For Paperwork Reduction Act Notice, see the separate instructions.

## DLN: 93493110000011

OMB No. 1545-0047

2019

Department of the 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.

 $\blacktriangleright$  Go to  $\underline{www.irs.gov/Form990}$  for instructions and the latest information.

Open to Public Inspection

A F	or th	e 2019 c	alendar vear, or tax vear begin	ning 07-01-2019 , and ending 06-	30-2020					
		pplicable:	C Name of organization				D Employ	er iden	tificatio	n number
		change	HILLEL THE FOUNDATION FOR JEWIS	SH CAMPUS LIFE			52-184	1022		
□ Na	me ch	ange	% SAMUEL KLEIN				32-104	4023		
☐ Ini			Doing business as							
		n/terminated d return		ail is not delivered to street address) Room/s	suite		E Telephor	ne numb	er	
		on pending	OUU STH CIDEEL VIV	an is not delivered to street dudiess) incomis	suite		(202) 4	49-652	20	
			City or town, state or province, coun WASHINGTON, DC 20001	try, and ZIP or foreign postal code			<b>G</b> Gross re	cainte ¢	16 755	207
			<b>F</b> Name and address of principa	officer:	Ш(э)	To block				
			SAMUEL KLEIN	officer.	П(а)		a group re	turn fo		]Yes <b>☑</b> No
			800 8TH STREET NW WASHINGTON, DC 20001		H(b)		linates? subordinat	tes	_	
r Tax	r-exer	mpt status:			<b>-</b> ` ´	include	ed?			☐Yes ☐No
_		·	<b>⊻</b> 501(c)(3) <b>□</b> 501(c)( ) <b>◄</b> (	insert no.) 4947(a)(1) or 527	1		" attach a	•		
J W	ebsit	te:▶ WW	/W.HILLEL.ORG		11(0)	Group	exemption	numbe	er <b>»</b> 3	/36
<b>K</b> Forn	n of o	rganization	Corporation Trust Assoc	ciation  Other	<b>L</b> Year o	of forma	tion: 1993	M Stat	te of lega	al domicile: DC
De	art I	Sum	mary							
Га		_	scribe the organization's mission or	most significant activities:						
	7	THE ÓRGA	ANIZATION'S PRIMARY EXEMPT PU	RPOSE IS TO ENHANCE JEWISH LIFE F	OR COLLE	GE AN	D UNIVERS	ITY CC	MMUNI	TIES IN NORT
e Ce	4	AMERICA .	AND THROUGHOUT THE WORLD.							
	-									
<b>=</b>	-									
Ō,				continued its operations or disposed of			of its net a	ssets.	i	
×đ	3	Number o	of voting members of the governin	g body (Part VI, line 1a)				_3		20
တ္	l		, -	the governing body (Part VI, line 1b)			•	4		19
<u> </u>	5	Total nun	nber of individuals employed in cal	endar year 2019 (Part V, line 2a) .		•		5	<b>i</b>	243
Activities & Governance	6	Total number of volunteers (estimate if necessary)								50
	7a	Total unr	elated business revenue from Part	VIII, column (C), line 12				7	а	C
	b	Net unrel	ated business taxable income from	Form 990-T, line 39			•	7	b	
						Pric	or Year		Curr	ent Year
Qı	8	Contribut	ions and grants (Part VIII, line 1h)				42,213,	961		38,400,583
Ravenue	9	Program service revenue (Part VIII, line 2g)						174		4,979,74
λċ	10	Investme	vestment income (Part VIII, column (A), lines 3, 4, and 7d ) 925,591							
_	11	Other rev	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 557,936							
	12	Total rev	otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 51,815,662					662		44,989,17
	13	Grants ar	nd similar amounts paid (Part IX, co	olumn (A), lines 1–3 )			9,805,	185		11,129,01
	14	Benefits	paid to or for members (Part IX, co	lumn (A), line 4)				0		(
88	15	Salaries,	other compensation, employee be	nefits (Part IX, column (A), lines 5-10)			19,107,	853		18,777,519
ns(	<b>1</b> 6a	Professio	nal fundraising fees (Part IX, colun	nn (A), line 11e)			488,	187		775,34
Expenses	ь	Total fund	raising expenses (Part IX, column (D), I	ine 25) ▶4,715,055						
Δ	17	Other exp	penses (Part IX, column (A), lines 1	l1a-11d, 11f-24e)			23,326,	420		16,884,59
	18	Total exp	enses. Add lines 13–17 (must equ	al Part IX, column (A), line 25)			52,727,	645		47,566,47
	19	Revenue	less expenses. Subtract line 18 fro	om line 12			-911,	983		-2,577,30
Net Assets or Fund Balances					Begi	inning	of Current Y	'ear	Enc	l of Year
sets	20	Total ass	ets (Part X, line 16)		<u> </u>		52,957,	974		49,812,183
AB d	l		ilities (Part X, line 26)				10,668,			10,387,70
ž Š	l		s or fund balances. Subtract line 2				42,289,			39,424,47
	rt II		ature Block	11 110111 11110 20 1 1 1 1 1 1			72,203,	105		33,424,47
				ned this return, including accompanyin	g schedul	es and	statement	s, and	to the b	est of my
			f, it is true, correct, and complete.	Declaration of preparer (other than of	ficer) is ba	ased or	n all inform	ation o	f which	preparer has
any k	nowie	eage.								
		*****	*				1-04-20			
Sign		Signati	ure of officer			Date	!			
Here	:		EL KLEIN VP FINANCE							
		Туре о	r print name and title							
		P	rint/Type preparer's name	Preparer's signature	Date	Cher		PTIN P018715	563	
Paid	t	L				self-	employed	010/13	,,,,	
Prej	oare	er 📙	irm's name  BDO USA LLP			Firm	ı's EIN ►			
Use		H	irm's address ► 8401 GREENSBORO DR	IVE 800		Phor	ne no. (703)	893-060	00	
		-   "	MCLEAN, VA 22102						-	
								[. a	1,	
ળaν t	ne IR	S discuss	this return with the preparer show	n above? (see instructions)				<b>✓</b>	Yes [	_INo

Cat. No. 11282Y

Form 990 (2019)

Form	990 (2019)					Page <b>2</b>					
Pa	rt III Statement	of Program Se	rvice Accomplis	hments							
	Check if Sche	dule O contains a r	esponse or note to	any line in this Part III		🗹					
1	Briefly describe the o		<u> </u>	•							
		NRICH THE LIVES (	OF JEWISH UNDERG	RADUATE AND GRADUA	TE STUDENTS SO THAT THEY	MAY ENRICH THE JEWISH					
PEOP	LE AND THE WORLD.										
	Did the organization	undertake anv sign	uificant program ser	vices during the year wh	ich were not listed on						
_	-	, ,	, ,			☐ Yes ☑ No					
	If "Yes," describe the										
3	•			changes in how it condu	cts, any program						
	services?	. □Yes ☑No									
		If "Yes," describe these changes on Schedule O.									
4	,	_		ata for anch of its throat	argest program services, as m	angured by expenses					
7					f grants and allocations to othe						
	expenses, and reven				<b>3</b>	,					
	(Code:	) (Expenses \$	8,784,448	including grants of \$	3,041,720 ) (Revenue \$	758,397 )					
	See Additional Data	) (Expended ¢	0,701,710	morading grante or ¢	3,0 11,720 ) (Navende \$	, 50,557 ,					
4b	(Code:	) (Expenses \$	5,935,829	including grants of \$	1,795,407 ) (Revenue \$	0)					
	See Additional Data										
4c	(Code:	) (Expenses \$	5,294,942	including grants of \$	19,222 ) (Revenue \$	4,160,558)					
	See Additional Data										
	See Additional Data	Table				_					
4d	Other program servi	ces (Describe in Sc	hedule O.)	_	_						
	(Expenses \$	17,425,896	including grants of	\$ 6,272.66	68 ) (Revenue \$	60,786 )					
	(Expenses \$	17,123,030		4 0,2,2,0	oo ) (Nevenue \$	00,700 )					

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Par	Checklist of Required Schedules		Vaa	N.a.
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	<b>Yes</b> Yes	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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		
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? <i>If "Yes," complete Schedule D</i> ,Part   2	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? <i>If "Yes,"</i> 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, VIII, VIII, IX, or $X$ as applicable.			
	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	
	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 2	11b	Yes	
	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
	in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
	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)? <i>If "Yes," complete Schedule D, Part X</i>	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		No
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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b 21	Yes	
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			0 (2019)

Form	990 (2019)			Page <b>4</b>
Pai	Checklist of Required Schedules (continued)			
			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		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? If "Yes," complete Schedule L, Part 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 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> 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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	. :		<u> </u>
			Yes	No

**1**a

1b

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

210

0

1c

Yes

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
	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	Yes	
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	Yes	
	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)?  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).	4a		No
52	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?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
	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).			
а	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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Yes	
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	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	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:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	which the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		.,,,
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to i	lines
Se	ction A. Governing Body and Management			
1.	Enter the number of voting members of the governing body at the end of the tax year   1a   20		Yes	No
14	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	   7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	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
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	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).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," 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		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed  AL , AK , AZ , AR , CA , CO , CT , DE , DC , IN , IA , KS , KY , LA , ME , MD , MA , MI NE , NV , NH , NJ , NM , NY , NC , ND , OH RI , SC , SD , TN , TX , UT , VT , VA , WA	, MŃ, I, OK,	MS , MO OR , PA	O, MT, A, PR,
18	only) available for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  SAMUEL KLEIN 800 8TH STREET NW WASHINGTON, DC 20001 (202) 449-6520			

(A)

Name and title

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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

✓

(F)

Estimated

amount of other

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(E)

Reportable

compensation

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

(B)

Average

hours per

week (list is both an officer and a from the from related compensation director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Highest compensatemployee Former organizations MISC) MISC) related Institutional Trustee below dotted organizations employee line) Ē See Additional Data Table

Part VII

142,667

111,512

111,063

Form 990 (2019)

l a	Section A. Officers, Direct	Tors, Trustees	,, icey i	<u>-111P</u>		•	- and	-119	1031 00.	препоис	T TIMPIOYCES (	<del>, 00//0/</del>	maca)	
	<b>(A)</b> Name and title	(B) Average hours per week (list any hours	than o	one bo	ox, u an off	ot che unles fficer	neck mo ess pers er and a tee)	son	Repo compo froi orgai	(D) portable pensation om the nization	(E) Reportable compensatior from related organizations	tion amount of ted compens ons from t		ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compens employee	Former		2/1099- IISC)	(W-2/1099- MISC)		organizati relato organiza	ed
			Φ Φ	แสเล			ensated							
See	Additional Data Table					厂								
				_	<u></u>	$\vdash$	_	<u>                                     </u>				+		
					+	+		+						
						厂								
			<u> </u>	_	_	$\perp$		<u> </u>				_		
				-	<del> </del>	$\vdash$	_	+	-			+		
		+				+	_	+				+		
c T	Sub-Total	art VII, Section	Α				<b>*</b>	<u> </u>	3,	,568,031		0		243,830
2	Total number of individuals (including of reportable compensation from the	g but not limited	to those				e) who	rec			00,000	1		
													Yes	No
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>								ighest cor		employee on	3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual										the	4	Yes	_
5	Did any person listed on line 1a receiv services rendered to the organization									ition or indi	vidual for	5		No
Se	ection B. Independent Contract	cors			_	_		_						
1	Complete this table for your five higher from the organization. Report comper	nest compensate										npens	ation	
	Name :	(A) and business addre	ess							Desc	(B) ription of services		(C Compen	
2000	k Peak Holdings LLC, State Route 392 AND, NY 13045									CATERING, I	•			200,108
	sh Productions, 0 Locustwood Lane									audio visual				197,430

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

compensation from the organization ▶ 5

Cozen O'Connor, 1650 Market Street PHILADELPHIA, PA 19103 Morgan Lewis Bockius LLP, 1701 Market Street

14740 Locustwood Lane

PHILADELPHIA, PA 19103

770 Kenmoor SE GRAND RAPIDS, MI 49546

BDO,

SILVER SPRING, MD 20905

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

LEGAL SERVICES

LEGAL SERVICES

ACCOUNTING SERVICES

orm 9- Part		(2019) Statement	of E	Pavanua						Page <b>9</b>
Part	VIII				respo	onse 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
0	1:	a Federated campa	igns	s [	<b>1</b> a	I		revenue		312 314
Contributions, Gifts, Grants and Other Similar Amounts		<b>b</b> Membership due:	5.	· į	<b>1</b> b					
6r.		<b>c</b> Fundraising even	ts .	. [	1c					
ifts, ar A		d Related organiza	tions	s [	<b>1</b> d					
m; 6		e Government grants	(con	tributions)	1e					
ions	1	f All other contribution and similar amounts			1f	38,400,583				
but the	١,	above g Noncash contributio	ns in	l cluded in		30,.00,000				
a di		lines 1a - 1f:\$			<b>1</b> g	609,386				
<u>ප</u>		<b>h Total.</b> Add lines	1a-1	f		•	38,400,583			
						Business Code	010 102	010 102	0	0
au	2a	CONFERENCE REGIST	[RAT]	ION		900099	819,183	819,183	0	U
Program Service Revenue	b	BIRTHRIGHT ISRAEL	PRO	GRAM		900099	4,160,558	4,160,558	0	0
æ. Ş						<u> </u>				
vice	c									
Set	d	1								
ranı										
Prog	е									
_	f	All other program	serv	ice revenue.						
	g	<b>Total.</b> Add lines 2	2a-2	f	. ▶	4,979,741				
		Investment income similar amounts)		luding divide		nterest, and other	327,972	2		327,972
		Income from invest				ond proceeds <b>&gt;</b>				
	5	Royalties				•				
				(i) Rea	al .	(ii) Personal	_			
		Gross rents	6a	3	334,352	2				
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c		334,352	)				
	c	I Net rental income					<u>7</u>   334,352	2		334,352
				(i) Securi	ities	(ii) Other				
	7a Gross amount from sales of 7a 1,893,39				393,390					
		assets other than inventory		ĺ	·					
	b	Less: cost or other basis and	7b	1 7	766,126	5				
		sales expenses	_							
	С	Gain or (loss)	7c	:	127,264	1				
	c	Net gain or (loss)	•				127,264	1		127,264
<u>a</u>	<b>8</b> a	<ul><li>Gross income from fu (not including \$</li></ul>	ındra	ising events of						
E		contributions reported See Part IV, line 18		line 1c).		0				
Other Revenue	Ŀ	Less: direct expen			8a 8b	0				
her		Net income or (los			ing ev	ents				
	0-	Gross income from	aami	ing activities						
	Ja	See Part IV, line 19			9a	0				
		Less: direct expen			9b	0	]			
	C	Net income or (los	s) fr	om gaming	activit <sup>®</sup>	ies 🕨	7	)		
	10	aGross sales of inve	entor	ry, less						
		returns and allowa			10a	0				
		Less: cost of good Net income or (los			10b					
	_	Miscellaneo	_		IIIVEIIC	Business Code				
	11	-aMISCELLANEOUS	INC	ОМЕ		900099	819,259	819,259	0	0
	Ŀ									
	•	i								
	,	All other revenue								
		Total. Add lines 1				•				
	12	<b>! Total revenue.</b> S	ee ir	nstructions			819,259			_
							44,989,171	5,799,000	0	789,588

Ρ	art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns.	All other organizatio	ns must complete colu	ımn (A).
	Check if Schedule O contains a response or note to ar	ny line in this Part IX			$\square$
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,201,540	8,201,540		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	2,927,477	2,927,477		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,848,431	971,585	323,484	553,362
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	13,640,433	9,897,730	2,021,484	1,721,219
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	545,952	421,744	77,178	47,030
9	Other employee benefits	1,676,352	1,171,218	299,877	205,257
10	Payroll taxes	1,066,351	721,492	180,016	164,843
11	Fees for services (non-employees):				
ā	a Management	0			
	b Legal	46,825	16,370	21,032	9,423
	c Accounting	75,198	28,364	41,409	5,425
		0	20,00	12/103	37.23
	e Professional fundraising services. See Part IV, line 17	775,347		+	775,347
	- · · · · · · · · · · · · · · · · · · ·	106,546	0	106,546	7/3,347
	f Investment management fees				
9	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,267,076	7,275,211	678,576	313,289
12	Advertising and promotion	281,509	142,298	11,925	127,286
	Office expenses	533,710	295,568	177,515	60,627
	Information technology	623,440	296,440	208,095	118,905
	Royalties	0			
		1,243,493	581,805	593,244	68,444
	Occupancy				·
	Travel	1,518,481	1,443,115	23,253	52,113
	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
	Conferences, conventions, and meetings	2,412,653	2,281,822	25,021	105,810
	Interest	0			
	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	520,597	187,379	294,617	38,601
23	Insurance	289,061	106,060	161,802	21,199
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 DIRECT MAIL/POSTAGE	436,033	253,778	58,477	123,778
	b BANK AND MERCHANT FEES	529,968	220,119	106,752	203,097
	c				
	d				
	e All other expenses				
	Total functional expenses. Add lines 1 through 24e	47,566,473	37,441,115	5,410,303	4,715,055
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7,137,53	.,, 22,,533

Form 990 (2019)

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26

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28

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Liabilities 22

Fund Balances

ō 29

Assets 30 1,125,770

0

0 5

0 6 0

651,813

9,072,477

1,220,506

23,709,937

1,556,937

52,957,974

6,362,954

389.107

34.005

3,856,331

26,474

10.668.871

9,343,751

32,945,352

42,289,103

52,957,974

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year

Page **11** 

5,630,266 7,968,389

646.803

0

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640,111

8,566,750

24.838.872

1,518,027

49,812,183

4,242,376

3,401,777

2,612,700

10.387.708

8.087,999

31,336,476

39,424,475

49,812,183

Form 990 (2019)

67,858

62.997

0

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2,965

0

0

Check if Schedule C	contains a re-	sponse or note	to any line i	this Part IX	
Check ii Schedule e	contains a re-	sponse or note	co arry mile ii	T CITIS T GIT 17 C	

Accounts receivable, net

Pledges and grants receivable, net . .

Notes and loans receivable, net . . .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \\ \text{and} \end{align\*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Inventories for sale or use . . Prepaid expenses and deferred charges .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

10a

10b

	Beginning of year		End of
Cash-non-interest-bearing	3,146,210	1	
Savings and temporary cash investments	12,474,324	2	

16,165,819

7,599,069

s	
ş	l

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

Nο

Form 990 (2019)

3h

Audit Act and OMB Circular A-133? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

## **Additional Data**

Software ID: Software Version:

**EIN:** 52-1844823

Form 990 (2019)

Form 990, Part III, Line 4a:

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Talent Grants provide local Hillels with Campus Support Directors, as well as resources to recruit, retain and train top talent. Talent Grants have infused the movement with funds in talent investments, distributed across 400 grants, training programs, scholarships, and conference subsidies, impacting over 160 local Hillels

## Form 990, Part III, Line 4b: A measurement program, designed to assess the success of local Hillels on key student outcomes, outputs that correlate with those outcomes, and the key drivers of Hillel's

success (money, talent, etc.). Hillels receive valuable performance and benchmarking data, and are using the data to help them tell their story, inform their strategies, and raise funds. The data is also used to evaluate the best ways Hillel International can support Hillels on the path to excellence. Currently 126 North American Hillels and 8

International Hillels participate in the measurement program.

### Form 990, Part III, Line 4c: Birthright Israel seeks to ensure that every eligible young Jewish adult around the world, especially the less connected, is given the opportunity to visit Israel on this

educational journey. Birthright Israel program aims to give the gift of an educational trip to Israel to 50,000 young Jewish adults each year. Hillel International is facilitator

and major provider of these trips through its campus connections.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

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

(Code:	) (Expenses \$	2,988,020	including grants of \$	1,748,385 ) (Revenue \$	52 )
TWO-YEAR FELLOWSHIP					

(Code:	) (Expenses \$	2,988,020	including grants of \$	1,748,385 ) (Revenue \$	52 )
TWO-YEAR FELLOWSHIP					

3,088,993

(Code:

HILLEL U

) (Expenses \$

(Code:	) (Expenses \$	2,988,020	including grants of \$	1,748,385 ) (Revenue \$	52 )
TWO-YEAR FELLOWSHIP					

including grants of \$

27,391 ) (Revenue \$

60,734

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

others, the total expenses, and revenue, if any, for each program service reported.							
(Codo:	\ /Eyponsos ¢	4 171 E22	including grants of ¢	1 022 470 ) (Payanua ¢	0.1		

Section E01(a)(2) and (4) organizations and 4047(a)(1) trusts are required to report the amount of grants and allocations to

(Code:	) (Expenses \$	4,171,532	including grants of \$	1,032,470 ) (Revenue \$	0)
Office of Innovation					

/C	\ / \( \sigma \)	2 2 2 2 4 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1	 <b>*</b>	220 76	= ) (D	4	
ffice of Innovation							
•			 •		, ,		

/C	\ / \( \cdot \)	0.000.400 including annual of A	220 ZCE ) (D	
ffice of Innovation				

Israel Action

(Code:

) (Expenses \$ 2,860,166 including grants of \$ 229,765 ) (Revenue \$ Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

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

3,705,923

(Code:

INTERNATIONAL

) (Expenses \$

(Code:	) (Expenses \$	554,853	including grants of \$	365,781 ) (Revenue \$	0)
MOSAIC					

including grants of \$

2,475,585 ) (Revenue \$

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

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

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

```
(Code: ) (Expenses $ 56,409 including grants of $ 393,291 ) (Revenue $ 0 )
OTHER
```

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from the from related any hours and a director/trustee) organization organizations from the

(W- 2/1099-

276,551

269,358

248,113

240,332

218,232

221,780

(W- 2/1099-

0

0

0

0

0

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14,864

18,664

27,515

13,282

25,032

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

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Eric Fingerhut President	40.0						Х	452,367	0	23,495
Adam Lehman President & CEO	40.0	х		х				426,566	0	24,290
Michelle Kravetz Chief Experience Officer	40.0			х				331,663	0	32,117
Tim Cohen	40.0					Х		306,199	0	14,863

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Chief Experience Officer
Tim Cohen
Sr Vice President
Shira Hutt

Chief Development Officer

VICE PRESIDENT, ISRAEL ENGAGE

Mark Rotenberg

DAN SMOKLER

Jennifer Zwilling

Benjamin Berger

Aryeh Furst

CFO

chief innovation officer

Chief Stragety Officer

VP, Jewish Education

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from the from related and a director/trustee) any hours organization organizations from the

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

	any nours	and a director/trustee)			)	organization organizations		from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Jennifer Chestnut CAMPUS SUPPORTING DIRECTOR	40.0					х		202,586	0	11,359
Sara Fried Senior VP - Advancement	40.0			х				182,975	0	23,392
Sam Klein CFO	40.0			х				191,309	0	14,957
Tina Price Immediate Past Chair	0.0	Х		x				0	0	0
Skip Vichness Chair	0.0	X		x				0	0	0

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Deborah Kallick

Vice Chair

Treasurer

MEMBER

Abby Doft

MEMBER

MEMBER

Lee Dranikoff

Gary Shamis

Sidney Pertnoy

and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

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

and Independent Contractors

Jacqueline Ulin Levey

......

MEMBER

MEMBER

MEMBER

MEMBER

MEMBER

MEMBER

Bruce Sholk

Larry Moses

Hilda Applbaum

David Rittberg

Estee Portnov

	any hours	and	a dir	ecto	r/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	ıv	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jordyn Zimmerman	2.0	Х						0	0	0	
MEMBER	0.0										
David Yaffe	2.0	X		x				0	C	0	
Vice Chair	0.0							Ĭ	9		
Meredith Burak	2.0	X						0	0	0	

0

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0

0

David Yaffe	2.0	x	Х		0	
Vice Chair	0.0		^			
Meredith Burak	2.0					
		X			0	
MEMBER	0.0					
David Kulp	2.0					
		Χ			0	
MEMBER	0.0					

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and Independent Contractors (A) (B) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation compensation amount of other

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

	week (list any hours for related organizations below dotted line)		recto	r/tr	office Highest compensated	from the organization (W- 2/1099- MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
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Jason Benkendorf

MEMBER

efil	e GR/	<u>APHIC pri</u> i	nt - DO NOT PROCESS	S As Filed Data - DLN: 93493110000							
SCI		ULE A	Dublic (	Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047			
	m 99			ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019			
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i			ormation.	Open to Public Inspection			
Nam	e of th	ne organiza	tion OR JEWISH CAMPUS LIFE				Employer identific	ation number			
							52-1844823				
	rt I		for Public Charity Statu a private foundation because				See instructions.				
1	n yannz		onvention of churches, or as	`	-		(A)(i)				
2		•	scribed in section 170(b)(:								
3					,	, ,					
		·	or a cooperative hospital serv	-			-				
4	Ш	name, city,	esearch organization operate and state:	ed in conjunction with	a nospital descri	ped in <b>section</b> .	170(D)(1)(A)(III). E	nter the hospital s			
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170</b> (b)(1)(A)(iv). (Complete Part II.)									
6		A federal, s	tate, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).				
7	✓		ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in			
8		A communi	ty trust described in <b>section</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)					
9			ural research organization de rant college of agriculture. Se					ege or university or a			
10		non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:  An organization that normally receives: (1) more than 331/3% 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 331/3% 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.)									
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).				
12		more public	ation organized and operated ly supported organizations d through 12d that describes	escribed in section 5	09(a)(1) or sec	ction 509(a)(2	). See <b>section 509(</b> a				
а		<b>Type I.</b> A so	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or coppoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by				
b		Type II. A manageme	supporting organization sup- nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i Ition vested in the sar							
c		Type III f	unctionally integrated. A sorganization(s) (see instruction)	upporting organizatio				ted with, its			
d		Type III n	on-functionally integrated integrated. The organization (s). You must complete Par	I. A supporting organi generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar				
e		Check this	box if the organization receiv or Type III non-functionally	red a written determir	ation from the I		pe I, Type II, Type II	I functionally			
f	Enter				-		<u> </u>				
g	Provi	de the follow	ing information about the su	pported organization(	r '						
	(i) N	(i) Name of supported organization (ii) EIN		(iii) Type of organization (described on lines 1- 10 above (see instructions))	organization in your governing document? monetary support other's scribed on lines 10 above (see						
					Yes	No					
Tota			tion Act Notice, see the In		Cat. No. 11285		Schedule A (Form 9				

Page 2

	If the organization failed						, quality u	nuer raft III.	
<u> </u>	ection A. Public Support	a to quality affac	. the tests listed	Dolovi, picase c	ompiece i die II.	,			
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2	2019	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	35,398,831	50,115,527	44,448,075	42,213,961	3	8,400,583	210,576,977	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0	
3	The value of services or facilities furnished by a governmental unit to							0	
4	the organization without charge <b>Total.</b> Add lines 1 through 3	35,398,831	50,115,527	44,448,075	42,213,961	3	8,400,583	210,576,977	
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							61,790,867	
6	(f) <b>Public support.</b> Subtract line 5 from line 4.							148,786,110	
s	ection B. Total Support	L			L				
_	Calendar year	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(a)	2019	(f) Total	
_	(or fiscal year beginning in) ▶	` ,			* * *				
7 8	Amounts from line 4 Gross income from interest,	35,398,831	50,115,527	44,448,075	42,213,961	3	8,400,583	210,576,977	
	dividends, payments received on securities loans, rents, royalties and income from similar sources	374,028	530,756	569,963	660,160	327,972		2,462,879	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	591						591	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	249,820	424,621	391,551	455,508		1,153,611	2,675,111	
11	<b>Total support.</b> Add lines 7 through 10							215,715,558	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		21,081,459	
13	First five years. If the Form 990 is f	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501	(c)(3) orga	nization,	
	check this box and <b>stop here</b>						▶ □		
S	ection C. Computation of Publi								
14	Public support percentage for 2019 (I	ine 6, column (f) d	ivided by line 11, c	olumn (f))		14		68.973 %	
15	Public support percentage for 2018 Se	chedule A, Part II,	line 14			15		72.138 %	
16a	33 1/3% support test-2019. If the	e organization did i	not check the box o	on line 13, and line	e 14 is 33 1/3% or	more, c	heck this b	ox	
	and <b>stop here.</b> The organization qua	lifies as a publicly s	supported organiza	tion				. ▶ ☑	
	b 33 1/3% support test—2018. 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								
Ь	in Part VI how the organization meets organization	st— <b>2018.</b> If the o ization meets the " on meets the "fact		check a box on lir ances" test, check es" test. The organ	ne 13, 16a, 16b, o this box and <b>stop</b> nization qualifies a	. í r 17a, a <b>here.</b> s a publ	 nd line icly		
18	Private foundation. If the organizat								

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010	( ) 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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						
4	under section 513  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						
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1	<del></del>			Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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.						
С	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						
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18   33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

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the organization had excess business holdings).

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 <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

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 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a 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

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.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations. 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

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). 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

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

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 Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) 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

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 550 01 550 E2) 2015			age 3					
Pa	rt IV Supporting Organizations (continued)								
_			Yes	No					
	Has the organization accepted a gift or contribution from any of the following persons?								
а	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							
	A family member of a person described in (a) above?	11b							
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c							
S	ection 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 <b>Part VI</b> 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.	1							
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-							
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2							
	organization.								
S	ection 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 <b>Part VI</b> how control or management of the	1							
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).								
S	ection D. All Type III Supporting Organizations		v						
_			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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).								
_		2							
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3							
S	ection 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 instruction)	ions):							
	The organization satisfied the Activities Test. Complete line 2 below.								
	b								
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)						
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No					
•	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 <b>Part VI identify those supported organizations and explain</b> 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							
ı	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	Parent of Supported Organizations. 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? <i>Provide details in Part VI.</i>	3a							
	<b>b</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 <b>Part VI.</b> the role played by the organization in this regard.	3h							

3b

Schedule A (Form 990 or 990-EZ) 2019 Page 6 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 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

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 <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

7	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in <b>Part VI</b> ). See instructions	nsive (provide		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations	(i)	(ii) Underdistributions	(iii) Distributable

8	Distributions to attentive supported organizations to wh details in $\bf Part\ VI)$ . See instructions				
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019	
1 Distributable amount for 2019 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.					
3	Excess distributions carryover, if any, to 2019:			_	

9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
i Carryover from 2014 not applied (see instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
<u></u> \$		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to		

e From 2018. . . . . .

d Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 39, 311, and 31 from 31.		
4 Distributions for 2019 from Section D, line 7:		
<u>      \$                              </u>		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.		
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.		
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.		

	See instructions.		
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.		
7	Excess distributions carryover to 2020. Add lines 3j and 4c.		
8	Breakdown of line 7:		
а	Excess from 2015		
b	Excess from 2016		
С	Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

## **Additional Data**

## Software ID: Software Version:

**EIN:** 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

Schedule A (Form 990 or 990-EZ) 2019

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

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493110000011

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

(Form 990)

**Supplemental Financial Statements** ▶ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Schedule D (Form 990) 2019

Cat. No. 52283D

	me of the organization LEL THE FOUNDATION FOR JEWISH CAMPUS LIFE		I	Employer identification number			
шт	LEE THE FOONDATION FOR JEWISH CAMPOS LIFE		[	52-1844823			
Ρā	art I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fu	nds or A	Accounts.			
	Complete if the organization answered "Ye						
		(a) Donor advised funds		(b) Funds and other accounts			
•	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
ŀ	Aggregate value at end of year						
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex						
•	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or for any other pur	rpose con				
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990 Part IV line 7					
	Purpose(s) of conservation easements held by the orga						
•							
	Preservation of land for public use (e.g., recreation	·		storically important land area			
	Protection of natural habitat	☐ Preservation	n of a cer	tified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in	the form	of a conservation  Held at the End of the Year			
а	Total number of conservation easements		2	a			
b	Total acreage restricted by conservation easements		2	b			
c	Number of conservation easements on a certified histori	c structure included in (a)	2	c			
d	Number of conservation easements included in (c) acqu structure listed in the National Register	red after 7/25/06, and not on a histor	ric 2	d			
3	Number of conservation easements modified, transferre tax year •	d, released, extinguished, or terminat	ted by the	e organization during the			
ļ	Number of states where property subject to conservation	n easement is located 🗲					
;	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ndling of	violations,			
<b>,</b>	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enfor	cing cons				
,	Amount of expenses incurred in monitoring, inspecting,  \$ \\$	handling of violations, and enforcing o	conservat	ion easements during the year			
3	Does each conservation easement reported on line 2(d)						
)	and section 170(h)(4)(B)(ii)?	ervation easements in its revenue and	d expense				
	balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	ts.					
ar	<b>Organizations Maintaining Collections</b> Complete if the organization answered "Ye	s" on Form 990, Part IV, line 8.					
.a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, education, or resear	rch in furt				
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 on Form 990, Part VIII, line ${f 1}$			<b>&gt;</b> \$			
(	ii)Assets included in Form 990, Part X			<b>&gt;</b> \$			
2	If the organization received or held works of art, histori following amounts required to be reported under SFAS	cal treasures, or other similar assets fo	or financi				
а	Revenue included on 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.

Sched	dule D (Form 990) 2019							Page
Part	Organization	ns Maintaining Col	lections of Art, H	istorical	Treas	sures, or Other	Similar Assets (	continued)
3	Using the organization' items (check all that ap		n, and other records,	check any	of the	following that are a	significant use of it	s collection
а	Public exhibition			d _	Loa	n or exchange pro	grams	
b	Scholarly research	ch		e _	Oth	ner		
С	Preservation for	future generations						
4	Provide a description of Part XIII.		lections and explain h	ow they fu	rther t	he organization's e	xempt purpose in	
5	During the year, did the assets to be sold to raise							es 🗌 No
Par		Custodial Arrange ne organization answ		n 990, Pa	rt IV,	line 9, or report	ed an amount on	Form 990, Part
1a	Is the organization an a included on Form 990,							es 🗌 No
b	If "Yes," explain the ar	rangement in Part XIII	and complete the fol	lowing tabl	e:		Amount	
c	Beginning balance					. 1c		
d	Additions during the ye	ear				1d		
е	Distributions during the	e year				1e		
f	Ending balance					1f		
2a	Did the organization in	clude an amount on Fo	rm 990. Part X. line 2	1. for escr	ow or o	custodial account li	ability?	es 🗆 No
b	If "Yes," explain the ar							
	t V Endowment	-	r one on the ox	pramation :		m provided in rais	<u> </u>	
		ne organization answ	vered "Yes" on Forr	n 990, Pa	rt IV,	line 10.		
			(a) Current year	(b) Prior y		(c) Two years back		(e) Four years back
	Beginning of year baland	ce	18,502,398		51,129			8,493,134
	Contributions		7,843		53,830	· · · · · · · · · · · · · · · · · · ·	' '	1,129,390
	Net investment earnings		98,572		62,594	1,126,512	1,165,611	-303,154
d (	Grants or scholarships							
	Other expenditures for fa	acilities	465,775		65,155	1,132,150	2,117,014	322,259
	and programs	•	,		,	_,	_,,	
	Administrative expenses		18,143,038	19 5	02,398	17,151,129	11,240,455	8,997,111
_	End of year balance						11,240,433	
2	Provide the estimated properties and designated or que	_	•	(line 1g, co	lumn (	a)) held as:		
a		***************************************	23.000 %					
b	Permanent endowment							
С	Temporarily restricted	***************************************						
3a	The percentages on line Are there endowment f		•	on that are	held a	and administered fo	or the	
	organization by:	ions					<u> </u>	Yes No
	(i) unrelated organization				•			a(i) No a(ii) No
b	(ii) related organizatio If "Yes" on 3a(ii), are t			.     . n Schedule	R?		<del>-</del>	3b
4	Describe in Part XIII th							
		ngs, and Equipmen						
	Complete if th	ne organization answ	vered "Yes" on Forr					
	Description of property	(a) Cost or oth		or other basis	(other	(c) Accumulated	depreciation	(d) Book value

2,908,629 **1a** Land . . 2,908,629

9,878,526 4,444,873 **b** Buildings . . . .

5,433,653 2,012,997 1,957,437  ${f c}$  Leasehold improvements

 ${f d}$  Equipment . 93,123 93,123 1,272,543 1,103,635 168,908 **e** Other .

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

55,560

Complete if the organization answered "Yes" on Formula (a) Description of security or category (including name of security)	rm 990, Part IV, line (b) Book value	<b>(c)</b> Meti	, Part X, line 12. nod of valuation: of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests	10.015.000		
A) LIMITED LIABILITY PARTNERSHIPS	18,216,392		<u>F</u>
(B) FIXED INCOME	6,608,864		<u>F</u>
C) ACCRUED INTEREST D)	13,616		F
E)			
F)			
G)			
H)			
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	24,838,872		_
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on For	rm 990 Part IV line	11c See Form 990	Part X line 13
(a) Description of investment		(b) Book value	
1)			value
(2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		<b>&gt;</b>	
Part IX Other Assets.		<u>'</u>	
Complete if the organization answered 'Yes' on Form (a) Description	m 990, Part IV, line	110. See Form 990, F	(b) Book value
(1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			. •
<b>Other Liabilities.</b> Complete if the organization answered 'Yes' on Form	m 990, Part IV, line	11e or 11f.See Forr	m 990, Part X, line 25.
(a) Description of liab			<b>(b)</b> Book
(1) Federal income taxes			value 0
2) FAIR VALUE OF INTEREST RATE SW  3)			67,858
4)			<del> </del>
5)			
6)			
7)			
8)			<del> </del>
9)			
(10)			
			b 67.050
Fotal. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of t		uinatian'a financial eta	► 67,858

Part XI

2

а

b

d

e

C 5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Part XII

Schedule D (Form 990) 2019

Page 4

-287,326

44,882,625

47,459,928

106,545

47.566.473

Schedule D (Form 990) 2019

#### Subtract line **2e** from line **1** . . . . . . . . 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 106,546 b

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

4b Add lines **4a** and **4b** . . . . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . .

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . .

Other (Describe in Part XIII.)

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Subtract line **2e** from line **1** . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Recoveries of prior year grants . . . . . .

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

2a

2b

2c

2d

4a

4b

Explanation

4c 106,546 5 44,989,171 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

# Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . . 47,459,928 2a 2b 2c 2d

106,546

-1

-287.326

2e

2e

3

4c

5

chedule D (Form 990) 2019	Page <b>5</b>
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

### **Additional Data**

**EIN:** 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

# **Supplemental Information**

Software ID: Software Version:

Explanation

Return Reference PART V, LINE 4: HILLEL'S ENDOWMENTS CONSIST OF FUNDS ESTABLISHED FOR VARIOUS PROGRAMMATIC PURPOSES.

Supplemental Information	1				
Return Reference	Explanation				
PART X, LINE 2:	Hillel is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC) and from District of Columbia franchise tax under applicable tax regulations. Hillel is not a private foundation pursuant to section 509(a)(1) of the IRC. Income which is not related to exempt purposes, less applicable deductions, is subject to federal and s tate corporate income taxes. Hillel did not have any material unrelated to business income for the year ended June 30, 2020. Hillel recognizes the effect of income tax positions on ly if those positions are more likely than not of being sustained. To the extent that the final tax outcome of any such matters is different than any amounts recorded, such differe nces would impact income tax expense in the period in which such determination is made. Ma nagement has evaluated Hillels tax positions and has concluded that Hillel has taken no ma terial uncertain tax positions that require adjustment to the financial statements to comp ly with the provisions of this guidance. Interest and penalties, if any, related to accrue d liabilities for potential tax assessments are included in income tax expense. For the ye ar ended June 30, 2020, Hillel did not pay interest and penalties. THE TAX YEARS ENDED JUN E 30, 2017, 2018, AND 2018, REMAIN OPEN TO EXAMINATION BY THE TAXING JURISDICTIONS TO WHIC H HILLEL IS SUBJECT, AND THEY HAVE NOT BEEN EXTENDED BEYOND THE APPLICABLE STATUTE OF LIMI TATIONS. NO EXAMINATIONS ARE CURRENTLY IN PROCESS.				

Cupplemental Information

SCHEDULE F	State	ement of A	Activities (	Outside the Uni	ited S	tates	OMB No. 1545-0047	
(Form 990)  Department of the Treasury  Internal Revenue Service	► Comp	lete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  ▶ Attach to Form 990.  ► Go to www.irs.gov/Form990 for instructions and the latest information.					2019 Open to Public Inspection	
Name of the organization						Employer ider	ntification number	
HILLEL THE FOUNDATION	FOR JEWISH	CAMPUS LIFE				52-1844823		
Part I General In Form 990,			Outside the U	Jnited States. Comple	ete if the	organization a	inswered "Yes" on	
other assistance, t	ne grantees'	eligibility for th	ne grants or assis	substantiate the amoun stance, and the selection	_		☑ Yes 🗌 No	
2 For grantmakers outside the United		Part V the orga	anization's proce	dures for monitoring the	use of it	s grants and ot	her assistance	
3 Activites per Region	(The following	ng Part I, line 3 t	table can be dupli	cated if additional space is	s needed.)	)		
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a service, describe scific type of (s) in the region	(f) Total expenditures for and investments in the region	
See Add'l Data								
3a Sub-total	on sheets to		3				2,927,47	
	and 3b)		3		İ		2,927,47	

Cat. No. 50082W Schedule F (Form 990) 2019

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Page 2

Pa	rt III Grants a	nd Other As	sistance to Organ	izations or Entitie	s Outside the Unit	ted States. Comple	ete if the organization	n answered "Yes" o	n 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.									
	(a) Name of organization	(b) IRS code section and EIN (if	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	(i) Method of valuation (book, FMV,	

organizacion	and EIN (if applicable)	grant	casii grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
See Add'l Data							

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-19 

Schedule F (Form 990) 2019

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	( <b>b)</b> Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page <b>4</b>
Par	Toreign 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	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)		
		☐ Yes	<b>✓</b> 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	<b>☑</b> 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	<b>☑</b> 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	<b>✓</b> 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 separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐Yes	<b>✓</b> No

	Page	chedule F (Form 990) 2019	Schedu
required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting m vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting olumn (c) (estimated number of recipients), as applicable. Also complete this part to pr	Provide the information requamounts of investments vs.	Part V	
Explanation	Explanation	ReturnReference	
		_	

#### **Additional Data**

Middle East and North Africa

## Software ID: Software Version:

**EIN:** 52-1844823

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

JEWISH EDUCATION

705,881

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
Europe (Including Iceland and			Program Services	JEWISH EDUCATION	267,676			

2 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) North America Program Services JEWISH EDUCATION 216.050 Russia and the Newly Program Services JEWISH EDUCATION 1,681,890 Independent States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) South America 1 | Program Services JEWISH EDUCATION 55,980

(i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East and PROGRAM 478,182 WIRE IFMV North Africa **ISERV** 115.028 WIRE lFM∨



# Europe (Includina

Iceland and Greenland)

IPROGRAM. SERV

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

(i) Method of '(h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) Russia and the **IPROGRAM** 73,909 WIRE IFMV Newly SERV Independent States IFMV



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

Independent States

(i) Method of '(h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 39,120 WIRE Russia and the **IPROGRAM** IFMV Newly SERV Independent States

Russia and the **IPROGRAM** 42.338 WIRE Newly SERV

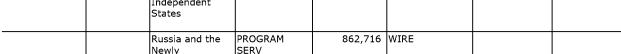
Form 990 Schedule F Part II - Grants or Entities Outside The United States

States

IFMV Independent

(i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the **IPROGRAM** 565,982 WIRE IFMV Newly ISERV Independent States

**IFMV** 



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

Independent States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America PROGRAM 40,000 WIRE IFMV ISERV IPROGRAM . 22,360 WIRE lFM∨ Europe ISERV (Includina Iceland and

Greenland)

(i) Method of '(h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) Russia and the **IPROGRAM** 50,000 WIRE IFMV Newly SERV Independent States IFMV



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

Greenland)

(i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) PROGRAM 110,016 WIRE IFMV Europe (Includina SERV Iceland and Greenland)

PROGRAM 177,375 WIRE IFMV

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

SERV

North America

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America PROGRAM 10,000 WIRE IFMV ISERV North America IPROGRAM 38,675 CHECK IFMV ISERV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America PROGRAM 5.980 WIRE lFM∨ **ISERV** Middle East PROGRAM 227.704 WIRE lFM∨ land North SERV

Africa

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Info

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on 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.

Go to www.irs.gov/Form990 for instructions and the latest information.

**DLN: 93493110000011**OMB No. 1545-0047

2019

Open to Public Inspection

**Employer identification number** Name of the organization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE 52-1844823 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 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 If "Yes," list the 10 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 (iii) Did (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No CHAPMAN CUBINE DIRECT MAIL ADAMSHUSSEY 100 Montgomery Street No 1,762,025 738,043 1,023,982 Suite 2150 San Francisco, CA 94104 NAMES IN THE NEWS LIST BROKER FIRM 180 Grand Avenue 0 No 20,723 -20,723Suite 1365 Oakland, CA 94612 FRONT LINE SUPPORT LLC TELEMARKET 2006 Southern Blvd Nο 0 16,581 -16,581 Suite 101 Rio Rancho, NM 87124 775,347 1,762,025 986,678

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

	rt II Fundraising Events. Compl				
	than \$15,000 of fundraising		d gross income on Form	990-EZ, lines 1 and	6b. List events with
	gross receipts greater than \$	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Keverkie					
200					
¥					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
N T	5 Noncash prizes				
Expenses	6 Rent/facility costs				
Š	7 Food and beverages				
Zieg Zieg	Sentertainment				
2	Other direct expenses	through O in column (d)			
	11 Net income summary. Subtract line 10				
Pai	rt III Gaming. Complete if the org			V, line 19, or reported	l i more than \$15,000
	on Form 990-EZ, line 6a.	1			1
E		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue					
<u>.</u>	1 Gross revenue				
TSe.	2 Cash prizes				
7	3 Noncash prizes				
វ	3 Noncash prizes				
ង ប្ដូ	4 Rent/facility costs				
ži Delo	4 Rent/facility costs				
វ រូវ ភ្ន			☐ Yes%	☐ Yes%	
វ រដ្ឋភ្ជុំ 	4 Rent/facility costs	☐ Yes%	☐ Yes % ☐ No	☐ Yes %	
<u>1</u> 1910 –	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	□ No	1_		
	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2	No	□ No	□ No ►	
	4 Rent/facility costs	No through 5 in column (d)	No	No	
<b></b>	4 Rent/facility costs	No  through 5 in column (d)  t line 7 from line 1, column  tion conducts gaming activities	No	<ul><li>No</li><li> ▶</li><li> ▶</li></ul>	Ves □No
a b	4 Rent/facility costs	through 5 in column (d)   nn (d)	No	☐ Yes ☐ No	
9 a	4 Rent/facility costs	through 5 in column (d)  thine 7 from line 1, column  tion conducts gaming activation activities in each column.	No  nn (d)	No	
9 a	4 Rent/facility costs	through 5 in column (d)  thine 7 from line 1, column  cion conducts gaming activaming activities in each column  censes revoked, suspend	No  nn (d)	No	
a b	4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary. Add lines 2  8 Net gaming income summary. Subtract the state(s) in which the organization licensed to conduct of If "No," explain:	through 5 in column (d)  thine 7 from line 1, column  cion conducts gaming activaming activities in each column  censes revoked, suspend	No  nn (d)	No	

Sche	dule G (Form 990 or 990-EZ) 2019	)					F	Page 3			
11	Does the organization conduct ga	aming activities with nonmember	s?			Yes	Пио				
12	Is the organization a grantor, beformed to administer charitable of		member of a partnership or other	entity 		□Yes					
13	Indicate the percentage of gamir	g activity conducted in:									
а	The organization's facility .				13a			%			
b	An outside facility				13b			%			
14	Enter the name and address of the	ne person who prepares the orga	nization's gaming/special events bo	oks and re	ecords:						
	Name •										
	Address >										
15a	Does the organization have a cor revenue?	tract with a third party from who	om the organization receives gaming			□ <b>v</b>	П.				
b			anization 🕨 \$			⊔ Yes	⊔ но				
	amount of gaming revenue retain										
c	If "Yes," enter name and address	of the third party:									
	Name ►										
	Address >										
16	Gaming manager information:										
	Name ►										
	Gaming manager compensation	Gaming manager compensation ▶ \$									
	Description of services provided <b>I</b>	<b>&gt;</b>									
	☐ Director/officer	☐ Employee	☐ Independent contrac	tor							
17	Mandatory distributions:										
а			stributions from the gaming proceed			□Yes	Пио				
b	Enter the amount of distributions	required under state law distrib	uted to other exempt organizations	or spent		□ 1es	100				
	in the organization's own exempt	<u> </u>	•								
Pai			ions required by Part I, line 2b, licable. Also provide any additio					 s.			
	Return Reference		Explanation								

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

(Form 990)

Department of the

Treasury

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Go to www.irs.gov/Form990 for the latest information.

▶ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

DLN: 93493110000011

Name of the organization						Employer identifie	cation number
HILLEL THE FOUNDATION FOR J	EWISH CAMPUS LIF	Ξ				52-1844823	
Part I General Inform	ation on Grants	and Assistance				•	
Does the organization mai the selection criteria used						ce, and	☑ Yes ☐ N
2 Describe in Part IV the org	•						
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes	" on Form 990, Part IV, line	e 21, for any recipient
(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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
<ul><li>2 Enter total number of sect</li><li>3 Enter total number of other</li></ul>		<del>-</del>					135
For Paperwork Reduction Act Noti				Cat. No. 50055			hedule I (Form 990) 2019

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

Return Reference **Explanation** 

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

Schedule I (Form 990) 2019

## **Additional Data**

Hillel Council of New England

1320 Centre Street Newton Center, MA 02459 Hillel-Boston University

213 Bay State Road Boston, MA 02215

Software ID: **Software Version:** 

04-2688997

32-0293118

**EIN:** 52-1844823

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

PROGRAM GRANT

PROGRAM GRANT

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

(a) Name and address of	<b>(b)</b> EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	l
organization		if applicable	grant	cash	(book, FMV, appraisal,	i
or government				assistance	other)	ı

organization	 if applicable	grant	cash	(book, FMV, appraisal,
or government			assistance	other)

501(C)(3)

501(C)(3)

27,733

229,575

Name: HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 27-3185784 501(C)(3) 130.585 IPROGRAM GRANT Hillel-Brandeis University MS 205 415 Waltham, MA 02454

22.373

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

501(C)(3)

Hillel-Mass Institute of Tech

40 Massachusetts Avenue Cambridge, MA 02139

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Northeastern University 04-6139142 501(C)(3) 23.326 IPROGRAM GRANT 70 Saint Stephen Street

34.060

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

501(C)(3)

Boston, MA 02115
Hillel-Tufts University

Granoff Fam Hillel Ctr Medford, MA 02155

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Hillel-University of Vermont 81-0554021 501(C)(3) 84.925 IPROGRAM GRANT 461 Main St

64.055

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

501(C)(3)

Burlington, VT 05405
Hillel-CUNY Brooklyn College

2901 Campus Road Brooklyn, NY 11210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-CUNY Hunter College 13-3853221 501(C)(3) 169.945 IPROGRAM GRANT 695 Park Avenue New York, NY 10021

155.641

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

501(C)(3)

Hillel-CUNY Queens College

65-30 Kissena Boulevard Flushing, NY 11367

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

Hillel-Hofstra University	52-1758794	501(C)(3)	19,060		PROGRA
200 Hofstra University					
Hempstead, NY 11549					

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

SB Union Suite 201 Stony Brook, NY 11794

Hillel-Stony Brook 11-6112474 501(C)(3) 72.637 IPROGRAM GRANT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 23-7077182 501(C)(3) 34.676 IPROGRAM GRANT Hillel-Columbia University

169,301

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

501(C)(3)

Hillel-Columbia Universit RK Kraft Fam Ctr New York, NY 10025

Hillel-Baruch College

55 Lexington Avenue New York, NY 10010 23-7077182

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 13-5562308 501(C)(3) 79.795 IPROGRAM GRANT Hillel-New York University EBronfman Ctr

31,385

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

501(C)(3)

New York, NY 10003 Hillels of Westchester

Sarah Lawrence College Bronxville, NY 10708

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

23,330

Hillel-College Staten Island 3A-104 Multi Faith Ctr	26-0212010	501(C)(3)	15,417		PROG
SI, NY 10314					

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

501(C)(3)

Hillel-Greater Philadelphia

215 S 39th St Philadelphia, PA 19104

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

Hillel-Univ of Pennsylvania Steinhardt Hall Philadelphia, PA 19104	23-1365179	501(c)(3)	172,181		PROGRAM GRANT
Hillel-Temple University	23-1365179	501(c)(3)	48,601		PROGRAM GRANT

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

Phil Ctr Commuter Svc Phil, PA 19121

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Drexel University 81-3913374 501(c)(3) 27.523 IPROGRAM GRANT

Hillel-Drexel University 81-3913374 501(c)(3) 27,523 PROGRAM GRANT 232 Creese Stu Ctr
Philadelphia, PA 19104
Hillel-American University 52-6066696 501(c)(3) 83,685
PROGRAM GRANT

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

Kay Spritual Life Ctr Washington, DC 20016

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-George Washington Univ 52-6081729 501(c)(3) 82.175 IPROGRAM GRANT 2300 H St NW

94.930

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

501(c)(3)

Washington, DC 20037
Hillel-University of Maryland

7612 Mowatt Lane College Park, MD 20740

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-George Mason University 52-2232458 501(c)(3) 35.225 IPROGRAM GRANT 4400 University Drive

230,177

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

501(c)(3)

59-6194457

Fairfax, VA 22030
Hillel-Florida State Univ

834 W St Augustine Tallahassee, FL 32304

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-University of Florida 65-1090524 501(c)(3) 205.138 IPROGRAM GRANT 2020 W Univ Ave Gainesville, FL 32603

101.838

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

501(c)(3)

Hillel of Greater Miami

1100 Stanford Drive Coral Gables, FL 33146

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of South Florida 52-1758800 501(c)(3) 26.975 IPROGRAM GRANT

Attn Lori Drutz Tampa, FL 33617

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

Boca Raton, FL 33431

Hillel-Broward and Palm Beach 56-2472825 501(c)(3) 75.391 IPROGRAM GRANT 777 Glades Road

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 81-0553966 501(c)(3) 284.809 IPROGRAM GRANT Hillel-Univ of Central FL

4250 Alafaya Trail Oviedo, FL 32765 Hillel at Florida International 47-4532260 501(c)(3) 90.574 University Inc

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

IPROGRAM GRANT 4200 Biscayne Blvd Miami, FL 33137

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

Hillel-Johns Hopkins Hopkins Hillel Office Baltimore, MD 21218	52-0607957	501(c)(3)	106,088		PROGRAM GRANT
Hillel-Towson University	52-0607957	501(c)(3)	29,581		PROGRAM GRANT

8000 York Road Towson, MD 21252

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 52-0607957 501(c)(3) 20.463 IPROGRAM GRANT

Hillel-Goucher College 1021 Dulaney Road Baltimore, MD 21204

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

30 South Wells Chicago, IL 60606

Hillels of Illinois 36-2167761 501(c)(3) 6.250 IPROGRAM GRANT

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

Hillel-Northwestern University 629 Foster Street Evanston, IL 60201	36-2167761	501(c)(3)	66,544		PROGRAM GRANT
Hillel-University of Chicago	36-2167761	501(c)(3)	17,925		PROGRAM GRANT

5715 South Woodlawn Ave THE KRAFT CENTER Chicago, IL 60637

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 36-2167761 501(c)(3) 77.142 IPROGRAM GRANT

Hillel-Univ of IL Urbana 503 East John Street

59,654

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

501(c)(3)

Champaign, IL 61820 Metro Chicago Hillel 36-2167761

30 South Wells Chicago, IL 60606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Cleveland 34-1187022 501(c)(3) 57.760 IPROGRAM GRANT

11291 Euclid Avenue Cleveland, OH 44106					
Hillel-Kent State University	34-6557290	501(c)(3)	28,760		PROGRAM GRANT

STEINHARDT HALL

Kent, OH 44240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 31-6068732 501(c)(3) 17.910 IPROGRAM GRANT Hillel-Miami Univ-Ohio 11 East Walnut Street

Oxford, OH 45056

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

Athens, OH 45701

Hillel-Ohio University 52-1758797 501(c)(3) 41.170 IPROGRAM GRANT 21 Mill Street

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of Toledo 34-4428259 501(c)(3) 15.475 IPROGRAM GRANT 6465 Sylvania Avenue Sylvania, OH 43560

151,503

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

501(c)(3)

Hillel-Univ of California LA

574 Hilgard Avenue Los Angeles, CA 90024

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 91-2054237 501(c)(3) 25.300 IPROGRAM GRANT

Hillel-Univ CA Santa Barbara 781 Embarcadero Del Mar I Vista, CA 93117

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

Los Angeles, CA 90007

Hillel-Univ of Southern Cal 95-4867366 501(c)(3) 85.443 IPROGRAM GRANT 3300 S Hoover Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-San Francisco State 94-3152892 501(c)(3) 55.375 IPROGRAM GRANT

74.460

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

501(c)(3)

33 Banbury Street
San Francisco, CA 94132

77-0492512

Hillel-Stanford

PO Box 20526 Stanford, CA 94309

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of CA Berkelev 52-1758790 501(c)(3) 11.366 IPROGRAM GRANT 2736 Bancroft Way

13.734

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

501(c)(3)

Berkeley, CA 94704 Hillel-Univ of CA Davis

328 A Street Davis, CA 95616

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

Hillel-Univ of CA Santa Cruz 222 Cardiff Place Santa Cruz, CA 95060	77-0427628	501(c)(3)	77,970		PROGRAM GRANT
Hillel of Silicon Valley	77-0575153	501(c)(3)	14,298		PROGRAM GRANT

44 S 11th Street San Jose, CA 95112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-San Luis Obispo 20-1744245 501(c)(3) 67.438 IPROGRAM GRANT EpiCenter Box 88

San Luis Obispo, CA 93407

Hillel-Univ of Rhode Island 05-6019148 501(c)(3) 24.460 IPROGRAM GRANT 6 Fraternity Circle Kingston, RI 02881

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-CSU Long Beach 33-0348561 501(c)(3) 37.801 IPROGRAM GRANT 3801 E Willow Street Long Beach, CA 90815

44.560

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

501(c)(3)

Hillel-Rochester Area

Interfaith Chapel Rochester, NY 14627

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel of Colorado 52-1758791 501(c)(3) 10.975 IPROGRAM GRANT Merage Allon Hillel Ctr Denver, CO 80210

152.173

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

501(c)(3)

Hillel-Colorado at Boulder

2795 Colorado Avenue Boulder, CO 80302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel of San Diego 33-0519225 501(c)(3) 55,808 IPROGRAM GRANT

8976 Cliffridge Avenue La Jolla, CA 92037					
Hillel-San Diego State Univ 5717 Lindo Paseo	33-0519225	501(c)(3)	30,283		PROGRAM GRANT

Asbell Center for Jewish Life San Diego, CA 92115

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 33-0519225 501(c)(3) 24.008 IPROGRAM GRANT Hillel-Univ of CA San Diego 8976 Cliffridge Avenue La Jolla, CA 92037

86.410

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

501(c)(3)

Hillel-Univ of Mass-Amherst

Center for Religious Life Amherst, MA 01002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 36.959 IPROGRAM GRANT

88.971

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

501(c)(3)

Hillel-University of Albany	52-2238644	501(c)(3)
Chapel House		
Albany, NY 12222		
•		

01-0569965

Hillel-Binghamton University

Binghamton University Binghamton, NY 13902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 16-6068463 501(c)(3) 65.882 IPROGRAM GRANT Hillel-Cornell University G-34 Anabel Taylor Hall

71.600

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

501(c)(3)

52-1758795

Ithaca, NY 14853 Hillel-Ithaca College

1001 Muller Chapel Ithaca, NY 14850

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-SUNY Buffalo 16-6065281 501(c)(3) 71.634 IPROGRAM GRANT

169,960

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

501(c)(3)

520 Lee Entrance Amherst, NY 14228 Hillel-Syracuse University

Winnick Hillel Center Syracuse, NY 13210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 26-0177367 501(c)(3) 85.675 IPROGRAM GRANT Hillel-Rutgers University

44,425

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

501(c)(3)

93 College Avenue New Brunswick, NJ 08901 Hillel-Princeton University

70 Washington Road Princeton, NJ 08540

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

12.700

Hillel-Muhlenberg College	23-2670541	501(c)(3)	28,011		PROGR
28 North College Street Carlisle, PA 17013					
					$\overline{}$

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

501(c)(3)

Hillel-Univ of Connecticut 54 North Eagleville Road

Storrs, CT 06268

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillal Vala Haistavaiks 06 1357354 E01/-1/21 4E 70E IPROGRAM GRANT

miller-rate University	00-123/334	201(c)(2)	45,725		PROGRA
80 Wall Street					
Kay Spritual Life Center					
New Haven, CT 06520					

426.760

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

501(c)(3)

38-3829311

Hillel-Penn State University

117 Pasquerilla Ctr Univ Park, PA 16802

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel JUC of Pittsburgh 25-6065236 501(c)(3) 55.500 IPROGRAM GRANT

4607 Forbes Avenue Pittsburgh, PA 15213		,,,,	·		
Hillel-William & Mary 420 Spottswood Avenue	30-0091478	501(c)(3)	24,260		PROGRAM GRANT

Ste 216-600

Norfolk, VA 23517

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Hillel-University of Delaware 51-0331975 501(c)(3) 87.675 IPROGRAM GRANT 47 West Delaware Ave

25,339

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

501(c)(3)

Newark, DE 19711
Hillel-University of Virginia

Blacksburg, VA 24063

PO Box 708

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Virginia Tech 54-6061871 501(c)(3) 84.825 IPROGRAM GRANT 1824 Univ Cir Charlottesville, VA 22903

118,333

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

501(c)(3)

Hillel-North Carolina

210 W Cameron Avenue Chapel Hill, NC 27516

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-University of Georgia 58-2051970 501(c)(3) 14 400 IPROGRAM GRANT

Atlanta, GA 30322 Hillels of Georgia	58-2051970	501(c)(3)	86,250		PROGRAM GRANT
Hillel of Georgia Allen House	30 2031370	301(0)(3)	14,400		TROCKAM GRANT

Hillels of Georgia 735 Gatewood Road

Atlanta, GA 30322

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 31-1048567 501(c)(3) 97.525 IPROGRAM GRANT Hillel-Ohio State University 46 East 16th Avenue

77.595

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

501(c)(3)

Columbus, OH 43201
Hillel-Univ of Cincinnati

Rose Warner House Cincinnati, OH 45220

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Michigan State Univ 38-3034766 501(c)(3) 6.972 IPROGRAM GRANT

360 Charles Street East Lansing, MI 48823 Hillel-University of Michigan 38-6119964 501(c)(3) 116,705 IPROGRAM GRANT

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

1429 Hill Street Ann Harbor, MI 48104

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 20-2804389 501(c)(3) 45.825 IPROGRAM GRANT Hillel-Indiana University 730 East Third Street

730 East Third Street
Bloomington, IN 47401

Hillel-Univ of WI Madison 39-2035142 501(c)(3) 91,341

PROGRAM GRANT
611 Langdon Street

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

STEINHARDT HALL Madison, WI 53703

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of WI Milwaukee 39-1445185 501(c)(3) 43.008 IPROGRAM GRANT

3053 N Stowell Avenue Milwaukee, WI 53211

Nashville, TN 37212

Hillel-Vanderbilt University 62-6073391 501(c)(3) 55.150 IPROGRAM GRANT Schulman Ctr

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel of New Orleans 72-6031116 501(c)(3) 192.693 IPROGRAM GRANT 912 Broadway New Orleans, LA 70118

22,235

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

501(c)(3)

Hillel-University of Iowa

122 East Market Street Iowa City, IA 52245

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Hillel-University of Kansas 48-6121370 501(c)(3) 86.983 IPROGRAM GRANT

722 New Hamphire Street Lawrence, KS 66044

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

Minneapolis, MN 55414

Hillel-University of Minnesota 41-6038613 501(c)(3) 62,360 IPROGRAM GRANT 1521 Univ Ave SE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-University of Missouri 43-1600778 501(c)(3) 42.201 PROGRAM GRANT

1107 University Avenue Columbia, MO 65201					
Hillel-St Louis Washington 6300 Forsyth Boulevard	43-6065763	501(c)(3)	74,560		PROGRAM GRANT

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

3A-104 Multi Faith Center St Louis, MO 63105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of Oklahoma 73-6106369 501(c)(3) 10.551 IPROGRAM GRANT 494 Elm Avenue

38.800

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

501(c)(3)

Norman, OK 73069

800 George Bush Dr College Sta, TX 77840

Hillel-Texas A & M University

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

77.338

Hillel-Houston	76-0684042	501(c)(3)	33,335		PROG
1700 Bissonnett					
Houston, TX 77005					

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

501(c)(3)

Hillel-Univ of Texas-Austin

Texas Hillel Foundation Austin, TX 78705

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Univ of North TX 80-0501175 501(c)(3) 24.975 IPROGRAM GRANT Jacob Feldman Building Dallas, TX 75230

168.274

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

501(c)(3)

Hillel-Arizona State Univ

1012 South Mill Avenue Tempe, AZ 85281

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-University of Arizona 86-6053800 501(c)(3) 21.728 IPROGRAM GRANT

45.077

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

501(c)(3)

Hillel-University of Arizoni 1245 E 2nd Street Tucson, AZ 85719 Hillel-University of Utah

c/o 332 S 1400 EFront SLC, UT 84112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Hillel Foundation Orange Cty 23-7172074 501(c)(3) 83.188 IPROGRAM GRANT 4255 Campus Drive Irvine, CA 92612

25.073

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

501(c)(3)

Hillel-Greater Portland

P O Box 1547 Portland, OR 97207

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

Hillel-University of Oregon 1059 Hilyard Eugene, OR 97401	93-6037440	501(c)(3)	95,002		PROGR
Eugene, OR 9/401					

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

4745-17th Avenue NE Seattle, WA 98105

Hillel-Univ of Washington 91-6067231 501(c)(3) 14.500 IPROGRAM GRANT

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

Hillel-Bradley University 1532 W Fredonia Avenue Peoria, IL 61606	37-6053576	501(c)(3)	6,623		PROGRAM GRANT
Hillel-Elon University	56-0532303	501(c)(3)	11.322		PROGRAM GRANT

11.322 Hillel-Elon University 56-0532303 501(c)(3)|

POBox 398 Elon, NC 27244

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel-Colby College 01-0211497 501(c)(3) 26.000 IPROGRAM GRANT

4120 Mayflower Hill Waterville, ME 04901			·		
Jewish Theological Seminary of	13-0887640	501(c)(3)	17,678		PROGRAM GRANT

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

3080 Broadway Box 133 New York, NY 10027

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Univ of Arizona Medical School 74-2652689 501(c)(3) 16.000l IPROGRAM GRANT 1501 N Campbell Avenue 36-2662739 501(c)(3) 7.500l PROGRAM GRANT

Tucson, AZ 85724 Spertus Institute for Jewish Learning and Leadersh 610 South Michigan Avenue Suite 160

Chicago, IL 60605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 03-0179424 501(c)(3) 10.021 IPROGRAM GRANT Norwich University 158 Harmon Drive

173.117

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

501(c)(3)

Northfield, VT 05663

Jewish Agency for Israel

633 3rd Ave 21st Fl New York, NY 10017

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 59-0624416 501(c)(3) 11.426 IPROGRAM GRANT Stetson University Inc 421 N Woodland Blvd DeLand, FL 32723

16.280

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

501(c)(3)

59-0624440

Rollins College

1000 Holt Avenue Winter Park, FL 32789

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel of Rockland 13-4054768 501(c)(3) 10 901 IPROGRAM GRANT

145 College Road Suffern, NY 10901	13 4034700	301(0)(3)	10,501		TROCKAN CIVANT
Hillel-North Carolina State University	56-6094521	501(c)(3)	5,300		PROGRAM GRANT

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

210 W Cameron Ave Chapel Hill, NC 27516

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hebrew College 04-2104300 501(c)(3) 12.520 IPROGRAM GRANT 160 Herrick Road Newton Centere, MA 02459

15.000l

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

501(c)(3)

Friends of Israel Scouts Inc.

575 8th Ave 11th Fl New York, NY 10018

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

6.206

Hillel-Univ of Alabama	30-0459224	501(c)(3)	10,677		PRC
380 9th Street					
Tuscaloosa, AL 35401					<u> </u>

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

501(c)(3)

Hillel of Northern Nevada

1674 N Virginia Street Reno, NV 89507

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

Hillel-Univ of NV Las Vegas	88-0098500	501(c)(3)	12,026		PROGRAM
2317 Renaissance Drive					
Las Vegas, NV 89119					

14.865

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

501(c)(3)

27-1028160

Hillel of Dallas

7615 Currin Drive Dallas, TX 75230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 20-0633180 501(c)(3) 6.017 IPROGRAM GRANT

Hillel-Purdue University 912 W State St W Lafavette, IN 47906

10.698

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

501(c)(3)

Hillel-Clark University

633 Salisbury Street Worcester, MA 01609

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Hillel-Brown University 05-6019146 501(c)(3) 10.000 IPROGRAM GRANT 80 Brown St Bown RISD Providence, RI 02906

5.055

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

501(c)(3)

Hillel-Claremont Colleges

919 N Columbia Ave Claremont, CA 91711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hillel 818 46-0893850 501(c)(3) 70.127 IPROGRAM GRANT

23.190

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

501(c)(3)

17729 Plummer Street Northridge, CA 91325 Hillel-Inland and Desert

PO Box 56691 Riverside, CA 92517

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

Hillel of Greater Baltimore 52-1844823 501(c)(3) 13,282 PROGRAM GRANT 101 W Mt Royal Ave

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

Baltimore, MD 21201

efil	e GRAPHIC pi	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49311	10000	011
Sch	edule J	Co	ompensati	ion Information	0	MB No.	1545-0	0047
(For	n 990)	For certain Office		rustees, Key Employees, and Hig	hest			
		► Complete if the org	Compensa Janization answ	ited Employees ered "Yes" on Form 990, Part IV,	, line 23.	20	119	)
Domon	tment of the Treasury		▶ Attach	to Form 990. instructions and the latest inform		Open		
•	al Revenue Service	r do to <u>www.msigo</u>	10.	mstructions and the latest mion		Insp	ectio	n
	ne of the organiza LEL THE FOUNDATION	ation ON FOR JEWISH CAMPUS LIFE			Employer identifica	tion nu	ımber	
					52-1844823			
Pa	rt I Questi	ons Regarding Compensa	tion					
<b>1</b> a				the following to or for a person lister			Yes	No
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence							
	Tax idemi	nification and gross-up payment	s 🔲	Health or social club dues or initiation	on fees			
	Discretion	ary spending account		Personal services (e.g., maid, chauf	feur, chef)			
b				follow a written policy regarding pays		1b		
2				or allowing expenses incurred by all		2		
	airectors, truste	es, officers, including the CEO/E	executive Director	r, regarding the items checked on Lir	ne la?			
3				d to establish the compensation of the check any boxes for methods	ne			
				CEO/Executive Director, but explain i	n Part III.			
	<b>✓</b> Compens	ation committee	$\checkmark$	Written employment contract				
	☐ Independ	ent compensation consultant		Compensation survey or study				1
	☐ Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a			
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a suppl	emental nonqual	ified retirement plan?		4b		No
c				nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	licable amounts for each item in Part	: 111.			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Sectio ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	1?				5a		No
b		anization?				5b		No
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	-	1?				6a		No
b						6b		No
7	•	6a or 6b, describe in Part III.	n A line to did	the organization provide any nonfixed	d			
,				the organization provide any nonfixed $\operatorname{rt} \operatorname{III} \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot$		7		No
8	subject to the ir	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 				
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		No
For F	<u>``</u>	iction Act Notice, see the Ins			50053T Schedule 3		1 990)	2019

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 on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on 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 to	tal amou	ınt of Fo	rm 990, Part VII, Se	ection A, line 1a, ap							
(A) Name and Title	(	(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	( <b>D)</b> Nontaxable benefits	columns	(F) Compensation in			
	(i) comp	Base ensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990			
See Additional Data Table											
	_										
	+-										

Schedule J (Form 990) 2019	Page <b>3</b>										
Part III Supplemental Inform											
rovide 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										
SCHEDULE J, LINE 4A:	Aryeh Furst WAS PAID A SEVERANCE OF \$221,780										
	Schedule 1 (Form 990) 2019										

Software ID:

**Software Version:** 

**EIN:** 52-1844823

		of W-2 and/or 1099-MISC (ii) Bonus & incentive		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on
_		compensation	compensation			<u> </u>	prior Form 990
(i)	250,000	0	202,367	13,221	10,274	475,862	0 '
(ii)	0	0	0	0		0	0
(i)	414,357	0	12,209	14,000	10,290	450,856	0
(ii)	o	0		0	,	1 0	0
(i)	0	0	221,780	0	0	221,780	0
(ii)						1	
(i)	306,875	0	24,788	14,000	18,117	363,780	0
(ii)						1	
(i)	181,000	0	1,975	9,117	14,275	206,367	0
(ii)				,			
(i)	182,000	0	9,309	, <u> </u>	14,957	206,266	
l <sub>cii)</sub>			, <u>-</u>		,	/ <u>-</u>	
(i)	290,700	0	15.499	14.000	863	321.062	0
(i)	265,200		11 351	13 683	1 181	291 415	0
				15,005			
	250,000	0	10.358	1 445	17.219	UI 288 022	0
			,	1,445	17,219	200,022	
<u> </u>	237 500	0	0	0	0	0!	0
	257,300		2,832	11,860	1,416	253,614	
(ii)	100.600	0	0	0	0	0'	0
(")	000,661	0	2,986	9,980	1,379	213,945	0
(ii)	0	0	0	0	0	0	0
(i)	144,800	0	103,313	12,379	15,136	275,628	0
(ii)	0	0	0	0	0	0	0
(i)	218,232	0	0	10,695	14,337	243,264	0
(ii)	o	0	0	0	0	0	0
		(B) Breakdown (i) Base Compensation (ii) 250,000 (iii) 414,357 (iii) 0 (ii) 306,875 (iii) 0 (ii) 306,875 (iii) 0 (ii) 181,000 (ii) 182,000 (iii) 0 (ii) 290,700 (iii) 0 (ii) 250,000 (iii) 0 (ii) 237,500 (iii) 0 (ii) 199,600 (iii) 0 (ii) 199,600 (iii) 0 (ii) 10 (iii) 0 (i	Color   Colo	Part II - Officers, Directors, Trustees, Key Employees, and Foundation (i) Breakdown of W-2 and/or 1099-MISC compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation (iii) Other re	Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensate   (B) Breakdown   FW-2 and/or 1099-MISC compensation   (C) Retirement and other deferrence compensation   (D)   (D)	(i) Base Compensation         (ii) Bonus & incentive compensation         (iii) Other reportable compensation         other deferred compensation         benefits           (i) 250,000         0 202,367         13,221         10,274           (ii) 0 0 0 0 0 0 0 0 0 0         0 0 0 0 0         0           (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0         0 0 0 0 0         0           (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0         0 0 0 0 0         0           (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493110000011 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE 52-1844823 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 609,386 AVERAGE DAILY VALUE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . 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 ▶ ( \_\_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page <b>2</b>
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
PART I, COLUMN (B):	HILLEL REPORTS THE NUMBER OF CONTRIBUTIONS IN COLUMN (B).
	Schedule M (Form 990) (2019)

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93493110000		
SCHEDUL (Form 990 or EZ)	Complete to provide information for responses to specific questing Form 990 or 990-EZ or to provide any additional information Attach to Form 990 or 990-EZ.	ons on n. Open to Public
Name Setherofganization HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE  52-1844823  990 Schedule O, Supplemental Information		Employer identification number 52-1844823
Return Reference	Explanation	
FORM 990, PAGE 1, QUESTION H(C):	IN 2001, HILLEL: THE FOUNDATION FOR JEWISH CAMPUS LIFE FILED FOR AND RE PTION NUMBER - 3736. THIS TAX RETURN, IS THE RETURN FOR THE CENTRAL OF NOT CONTAIN ANY INFORMATION FROM ITS SUBORDINATES. ALL OF THE SUBOR VERED BY THE GROUP EXEMPTION FILE THEIR OWN EXEMPT ORGANIZATION RE TS TO CERTAIN SUBORDINATES AND THESE ARE REPORTED ON SCHEDULE I TO NT EXCEEDS \$5,000.	GANIZATION AND DOES DINATE ORGANIZATIONS CO TURN. HILLEL ISSUES GRAN

FORM 990, PART III, LINE 4D: OTHER ACCOMPLISHMENTS  A paid, two-year fellowship that brings recent college grads with passion for building Jew ish life and skills in innovation or Jewish education to college campuses across North Ame rica. there are Springboard Fellows across 65+ campuses focusing on Social Justice, Innova tion and Ezra Jewish Education. EXPENSES \$2,988,020. GRANTS \$1,748,385. REVENUE \$52. A com prehensive, best-in-class professional development initiative that is a key strategy in Hi liels effort to recruit and retain too talent in the field. Hillel LI aims to provide every	Return Reference	Explanation	- 1
Hillel professional with the skills, knowledge and resources to enable them to do their j obs with excellence. Hillel U employs a mix of in-person, online and blended learning oppo rtunities that range from in-depth certificate programs to one-time sessions. It impacts h undreds of Hillel professionals through its three Centers of Learning for professionals: - The Center for Jewish and Israel Education (CJIE) - The Center for Young Adult Engagement and Wellness - The Center for Management and Leadership EXPENSES \$3,088,993. GRANTS \$27,3 91. REVENUE \$52. OFFICE OF INNOVATION EXPENSES \$4,171,532. GRANTS \$1,032,470. REVENUE \$0. ISRAEL ACTION EXPENSES \$2,860,166. GRANTS \$229,765. REVENUE \$0. MOSAIC EXPENSES \$554,853. GRANTS \$365,781. REVENUE \$0. INTERNATIONAL EXPENSES \$3,705,923. GRANTS \$2,475,585. REVENUE \$0. OTHER EXPENSES \$56,409. GRANTS \$393,291. REVENUE \$0.	LINE 4D: OTHER	ish life and skills in innovation or Jewish education to college campuses across North Ame rica. there are Springboard Fellows across 65+ campuses focusing on Social Justice, Innova tion and Ezra Jewish Education. EXPENSES \$2,988,020. GRANTS \$1,748,385. REVENUE \$52. A comprehensive, best-in-class professional development initiative that is a key strategy in Hi llels effort to recruit and retain top talent in the field. Hillel U aims to provide every Hillel professional with the skills, knowledge and resources to enable them to do their jobs with excellence. Hillel U employs a mix of in-person, online and blended learning opportunities that range from in-depth certificate programs to one-time sessions. It impacts hundreds of Hillel professionals through its three Centers of Learning for professionals: -  The Center for Jewish and Israel Education (CJIE) - The Center for Young Adult Engagement and Wellness - The Center for Management and Leadership EXPENSES \$3,088,993. GRANTS \$27,3  91. REVENUE \$52. OFFICE OF INNOVATION EXPENSES \$4,171,532. GRANTS \$1,032,470. REVENUE \$0. ISRAEL ACTION EXPENSES \$2,860,166. GRANTS \$229,765. REVENUE \$0. MOSAIC EXPENSES \$554,853. GRANTS \$365,781. REVENUE \$0. INTERNATIONAL EXPENSES \$3,705,923. GRANTS \$2,475,585. REVENUE	

Return Explanation Reference

FORM 990,	THE FORM 990 IS PREPARED BY OUR INDEPENDENT AUDITORS. THE RETURN IS SUBSEQUENTLY REVIEWED
PART VI,	BY THE CEO, COO, CFO, CHAIR OF THE BOARD, TREASURER, THE AUDIT COMMITTEE AND OTHER MEMBERS
SECTION B,	OF THE EXECUTIVE COMMITTEE.
LINE 11B:	

Return Reference	Explanation
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 PRE SENT, SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION O R 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 O 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 REASON ABLY ATTAINABLE, THE BOARD OR AUDIT COMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF DISINTE RESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN HILLEL'S BEST INEREST 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 COMITTEE 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.

990 Schedule O, Supplemental Information

Return Explanation

Reference

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FORM 990,	A GROUP OF THE BOARD OF DIRECTORS' OFFICERS MEET TO DISCUSS THE CEO'S, COO'S, AND CFO'S SA
PART VI,	LARIES. THEY ALSO DISCUSS THE SALARIES OF KEY EMPLOYEES.
SECTION B,	
LINE 15A &	
15B:	

990 Schedule O, Supplemental Information

Return

Deference

Reference	
FORM 990,	THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'
PART VI,	S INTRANET AND THE FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST TO THE PUBLIC AND IS AL
SECTION C,	SO PUBLISHED ON PUBLIC WEBSITES SUCH AS GUIDESTAR.
LINE 19:	

Explanation

Return Explanation
Reference

FORM 990, PART XII, LINE 2C:

Return Explanation
Reference

DESCRIPTION:BIRTHRIGHT PROGRAM FEES TOTAL FEES:3873800

990 Schedule O, Supplemental Information

FORM 990

PART IX LINE 11G

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990 DESCRIPTION:HONORARIUMS TOTAL FEES:213517
PART IX
LINE 11G

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990 DESCRIPTION:OTHER TOTAL FEES:4179759
PART IX
LINE 11G