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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE		D Employer identification number 52-1844823
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (202) 449-6520
	800 8TH STREET NW		
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20001		G Gross receipts \$ 34,543,466
F Name and address of principal officer ARYEH FURST 800 8TH STREET NW WASHINGTON,DC 20001			
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶			
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀(insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW HILLEL ORG			

K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation 1984	M State of legal domicile DC
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Part I

Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO ENHANCE JEWISH LIFE FOR COLLEGE AND UNIVERSITY COMMUNITIES IN NORTH AMERICA AND THROUGHOUT THE WORLD		
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3	54
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	54
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	1,505
	6 Total number of volunteers (estimate if necessary)	6	50
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
	Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		25,625,478	29,331,470
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		520,570	794,262
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		622,844	250,062
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		-640,667	-186,463
		26,128,225	30,189,331
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		5,948,540	5,830,026
14 Benefits paid to or for members (Part IX, column (A), line 4)		0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		7,763,288	9,299,922
Net Assets or Fund Balances	16a Professional fundraising fees (Part IX, column (A), line 11e)	47,478	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶3,696,752		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	11,867,365	15,565,569
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	25,626,671	30,695,517
	19 Revenue less expenses Subtract line 18 from line 12	501,554	-506,186
		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	40,688,198	39,167,777
	21 Total liabilities (Part X, line 26)	10,631,881	9,954,687
22 Net assets or fund balances Subtract line 21 from line 20	30,056,317	29,213,090	

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer		2016-05-16 Date		
	ARYEH FURST CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name BERT L SWAIN	Preparer's signature BERT L SWAIN	Date	Check <input type="checkbox"/> if self-employed	PTIN P00238304
	Firm's name ▶ DIXON HUGHES GOODMAN LLP			Firm's EIN ▶ 56-0747981	
	Firm's address ▶ 111 ROCKVILLE PIKE 6TH FLOOR ROCKVILLE, MD 20850			Phone no (240) 403-3700	
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

HILLEL'S MISSION IS TO ENRICH THE LIVES OF JEWISH UNDERGRADUATE AND GRADUATE STUDENTS SO THAT THEY MAY ENRICH THE JEWISH PEOPLE AND THE WORLD

2

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

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

3

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

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 23,259,504 including grants of \$ 5,830,026) (Revenue \$ 831,432)

PROVIDE DIRECT FUNDING AND SUPPORTING SERVICES TO LOCAL HILLELS AND STUDENTS AT COLLEGES AND UNIVERSITIES THROUGHOUT NORTH AMERICA AND THE WORLD

4b

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

4c

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

4d

Other program services (Describe in Schedule O)


















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

4e

Total program service expenses 23,259,504

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	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	No
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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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	No
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		
a 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
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e 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	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	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 Yes	
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	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
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	

Part 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 domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	108	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	1,505	
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b. If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b. If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	No
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d. If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
		8	
9a. Did the sponsoring organization make any taxable distributions under section 4966?		9a	
b. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter			
a. Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11 Section 501(c)(12) organizations. Enter			
a. Gross income from members or shareholders.		11a	
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a. 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	
b. 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.		13b	
c. Enter the amount of reserves on hand.		13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		14b	

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	54	
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			
1b	Enter the number of voting members included in line 1a, above, who are independent	54	
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
7b	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		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
10b	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?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
11b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	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 organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK, AL, AR, AZ, CA, CO, CT, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, HI, FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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, address, and telephone number of the person who possesses the organization's books and records	ARYEH FURST 800 8TH STREET NW WASHINGTON, DC 20001 (202) 449-6520

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

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

Form **990** (2014)

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	1,967,785	0	175,065

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization. 7

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MLLNNL LLC 257 GRAND STREET SUITE 98 BROOKLYN, NY 11211	CONSULTING	287,398
30 POINT STRATEGIES 7315 WISCONSIN AVENUE SUITE 606 BETHESDA, MD 20814	CONSULTING	286,440
JVA CAMPAIGNS 240 N 5TH STREET SUITE 360 COLUMBUS, OH 43215	CONSULTING	187,079
WELLSPRING CONSULTING 198 AMITY ROAD SUITE 23 WOODBIDGE, CT 06525	CONSULTING	156,800
ANNE LEWIS STRATEGIES LLC 2801 M STREET NW WASHINGTON, DC 20007	CONSULTING	125,005

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 ▶6

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	1,583,908			
	d	Related organizations 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	27,747,562			
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	29,331,470			
Program Service Revenue	2a	CONFERENCE REGISTRATION				
		Business Code				
		900099	794,262	794,262		
	b					
	c					
	d					
	e					
	f	All other program service revenue				
Other Revenue	g	Total. Add lines 2a-2f	794,262			
	3	Investment income (including dividends, interest, and other similar amounts)	513,041			513,041
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)	344,908			344,908
	7a	Gross amount from sales of assets other than inventory				
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)	-262,979			-262,979
	8a	Gross income from fundraising events (not including \$ 1,583,908 of contributions reported on line 1c) See Part IV, line 18				
		a	175,990			
	b	Less direct expenses b	744,531			
	c	Net income or (loss) from fundraising events	-568,541			-568,541
	9a	Gross income from gaming activities See Part IV, line 19				
		a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances				
		a				
	b	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue				
		Business Code				
	11a	MISCELLANEOUS INCOME	37,170	37,170		
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	37,170			
	12	Total revenue. See Instructions	30,189,331	831,432	0	26,429

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,857,636	3,857,636		
2	Grants and other assistance to domestic individuals See Part IV, line 22	21,431	21,431		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	1,950,959	1,950,959		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,190,380		1,190,380	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,910,725	3,188,203	1,630,305	2,092,217
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	244,896	123,437	54,412	67,047
9	Other employee benefits	473,858	245,008	99,083	129,767
10	Payroll taxes	480,063	196,476	149,981	133,606
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	103,645		103,645	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,817,671	1,872,786	997,318	947,567
12	Advertising and promotion	82,780	52,890	2,781	27,109
13	Office expenses	75,693	30,360	30,276	15,057
14	Information technology	186,091	54,015	106,413	25,663
15	Royalties				
16	Occupancy	132,123	132,123		
17	Travel	914,185	620,076	139,192	154,917
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,232,138	4,185,602	24,505	22,031
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	371,377	282,196	89,181	
23	Insurance	130,257	41,907	88,350	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PROGRAM EXPENSES	2,665,745	2,665,745		
b	POSTAGE/SHIPPING/DELIVE	1,170,669	10,248	15,837	1,144,584
c	BUILDING MAINTENANCE	643,010	643,010		
d	HONORARIUMS	380,694	355,794		24,900
e	All other expenses	659,491	2,729,602	-982,398	-1,087,713
25	Total functional expenses. Add lines 1 through 24e	30,695,517	23,259,504	3,739,261	3,696,752
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		3,913,927	2	3,340,887
	3	Pledges and grants receivable, net		6,299,056	3	4,820,386
	4	Accounts receivable, net		362,157	4	453,896
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		443,145	9	320,628
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a17,056,671			
	b	Less accumulated depreciation	10b7,249,081	10,119,784	10c	9,807,590
	11	Investments—publicly traded securities		203,660	11	57,613
	12	Investments—other securities See Part IV, line 11		18,981,556	12	20,039,808
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		364,913	15	326,969
	16	Total assets. Add lines 1 through 15 (must equal line 34)		40,688,198	16	39,167,777
Liabilities	17	Accounts payable and accrued expenses		3,602,623	17	4,002,997
	18	Grants payable		117,675	18	116,827
	19	Deferred revenue		707,429	19	54,488
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		6,080,868	23	5,689,252
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		123,286	25	91,123
	26	Total liabilities. Add lines 17 through 25		10,631,881	26	9,954,687
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		2,418,463	27	1,821,667
	28	Temporarily restricted net assets		23,697,356	28	23,343,773
	29	Permanently restricted net assets		3,940,498	29	4,047,650
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		30,056,317	33	29,213,090
	34	Total liabilities and net assets/fund balances		40,688,198	34	39,167,777

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	30,189,331
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,695,517
3	Revenue less expenses Subtract line 2 from line 1	3	-506,186
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,056,317
5	Net unrealized gains (losses) on investments	5	-346,131
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	9,090
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,213,090

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ERIC D FINGERHUT PRESIDENT	35 00	X		X				534,019	0	19,070
(1) SIDNEY PERTNOY CHAIRMAN	2 00	X		X				0	0	0
(2) BRUCE SHOLK EXECUTIVE COMMITTEE	2 00	X		X				0	0	0
(3) DAVID M COHEN EXECUTIVE COMMITTEE	2 00	X						0	0	0
(4) LEE DRANIKOFF VICE-CHAIR, EXECUTIVE COMMMITEE	2 00	X		X				0	0	0
(5) DEBORAH KALLICK EXEC COM , VICE-CHAIR	2 00	X		X				0	0	0
(6) DAVID P YAFFE TREASURER/SECRETARY	2 00	X		X				0	0	0
(7) ANDREW HOCHBERG EXECUTIVE COMMITTEE	2 00	X						0	0	0
(8) DANA RAUCHER MEMBER	2 00	X						0	0	0
(9) CAROL S SMOKLER EXECUTIVE COMMITTEE	2 00	X						0	0	0
(10) THOMAS A BLUMBERG PAST CHAIR	2 00	X						0	0	0
(11) RANDALL R KAPLAN EXEC COM , CHAIR BOARD OF GOVS	2 00	X						0	0	0
(12) BEATRICE S MANDEL PAST CHAIR	2 00	X						0	0	0
(13) NEIL M MOSS PAST CHAIR	2 00	X						0	0	0
(14) CHARLES CHUCK NEWMAN PAST CHAIR	2 00	X						0	0	0
(15) LAWRENCE S BACOW MEMBER	2 00	X						0	0	0
(16) RICHARD BILLER MEMBER	2 00	X						0	0	0
(17) FRANCES KRASNOW MEMBER	2 00	X						0	0	0
(18) AMY BORN MEMBER	2 00	X						0	0	0
(19) SANDY COLEN MEMBER	2 00	X						0	0	0
(20) GARY SHAMIS MEMBER	2 00	X						0	0	0
(21) EDITH B EVERETT MEMBER	2 00	X						0	0	0
(22) JEFFREY FRIEDSTEIN MEMBER	2 00	X						0	0	0
(23) DAVID GEDZELMAN MEMBER	2 00	X						0	0	0
(24) DAVID RITTBERG EXECUTIVE COMMITTEE	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) WALTER HARRISON MEMBER	2 00	X						0	0	0
(1) HANK KATZEN MEMBER	2 00	X						0	0	0
(2) ADAM NAFTALIN-KELMAN MEMBER	2 00	X						0	0	0
(3) CHAIM PIZEM MEMBER	2 00	X						0	0	0
(4) RUSS ROBINSON MEMBER	2 00	X						0	0	0
(5) BARBARA ROSWELL MEMBER	2 00	X						0	0	0
(6) TILLY SHAMES MEMBER	2 00	X						0	0	0
(7) MORTON OWEN SCHAPIRO MEMBER	2 00	X						0	0	0
(8) MICHELE MICHAELIS SLIFKA EXECUTIVE COMMITTEE	2 00	X						0	0	0
(9) RALPH S TABER MEMBER	2 00	X						0	0	0
(10) SHARON MARGOLIN UNGERLEIDER MEMBER	2 00	X						0	0	0
(11) MICHAEL URAM MEMBER	2 00	X						0	0	0
(12) ESTEE PORTNEY EXECUTIVE COMMITTEE	2 00	X						0	0	0
(13) JUDY YUDOF MEMBER	2 00	X						0	0	0
(14) LIZA ABRAMS STUDENT MEMBER	2 00	X						0	0	0
(15) YOAV SCHAEFER STUDENT MEMBER	2 00	X						0	0	0
(16) JULIANA WISHNE STUDENT MEMBER	2 00	X						0	0	0
(17) JILL SMITH CHAIR APPOINTEE	2 00	X						0	0	0
(18) LARRY MOSES EXECUTIVE COMMITTEE	2 00	X						0	0	0
(19) SHELLY KIVELL EXECUTIVE COMMITTEE	2 00	X						0	0	0
(20) SAMUEL ESKIP VICHNESS MEMBER	2 00	X						0	0	0
(21) RICHARD STEIN EXECUTIVE COMMITTEE	2 00	X						0	0	0
(22) ARYEH FURST CHIEF FINANCIAL OFFICER	35 00				X			329,338	0	32,149
(23) DAVID EDEN CHIEF ADMINISTRATIVE OFFICER	35 00				X			191,224	0	19,033
(24) ROBERT GOLDBERG VP CAMPUS DEVELOPMENT	35 00					X		229,556	0	30,718

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(51) TIM COHEN SENIOR VP	35 00					X		265,218	0	31,988
(1) MATTHEW BRAMAN VP OF INFORMATION TECHNOLO	35 00					X		211,847	0	12,727
(2) SCOTT BROWN VP FOR TALENT	35 00					X		206,583	0	29,380

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

OMB No 1545-0047

2014

Open to Public Inspection

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

Part I

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

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

- 1

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) 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 in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	25,628,172	24,498,105	24,472,716	25,625,478	29,331,470	129,555,941
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	25,628,172	24,498,105	24,472,716	25,625,478	29,331,470	129,555,941
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						15,175,264
6 Public support. Subtract line 5 from line 4						114,380,677

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	25,628,172	24,498,105	24,472,716	25,625,478	29,331,470	129,555,941
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	531,785	931,142	3,231,490	774,505	594,970	6,063,892
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,877	3,908	8,646	11,200	37,170	71,801
11 Total support Add lines 7 through 10						135,691,634
12 Gross receipts from related activities, etc. (see instructions)					12	2,957,697
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	84 290 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	86 100 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2013. 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—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

Part IIISupport 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						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV

Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. . . .	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) .	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

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

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

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

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

1

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

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

1a

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

b

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

(i) Revenue included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

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

a

Revenue included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2014

Part III

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

- 3

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

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

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

☐ Yes

☐ No

Part IV

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

- 1a

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

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	8,678,951	8,051,092	7,874,097	9,981,953	8,714,103
b Contributions	413,391	509,001	606,169	773,747	42,811
c Net investment earnings, gains, and losses	31,378	929,339	1,047,541	-207,302	1,424,642
d Grants or scholarships					
e Other expenditures for facilities and programs	630,586	810,481	1,476,715	2,674,301	199,603
f Administrative expenses					
g End of year balance	8,493,134	8,678,951	8,051,092	7,874,097	9,981,953

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment ▶ 38 000 %

b

Permanent endowment ▶ 14 000 %

c

Temporarily restricted endowment ▶ 48 000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

Describe in Part XIII the intended uses of the organization's endowment funds
- Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
- | Description of property | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | 2,908,629 | | 2,908,629 |
| b Buildings | | 11,814,262 | 5,352,396 | 6,461,866 |
| c Leasehold improvements | | | | |
| d Equipment | | 2,333,780 | 1,896,685 | 437,095 |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ | | | | 9,807,590 |
- Schedule D (Form 990) 2014

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	30,420,831
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-346,131
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	9,090
e	Add lines 2a through 2d	2e	-337,041
3	Subtract line 2e from line 1	3	30,757,872
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-568,541
c	Add lines 4a and 4b	4c	-568,541
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	30,189,331

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	31,264,058
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	31,264,058
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-568,541
c	Add lines 4a and 4b	4c	-568,541
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	30,695,517

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 V, LINE 4	HILLEL'S ENDOWMENTS CONSIST OF FUNDS ESTABLISHED FOR VARIOUS PROGRAMMATIC PURPOSES
PART X, LINE 2	HILLEL IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES IN ACCORDANCE WITH SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION OR LIABILITY FOR FEDERAL AND STATE INCOME TAXES. HILLEL HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE 30, 2015 AND 2014. FISCAL YEARS ENDING ON OR AFTER JUNE 30, 2012 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES.
PART XI, LINE 2D - OTHER ADJUSTMENTS	UNREALIZED LOSS ON INTEREST RATE SWAP 32,163 UNREALIZED LOSS ON SPLIT INTEREST AGREEMENTS -23,073
PART XI, LINE 4B - OTHER ADJUSTMENTS	NET FUNDRAISING LOSS -568,541
PART XII, LINE 4B - OTHER ADJUSTMENTS	NET FUNDRAISING LOSS -568,541

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number
52-1844823

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) SOUTH AMERICA			PROGRAM SERVICE	JEWISH EDUCATION	60,000
(2) RUSSIA AND NEWLY INDEPENDENT STATES			PROGRAM SERVICE	JEWISH EDUCATION	1,298,860
(3) NORTH AMERICA			PROGRAM SERVICE	JEWISH EDUCATION	136,286
(4) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	JEWISH EDUCATION	455,813
(5)					
3a Sub-total	0	0			1,950,959
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			1,950,959

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2

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

17

3

Enter total number of other organizations or entities ▶

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)*

☐

Yes

☒

No

Part V

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	A BUDGET FOR PROGRAM SERVICES IS REQUIRED BEFORE THE GRANT IS FUNDED AND PERIODIC REPORTS ON THE PROGRAM ARE REQUIRED

Additional Data

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

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SERVICES	647,804	WIRE			FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SERVICES	16,100	WIRE			FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SERVICES	45,000	WIRE			FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SERVICES	64,488	WIRE			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SERVICES	485,468	WIRE			FMV
		MIDDLE EAST AND NORTH AFRICA	PROGRAM SERVICES	455,813	WIRE			FMV
		SOUTH AMERICA	PROGRAM SUPPORT	30,000	WIRE			FMV
		SOUTH AMERICA	PROGRAM SUPPORT	15,000	WIRE			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	15,000	WIRE			FMV
		NORTH AMERICA	PROGRAM SERVICES	22,560	CHECK			FMV
		NORTH AMERICA	PROGRAM SERVICES	62,784	CHECK			FMV
		NORTH AMERICA	PROGRAM SERVICES	27,617	CHECK			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	PROGRAM SUPPORT	40,000	WIRE			FMV
		NORTH AMERICA	PROGRAM SUPPORT	5,325	CHECK			FMV
		NORTH AMERICA	PROGRAM SUPPORT	18,000	CHECK			FMV

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number
52-1844823

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

1

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

a

Mail solicitations

b

Internet and email solicitations

c

Phone solicitations

d

In-person solicitations

e

Solicitation of non-government grants

f

Solicitation of government grants

g

Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes

No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 DIRECT MAIL PROCESSORS INC 1150 CONRAD COURT HAGERSTOWN, MD 21740	RESPONSE PROCESSING AND ACKNOWLEDGEMENT MAILING FOR DIRECT M	Yes		1,720,033	40,094	1,679,939
2 ABDATA 600 A B DATA DRIVE MILWAUKEE, WI 53217	DIRECT MAIL RESPONSE MARKETING		No	0	732,999	-732,999
3 AB DATA CLIENT TRUST 600 A B DATA DRIVE MILWAUKEE, WI 53217	DIRECT MAIL RESPONSE MARKETING		No	0	285,608	-285,608
4 COPILEVITZ & CANTER 310 TWENTIETH ST STE 300 KANSAS CITY, MO 64108	DIRECT MAIL RESPONSE MARKETING		No	0	8,378	-8,378
5 STRATEGIC FUNDRAISING INC 2625 MOMENTUM PLACE CHICAGO, IL 60689	OUTBOUND TELEMARKETING		No	0	18,353	-18,353
6 VAPUR INC 31344 VIA COLINAS STE 104 WESTLAKE VILLAGE, CA 91362	WATER BOTTLES FOR FUNDRAISING		No	0	10,550	-10,550
7						
8						
9						
10						
Total				1,720,033	1,095,982	624,051

3

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990or 990-EZ.

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2014

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>GALA</u> (event type)	<u>POKER</u> (event type)	 (total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	1,289,401	470,497	1,759,898
	2	Less Contributions . . .	1,160,461	423,447	1,583,908
	3	Gross income (line 1 minus line 2)	128,940	47,050	175,990
Direct Expenses	4	Cash prizes		10,000	10,000
	5	Noncash prizes . . .		4,253	4,253
	6	Rent/facility costs . . .	104,537	37,838	142,375
	7	Food and beverages .			
	8	Entertainment			
	9	Other direct expenses .	502,356	85,547	587,903
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activities conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party

\$ and the \$

c

If "Yes," enter name and address of the third party

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year

\$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	RESPONSE PROCESSING AND ACKNOWLEDGEMENT MAILING FOR DIRECT MARKETING

Schedule G (Form 990 or 990-EZ) 2014

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Employer identification number
52-1844823

Part I General Information on Grants and Assistance

1

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

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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

2

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

92

3

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. 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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT AWARDS	18	21,431		FMV	

Part IV

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

Return Reference	Explanation
PART I, LINE 2	A BUDGET FOR PROGRAM SERVICES IS REQUIRED BEFORE THE GRANT IS FUNDED AND PERIODIC REPORTS ON THE PROGRAM ARE REQUIRED

Additional Data

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

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN DIEGO STATE UNIVERSITY5742 MONTEZUMA ROAD SAN DIEGO,CA 92115	33-0519225		19,500				JEWISH EDUCATIONAL PROGRAMS
RUTGERS UNIVERSITY HILLEL93 COLLEGE AVENUE NEW BRUNSWICK, NJ 08901	26-0177367		100,438				JEWISH EDUCATIONAL PROGRAMS
CORNELL HILLELG-34 ANABEL TAYLOR HALL CORNELL UNIVERSITY ITHACA,NY 14853	16-6068463		92,420				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL FOUNDATION AT TUFTS UNIVERSITY220 PACKARD AVE MEDFORD,MA 02155	04-6139157		5,472				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT THE GEORGE WASHINGTON UNIVERSITY 2300 H STREET NW WASHINGTON,DC 20037	52-6081729		64,935				JEWISH EDUCATIONAL PROGRAMS
HILLEL FOUNDATION OF NEW ORLEANS (TULANE) 912 BROADWAY NEW ORLEANS,LA 70118	72-6031116		31,600				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH CAMPUS ACTIVITIES BOARD HILLEL OF GREATER PHILADELPHIA (UNIVERSITYSTEINHARDT HALL 215 SOUTH 39TH ST PHILADELPHIA,PA 19104	23-1365179		39,500				JEWISH EDUCATIONAL PROGRAMS
BEN & ESTHER ROSENBLOOM HILLEL CENTER AT THE UNIVERSITY OF MARYLAND7612 MOWATT LANE COLLEGE PARK,MD 20740	52-0749507		45,175				JEWISH EDUCATIONAL PROGRAMS
GAINSVILLE HILLEL INC (HILLEL AT THE UNIVERY OF FLORIDA)2020 W UNIVERSITY AVENUE UNIVERSITY OF FL GAINSVILLE,FL 32603	65-1090524		25,749				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN CALIFORNIA 3300 SOUTH HOOVER BOULEVARD LOS ANGELES,CA 90007	95-4867366		44,000				JEWISH EDUCATIONAL PROGRAMS
HILLEL VIRGINIA TECHPO BOX 708 BLACKSBURG,VA 24063	90-0406012		47,684				JEWISH EDUCATIONAL PROGRAMS
BERKELEY HILLEL2736 BANCROFT WAY BERKELEY,CA 94704	52-1758790		102,650				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CALIFORNIA-LOS ANGELES 574 HILGARD AVENUE LOS ANGELES,CA 90024	95-4575930		41,800				JEWISH EDUCATIONAL PROGRAMS
THE HILLEL JEWISH CENTER AT THE UNIVERSITY OF VIRGINIA 1824 UNIVERSITY CIRCLE CHARLOTTESVILLE,VA 229031886	54-6061871		13,500				JEWISH EDUCATIONAL PROGRAMS
GREATER MIAMI HILLEL FOUNDATION INC1100 STANFORD DRIVE CORAL GABLES,FL 33146	52-1758796		95,065				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL AT BARUCH INC55 LEXINGTON AVE BE-210 NEWYORK,NY 10010	20-4777751		48,389				JEWISH EDUCATIONAL PROGRAMS
HILLEL FOUNDATION UNIVERSITY OF WISCONSIN INC (MADISON)611 LANGDON STREET MADISON,WI 53703	39-2035142		41,592				JEWISH EDUCATIONAL PROGRAMS
B'NAI B'RITH HILLEL FOUNDATION AT OHIO STATE UNIVERSITY46 E 16TH AVENUE COLUMBUS,OH 43201	31-1048567		52,835				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HILLEL FOUNDATION OF ORANGE COUNTY4255 CAMPUS DRIVE STE 250 IRVINE,CA 92612	23-7172074		30,000				JEWISH EDUCATIONAL PROGRAMS
B'NAI B'RITH HILLEL FOUNDATION (STONY BROOK)GLORIA MARK SNYDER HILLEL CENTER STONY BROOK UNION STE 201 SONNY BROOK,NY 11794	11-6112474		31,050				JEWISH EDUCATIONAL PROGRAMS
HILLEL FOUNDATION FOR JEWISH LIFE AT THE UNIVERSITY OF WASHINGTON4745 17TH ST NE SEATTLE,WA 98105	91-6067231		9,700				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MICHIGAN HILLEL FOUNDATION1429 HILL ST ANN ARBOR, MI 48104	38-6119964		150,858				JEWISH EDUCATIONAL PROGRAMS
B'NAI B'RITH HILLEL FOUNDATION AT PRINCETON70 WASHINGTON ROAD PRINCETON,NJ 08540	22-6071127		31,650				JEWISH EDUCATIONAL PROGRAMS
DICKINSON COLLEGE ASBELL CENTER FOR JEWISH LIFE 262 W HIGH STREET CARLISLE,PA 17073	23-1365954		43,166				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN UNIVERSITY HILLELKAY SPIRITUAL LIFE CENTER 4400 MASS AVE NW WASHINGTON,DC 20016	52-6066696		34,200				JEWISH EDUCATIONAL PROGRAMS
JOSEPH SLIFKA CENTER FOR JEWISH LIFE AT YALE 80 WALL ST NEW HAVEN,CT 06811	06-1257354		22,375				JEWISH EDUCATIONAL PROGRAMS
CENTER FOR JEWISH CAMPUS LIFE (HILLEL AT STANFORD)565 MAYFIELD AVENUE STANFORD,CA 94305	77-0492512		46,715				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH CAMPUS LIFE FUND INC (COLUMBIABARNARD U)THE KRAFT CENTER 606 W 115TH ST NEW YORK,NY 10025	23-7077182		42,550				JEWISH EDUCATIONAL PROGRAMS
PENN STATE HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE114-117 PASQUERILLA SPIRITUAL CENTER UNIVERSITY PARK, PA 16802	25-6078799		226,352				JEWISH EDUCATIONAL PROGRAMS
DREW UNIVERSITY36 MADISON AVE MADISON,NJ 07940	22-1487164		40,000				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF METROPOLITAN CHICAGO (NORTHWESTERN UNIVERSITY)30 S WELLS ST STE 216-600 CHICAGO,IL 60606	36-2167761		24,100				JEWISH EDUCATIONAL PROGRAMS
JEWISH FEDERATION OF METROPOLITAN CHICAGO (HILLELS OF ILLINOIS)30 S WELLS ST STE 216-600 CHICAGO,IL 60606	36-2167761		12,050				JEWISH EDUCATIONAL PROGRAMS
HILLEL OF BROWARD AND PALM BEACH INC777 GLADES ROAD BLDG LY-3A BOCA RATON,FL 33431	56-2472825		111,916				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF METROPOLITAN CHICAGO (UNIVERSITY OF ILLINOIS-URBANA)30 S WELLS ST STE 216-600 CHICAGO,IL 60606	36-2167761		16,900				JEWISH EDUCATIONAL PROGRAMS
THE EDWARD AND ROSE BERMAN HILLEL JEWISH UNIVERSITY CENTER (UNIV OF PITTSBU4607 FORBES AVENUE PITTSBURG,PA 15213	25-6065236		221,209				JEWISH EDUCATIONAL PROGRAMS
TEXAS HILLEL FOUNDATION (UNIVERSITY OF TEXAS-AUSTIN)2105 SAN ANTONIO ST AUSTIN,TX 78705	52-1758802		34,350				JEWISH EDUCATIONAL PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER PORTLAND HILLELPO BOX 1547 PORTLAND,OR 97207	80-0221753		29,500				JEWISH EDUCATIONAL PROGRAMS
HILLEL HOUSE AT UMASS AMHERST388 N PLEASANT ST 15 AMHERST,MA 01002	04-3110103		20,500				JEWISH EDUCATIONAL PROGRAMS
TANGER HILLEL AT BROOKLYN COLLEGE2901 CAMPUS ROAD BROOKLYN,NY 11210	11-6036253		25,450				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE (JOHN HOPKINS)101 WEST MT ROYAL AVENUE BALTIMORE,MD 21201	52-0607957		27,900				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT KENT STATE UNIVERSITY613 E SUMMIT STREET KENT,OH 44240	34-6557290		18,900				JEWISH EDUCATIONAL PROGRAMS
HILLEL FOUNDATION AT THE UNIVERSITY OF ARIZONA1245 E 2ND STREET TUCSON,AZ 85719	86-6053800		29,500				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CA STATE UNIVERSITY NORTHRIDGE6505 WILSHIRE BLVD STE 450 LOS ANGELES,CA 90048	95-6134920		21,900				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT DAVIS AND SACRAMENTO328 A STREET DAVIS,CA 95616	36-4499099		21,000				JEWISH EDUCATIONAL PROGRAMS
HILLEL FRANKLIN AND MARSHALL COLLEGE645 COLLEGE AVENUE PO BOX 3003 LANCASTER,PA 176043003	23-1352635		5,200				JEWISH EDUCATIONAL PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN FRANCISCO HILLEL JEWISH STUDENT CENTER 33 BRANBURY DRIVE SAN FRANCISCO, CA 94132	94-3152892		34,600				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT THE UNIVERSITY OF VERMONT ALLEN HOUSE 461 MAIN STREET BURLINGTON, VT 05405	81-0554021		19,178				JEWISH EDUCATIONAL PROGRAMS
DUKE UNIVERSITYBOX 104132 DURHAM, NC 27708	56-0532129		20,000				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF METROPOLITAN CHICAGO (UNIVERSITY OF ILLINOIS-CHICAGO)30 S WELLS ST STE 216-600 CHICAGO,IL 60606	36-2167761		23,000				JEWISH EDUCATIONAL PROGRAMS
SYRACUSE HILLEL INC102 WALNUT PL SYRACUSE,NY 13210	45-1441843		14,900				JEWISH EDUCATIONAL PROGRAMS
HILLEL- HOFSTRA UNIVERSITYSTDY CENTER 213 A 200 HEMPSTEAD TURNPIKE HEMPSTEAD,NY 11549	52-1758794		14,900				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE NORTH CAROLINA STATE UNIVERSITY210 WEST CAMERON AVE CHAPEL HILL,NC 27510	56-6094521		21,600				JEWISH EDUCATIONAL PROGRAMS
UNIVERSITY OF CA-SAN DIEGO5742 MONTEZUMA ROAD SAN DIEGO,CA 92115	36-2167761		55,300				JEWISH EDUCATIONAL PROGRAMS
JEWISH FEDERATION OF METROPOLITAN CHICAGO (UNIVERSITY OF CHICAGO)30 S WELLS ST STE 216-600 CHICAGO,IL 60606			37,900				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL FOUNDATION FOR JEWISH LIFE (HILLEL AT BUFFALO)520 LEE ENTR SUITE 210 AMHERST,NY 14228	16-6065281		10,533				JEWISH EDUCATIONAL PROGRAMS
UNIVERSITY OF SOUTHERN CA-SANTA BARBARA781 EMBARCADERO DEL MAR ISLA VISTA,CA 93111	95-4575932		13,000				JEWISH EDUCATIONAL PROGRAMS
B'NAI B'RITH HILLEL FOUNDATION (UNIV OF OKLAHOMA)494 ELM AVENUE NORMAN,OK 73069	73-6106369		44,796				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JEWISH CAMPUS ACTIVITIES BOARD HILLEL OF GREATER PHILADELPHIA STEINHARDT HALL 215 SOUTH 39TH ST PHILADELPHIA,PA 19104	23-1365179		53,500				JEWISH EDUCATIONAL PROGRAMS
CENTRAL FLORIDA HILLEL 4250 ALFAYA TRAIL STE 212-363 OVIEDO,FL 32765	34-1187022		483,171				JEWISH EDUCATIONAL PROGRAMS
CLEVELAND HILLEL FOUNDATION INC11291 EUCLID AVENUE CLEVELAND,OH 44106			18,600				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL JEWISH CAMPUS LIFE UNIVERSITY OF CINCINNATI2615 CLIFTON AVE CINCINNATI,OH 45220	31-6068733		24,300				JEWISH EDUCATIONAL PROGRAMS
KANSAS UNIVERSITY HILLEL FOUNDATION722 NEW HAMPSHIRE ST LAWRENCE,KS 66044	48-6121370		11,500				JEWISH EDUCATIONAL PROGRAMS
THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE (UNIVERSITY OF MD101 WEST MT ROYAL AVENUE BALTIMORE,MD 21201	52-0607957		12,000				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GEORGE MASON UNIVERSITY HILLEL4400 UNIVERSITY DRIVE MS2C7 FAIRFAX,VA 22030	52-2232458		37,470				JEWISH EDUCATIONAL PROGRAMS
THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE (TOWSON UNIVERSITY)101 WEST MT ROYAL AVENUE BALTIMORE,MD 21201	52-0607957		23,825				JEWISH EDUCATIONAL PROGRAMS
THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE (GOUCHER COLLEGE)101 WEST MT ROYAL AVENUE BALTIMORE,MD 21201	52-0607957		29,100				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK UNIVERSITY7 EAST 10TH STREET NEW YORK,NY 10003	13-5562308		15,800				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT ITHACA COLLEGE953 DARBY ROAD MULLER CHAPEL ITHACA,NY 14850	52-1758795		22,200				JEWISH EDUCATIONAL PROGRAMS
HOUSTON HILLEL INC1700 BISSENET HOUSTON,TX 77005	76-0684042		6,800				JEWISH EDUCATIONAL PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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B'NAI B'RITH HILLEL FOUNDATIN OF QUEENS COLLEGE (QUEENS COLLEGE HILLEL)STDT UNION BLEDG 206 65-30 KISSENA BLVD FLUSHING,NY 11367	11-3285824		20,344				JEWISH EDUCATIONAL PROGRAMS
JEWISH CAMPUS ACTIVITIES BOARD HILLEL OF GREATER PHILADELPHIA (DREXEL UNIVSTEINHARDT HALL 215 SOUTH 39TH ST PHILADELPHIA,PA 19104	23-1365179		17,250				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT BRANDEIS INC 415 SOUTH STREET WALTHAM,MA 024549110	27-3185784		8,907				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL OF METRO DETROITWSU 667 STUDENT CENTER BLDG DETROIT,MI 48202	52-1758804		24,600				JEWISH EDUCATIONAL PROGRAMS
JEWISH CAMPUS ACTIVITIES BOARD HILLEL OF GREATER PHILADELPHIA (TEMPLE (DEPTSTEINHARDT HALL 215 SOUTH 39TH ST PHILADELPHIA,PA 19104	23-1365179		31,150				JEWISH EDUCATIONAL PROGRAMS
HILLEL AT THE COLLEGE OF STATEN ISLANDMULTI FAITH CENTER 3A-104 2800 VICTORY BLVD STATEN ISLAND,NY 10314	26-0212010		5,500				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL FOUNDATION AT THE UNIVERSITY OF OREGON INC1059 HILYARD ST EUGENE,OR 97401	93-6037440		14,700				JEWISH EDUCATIONAL PROGRAMS
HILLEL-MICHIGAN STATE UNIVERSITY360 CHARLES STREET EAST LANSING,MI 48823	06-6071635		42,536				JEWISH EDUCATIONAL PROGRAMS
HILLEL-U OF CONNECTICUT54 NORTH EAGLEVILLE ROAD STORRS,CT 06268			27,800				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY AT ALBANY HILLELI UNIVERSITY DRIVE ALBANY,NY 12222	52-2238644		22,500				JEWISH EDUCATIONAL PROGRAMS
HILLEL COUNCIL OF NEW ENGLAND1320 CENTER STREET STE 306 NEWTON CENTRE,MA 024592400	56-6194457		7,500				JEWISH EDUCATIONAL PROGRAMSJEWISH EDUCATIONAL PROGRAMS
FLORIDA STATE UNIVERSITY HILLEL834 W STAUGUSTINE ST 2 TALAHASEE,FL 32304			5,900				JEWISH EDUCATIONAL PROGRAMSJEWISH EDUCATIONAL PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL COUNCIL OF NEW ENGLAND (NORTHEASTERN)1320 CENTER STREET STE 306 NEWTON CENTRE, MA 024592400	77-0575153		6,818				JEWISH EDUCATIONAL PROGRAMS
HILLEL OF SILICON VALLEY 44 S 11TH STREET SAN JOSE, CA 95112			32,800				JEWISH EDUCATIONAL PROGRAMS
HILLEL-ARIZONA STATE UNIV1012 SOUTH MILL AVENUE TEMPE, AZ 85281	85-6053859		8,000				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL-CSU LONG BEACH 3801 E WILLOW STREET LONG BEACH,CA 90815	23-7172074		18,900				JEWISH EDUCATIONAL PROGRAMS
HILLEL-INDIANA U730 EAST THIRD STREET BLOOMINGTON,IN 47401	20-2804389		5,700				JEWISH EDUCATIONAL PROGRAMS
HILLEL-LOYOLA MARYMOUNT UNIVERSITY1 LMU DRIVE MALONE 301 LOS ANGELES,CA 90045	95-1643334		11,483				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL-UNIV CA SANTA CRUZ222 CARDIFF PLACE SANTA CRUZ,CA 95060	77-0427628		41,438				JEWISH EDUCATIONAL PROGRAMS
HILLEL-UNIV OF MINNESOTA1521 UNIVERSITY AVENUE SE MINNEAPOLIS,MN 55414	41-6038613		23,600				JEWISH EDUCATIONAL PROGRAMS
HILLEL-UNIV OF MINNESOTA1521 UNIVERSITY AVENUE SE MINNEAPOLIS,MN 55414	41-6038613		23,600				JEWISH EDUCATIONAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLEL-UNIV OF MISSOURI1107 UNIVERSITY AVENUE COLUMBUS,MO 65201	43-1600778		7,225				JEWISH EDUCATIONAL PROGRAMS
METRO CHICAGO HILLEL 30 S WELLS ST STE 216-600 CHICAGO,IL 60606	41-6038613		9,800				JEWISH EDUCATIONAL PROGRAMS
UNIV OF SOUTH FL HILLEL 13102 NORTH 50TH STREET TAMPA,FL 33617	52-1758800		22,300				JEWISH EDUCATIONAL PROGRAMS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number
52-1844823

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</div></div>		
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</div></div>	Yes	
<div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</div></div>		
<div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>		No
<div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		No
<div><div></div><div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div></div>		
<div><div>5</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III.</div>		No
<div><div>6</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III.</div>		No
<div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</div></div>		No
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div></div>		

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)(i)-(iii) 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 of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ERIC D FINGERHUT, PRESIDENT	(i)	441,835	50,000	42,184	0	19,070	553,089	0
	(ii)	0	0	0	0	0	0	0
2 ARYEH FURST, CHIEF FINANCIAL OFFICER	(i)	315,085	0	14,253	13,000	19,149	361,487	0
	(ii)	0	0	0	0	0	0	0
3 DAVID EDEN, CHIEF ADMINISTRATIVE OFFICER	(i)	188,452	0	2,772	19,033	0	210,257	0
	(ii)	0	0	0	0	0	0	0
4 ROBERT GOLDBERG, VP CAMPUS DEVELOPMENT	(i)	229,556	0	0	11,779	18,939	260,274	0
	(ii)	0	0	0	0	0	0	0
5 TIM COHEN, SENIOR VP	(i)	265,218	0	0	13,000	18,988	297,206	0
	(ii)	0	0	0	0	0	0	0
6 MATTHEW BRAMAN, VP OF INFORMATION TECHNOLO	(i)	211,847	0	0	10,880	1,847	224,574	0
	(ii)	0	0	0	0	0	0	0
7 SCOTT BROWN, VP FOR TALENT	(i)	204,435	0	2,148	10,512	18,868	235,963	0
	(ii)	0	0	0	0	0	0	0

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
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Employer identification number
52-1844823

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	20	196,196	AVERAGE DAILY VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶()				
27 Other ▶()				
28 Other ▶ ()				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information.

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

Return Reference	Explanation
PART I, LINE 32B	MERRILL LYNCH AND CHARLES SCHWAB FOR STOCKS/BONDS RECEIVED

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE	Employer identification number 52-1844823
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST IF THE AUDIT COMMITTEE OR BOARD MEMBER S DETERMINE BY CONSENSUS THAT A CONFLICT OF INTEREST EXISTS, THE INTERESTED PERSON, IF PRESENT, SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT INVOLVES THE CONFLICT OF INTEREST THE PRESIDENT OR THE AUDIT COMMITTEE CHAIRPERSON SHALL APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT IF ALTERNATIVES ARE INVESTIGATED, THE BOARD OR R AUDIT COMMITTEE SHALL DETERMINE WHETHER HILLEL CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE, THE BOARD OR AUDIT COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN HILLEL'S BEST INTEREST AND IS FAIR AND REASONABLE TO HILLEL, AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY IF THE BOARD OR AUDIT COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT AN INTERESTED PERSON HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE IF, AFTER HEARING THE RESPONSE AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD OR AUDIT COMMITTEE DETERMINES THAT THE PERSON HAS IN FACT FAILED TO ADEQUATELY DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION INCLUDING REMOVAL FROM THE BOARD
FORM 990, PART VI, SECTION B, LINE 15	A GROUP OF THE BOARD OF DIRECTORS' OFFICERS MEET TO DISCUSS THE CEO AND CFO'S SALARY THEY ALSO DISCUSS THE SALARIES OF KEY EMPLOYEES
FORM 990, PART VI, SECTION C, LINE 19	THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S INTRANET AND THE FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST TO THE PUBLIC AND IS ALSO PUBLISHED ON PUBLIC WEBSITES SUCH AS GUIDESTAR
FORM 990, PART IX, LINE 11G	CONSULTING FEES AND EXPENSES PROGRAM SERVICE EXPENSES 1,683,514 MANAGEMENT AND GENERAL EXPENSES 515,452 FUNDRAISING EXPENSES 313,283 TOTAL EXPENSES 2,512,249 PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 8,850 MANAGEMENT AND GENERAL EXPENSES 99,005 FUNDRAISING EXPENSES 1,400 TOTAL EXPENSES 109,255 COMPUTER SERVICES AND CONSULTING PROGRAM SERVICE EXPENSES 180,422 MANAGEMENT AND GENERAL EXPENSES 382,861 FUNDRAISING EXPENSES 632,884 TOTAL EXPENSES 1,196,167
FORM 990, PART XI, LINE 9	UNREALIZED GAIN ON INTEREST RATE SWAP 32,163 UNREALIZED LOSS ON SPLIT INTEREST AGREEMENTS -23,073