X		х		X
В	Town of Hempstead LDC Series 2011	11-2798949	424682CZ3	12-20-2011	75,54	11,215		Refinance 1998 Bonds & Renovations			Х		х		Х
С	Town of Hempstead LDC Series 2013	11-2798949	424682ED0	06-20-2013	70,20	00,775		Refinance 2003 Bonds & New Facılıt		,	X		х		Х
Pa	rt III Proceeds			•			'				<u> </u>				
								В		С			D		
1	A mount of bonds retired					3,000,	000				0				
2	A mount of bonds legally defea	sed					0	1	0			0			
3	Total proceeds of issue					26,134,	282	. 7	5,559,538		70,21	5,721			
4	Gross proceeds in reserve fun	ds					0		0			0			
5	Capitalized interest from proce	eeds					0 1,650,000			1,38	4,229				
6	Proceeds in refunding escrows	;			0 0		0		0						
7	Issuance costs from proceeds	3				613,767 771,553		796,915							
8	Credit enhancement from proc	eeds					0		0	,					
9	Working capital expenditures f	from proceeds					0		0			0			
10	Capital expenditures from prod	ceeds				25,468,	348	2	0,395,829		17,05	1,512			
11	Other spent proceeds						167		2,232,822		39,15				
12	Other unspent proceeds						0		509,334		11,83				
13	Year of substantial completion	1			20	08		201	.4	2	015				
					Yes	No		Yes	No	Yes		lo	Yes	1	No
14	14 Were the bonds issued as part of a current refunding issue?					Х		X		Х					
15	Were the bonds issued as part	of an advance refu	nding issue?			Х			Х		,	,			
16	Has the final allocation of proc	ceeds been made?			Х				Х		,	,			

allocation of proceeds? Private Business Use Part III

		/	Α	В		c		[)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		Х		×		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х		Х		X		
=			N. FO14	0.0.5		•	6.1	1 1 1/7	000) 2012

Χ

Does the organization maintain adequate books and records to support the final

Χ

Χ

Part Private Business Use (Continued)

Part	Private Business Use (Continued)								
			4	I	3		С	Γ)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×	×					
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		×		×		×		
С	Are there any research agreements that may result in private business use of bond-financed property?		×		Х		х		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		Х		Х		х		
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 150 %		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %	0 832 %		0 150 %			
6	Total of lines 4 and 5		0 %		0 832 %	0 300 %			
7	Does the bond issue meet the private security or payment test?								
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х		х		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		•						
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		Х		Х		×		
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		Х		Х		х		

Part IV Arbitrage

Par	Part V Arbitrage											
		Α		В		С		D				
		Yes	No	Yes	No	Yes	No	Yes	No			
1	Has the issuer filed Form 8038-T?		Х		Х		Х					
2	If "No" to line 1, did the following apply?											
а	Rebate not due yet?		Х		Х		Х					
b	Exception to rebate?		Х		X		Х					
С	No rebate due?	Х		Х		Х						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed											
3	Is the bond issue a variable rate issue?		Х		Χ		X					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?											
b	Name of provider	0		0		0						
С	Term of hedge											
d	Was the hedge superintegrated?											
е	Was the hedge terminated?											
							Sc	hedule K (Forn	າ 990) 2013			

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		x		
b	Name of provider	0		0		0			
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		x		X		x		
7	Has the organization established written procedures to monitor the requirements of section 148?	х		X		X			

Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

Α		В		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
X		×		×				
,								

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

Return Reference Explanation

Part II, Line 3

Includes Investment Earnings on Bond Proceeds through 8/31/14

Return Reference	Explanation
Part IV, Line 2c	

DLN: 93493187010015

OMB No 1545-0047

SCHEDULE M Noncash Contributions (Form 990)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Hofstra University

Employer identification number

Pa	rt I Types of Property			1	1030300			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contri			nts
1	Art—Works of art	X	20		NA			
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		0	NA			
5	Clothing and household goods	Х		0	NA			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	X	23	1,848,200	FMV of stocks			
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—O ther							
	Collectibles							
	Food inventory	Х	2	0	NA			
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens Archeological artifacts							
	Other • (X	4		NA			
	nt Supplies)		7		NA .			
	Other ► (Card/Certificate)	Х	43	0	NA			
Гіск	Other►(X	2		NA			
	Other► (ipment)	X	2	0	NA			
	Number of Forms 8283 received by th for which the organization completed F				9			4
							Yes	No
30a	During the year, did the organization	receive by	contribution any property r	eported in Part I, lines 1	through 28, that			
	it must hold for at least three years fr			, and which is not required	l to be used			
	for exempt purposes for the entire ho		17			30a		No
Ь	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc					31	Yes	
32a	Does the organization hire or use thir contributions?	d parties oi	related organizations to s	olicit, process, or sell nor	ncash · · ·	32a	Yes	
b	If "Yes," describe in Part II							
33		mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

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

Return Reference	Explanation
Schedule M, Part I, Line 32a	The University utilizes the services of a third party broker to process stock gift sales
, ,	See statement for Schedule D, Part III, Line 1a with regards to works of art Other non-cash contributions other than works of art are used by the University in the normal course of business or used in connection with Development activities

Schedule M (Form 990) (2013)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493187010015

OMB No 1545-0047

2013

Open to Public
Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization
Hofstra University

Employer identification number

11-1630906

Return Reference	Explanation
Form 990, Part VI, Section A, Question 2	As per statements filed annually with the University, no officer, director, trustee, key employees, highest compensated employees, or highest compensated professional or other independent contractors receiving any compensation from the organization is related to any other such entity through family or business relationships. Former Officer, Directors, Trustees, and key employees Form 990, Schedule J The University contributes to retiree health benefits for Former employees, including former officers.

Return Reference	Explanation
Form 990, Part IV, Line 9	In the ordinary course of business, the University provides information to students and parents regarding eligibility for Title IV student assistance, including student and parent loans, University scholarship and loan programs, and internal and external payment plan arrangements which are available to finance tuition and fees at Hofstra. In addition, the University is engaged in the collection of tuition and fee balances from students for the current and prior terms, including entering into agreements for the collection and payment of amounts due and owing

Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990 is prepared by the University, and reviewed by an outside tax consultant. The VP for Financial Affairs and Treasurer also reviews the return with the President, Senior VP for Planning and the VP for Legal Affairs and General Counsel. The final return is submitted to the Audit Committee of the Board of Trustees and the full Board of Trustees prior to signing and filing the return.

Return Reference	Explanation
Form 990, Part VI, Line 15	The Hofstra University Board of Trustees Compensation Committee has oversight of all elements of executive compensation and reports to the entire Board on such matters. Specifically, the Committee reviews thoroughly the compensation of the President and officers and other key employees. The Committee assesses and approves the reasonableness of the compensation of the President, other officers are recommended by the President to the Board of Trustees. General Counsel is responsible for providing the necessary data to the Committee and the Board in order for the review to take place each year. Members of the Committee, as well as any third parties providing professional advice to the Committee, must be independent and have no conflicts of interest as to the compensation being reviewed, the officer who is being reviewed, or any products or services being considered. Such review includes a comparison of data as presented on the 990 tax return of comparable institutions, adjusted as appropriate for the New York metropolitan area and updated to the present year. Consideration is given to the breadth and complexity of programs, such as medical and law schools. The review also includes an assessment of the duties and responsibilities of each officer and the overall performance of each. From time to time, the University engages an outside consultant to review the comparables and to assist the Committee in its deliberations. The Committee reviews its recommendations with the Board of Trustees for final approval. The actions of the Committee and Board of Trustees are set forth in the minutes, including the information reviewed in determining comparability and the basis for determining that the compensation is reasonable.

Return Reference	Explanation
Form 990, Part VI, Line 12c	The University's bylaws set forth a conflict of interest policy for Trustees prohibiting certain transactions and requiring disclosure of any conflict that might arise. Annually, all Trustees must complete and sign a compliance and disclosure statement which is reviewed and maintained as a matter of record by the University's General Counsel. Any disclosure or matter in violation of the policy is brought to the attention of the Board of Trustees. In addition, there is a conflict of interest policy for all administrative employees prohibiting certain actions and requiring disclosure of any conflict that might arise. Annually, employees must complete and sign a compliance and disclosure statement which is reviewed and maintained as a matter of record by the Office of Human Resources. Any questionable activity is not permitted until the appropriate Vice President has determined that sufficient safeguards exist to fully protect the University's interests and the University's General Counsel has reviewed.

Return Reference	Explanation
Form 990, Part XI, Line 5	Other changes in net assets are made up of the following. Unrealized Gains on Investments \$ 35,343,596 Postretirement. Changes other than net periodic benefit costs 496,729 Reclassifications and other adjustments (48,314)\$ 35,792,011

Return Reference	Explanation
Form 990, Part IV, Line 16	The University provided financial assistance of \$4,660,620 to certain international students attending Hofstra. This assistance is included on Schedule I, Part III as Assistance to Individuals in the United States, as the students attended classes within the United States.

Return Reference	Explanation
VI, Line 19	As a private University, governing documents, conflict of interest policy and financial statements are not required to be made available to the public. However, the University Bylaws and the Conflict of Interest Policy are available on the University website. In addition, the University's Form 990 (which includes financial data) is made available upon request

DLN: 93493187010015

2013

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

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

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization **Employer identification number** Hofstra University 11-1630906

Part I Identification of Disregarded Entities Com	nplete if the organization	n answered "Yes" or	n Form 990, Par	t IV, line 33.				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	D	(f) pirect controlling entity		
Part II Identification of Related Tax-Exempt Organizations during	anizations Complete if ng the tax year.	the organization ar	nswered "Yes" o	on Form 990, P	art IV,	line 34 because it	t had or	ie
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(d) (e) empt Code section Public charity (if section 501)		(f) Direct controlling entity	(13) contro entity?	
(1) Community Legal Assistance Corporation	Education	NY	501(c)(3)	11(a)		na	Yes Yes	No
108 Hofstra University Hempstead, NY 11549								
11-2267282 (2) Hofstra Law Access to Justice Incubator 108 Hosftra University	Education	NY	501 (C)(3)	11(a)		na	Yes	
Hempstead, NY 11549 46-3390636								
For Paperwork Reduction Act Notice, see the Instructions for Form	990.	Cat No 501	35Y			Schedule R (For	m 990) 2	013

because it had one or more re	latea organizations tro	(b)					· ·		1			1 -	, 1			
(a) Name, address, and EIN o related organization	(a) Name, address, and EIN of related organization		ress, and EIN of		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predon Income(unrela exclude tax u sections	ninant related, ated, d from nder s 512-	(f) Share o total incor	(g) Share of ne end-of-year assets	(h Disprop allocat	ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or aging	(k) Percentag ownership
					31	'',			Yes	No		Yes	No			
Part IV Identification of Related Online 34 because it had one or i									wered	d "Yes	" on Form	990,	Part	IV,		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		Dire	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)		(g) Share of end- year assets		of- Percen owner	tage		(i) ection 512 (b)(13) controlled entity?		
(4) Chartable Danier and a	TRUCT	l Niv				TDUCT							Ţ	Yes No		
(1) Chantable Remainder Unitrust (2)	TRUST	NY		NA		TRUST										
128 Hofstra University Hempstead, NY 11549																
(2) Charitable Remainder Annuity Trust (3)	TRUST	NY		NA		TRUST										
128 Hofstra University Hempstead, NY 11549														\perp		
						†								_		

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

Yes

1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?	•					
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
b Gift, grant, or capital contribution to related organization(s)								
c Gift, grant, or capital contribution from related organization(s)								
d Loans or loan guarantees to or for related organization(s)								
e Loans or loan guarantees by related organization(s)								
f Dividends from related organization(s)				1f				
g Sale of assets to related organization(s)				1 g		No		
h Purchase of assets from related organization(s)				1h		No		
i Exchange of assets with related organization(s)				1i		No		
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes			
• Sharing of paid employees with related organization(s)				10	Yes			
p Reimbursement paid to related organization(s) for expenses				1 p		No		
q Reimbursement paid by related organization(s) for expenses				1q		No		
r Other transfer of cash or property to related organization(s)				1r		No		
s Other transfer of cash or property from related organization(s)				1 s		No		
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	te this line, including co	overed relationships	and transaction thresholds					
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount II	nvolved			
1) Community Legal Assistance Corporation	N,O		See Part VII					
2) Hofstra Law Access to Justice Incubator	N,O		See Part VII					

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
	•												

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation				
	In furtherance of Hofstra University's educational mission, the related entities have been formed pursuant to the Not-For-Profit Corporation Law of New York State The related entities do not have separate facilities or employees and their activities are included in Hofstra University's financial statements The related entities each provide educational opportunities for law students and services for the underprivileged under the supervision of attorneys to the extent permitted under the New York Judiciary Law				

Schedule R (Form 990) 2013