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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

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

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
610 PRESIDENT CLINTON AVE 2ND FLOO
Suite

City or town, state or province, country, and ZIP or foreign postal code
LITTLE ROCK, AR 72201

D Employer identification number
31-1580204

E Telephone number
(501) 748-0471

G Gross receipts $ 151,088,009

F Name and address of principal officer
ERIC BRAVERMAN
1271 AVENUE OF AMERICAS
NEW YORK, NY 10020

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW CLINTONFOUNDATION ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1997

M State of legal domicile AR

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
IMPROVE GLOBAL HEALTH & WELLNESS,INCREASE OPPORTUNITY FOR WOMEN/GIRLS, REDUCE CHILDHOOD OBESITY,CREATE ECONOMIC OPP & GROWTH AND HELP COMMUNITIES ADDRESS EFFECTS OF CLIMATE CHANGE

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	402
6	Total number of volunteers (estimate if necessary)	6	400
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,425,459
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-201,666

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	51,456,352	144,382,361
	9	Program service revenue (Part VIII, line 2g)	503,024	1,926,241
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	487,358	159,457
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,266,216	2,421,380
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	54,712,950	148,889,439
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,091,488	8,865,052
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	18,438,574	29,914,108
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	204,179	185,970
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶8,006,421		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	32,017,657	45,719,364
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	58,751,898	84,684,494
	19	Revenue less expenses Subtract line 18 from line 12	-4,038,948	64,204,945

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	225,703,274	277,805,820
	21	Total liabilities (Part X, line 26)	42,113,239	30,506,362
	22	Net assets or fund balances Subtract line 21 from line 20	183,590,035	247,299,458

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign Here

▶ ******
Signature of officer

▶ ANDREW KESSEL CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
LAURA J PARELLO

Preparer's signature

Firm's name ▶ PricewaterhouseCoopers LLP

Firm's address ▶ 300 Madison Avenue
New York, NY 10017

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

THE CLINTON FOUNDATION CONVENES BUSINESSES, GOVERNMENTS, NGOS AND INDIVIDUALS TO IMPROVE GLOBAL HEALTH AND WELLNESS, INCREASE OPPORTUNITY FOR WOMEN AND GIRLS, REDUCE CHILDHOOD OBESITY, CREATE ECONOMIC OPPORTUNITY AND GROWTH, AND HELP COMMUNITIES ADDRESS THE EFFECTS OF CLIMATE CHANGE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☑ **Yes** ☐ **No**

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 23,684,000 including grants of $) (Revenue $ 896,400)

CLINTON GLOBAL INITIATIVE (SEE SCHEDULE O FOR FURTHER DETAILS)

4b (Code) (Expenses $ 12,288,987 including grants of $ 107,374) (Revenue $ 2,814,980)

CLINTON PRESIDENTIAL CENTER (SEE SCHEDULE O FOR FURTHER DETAILS)

4c (Code) (Expenses $ 8,311,000 including grants of $ 496,023) (Revenue $ 0)

CLINTON CLIMATE INITIATIVE (SEE SCHEDULE O FOR FURTHER DETAILS)

4d Other program services (Describe in Schedule O)

(Expenses $ 24,024,824 including grants of $ 8,261,655) (Revenue $ 1,319,286)

4e **Total program service expenses** ▶ 68,308,811

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer 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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If so, complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	265			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	402			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶ AS , CO , IN , KE , MI , PE , RW , UP , VM See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	13		
	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	11		
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	Yes	
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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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?			
a	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)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
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		No

Section 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, FL, GA, HI, ID, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, VT, VA, WA, WV, WI, WY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶ ANDREW KESSEL 610 PRESIDENT CLINTON AVE
LITTLE ROCK, AR 72201 (501) 748-0471

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) BRUCE R LINDSEY-CEO TIL 72013 CHAIRMAN OF BOARD	45 0 5 0	X		X				360,672	0	34,184
(2) TERENCE MCAULIFFE DIRECTOR - UNTIL NOV 5,2013	5 0 0 0	X								
(3) CHELSEA V CLINTON DIRECTOR	20 0 5 0	X						0	0	0
(4) ERIC BRAVERMAN CEO BEGINNING JULY 2013	50 0 0 0	X		X				261,041	0	13,300
(5) WILLIAM JEFFERSON CLINTON DIRECTOR	20 0 5 0	X								
(6) HILLARY RODHAM CLINTON DIRECTOR	20 0 5 0	X								
(7) FRANK GIUSTRA DIRECTOR	5 0 0 0	X								
(8) ROLANDO GONZALEZ BUNSTER DIRECTOR	5 0 0 0	X								
(9) ERIC GOOSBY DIRECTOR	5 0 0 0	X								
(10) HADEEL IBRAHIM DIRECTOR	5 0 0 0	X								
(11) LISA JACKSON DIRECTOR	5 0 0 0	X								
(12) CHERYL MILLS DIRECTOR	5 0 0 0	X								
(13) CHERYL SABAN DIRECTOR	5 0 0 0	X								
(14) RICHARD VERMA DIRECTOR	5 0 0 0	X								
(15) ANDREW KESSEL CFO	50 0 0 0			X				174,571	0	33,384
(16) STEPHANIE S STREETT EXECUTIVE DIRECTOR	50 0 0 0			X				138,750	0	30,999
(17) ROBERT S HARRISON CEO, CGI	45 0 5 0				X			208,138	0	35,619

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) DENNIS CHENG CDO	50 0 0 0				X			215,200	0	21,685
(19) MARK GUNTON CEO, CGEP	50 0 0 0					X		256,565	0	38,960
(20) SCOTT TAITEL COO, CGEP	50 0 0 0					X		186,571	0	29,113
(21) LAURA GRAHAM SENIOR ADVISOR	50 0 0 0					X		182,710	0	1,248
(22) VIRGINIA EHRLICH CEO, CHMI	50 0 0 0					X		181,864	0	19,159
(23) FREDERIC POUST DIR SPONSORS & MRKTING	50 0 0 0					X		464,229	0	20,028
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								2,630,311	0	277,679

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶35

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
FIVE CURRENTS LLC, 1200 AVIATION BLVD REDONDO BEACH CA 90254	CONF PRODUCTION	1,040,474
MATTER UNLIMITED LLC, 175 VARICK STREET NEW YORK NY 10013	WEB DESIGN & PROD	626,059
LANKEY LIMEY LTD, 85 JAMES TERRACE YONKERS NY 10704	CONF PRODUCTION	576,621
STAGE CALL LLC, 311 W 43RD ST NEW YORK NY 10036	CONF PRODUCTION	532,206
COMMUNITY COUNSELLING SERVICE CO, PO BOX 824885 PHILADELPHIA PA 19182	ENDOWMENT PLAN DEV	448,750

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶34

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 134,955				
	b	Membership dues	1b 10,746				
	c	Fundraising events	1c 14,833,387				
	d	Related organizations	1d 12,684,738				
	e	Government grants (contributions)	1e 4,863,534				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 111,855,001				
	g	Noncash contributions included in lines 1a-1f $	532,977				
	h	**Total.** Add lines 1a-1f ▶		144,382,361			
Program Service Revenue			Business Code				
	2a	PRESIDENTIAL CENTER	900099	1,029,841	238,147	791,694	
	b	CLINTON GLOBAL INITIATIVE	900099	896,400	896,400		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f ▶		1,926,241			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		159,457			159,457
	4	Income from investment of tax-exempt bond proceeds ▶		0			
	5	Royalties ▶		0			
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)	0 / 0				
	d	Net rental income or (loss) ▶		0			
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) ▶		0			
	8a	Gross income from fundraising events (not including $ 14,833,387 of contributions reported on line 1c) See Part IV, line 18	a 364,151				
	b	Less direct expenses	b 1,223,181				
	c	Net income or (loss) from fundraising events ▶		-859,030			-859,030
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities ▶		0			
	10a	Gross sales of inventory, less returns and allowances	a 1,785,139				
	b	Less cost of goods sold	b 975,389				
	c	Net income or (loss) from sales of inventory ▶		809,750		633,765	175,985
		Miscellaneous Revenue	Business Code				
	11a	OTHER REVENUE	900099	2,470,660	2,470,660		
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d ▶		2,470,660			
	12	**Total revenue.** See Instructions ▶		148,889,439	3,605,207	1,425,459	-523,588

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	5,454,133	5,454,133		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	3,410,919	3,410,919		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,358,372	346,888	796,284	215,200
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	21,798,525	16,578,543	3,107,930	2,112,052
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	971,610	682,997	184,106	104,507
9 Other employee benefits	3,762,685	2,718,333	757,023	287,329
10 Payroll taxes	2,022,916	1,542,287	295,048	185,581
11 Fees for services (non-employees)				
a Management	0			
b Legal	304,105	283,597	20,508	
c Accounting	370,756	133,166	237,590	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	185,970			185,970
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,153,057	6,141,436	179,170	1,832,451
12 Advertising and promotion	677,466	610,504		66,962
13 Office expenses	4,770,917	4,064,994	463,032	242,891
14 Information technology	2,066,067	1,067,763	536,032	462,272
15 Royalties . .	0			
16 Occupancy	4,010,380	3,063,226	527,040	420,114
17 Travel	8,448,502	6,472,418	288,970	1,687,114
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	9,224,775	8,996,173	24,624	203,978
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	4,724,162	4,300,956	423,206	
23 Insurance	372,147	131,127	241,020	
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 LOSS ON PROGRAM INVESTMENTS	26,348	26,348		
b OTHER EXPENSES	2,570,682	2,283,003	287,679	
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	84,684,494	68,308,811	8,369,262	8,006,421
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		89,498,607	2	91,057,703
	3	Pledges and grants receivable, net		8,610,879	3	56,399,881
	4	Accounts receivable, net		569,780	4	1,404,820
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		1,473,836	8	894,990
	9	Prepaid expenses and deferred charges		90,136	9	864,072
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 144,975,885			
	b	Less accumulated depreciation	10b 34,980,204	109,394,076	10c	109,995,681
	11	Investments—publicly traded securities		274,991	11	14,649,160
	12	Investments—other securities See Part IV, line 11		0	12	0
	13	Investments—program-related See Part IV, line 11		1,363,066	13	2,174,513
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		14,427,903	15	365,000
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		225,703,274	16	277,805,820
Liabilities	17	Accounts payable and accrued expenses		4,021,194	17	9,088,298
	18	Grants payable		0	18	0
	19	Deferred revenue		984,288	19	12,032,339
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		74,985	23	74,985
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		37,032,772	25	9,310,740
	26	**Total liabilities.** Add lines 17 through 25		42,113,239	26	30,506,362
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		159,044,754	27	163,985,951
	28	Temporarily restricted net assets		24,295,281	28	24,299,659
	29	Permanently restricted net assets		250,000	29	59,013,848
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		183,590,035	33	247,299,458
	34	Total liabilities and net assets/fund balances		225,703,274	34	277,805,820

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	148,889,439
2	Total expenses (must equal Part IX, column (A), line 25)	2	84,684,494
3	Revenue less expenses Subtract line 2 from line 1	3	64,204,945
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	183,590,035
5	Net unrealized gains (losses) on investments	5	61,155
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-556,677
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	247,299,458

Part XII Financial Statements and Reporting

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

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

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

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

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

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

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

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

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2013

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	126,979,554	138,003,746	66,487,709	51,546,352	144,382,361	527,399,722
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 the organization without charge						0
4 **Total.** Add lines 1 through 3	126,979,554	138,003,746	66,487,709	51,546,352	144,382,361	527,399,722
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						42,373,100
6 **Public support.** Subtract line 5 from line 4						485,026,622

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	126,979,554	138,003,746	66,487,709	51,546,352	144,382,361	527,399,722
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	364,211	384,287	76,395	39,358	159,457	1,023,708
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	2,232,084	2,237,205	583,070	282,062	2,470,660	7,805,081
11 **Total support** (Add lines 7 through 10)						536,228,511

12 Gross receipts from related activities, etc (see instructions) **12** 5,587,065

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) **14** 90 451 %

15 Public support percentage for 2012 Schedule A, Part II, line 14 **15** 87 323 %

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test		
Return Reference	Explanation	

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

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

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

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

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

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

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

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

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	267,491	250,000	250,000	250,000	250,000
b Contributions	58,763,848	17,491			
c Net investment earnings, gains, and losses	64,946				
d Grants or scholarships		0	0	0	0
e Other expenditures for facilities and programs		0	0	0	0
f Administrative expenses		0	0	0	0
g End of year balance	59,096,285	267,491	250,000	250,000	250,000

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

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 99 900 %

c Temporarily restricted endowment ▶ 0 100 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		943,690		943,690
b Buildings		130,150,240	29,680,414	100,469,826
c Leasehold improvements		6,775,324	3,114,929	3,660,395
d Equipment		7,106,631	2,184,681	4,921,950
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . . . . ▶				109,995,861

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	0
FUNDS HELD FOR BENEFIT OF REL ORG	9,310,740
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	9,310,740

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XIII **Supplemental Information**

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

Return Reference	Explanation
FORM 990, SCHEDULE D, PART V, LINE 4	THE ENDOWMENT CONSISTS OF FUNDS ESTABLISHED TO SUPPORT THE ONGOING MISSION OF THE BILL, HILLARY & CHELSEA CLINTON FOUNDATION
FORM 990, SCHEDULE D, PART X, LINE 2	THE CLINTON FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501 OF THE INTERNAL REVENUE CODE AND A SIMILAR PROVISION OF STATE LAW HOWEVER, THE CLINTON FOUNDATION IS SUBJECT TO FEDERAL INCOME TAX ON ANY UNRELATED BUSINESS TAXABLE INCOME THE CLINTON FOUNDATION FILES TAX RETURNS IN THE US FEDERAL JURISDICTION

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	11	73			20,835,025
b Total from continuation sheets to Part I					
c **Totals** (add lines 3a and 3b)	11	73			20,835,025

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

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

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶ 15

3 Enter total number of other organizations or entities . . . . . ▶ 0

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

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

Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☑ Yes ☐ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☑ Yes ☐ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).* ☐ Yes ☑ No

Part V **Supplemental Information**

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
FORM 990, SCHEDULE F, PART I, LINE 2	THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS DETAILING THE USE OF GR ANT FUNDS THE RELEVANT GROUP INITIATIVE WITHIN THE FOUNDATION REVIEWS THESE REPORTS FOR P ROPER USE OF GRANT FUNDS AND CONTINUED FUNDING

Additional Data

Software ID:
Software Version:
EIN: 31-1580204
Name: BILL HILLARY & CHELSEA CLINTON FOUNDATION

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
Central America and the Caribbean	1	2	Program Services	CLIMATE & ECONOMIC DEV	3,835,872
East Asia and the Pacific	2	5	Program Services	CLIMATE WORK	4,779,595
Europe (Including Iceland and Greenland)	1	3	Program Services	CLIMATE WORK	62,119

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
North America	0	0	Program Services	CLIMATE WORK	21,562
South America	3	11	Program Services	ECONOMIC DEVELOMENT	7,156,877
Sub-Saharan Africa	4	52	Program Services	CLIMATE & ECONOMIC DEV	4,979,000

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	MOTHER/CHILD NUTRITION	390,430	WIRE TRANSFE			N/A
		Central America and the Caribbean	EARTHQUAKE RECONSTRUCT	125,000	WIRE TRANSFE			N/A
		East Asia and the Pacific	CARBNCAPTURE CLIMATE WORK	73,087	WIRE TRANSFE			N/A
		East Asia and the Pacific	CARBNCAPTURE CLIMATE WORK	422,936	WIRE TRANSFE			N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	EARTHQUAKE RECONSTRUCT	9,800	WIRE TRANSFE			N/A
		Central America and the Caribbean	EARTHQUAKE RECONSTRUCT	114,250	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	203,567	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	140,175	WIRE TRANSFE			N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	RECONSTRUCT	43,626	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	98,748	WIRE TRANSFE			N/A
		Sub-Saharan Africa	AGRICULTURAL DEVELOPMENT	250,000	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	1,250,000	WIRE TRANSFE			N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	RECONSTRUCT	56,000	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	128,300	WIRE TRANSFE			N/A
		Central America and the Caribbean	RECONSTRUCT	100,000	WIRE TRANSFE			N/A

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

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

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

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☑ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

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

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1 AMERICAN MARKETING AND COMMUNICATIO	DIRECT MAIL MARKETING		No	222,173	75,000	147,173
2 M R STRATEGIC SERVICES	EMAIL FUNDRAISING		No	1,763,490	110,970	1,652,520
3						
4						
5						
6						
7						
8						
9						
10						
Total . . . . . ▶				1,985,663	185,970	1,799,693

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

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

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

		(a) Event #1 LONDON GALA (event type)	(b) Event #2 RECEP./DINNERS (event type)	(c) Other events 12 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	3,259,940	6,130,844	5,806,754	15,197,538
	2 Less Contributions	3,113,189	6,013,669	5,706,529	14,833,387
	3 Gross income (line 1 minus line 2)	146,751	117,175	100,225	364,151
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	96,659	17,340	104,492	218,491
	7 Food and beverages	105,863	73,524	49,886	229,273
	8 Entertainment	3,071	8,000	43,547	54,618
	9 Other direct expenses	184,703	228,580	307,516	720,799
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(1,223,181)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-859,030

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

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

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

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

b If "No," explain _____

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

b If "Yes," explain _____

11

Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

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

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

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

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

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

Name ▶ .....

Address ▶ .....

16 Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ $ .....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

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

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

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ALLIANCE FOR A HEALTHIER GENERATION 1200 NW NAITO PARKWAY Portland, OR 97209	27-2028308	501(c)(3)	2,300,000		N/A	N/A	
(2) ARCHITECTURE FOR HUMANITY 848 FOLSOM ST SAN FRANCISCO, CA 94107	30-0038297	501(c)(3)	402,448		N/A	N/A	HAITI RECONSTRUCTION
(3) CITY OF LITTLE ROCK 500 WEST MARKHAM LITTLE ROCK, AR 72201	71-6014465	Government	100,000		N/A	N/A	
(4) HENDRIX COLLEGE 1600 WASHINGTON ST CONWAY, AR 72032	71-0236897	501(c)(3)	175,000		N/A	N/A	
(5) MISSION OF HOPE HAITI PO BOX 60004 FORT MYERS, FL 33906	13-7207776	501(c)(3)	150,670		N/A	N/A	
(6) NORTH COAST FARMS AND DEVELOPMENT 3071 FIVE OAKS LANE GREEN COVE SPRINGS, FL 32043	45-2766475	501(c)(3)	47,500		N/A	N/A	
(7) SOLAR ELECTRIC LIGHT FUND 1612 K STREET WASHINGTON, DC 20006	52-1701564	501(c)(3)	116,730		N/A	N/A	
(8) SUSTAINABLE ORGANIC INTEGRATED LIVELIHOODS 3950 GREEN VALLEY SCHOOL RD SEBASTTOPOL, CA 95472	20-8195963	501(c)(3)	25,000		N/A	N/A	
(9) TECHNOSERVE 1120 19TH STREET WASHINGTON, DC 20036	13-2626135	501(c)(3)	109,852		N/A	N/A	
(10) CLINTON HEALTH ACCESS INITIATIVE 383 DORCHESTER AVE BOSTON, MA 02127	27-1414646	501(c)(3)	2,000,000		N/A	N/A	HAITI RELIEF
(11) CHICAGO CARES INC 2 N RIVERSIDE STE 2200 CHICAGO, IL 60606	36-3777709	501(c)(3)	20,000		N/A	N/A	COMM ACTION SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 11

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

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

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

Return Reference	Explanation
FORM 990, SCHEDULE I, PART I, LINE 2	THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS DETAILING THE USE OF GRANT FUNDS THE RELEVANT GROUP INITIATIVE WITHIN THE FOUNDATION REVIEWS THESE REPORTS FOR PROPER USE OF GRANT FUNDS AND CONTINUED FUNDING

Additional Data

Software ID:
Software Version:
EIN: 31-1580204
Name: BILL HILLARY & CHELSEA CLINTON FOUNDATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALLIANCE FOR A HEALTHIER GENERATION 1200 NW NAITO PARKWAY Portland, OR 97209	27-2028308	501(c)(3)	2,300,000		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ARCHITECTURE FOR HUMANITY 848 FOLSOM ST SAN FRANCISCO, CA 94107	30-0038297	501(c)(3)	402,448		N/A	N/A	HAITI RECONSTRUCTION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CITY OF LITTLE ROCK 500 WEST MARKHAM LITTLE ROCK,AR 72201	71-6014465	Government	100,000		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HENDRIX COLLEGE 1600 WASHINGTON ST CONWAY, AR 72032	71-0236897	501(c)(3)	175,000		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MISSION OF HOPE HAITI PO BOX 60004 FORT MYERS, FL 33906	13-7207776	501(c)(3)	150,670		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORTH COAST FARMS AND DEVELOPMENT 3071 FIVE OAKS LANE GREEN COVE SPRINGS, FL 32043	45-2766475	501(c)(3)	47,500		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOLAR ELECTRIC LIGHT FUND 1612 K STREET WASHINGTON,DC 20006	52-1701564	501(c)(3)	116,730		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SUSTAINABLE ORGANIC INTEGRATED LIVELIHOODS 3950 GREEN VALLEY SCHOOL RD SEBASTTOPOL, CA 95472	20-8195963	501(c)(3)	25,000		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TECHNOSERVE 1120 19TH STREET WASHINGTON,DC 20036	13-2626135	501(c)(3)	109,852		N/A	N/A	

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CLINTON HEALTH ACCESS INITIATIVE 383 DORCHESTER AVE BOSTON, MA 02127	27-1414646	501(c)(3)	2,000,000		N/A	N/A	HAITI RELIEF

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CHICAGO CARES INC 2 N RIVERSIDE STE 2200 CHICAGO,IL 60606	36-3777709	501(c)(3)	20,000		N/A	N/A	COMM ACTION SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☑ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

Part III Supplemental Information

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

Return Reference	Explanation
FORM 990, SCHEDULE J, PART I, LINE 1A	THE BOARD RECOGNIZES THAT, DUE TO EXTRAORDINARY SECURITY AND OTHER REQUIREMENTS, WILLIAM J CLINTON, HILLARY RODHAM CLINTON, AND CHELSEA CLINTON MAY REQUIRE THE NEED TO TRAVEL BY CHARTER OR IN FIRST CLASS, THE DETERMINATION OF WHICH WILL BE MADE ON A CASE-BY-CASE BASIS ERIC BRAVERMAN WAS PROVIDED A HOUSING ALLOWANCE FOR SEVERAL MONTHS FROM HIRE DATE HOUSING ALLOWANCE WAS TREATED AS TAXABLE COMPENSATION ON HIS 2013 FORM W-2
FORM 990, SCHEDULE J, PART I, LINE 2	THE HOUSING ALLOWANCE INDICATED IS COVERED BY POLICY, TRAVEL INDICATED ABOVE IS NOT IN A SEPARATE WRITTEN POLICY, BUT IS KNOWN TO THE BOARD IN MOST CASES SUCH TRAVEL IS PAID FOR DIRECTLY BY THE FOUNDATION AND REIMBURSEMENT IS NOT NECESSARY

Additional Data

Software ID:
Software Version:
EIN: 31-1580204
Name: BILL HILLARY & CHELSEA CLINTON FOUNDATION

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
BRUCE R LINDSEY- CEO TIL 72013 CHAIRMAN OF BOARD	(i)	360,672	0	0	15,300	18,884	394,856	0
	(ii)	0	0	0	0	0	0	0
ANDREW KESSEL CFO	(i)	171,571	3,000	0	10,433	22,951	207,955	0
	(ii)	0	0	0	0	0	0	0
STEPHANIE S STREETT EXECUTIVE DIRECTOR	(i)	135,750	3,000	0	8,232	22,767	169,749	0
	(ii)	0	0	0	0	0	0	0
ROBERT S HARRISON CEO, CGI	(i)	205,138	3,000	0	12,494	23,125	243,757	0
	(ii)	0	0	0	0	0	0	0
ERIC BRAVERMAN CEO BEGINNING JULY 2013	(i)	227,082	0	33,959	11,538	1,762	274,341	0
	(ii)	0	0	0	0	0	0	0
MARK GUNTON CEO, CGEP	(i)	253,565	3,000	0	15,575	23,385	295,525	0
	(ii)	0	0	0	0	0	0	0
DENNIS CHENG CDO	(i)	212,200	3,000	0	12,785	8,900	236,885	0
	(ii)	0	0	0	0	0	0	0
SCOTT TAITEL COO, CGEP	(i)	183,571	3,000	0	11,038	18,075	215,684	0
	(ii)	0	0	0	0	0	0	0
LAURA GRAHAM SENIOR ADVISOR	(i)	180,160	2,550	0	0	1,248	183,958	0
	(ii)	0	0	0	0	0	0	0
VIRGINIA EHRLICH CEO, CHMI	(i)	178,864	3,000	0	10,379	8,780	201,023	0
	(ii)	0	0	0	0	0	0	0
FREDERIC POUST DIR SPONSORS & MRKTING	(i)	214,230	249,999	0	12,404	7,624	484,257	0
	(ii)	0	0	0	0	0	0	0

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total		▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) FONDO ACCESO SAS	ENTITY-B LINDSEY DIRECTOR	1,175,250	PROGRAM-RELATED INVESTMENT		No

Part V **Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
FORM 990, SCHEDULE L, PART IV	NO DIRECTORS OF FONDO ACCESO ARE PAID OR RECEIVE ANY SHARE OF PROFITS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		116,567	MARKET LIST PRICE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	16	361,014	CASH REC'D ON SALE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	2	55,396	MARKET LIST PRICE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 1

		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 is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493321102704

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Return Reference	Explanation
FORM 990, PART I, LINES 8 THROUGH 22	YEAR OVER YEAR COMPARISONS ARE IMPACTED AS A RESULT OF THE CLINTON GLOBAL INITIATIVE ("CGI") BEING A SEPARATE ENTITY AND HAVING A SEPARATE 2012 FORM 990, WHERE CGI WAS MERGED INTO THE CLINTON FOUNDATION IN 2013 AS SUCH, THE 2012 FINANCIAL STATEMENTS REFLECT THE CLINTON FOUNDATION WITHOUT CGI, AND THE 2013 FINANCIAL STATEMENTS REFLECT THE CLINTON FOUNDATION INCLUDING THE MERGED CGI FORM 990, PART III, LINE 2 TOO SMALL TO FAIL AIMS TO HELP PARENTS AND BUSINESSES TAKE MEANINGFUL ACTIONS TO IMPROVE THE HEALTH AND WELL-BEING OF CHILDREN AGES ZERO TO FIVE, SO THAT MORE OF AMERICA'S CHILDREN ARE PREPARED TO SUCCEED IN THE 21ST CENTURY WE ARE WORKING TO PROMOTE NEW RESEARCH ON THE SCIENCE OF CHILDREN'S BRAIN DEVELOPMENT, EARLY LEARNING AND EARLY HEALTH, AND WE WILL HELP PARENTS, BUSINESSES AND COMMUNITIES IDENTIFY SPECIFIC ACTIONS, CONSISTENT WITH THE NEW RESEARCH, THAT THEY CAN TAKE TO IMPROVE THE LIVES OF YOUNG CHILDREN NO CEILINGS THE FULL PARTICIPATION PROJECT IS AN EFFORT LED BY HILLARY RODHAM CLINTON AT THE CLINTON FOUNDATION TO BRING TOGETHER PARTNER ORGANIZATIONS TO EVALUATE AND SHARE THE PROGRESS WOMEN AND GIRLS HAVE MADE IN THE 20 YEARS SINCE THE UN FOURTH WORLD CONFERENCE ON WOMEN IN BEIJING THIS NEW EFFORT WILL HELP CHART THE PATH FORWARD TO ACCELERATE FULL PARTICIPATION FOR WOMEN AND GIRLS IN THE 21ST CENTURY THE FULL PARTICIPATION OF WOMEN AND GIRLS IS CRITICAL TO GLOBAL PROGRESS, DEVELOPMENT, AND SECURITY

Return Reference	Explanation	
	FORM 990, PART III, LINES 4A-4D	NATURE OF OPERATIONS BUILDING ON A LIFETIME OF PUBLIC SERVICE, PRESIDENT BILL CLINTON EST ABLISHED THE WILLIAM J CLINTON FOUNDATION TO TRANSFORM LIVES AND COMMUNITIES FROM WHAT TH EY ARE TODAY TO WHAT THEY CAN BE TOMORROW BY BUILDING PARTNERSHIPS BETWEEN BUSINESSES, NGO S, GOVERNMENTS, AND INDIVIDUALS EVERYWHERE IN 2013, TO RECOGNIZE THE CONTRIBUTIONS OF SEC RETARY CLINTON AND CHELSEA CLINTON TO THE FOUNDATION AND TO ACKNOWLEDGE THEIR ROLE IN SHAP ING THE FOUNDATION'S FUTURE, THE FOUNDATION WAS RENAMED THE BILL, HILLARY, & CHELSEA CLINT ON FOUNDATION (CLINTON FOUNDATION) TODAY, THE CLINTON FOUNDATION WORKS TO IMPROVE GLOBAL HEALTH AND WELLNESS, INCREASE OPPORTUNITY FOR WOMEN AND GIRLS, REDUCE CHILDHOOD OBESITY, C REATIVE ECONOMIC OPPORTUNITY AND GROWTH, AND HELP COMMUNITIES ADDRESS THE EFFECTS OF CLIMA TE CHANGE TO ACCOMPLISH ITS GOALS, THE CLINTON FOUNDATION HAS ESTABLISHED SEPARATE INITIA TIVES, EACH WITH A DISTINCT MISSION BUT ALL REFLECTING THE CLINTONS' VISION TO CREATE PAR TNERSHIPS OF GREAT PURPOSE TO DELIVER SUSTAINABLE SOLUTIONS THAT LAST AND TRANSFORMS COMMU NITIES FROM WHAT THEY ARE TO WHAT THEY CAN BE THE INITIATIVES ARE AS FOLLOWS - THE ALLIA NCE FOR A HEALTHIER GENERATION (ALLIANCE), FOUNDED BY THE CLINTON FOUNDATION AND THE AMERI CAN HEART ASSOCIATION, IS LEADING THE CHARGE AGAINST THE CHILDHOOD OBESITY EPIDEMIC IN THE UNITED STATES BY ENGAGING DIRECTLY WITH INDUSTRY LEADERS, EDUCATORS, PARENTS, DOCTORS, AN D KIDS THEMSELVES THE GOAL OF THE ALLIANCE IS TO REDUCE THE PREVALENCE OF CHILDHOOD OBESI TY AND EMPOWER KIDS NATIONWIDE TO MAKE HEALTHY LIFESTYLE CHOICES IN 2013, THE ALLIANCE RE CRUITED MORE THAN 5,000 ADDITIONAL SCHOOLS FOR THE HEALTHY SCHOOLS PROGRAM, WHICH AS OF 20 13, INCREASED THE NUMBER OF SCHOOLS SERVED TO MORE THAN 20,000 AND INDIVIDUAL CHILDREN REA CHED TO 12 2 MILLION - THE CLINTON CLIMATE INITIATIVE (CCI) IMPLEMENTS PROGRAMS TO REDUCE CARBON EMISSIONS, INCREASE ENERGY EFFICIENCY, DEPLOY RENEWABLE ENERGY, AND PROVE THAT WHA T IS GOOD FOR THE ENVIRONMENT IS ALSO GOOD FOR THE ECONOMY BY WORKING WITH CITIES, FOREST -DEPENDENT COMMUNITIES, AND ISLAND NATIONS, THE CLINTON CLIMATE INITIATIVE DEVELOPS AND IM PLEMENTS CLEANER PUBLIC TRANSPORTATION, WASTE MANAGEMENT SYSTEMS, BUILDING RETROFIT PROGRA MS, AND FOREST PRESERVATION PROJECTS IN 2013, WITH SUPPORT FROM NORWAY, CCI'S FORESTRY TE AM LAUNCHED A NEW $12 5 MILLION PROGRAM WITH THE KENYAN GOVERNMENT TO DELIVER RELIABLE GRE ENHOUSE GAS DATA FOR THE ENTIRE LAND SECTOR ADDITIONALLY, IN 2013, CCI'S ISLANDS PROGRAM SIGNED MEMORANDUMS OF UNDERSTANDING WITH 22 ISLAND NATIONS TO DEVELOP CLEAN ENERGY PROJECT S IN THE UNITED STATES, CCI LAUNCHED AN EFFORT TO REPLICATE ITS HOME ENERGY AFFORDABILITY LOAN (HEAL) PROGRAM IN ARKANSAS ON A NATIONAL SCALE - THE CLINTON DEVELOPMENT INITIATIVE (CDI) PROVIDES SMALLHOLDER FARMERS IN RWANDA, MALAWI, AND TANZANIA WITH THE TOOLS THEY NE ED TO INCREASE THEIR HARVESTS, GENERATE STABLE INCOMES, SUPPORT THEIR FAMILIES, AND IMPROV E THEIR COMMUNITIES AT THE INVITATION OF GOVERNMENTS, THE CLINTON DEVELOPMENT INITIATIVE WORKS IN CLOSE COLLABORATION WITH NONGOVERNMENTAL ORGANIZATIONS, SOCIAL INVESTORS, AND FAR MERS TO HELP SMALLHOLDERS ENTER THE MARKET, ENSURING THAT COMMUNITIES CAN SUSTAIN THEMSELV ES IN RWANDA, THE CLINTON FOUNDATION WORKS IN PARTNERSHIP WITH THE HUNTER FOUNDATION IN 2013, CDI ESTABLISHED THE ANCHOR FARM PROJECT IN TANZANIA TO INCREASE INCOMES FOR 120,000 FARMERS OVER THE NEXT FIVE YEARS AND INCREASE PRODUCTION AND DISTRIBUTION TO SMALLHOLDER F ARMERS OF IMPROVED MAIZE, SOYA, AND SUNFLOWER SEED BY 2,800 TONS IN THE 2012/2013 SEASON, 42 PERCENT OF FARMERS DIRECTLY TRAINED BY CDI WERE WOMEN, FULFILLING CDI'S FARMER CLUB GU IDELINES THAT EACH CLUB OF TEN TO TWENTY MEMBERS BE COMPRISED OF AT LEAST 40 PERCENT WOMEN - IN HAITI, THE CLINTON FOUNDATION FOCUSES ON CREATING SUSTAINABLE ECONOMIC GROWTH IN TH E FOUR PRIORITY SECTORS OF ENERGY, TOURISM, AGRICULTURE, AND APPAREL/MANUFACTURING THE FO UNDATION WORKS IN HAITI TO DEVELOP FULL-CYCLE INVESTING, BRINGING TOGETHER PRODUCERS, INVE STORS, AND MARKETS IN A WAY THAT IS SOCIALLY, ENVIRONMENTALLY, AND ECONOMICALLY IMPACTFUL IN 2013, THE CLINTON FOUNDATION FACILITATED $30 MILLION IN FOREIGN DIRECT INVESTMENT AND VISITS OF MORE THAN 50 INTERNATIONAL INVESTORS, WHILE SUPPORTING THE GROWTH OF 40 ENTREPRE NEURIAL BUSINESSES ACROSS HAITI THE CLINTON FOUNDATION ALSO HELPED WITH THE PLANTING OF M ORE THAN 350,000 TREES AND PLANTS THROUGHOUT THE COUNTRY, BUILT, REPAIRED, OR IMPROVED SCH OOLS FOR 3,400 STUDENTS, AND WORKED WITH PARTNERS TO INSTALL OVER 225 KW OF SOLAR POWER AT SCHOOLS, MEDICAL FACILITIES, AND SMALL BUSINESSES - THE CLINTON GIUSTRA ENTERPRISE PARTN ERSHIP (ENTERPRISE PARTNERSHIP) CREATES NEW ENTERPRISES THAT CAPITALIZE ON MARKET OPPORTUN ITIES TO GENERATE SOCIAL IMPACT AND FINANCIAL RETURNS BY ADDRESSING EXISTING MARKET GAPS I N DEVELOPING COUNTRY SUPPLY AND DISTRIBUTION CHAINS THE ENTERPRISE PARTNERSHIP HAS BEEN R EFINING ITS APPROACH FOR SEVERAL YEARS AND WORKS T

Return Reference	Explanation	
	FORM 990, PART III, LINES 4A-4D	O ENHANCE THE ECONOMIC AND SOCIAL BENEFITS OF MARGINALIZED COMMUNITIES BY INCORPORATING TH ESE INDIVIDUALS INTO ONE OF THREE "MARKET-DRIVEN" MODELS - DISTRIBUTION ENTERPRISES, SUPPL Y CHAIN ENTERPRISES, AND TRAINING CENTER ENTERPRISES THROUGH THESE MODELS, THE ENTERPRISE PARTNERSHIP SEEKS TO HELP PEOPLE WORK THEMSELVES OUT OF POVERTY IN 2013, THE ENTERPRISE PARTNERSHIP OPENED THE FIRST SUPPLY CHAIN AND TRAINING CENTER ENTERPRISES IN CARTAGENA, CO LOMBIA, AND LAUNCHED A FEMALE ENTREPRENEUR DISTRIBUTION VENTURE, CHAKIPI, IN SOUTHERN PERU , TO SUPPORT LIFE-CHANGING INCOME OPPORTUNITIES FOR 3,000 WOMEN - THE CLINTON GLOBAL INIT IATIVE'S (CGI) MISSION IS TO INSPIRE, CONNECT, AND EMPOWER EVERYONE TO FORGE SOLUTIONS TO THE WORLD'S MOST PRESSING CHALLENGES CGI CONVENES LEADERS FROM THE PRIVATE SECTOR, PUBLIC SECTOR, AND CIVIL SOCIETY TO DRIVE ACTION THROUGH ITS UNIQUE MODEL RATHER THAN DIRECTLY IMPLEMENTING PROJECTS, CGI HELPS ITS MEMBERS TURN IDEAS INTO ACTION BY MAKING IMPACTFUL AN D MEASURABLE COMMITMENTS TO ACTION WITHIN NINE TRACKS, EACH REPRESENTING A TOPICAL GLOBAL CHALLENGE OR STRATEGIC APPROACH TO SUPPORT THE DEVELOPMENT OF COMMITMENTS YEAR-ROUND, CGI FACILITATES CONVERSATIONS, PROVIDES OPPORTUNITIES TO IDENTIFY PARTNERS, AND COMMUNICATES THE RESULTS OF THE WORK CGI'S MAJOR MEETINGS INCLUDE THE CGI ANNUAL MEETING, CGI UNIVERSI TY, CGI AMERICA, AND CGI INTERNATIONAL CGI MEMBERS MADE MORE THAN 300 COMMITMENTS IN 2013 , VALUED AT OVER $12 9 BILLION THAT, WHEN FULLY FUNDED AND IMPLEMENTED, WILL IMPACT THE LI VES OF MORE THAN 22 2 MILLION PEOPLE - THE CLINTON HEALTH ACCESS INITIATIVE WORKS TO ADDR ESS THE HIV/AIDS CRISIS IN THE DEVELOPING WORLD AND STRENGTHEN HEALTH SYSTEMS THERE TAKIN G ITS LEAD FROM GOVERNMENTS AND WORKING WITH PARTNERS, THE CLINTON HEALTH ACCESS INITIATIV E HAS IMPROVED MARKETS FOR MEDICINES AND DIAGNOSTICS, LOWERED THE COSTS OF TREATMENT, AND EXPANDED ACCESS TO LIFE-SAVING TECHNOLOGIES, CREATING A SUSTAINABLE MODEL THAT CAN BE OWNE D AND MAINTAINED BY GOVERNMENTS THE CLINTON HEALTH ACCESS INITIATIVE (CHAI) HAS SINCE EXP ANDED THIS MODEL TO INCREASE ACCESS TO HIGH-QUALITY TREATMENT FOR MALARIA, ACCELERATE THE ROLLOUT OF NEW VACCINES, AND LOWER INFANT MORTALITY IN JANUARY 2010, CHAI BECAME A SEPARA TE NONPROFIT ORGANIZATION AS OF 2013, 6 8 MILLION PEOPLE IN MORE THAN 70 COUNTRIES HAD AC CESS TO CHAI-NEGOTIATED PRICES FOR HIV/AIDS MEDICINES ADDITIONALLY, IN 2013, TOGETHER WIT H UNITAID, CHAI HELPED TO REDUCE THE PRICE OF PEDIATRIC ARV REGIMENS BY OVER 80 PERCENT, A ND CATALYZED THE SCALE UP OF TREATMENT TO 647,000 CHILDREN - BY BUILDING STRATEGIC PARTNE RSHIPS, WORKING ACROSS SECTORS, AND LEVERAGING TECHNOLOGY AND DIGITAL INNOVATION, THE CLIN TON HEALTH MATTERS INITIATIVE (CHMI) WORKS TO REDUCE THE PREVALENCE OF PREVENTABLE HEALTH OUTCOMES, CLOSE HEALTH INEQUITY AND DISPARITY GAPS, AND REDUCE HEALTH CARE COSTS BY IMPROV ING ACCESS TO KEY CONTRIBUTORS TO HEALTH FOR ALL PEOPLE IN 2013, CHMI GENERATED MORE THAN 50 FORMALIZED STRATEGIC PARTNERSHIPS WITH NATIONAL AND LOCAL ENTITIES, WHICH COLLECTIVELY REFLECTED AN INVESTMENT OF MORE THAN $100 MILLION IN HEALTH AND WELLNESS THAT WILL POSITI VELY IMPACT MORE THAN 25 MILLION PEOPLE ACROSS THE UNITED STATES ALSO, IN 2013, CHMI HOST ED FOUR CODEATHONS, WHICH CHALLENGED DEVELOPERS AND DESIGNERS TO CREATE MOBILE OR ONLINE A PPLICATIONS FOCUSED ON THE SOCIAL DETERMINANTS OF HEALTH, SUCH AS SLEEP OR STRESS - THE W ILLIAM J CLINTON PRESIDENTIAL CENTER (CENTER) IS THE HOME OF THE LITTLE ROCK OFFICES OF T HE CLINTON FOUNDATION, THE CLINTON LIBRARY AND MUSEUM, AND THE CLINTON SCHOOL OF PUBLIC SE RVICE, THE FIRST INSTITUTION IN THE NATION TO OFFER A MASTER'S OF PUBLIC SERVICE (MPS) DEG REE THE CENTER HOSTS A VARIETY OF EDUCATIONAL PROGRAMS, WORLD-CLASS LECTURES, AND UNIQUE EXHIBITS EACH YEAR, AND IS A PLACE WHERE PEOPLE COME TO LEARN ABOUT THE HISTORY OF THEIR C OUNTRY AND THE WORLD, AND BE INSPIRED TO ENGAGE IN PUBLIC SERVICE SINCE ITS GRAND OPENING IN 2004, THE CENTER HAS WELCOMED THREE

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A	THE FOUNDATION'S BUSINESS AND AFFAIRS ARE MANAGED BY ITS BOARD OF DIRECTORS THE BOARD'S EXECUTIVE COMMITTEE MAY ACT FOR THE BOARD BETWEEN MEETINGS REGULAR MINUTES OF THE EXECUTIVE COMMITTEE'S PROCEEDINGS ARE KEPT AND REPORTED TO THE BOARD THE EXECUTIVE COMMITTEE RESERVES THE LIMITED POWER TO REVIEW AND APPROVE DECISIONS RELATED TO THE USE OF THE CLINTON NAME AND THE RENAMING OF THE FOUNDATION THE FOUNDATION'S BYLAWS ESTABLISH TWO CLASSES OF DIRECTORS CLASS A CONSISTS OF THE EXECUTIVE COMMITTEE ALL OTHER DIRECTORS ARE CLASS B DIRECTORS ACTIONS BY THE BOARD REQUIRE THE SUPPORT OF A MAJORITY OF DIRECTORS ELIGIBLE TO VOTE, INCLUDING A MAJORITY OF CLASS A DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	WILLIAM JEFFERSON CLINTON, HILLARY RODHAM CLINTON, AND CHELSEA V CLINTON HAVE A FAMILY RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE FOUNDATION REVISED ITS BYLAWS THE AMENDED AND RESTATED BYLAWS AND THE ACCOMPANYING BOARD GOVERNANCE DOCUMENT EXPAND THE NUMBER OF DIRECTORS, ESTABLISH STAGGERED TERMS FOR AND CLASSES OF DIRECTORS, PROVIDE FOR EXECUTIVE AND AUDIT COMMITTEES, INCORPORATE THE CONFLICT OF INTEREST POLICY, CLARIFY THE CIRCUMSTANCES UNDER WHICH DIRECTORS MAY BE COMPENSATED, AND ESTABLISH LIMITATIONS ON INDEMNIFICATION OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF FORM 990 IS CIRCULATED TO THE BOARD, AMONG THE VARIOUS OFFICERS AND AMONG THE VARIOUS INITIATIVE HEADS FOR REVIEW PRIOR TO FILING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY REQUIRING DIRECTORS, OFFICERS, AND KEY EMPLOYEES TO DISCLOSE ANY POTENTIAL CONFLICTS ANNUALLY THE ANNUAL DISCLOSURES ARE REVIEWED BY COUNSEL AND IF ANY POTENTIAL CONFLICT EXISTS, IT WOULD BE EXAMINED AND APPROPRIATE ACTION WOULD BE TAKEN

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION PARTICIPATES IN AN ANNUAL COMPENSATION STUDY THAT REVIEWS THREE SURVEYS TO DETERMINE THE REASONABLENESS OF ALL STAFF COMPENSATION INCLUDING TOP MANAGEMENT THE ORGANIZATION ALSO UTILIZES AN INDEPENDENT COMPENSATION CONSULTANT AND TOP MANAGEMENT'S SALARIES ARE REVIEWED BY THE BOARD ANNUALLY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 16B	THE CLINTON FOUNDATION IS ENGAGED IN TWO PARTNERSHIPS WITH THE INTENT OF HELPING LIFT PEOPLE OUT OF POVERTY BY ORGANIZING THEM INTO SOCIAL ENTERPRISES ANY ACTION OF THESE PARTNERSHIPS REQUIRES CONCURRENCE OF THE FOUNDATION, TO ENSURE THAT ACTIVITIES ALIGN WITH THE FOUNDATION'S CHARITABLE PURPOSES AND WITH THE SOCIAL MISSION A POLICY GOVERNING THESE ACTIVITIES AS WELL AS THE FOUNDATION'S ENGAGEMENT IN PROGRAM RELATED INVESTMENTS IN GENERAL IS EFFECTIVE AS OF THE 2014 TAX YEAR

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS AUDITED FINANCIAL STATEMENTS AND ANNUAL REPORT AVAILABLE ON ITS WEBSITE. ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS CHANGE IN INTEREST IN NET ASSETS OF RELATED ENTITY ($ 2,715,345) PROVISION FOR UNCOLLECTIBLE PLEDGES ($ 225,000) TRANSFER FROM CLINTON GLOBAL INITIATIVE (MERGER) $ 2,383,668 ---------- TOTAL ($ 556,677)

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE CLINTON FOUNDATION HAS ESTABLISHED AN AUDIT COMMITTEE WITH RESPONSIBILITY TO OVERSEE THE ANNUAL AUDIT OF ITS FINANCIAL STATEMENT AND SELECTION OF AN INDEPENDENT AUDITOR

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number
31-1580204

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) ACACIA DEVELOPEMENT CO	ECON DEVLPMNT	DE	0	0	BHCC FDN
(2) ACCESO WORLDWIDE FUND INC 46-4160920	ECON DEVLPMNT	DE	0	0	BHCC FDN

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) WILLIAM J CLINTON FOUNDATION UK 610 PRESCLINTON AVE 2ND FL LITTLE ROCK, AR 72201	FUNDRAISING	UK			BHCC FDN	Yes	
(2) CLINTON GLOBAL INITIATIVE 1200 PRESIDENT CLINTON AVE LITTLE ROCK, AR 72201 27-1551550	INITIATIVE	AR	501(c)(3)	11B	BHCC FDN	Yes	
(3) CLINTON HEALTH ACCESS INITIATIVE 383 DORCHESTER AVE BOSTON, MA 02127 27-1414646	HEALTH	AR	501(c)(3)	7	BHCC FDN	Yes	
(4) CLINTON FOUNDATION INSALINGSSTIFTELSE TORNGREN MAGNELL VAST TRADGARD 8 STOCKHOLM SE-111 53 SW	FUNDRAISING	SW			BHCC FDN	Yes	

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) HAITI DEVELOPMENT FUND LLC 77 WATER STREET NEW YORK, NY 10005 45-3819678	INVESTMENT	DE		RELATED	-27,083	300,154		No	0	Yes		50 000 %

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

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

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p	Yes	
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) CLINTON GLOBAL INITIATIVE	s	2,383,668	FMV
(2) CLINTON HEALTH ACCESS INITIATIVE	D, S	3,558,496	FMV
(3) CLINTON HEALTH ACCESS INITIATIVE	B	2,000,000	FMV
(4) CLINTON FOUNDATION INSALINGSSTIFTELSE	c	12,684,738	FMV
(5) CLINTON HEALTH ACCESS INITIATIVE	p	1,191,864	FMV
(6) CLINTON FOUNDATION INSALINGSSTIFTELSE	s	2,618,607	FMV

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 31-1580204
Name: BILL HILLARY & CHELSEA CLINTON FOUNDATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
CLINTON GLOBAL INITIATIVE	s	2,383,668	FMV
CLINTON HEALTH ACCESS INITIATIVE	D, S	3,558,496	FMV
CLINTON HEALTH ACCESS INITIATIVE	B	2,000,000	FMV
CLINTON FOUNDATION INSALINGSSTIFTELSE	c	12,684,738	FMV
CLINTON HEALTH ACCESS INITIATIVE	p	1,191,864	FMV
CLINTON FOUNDATION INSALINGSSTIFTELSE	s	2,618,607	FMV