DLN: 93493320090335

**Return of Organization Exempt From Income Tax** 

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

2013

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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 <u>www.IRS.gov/form990</u>

		pplicable BILL HILLARY & CHELSEA CLINTON FOUNDATION		D Employ	yer iden	tification number	
☐ Add	Iress ch	ange		31-15	80204		
┌ Nai	ne cha	Doing Business As nge					
Init	ıal retu	Number and street (of F o box if mail is not delivered to street address) Room/suit	e	E Telepho	ne numb	per	
☐ Ter	mınate	d 610 PRESIDENT CLINTON AVE 2ND FLOO		·	748-0		
<b>▼</b> Am	ended			(501)	740-0	4/1	
☐ App	lication	pending LITTLE ROCK, AR 72201		<b>G</b> Gross re	eceipts \$	150,041,339	
		F Name and address of principal officer	<b>H(a)</b> Is thi	s a group	return	for	
		SEE SCHEDULE O 1271 AVENUE OF AMERICAS	subor	dinates?		┌ Yes 🗸 No	
		NEW YORK, NY 10020	<b>H(b)</b> Are a	ll subordu	nates	┌ Yes ┌ No	
			includ		naces	, 163, 110	
I Ta	x-exem	pt status	If "No	o," attach	alıst (	(see instructions)	
J W	ebsite	:: ► WWW CLINTONFOUNDATION ORG	H(c) Grou	p exempt	ion num	nber <b>►</b>	
<b>K</b> Forr	n of or	ganization 🔽 Corporation 🦲 Trust 🦷 Association 🦳 Other 🕨	<b>L</b> Year of fo	mation 19	97 <b>M</b> :	State of legal domicile AR	
Pa	rt I	Summary					
ance	:	Briefly describe the organization's mission or most significant activities IMPROVE GLOBAL HEALTH & WELLNESS,INCREASE OPPORTUNITY FOR WO DBESITY,CREATE ECONOMIC OPP & GROWTH AND HELP COMMUNITIES A					
Ĕ	.						
Governance	2	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 2	5% of its	net ass	sets	
Activities &	3	Number of voting members of the governing body (Part VI, line 1a) $\cdot\cdot\cdot$ . $\cdot$ .		.	3	13	
ě	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	11	
톭	5	Fotal number of individuals employed in calendar year 2013 (Part V, line 2a) $$ .			5	402	
ĕ		Total number of volunteers (estimate if necessary)			6	400	
	ı	Total unrelated business revenue from Part VIII, column (C), line 12			7a	1,425,459	
	Ь	Net unrelated business taxable income from Form 990-T, line 34			7b	-201,666	
	_			r Year	\C 4	Current Year	
<u>a</u>	8	Contributions and grants (Part VIII, line 1h)		49,937,2	_	142,885,956	
Ravenue	9 10	Program service revenue (Part VIII, line 2g)		1,165,7 516,0		2,375,976	
歪	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,970,3		2,421,380	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		2,570,5	,13	2,121,300	
		12)		54,589,3		147,842,769	
	13	Grants and similar amounts paid (Part IX, column (A), lines $1-3$ )		8,091,4	_	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)		18,438,5	574	29,914,108	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		204,1	.79	634,720	
ੜੇ	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶8,006,421					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		29,614,4	17	45,270,614	
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		56,348,6	558	84,684,494	
	19	Revenue less expenses Subtract line 18 from line 12	+	-1,759,3	_	63,158,275	
Not Assets or Fund Balances				of Currei ear	nt	End of Year	
3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00	20	Total assets (Part X, line 16)		225,703,2	274	277,805,820	
2 E	21	Total liabilities (Part X, line 26)		42,113,2	239	30,506,362	
	22	Net assets or fund balances Subtract line 21 from line 20	1	83,590,0	35	247,299,458	
Pai	t 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 prepare preparer has any knowledge

	**	***					
Sign	Sig	nature of officer					
Here	AN	DREW KESSEL CFO					
	Ту	pe or print name and title					
Doid		Print/Type preparer's name MARCIA KRAUSE	Preparer's signature				
Paid Prepare	er	Firm's name PricewaterhouseCoopers LLP					
Use On		Firm's address ► 600 13TH STREET NW SUITE 1000					

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

WASHINGTON, DC 200053005

Forn	1990 (2013)					Page
Pai		ent of Program Serv chedule O contains a res			ı	
1	Briefly describe t	the organization's missio	n			
AND	WELLNESS, INCR	EASE OPPORTUNITY F	OR WOMEN A	ND GIRLS, REDUCE CH	ND INDIVIDUALS TO IMPRO ILDHOOD OBESITY, CREAT S OF CLIMATE CHANGE	
_						
2		ion undertake any signifi 0 or 990-EZ?				▽ Yes ┌ No
	If "Yes," describe	these new services on S	Schedule O			
3	•	on cease conducting, or	~	2	ducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sche	dule O			
4	expenses Sectio		4) organızatıon	s are required to report t	ee largest program services, a the amount of grants and alloc	
4a	(Code	) (Expenses \$	23,684,000	ıncludıng grants of \$	) (Revenue \$	896,400 )
	CLINTON GLOBAL IN	ITIATIVE (SEE SCHEDULE O FO	OR FURTHER DETA	AILS)		
4b	(Code	) (Expenses \$	12,288,987	ıncludıng grants of \$	107,374 ) (Revenue \$	2,814,980 )
	CLINTON PRESIDEN	TIAL CENTER (SEE SCHEDULE	O FOR FURTHER I	DETAILS)		
4c	(Code	) (Expenses \$	8,311,000	ıncludıng grants of \$	496,023 ) (Revenue \$	0)
	CLINTON CLIMATE I	NITIATIVE (SEE SCHEDULE O I	FOR FURTHER DET	TAILS)		
4d	Other program s	ervices (Describe in Sch	nedule O )			
	(Eynenses \$	24 024 824 in	cluding grants	of \$ 261.6	55 ) (Revenue \$ 1	769 021 )

68,308,811

Total program service expenses ►

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)? <i>If "Yes," complete Schedule A</i>	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 1	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 2	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 $IV^{\square}$	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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 $\chi^{f G}$	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		Νo
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		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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)			
а	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\blacksquare$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</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?	] _,	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		<u> </u>	▼
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 265			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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)?	<b>4</b> a	Yes	
b	If "Yes," enter the name of the foreign country ►			
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?	<b> </b>		
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	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			
е	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		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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.			
а	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			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	ļ		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Section A. Governing Body and Management

<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax vear			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	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		N o
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
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
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶AL , AK , AR , CA , CT , FL , GA , HI , IL	, KS ,	KY , MD	, MA ,

List the States with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, MD, MA

MI, MN, MS, NH, NJ, NM, NY, NC, ND, OK, OR, PA,

RI, SC, TN, VA, WV, WI

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

## 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

	<u> </u>	I			_					
<b>(A)</b> Name and Title	( <b>B</b> ) A verage	Pos	sition	( <b>C</b> ) (do		chec	k	<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per	more	Position (do not check more than one box, unless		ess	compensation	compensation	amount of		
	week (list any hours		person is both an officer and a director/trustee)		from the organization	from related organizations	other compensation			
	for related							(W- 2/1099-	(W- 2/1099-	from the
	organizations below	출출.	<del> </del>	Office	9	晉章	Former	MISC)	MISC)	organization and related
	dotted line)	중	<b>∄</b>		Įğ.	12 14	重			organizations
		우	<u> </u>		Key employee	B				
		Individual trustee or director	ַ ַּ		8	ž				
		à:	Institutional Trustee			Highest compensated employee				
			۳.			2				
(1) BRUCE R LINDSEY-CEO TIL 72013	45 0	V		Х				260 672	0	24 194
CHAIRMAN OF BOARD	5 0	Х						360,672	0	34,184
(2) TERENCE MCAULIFFE	5 0	х								
DIRECTOR - UNTIL NOV 5,2013	0 0									
(3) CHELSEA V CLINTON	25 0	×						0	0	0
DIRECTOR	10 0	^						ŭ		
(4) ERIC BRAVERMAN	50 0	×		×				261,041	0	13,300
CEO BEGINNING JULY 2013	0 0							,	_	
(5) WILLIAM JEFFERSON CLINTON	20 0	×								
DIRECTOR	5 0									
(6) HILLARY RODHAM CLINTON	20 0	x								
DIRECTOR (7) FRANK CHISTRA	5 0									
(7) FRANK GIUSTRA	5 0	x								
DIRECTOR (8) ROLANDO GONZALEZ BUNSTER	0 0			-			_			
		х								
DIRECTOR (9) ERIC GOOSBY	0 0									
		х								
DIRECTOR (10) HADEEL IBRAHIM	0 0									
DIRECTOR	0 0	Х								
(11) LISA JACKSON	5 0									_
DIRECTOR	0 0	X								
(12) CHERYL MILLS	5 0									
DIRECTOR	0 0	X								
(13) CHERYL SABAN	5 0									
DIRECTOR	0 0	X								
(14) RICHARD VERMA	5 0	V								
DIRECTOR	0 0	Х								
(15) ANDREW KESSEL	50 0			x				174,571	0	33,384
CF0	0 0							174,371	0	33,304
(16) STEPHANIE S STREETT	50 0			x				138,750	0	30,999
EXECUTIVE DIRECTOR	0 0			Ĺ				155,750		30,555
(17) ROBERT S HARRISON	45 0				X			208,138	0	35,619
CEO, CGI	5 0							200,130		·
										Form <b>990</b> (2013)

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

<b>(A)</b> Name and Title		(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (D) Reportable compensation compens from the from rel organization organization (W-2/1099-1006)								Estim amount comper from	nated of other nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
	DENNIS CHENG	50 0				x			215,200		0	21,685
CDO (19) N	1ARK GUNTON	0 0 50 0									1	
CEO,		0 0					Х		256,565		0	38,960
(20) S	CCOTT TAITEL	50 0 0 0					х		186,571		0	29,113
(21) L	AURA GRAHAM	50 0					х		182,710		0	1,248
	r advisor 'Irginia ehrlich	0 0 50 0										
CEO,		0 0					Х		181,864		0	19,159
	REDERIC POUST SPONSORS & MRKTING	50 0 0 0					х		464,229		o	20,028
1b	Sub-Total						<u> </u>  ►					
c	Total from continuation sheets to Part	VII, Section A	· · ·		•		<b>⊢</b> ⊢					
d	Total (add lines 1b and 1c)						•		2,630,311	0		277,679
2	Total number of individuals (including b \$100,000 of reportable compensation f				ed al	bove	e) who	rec	eived more than			
3	Did the organization list any <b>former</b> offi on line 1a? <i>If "Yes," complete Schedule J</i>	cer, director or for such indivia	trustee	e, key			yee, o		ghest compensate	d employee	Yes	No No
4	For any individual listed on line 1a, is the organization and related organizations of individual									om the	Yes	
5	Did any person listed on line 1a receive services rendered to the organization?									ndividual for	i	No

#### **Section B. Independent Contractors**

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

(A)	(B)	(C)
Name and business address	Description of services	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 V	<b>/ + + +</b>	Statement of Revenue					
	T 4.	Check if Schedule O contains a response		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र इ	1a	Federated campaigns 1					
ran	b	Membership dues 1	<b>b</b>				
S B B	C	Fundraising events 1	c 14,833,387				
iffs ar.	d	Related organizations 10	9,969,393				
3, C	e	Government grants (contributions) 16	<b>e</b> 4,497,522				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	f 113,439,953				
를	g	Noncash contributions included in lines 1a-1f \$	632,977				ĺ
Com	h	Total. Add lines 1a-1f		142,885,956			
			Business Code				
Program Serwce Revenue	2a	PRESIDENTIAL CENTER	900099	1,029,841	238,147	791,694	
exe Se	Ь	CLINTON GLOBAL INITIATIVE	900099	896,400	896,400		
Э. Н	c	CGEP INCOME	900099	449,735	449,735		
Š h	d						
ਔ =	e						
⊊ Grag	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f		2,375,976			
	3	Investment income (including divide					150 157
	١.	and other similar amounts) Income from investment of tax-exempt bond		159,457			159,457
	4   5	Royalties	· · · · · · · · · · · · · · · · · · ·	0			
		(i) Real	(II) Personal				
	6a	Gross rents	(11)				
	b	Less rental expenses					
	c	Rental income 0	0				
	d	or (loss)  Net rental income or (loss)		o			
		(ı) 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			
une	8a	Gross income from fundraising events (not including \$14,833,387					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18	364,151				
ţ.	b	•	1,223,181				
0	C	Net income or (loss) from fundraising		-859,030			-859,030
	9a	Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses					
		Net income or (loss) from gaming act	tivities	0			
	10a	Gross sales of inventory, less returns and allowances .	1,785,139				
	ь	Less cost of goods sold <b>b</b>	975,389				
	С	Net income or (loss) from sales of in		809,750		633,765	175,985
		Miscellaneous Revenue	Business Code				
	11a	SPEECH REVENUE	900099	1,784,748	1,784,748		
	b	CDI FARMING	900099	-776,870	-776,870		
	C	OTHER REVENUE	900099	1,462,782	1,462,782		
	d	All other revenue					
	e	Total. Add lines 11a-11d		2,470,660			
	12	<b>Total revenue.</b> See Instructions .		147,842,769	4,054,942	1,425,459	-523,588

	Statement of Functional Expenses			laka asluman (A.)	
sectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
<u> </u>	Check if Schedule O contains a response or note to any line in this		(B)	(c)	<u> </u> (D)
Do no 7b, 8t	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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)				
а	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	634,720			634,720
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	7,704,307	6 141 426	170 170	1 202 701
12	Schedule O)	677,466	6,141,436	· ·	1,383,701
12 13	Office expenses	· · · · · ·	4,064,994	<del>                                     </del>	66,962
13 14		4,770,917 2,066,067	, ,	· · ·	242,891
	Information technology		1,067,763	536,032	462,272
15	Royalties	0	2 062 226	527.040	420.114
16 	Occupancy	4,010,380	3,063,226		420,114
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	8,448,502	6,472,418	288,970	1,687,114
19	Conferences, conventions, and meetings	9,224,775	8,996,173	24,624	203,978
20	Interest	9,224,773	0,550,175	27,027	203,370
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)			_ :=,;=:	
а	LOSS ON PRGRM RELATED INVSTMTS	26,348	26,348		
Ь	OTHER EXPENSES	2,570,682	2,283,003	287,679	
c d					
	All other expenses				
	All other expenses  Total functional expenses. Add lines 1 through 24e	04.534.55	60 202 24	0.363.365	0.005.45
25 26	Joint costs. Complete this line only if the organization	84,684,494	68,308,811	8,369,262	8,006,421
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . . . . . . . . . . . . . (B) (A) Beginning of year End of year 55,578,515 1 1 89.498.607 2 35,479,188 2 Savings and temporary cash investments . . . . . . 8,610,879 56,399,881 3 3 4 569.780 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 0 5 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 Assets 0 0 6 0 7 0 8 1.473.836 8 894.990 9 90,136 864,072 10a Land, buildings, and equipment cost or other basis 144,975,885 10a Complete Part VI of Schedule D h Less accumulated depreciation . . . . . 10b 34,980,204 109,394,076 109,995,681 274,991 14.649.160 11 11 12 0 12 0 Investments—other securities See Part IV, line 11 . . . . . . 1,363,066 2,174,513 13 13 Investments—program-related See Part IV, line 11 . . . . . . o 0 14 14 14,427,903 365,000 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . 225,703,274 16 277,805,820 4,021,194 17 9,088,298 **17** Accounts payable and accrued expenses . . . . . . 18 18 19 984,288 19 12,032,339 0 20 20 O 0 21 0 21 Escrow or custodial account liability Complete Part IV of Schedule D . . \_iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 ol 22 74,985 74,985 23 Secured mortgages and notes payable to unrelated third parties . . 23 ol Ω 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 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 37,032,772 25 9,310,740 26 Total liabilities. Add lines 17 through 25 . . . . . 42,113,239 26 30,506,362 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 159,044,754 27 164,678,982 Unrestricted net assets . . . . . . . 28 24,295,281 28 23,606,628 250.000 59,013,848 29 29 Permanently restricted net assets . . . . . . . . . Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 Assets

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances . . . . . . . . . . .

31

32

33

ğ

247, 299, 458

31

32

33

183,590,035

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৷
1	Total revenue (must equal Part VIII, column (A), line 12)	1		147,8	842,769
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				<u>-</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		63,1	158,275
7	Net assets of fully balances at beginning of year (must equal raft A, line 33, column (A))	4		183,5	590,035
5	Net unrealized gains (losses) on investments	5			61,155
6	Donated services and use of facilities				
7	Investment expenses	6			
•		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			489,993
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				•
	column (B))	10		247,2	299,458
Par	Financial Statements and Reporting  Check If Schedule O contains a response or note to any line in this Part XII				. 区
	Check it Schedule O Contains a response of note to any fine in this part AII	• •	<u> </u>	1	· ·
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	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		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320090335

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

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

2013

Open to Public Inspection

lame	of t	he	organization	
ILL HIL	LARY	′ &	CHELSEA CLINTON	<b>FOUNDATION</b>

Employer identification number

31-1580204

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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported organization (described on lines 1-9 above or IRC section (see  (iv) Is the organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) of your support?  (vii) A mount monetary support?  (viii) A mount monetary support?	_	$\overline{}$	Duabaaku	. a +b. a b.	v T cortifi that the			nally integrat						
check this box  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) A 35% controlled entity of a person described in (i) or (ii) above?  (i) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (ii) Is the organization in col (i) of your support?  (iii) EIN (iii) Type of organization in col (i) of your support?  (iv) Did you notify the organization in col (i) organization in col (i) of your support?  (vii) Is the organization in col (i) organization in the U S?  (viii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support		_												
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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support	_	_	D	المنطقة سيد	T									
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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support	_	$\Box$	By chacking	na thic h	ov I cartify that the									
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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support	e	$\sqcap$	By checkii	ng this bo	ox, I certify that the									
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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support	e	Γ	•	-	•	organizatio	n ıs not con	trolled direct	ly or indirec	tly by one or	more dıs	qualified	pers	ons
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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Is the organization (sold ii) organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount organization in col (i) organization in col (i) organization in the U S?	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  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (II)  and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) A 35% controlled entity of a person described in (I) or (II) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount monetary support	e	Γ	•	-	•	organizatio	n ıs not con	trolled direct	ly or indirec	tly by one or	more dıs	qualified	pers	ons
check this box  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) A 35% controlled entity of a person described in (i) or (ii) above?  (i) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (ii) Is the organization in col (i) of your support?  (iii) EIN (iii) Type of organization in col (i) of your support?  (iv) Did you notify the organization in col (i) organization in col (i) of your support?  (vii) Is the organization in col (i) organization in the U S?  (viii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in the U S?	check this box  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported organization (described on lines 1 - 9 above or IRC section (see instructions))  (iii) EIN (iii) Type of or (iv) Is the organization in col (i) of your support?  (iv) Did you notify the organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount monetary support?  (viii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) organization in co	e	Γ	other than	foundati	ox, I certify that the on managers and otl	organizatio	n ıs not con	trolled direct	ly or indirec	tly by one or	more dıs	qualified	pers	ons
Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) A person who directly or indirectly controls, either alone or together with persons described in (ii) Parson who directly or indirectly controls, either alone or together with persons described in (ii) Parson who directly or indirectly controls, either alone or together with persons described in (ii) Parson who directly or indirectly controls, either alone or together with persons described in (ii) Parson who directly or indirectly controls, either alone or together with persons described in (ii) Parson who directly or indirectly controls, either alone or together with persons described in (ii)    11g(ii)	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported organization (described on lines 1-9 above or IRC section (see instructions))  (iv) Is the organization in col (i) of your support?  (vi) Did you notify the organization in col (i) of your support?  (vii) Is the organization in col (i) of your support?  (viii) A mount monetary support?  (viii) A mount monetary support?	e	Γ	other than	foundati	•	organizatio	n ıs not con	trolled direct	ly or indirec	tly by one or	more dıs	qualified	pers	ons
following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on col (i) listed in lines 1-9 above or IRC section (see instructions))  (ii) Name of supported organization in col (i) of your supported organization in the U S?  (vii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) of your support?  (viii) A mount organization in the U S?	following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) Name of supported organization (see instructions))  (iii) EIN (iii) Type of organization in col (i) of your support?  (iv) Is the organization in col (i) of your support?  (vi) Is the organization in col (i) organized in the US?		Γ	other than section 50	foundatı 9 (a)(2)	on managers and otl	organızatıo her than one	n is not con e or more pi	trolled direct ublicly suppoi	y or indirec ted organiz	tly by one or ations descril	more dıs bed ın se	qualified ction 50	d perso 9(a)(:	ons 1)or
following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on col (i) listed in lines 1-9 above or IRC section (see instructions))  (ii) Name of supported organization in col (i) of your supported organization in the U S?  (vii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) of your support?  (viii) A mount organization in the U S?	following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1-9 above or IRC section (see instructions))  (ii) Name of supported organization (see instructions))		Γ	other than section 50 If the orga	foundatı 9 (a)(2) nızatıon	on managers and otl	organızatıo her than one	n is not con e or more pi	trolled direct ublicly suppoi	y or indirec ted organiz	tly by one or ations descril	more dıs bed ın se	qualified ction 50	d perso 9(a)(:	ons 1) or
(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?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported organization  (iii) EIN  (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))  (iv) Is the organization (supported organization)  (v) Did you notify the organization organization in col (i) of your support?  (vii) A mount organization in col (i) organized in the US?	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported organization  (ii) EIN  (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (iv) Is the organization in col (i) of your supported organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in the U S?  (vii) A mount monetary support in the U S?	f	Γ	other than section 50 If the orga check this	foundati )9(a)(2) nization box	on managers and oth	organizatio her than one eterminatio	n is not cone or more pu	trolled direct ublicly suppoi	y or indirected organiz	tly by one or ations descril pe II, or Type	more dıs bed ın se	qualified ction 50	d perso 9(a)(:	ons 1)or
and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (iii) I Ig(ii)   Ilg(iii)   Ilg	and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (II) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (iii) Type of or IRC section (described on lines 1- 9 above or IRC section (see instructions))	f	Γ	other than section 50 If the orga check this Since Aug	foundati 9(a)(2) nization box ust 17, 2	on managers and oth	organizatio her than one eterminatio	n is not cone or more pu	trolled direct ublicly suppoi	y or indirected organiz	tly by one or ations descril pe II, or Type	more dıs bed ın se	qualified ction 50	d perso 9(a)(:	ons 1) or
(iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) A family member of a person described in (i) above?  (ii) A joint in (ii) or (ii) above?  (iii) EIN (iii) Type of organization in col (ii) Is the organization in col (i) organization in col (ii) organization in the US?  (vii) A mount organization in col (i) organization in col (i) organized in the US?	(iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) EIN (iii) Type of organization in col (i) of your support?  (iii) EIN (iii) Type of organization in col (i) of your support?  (iv) Did you notify the organization in col (i) of your support?  (vii) A mount organization in col (i) of your support?  (viii) A mount organization in col (i) organization in the U S ?	f	Γ	other than section 50 If the orga check this Since Aug following p	foundati )9 (a)(2) nization box ust 17, 2 ersons?	on managers and other control of the	organizatio her than one eterminatio zation acce	n is not cone or more put n from the I	trolled direct ublicly suppoi RS that it is a ft or contribu	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup	qualified ction 50	d perso 9(a)(i organi	ons 1) or zation,
(iii) A 35% controlled entity of a person described in (i) or (ii) above?  Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1-9 above or IRC section (see instructions))  (iii) EIN (iii) Type of 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) of your support?  In the U S?	(iii) A 35% controlled entity of a person described in (i) or (ii) above?  Provide the following information about the supported organization(s)  (i) Name of supported organization (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iii) EIN (iii) Type of organization in col (i) listed in your governing document?  (v) Did you notify the organization organization in col (i) of your support?  (vii) A mount organization in col (i) organization in the U S?	f	Γ	other than section 50 If the orga check this Since Aug following p	foundati )9 (a)(2) nization box ust 17, 2 ersons?	on managers and other control of the	organizatio her than one eterminatio zation acce	n is not cone or more put n from the I	trolled direct ublicly suppoi RS that it is a ft or contribu	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup	qualified ction 50	d perso 9(a)(i organi	ons 1) or zation,
(iii) A 35% controlled entity of a person described in (i) or (ii) above?  Provide the following information about the supported organization(s)  (i) Name of supported organization (described on lines 1-9 above or IRC section (see instructions))  (iii) EIN (iii) Type of 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) of your support?  In the U S?	(iii) A 35% controlled entity of a person described in (i) or (ii) above?  Provide the following information about the supported organization(s)  (i) Name of supported organization (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iii) EIN (iii) Type of organization in col (i) listed in your governing document?  (v) Did you notify the organization organization in col (i) of your support?  (vii) A mount organization in col (i) organization in the U S?	f	Γ	other than section 50 If the orga check this Since Aug following p	foundati 19 (a)(2) nization box ust 17, 2 ersons? on who di	on managers and other control of the	organizatio her than one eterminatio zation acce controls, eit	n is not cone or more put n from the I spted any gither alone of the second sec	trolled direct ublicly suppoi RS that it is a ft or contribu r together wit	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup	qualified ction 50 porting (	d perso 9(a)(i organi	ons 1) or zation,
h Provide the following information about the supported organization(s)  (i) Name of supported organization (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) EIN (iii) Type of organization (iv) Is the organization in col (i) of your support?  (v) Did you notify the organization in col (i) of your support?  (vi) Is the organization in col (i) of your support?  (vii) A mount organization in col (i) organization in the U S?	h Provide the following information about the supported organization(s)  (i) Name of supported organization (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) EIN (iii) Type of organization (iv) Is the organization in col (i) Is the organization in col (i) of your support?  (v) Did you notify the organization in col (i) organization in col (i) organization in the U S?	f	Γ	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be	foundati 09(a)(2) nization box ust 17, 2 ersons? on who di	on managers and other control of the	organizationer than one etermination accessorted accessories acces	n is not cone or more put of the I epted any gither alone of dorganizati	trolled direct ublicly suppoi RS that it is a ft or contribu r together wit	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup	qualified ction 50 porting ( 11g(i)	d perso 9(a)(i organi	ons 1) or zation,
(i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) EIN (iii) Type of organization in cold (iv) Is the organization in cold (iv) Old you notify the organization in cold (iv) Is the organization in cold (iv) Old you notify the organization in cold (iv) Is the organization in cold (iv) Old you notify the organization in cold (iv) Old you notify the organization in cold (iv) Old you notify the organization in cold (iv) organizat	(i) Name of supported organization (described on lines 1- 9 above or IRC section (see instructions))  (ii) EIN  (iii) Type of organization in (iv) Is the organization in col (i) Isted in your governing document?  (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organized in the U S?  (vii) Is the organization in col (i) organized in the U S?	f	Γ	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami	foundati 9 (a)(2) nization box ust 17, 2 ersons? on who di elow, the ly memb	on managers and other control of the	organization her than one etermination acceston acceston to supported bed in (i) all	n is not cone or more put n from the I epted any gither alone or dorganization ove?	trolled direct ublicly suppor RS that it is a ft or contribu r together wit on?	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup )	qualified ction 50 porting d 11g(i) 11g(ii)	d perso 9(a)(i organi	ons 1) or zation,
supported organization (described on lines 1- 9 above or IRC section (see instructions))  organization organization in col (i) listed in your governing document?  the organization organization in col (i) of your col (i) organized support?  in the US?	supported organization   organizatio	f	Γ	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami	foundati 9 (a)(2) nization box ust 17, 2 ersons? on who di elow, the ly memb	on managers and other control of the	organization her than one etermination acceston acceston to supported bed in (i) all	n is not cone or more put n from the I epted any gither alone or dorganization ove?	trolled direct ublicly suppor RS that it is a ft or contribu r together wit on?	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup )	qualified ction 50 porting d 11g(i) 11g(ii)	d perso 9(a)(i organi	ons 1) or zation,
supported organization (described on lines 1- 9 above or IRC section (see instructions))  organization organization in col (i) listed in your governing document?  the organization organization in col (i) of your col (i) organized support?  in the US?	supported organization organization in col (i) listed in your governing or IRC section (see instructions)	f g	Γ	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami (iii) A 350	foundation (2) (a) (2) (a) (2) (b) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	on managers and other content of the	organization her than one etermination accessoration accessoration accessoration accessoration (i) all an described in (i) all an described	n is not cone or more put in from the I epted any gither alone of dorganization ove?	trolled direct ublicly suppor RS that it is a ft or contribu- r together wit on? ) above?	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup )	qualified ction 50 porting d 11g(i) 11g(ii)	d perso 9(a)(i organi	ons 1) or zation,
supported organization (described on lines 1- 9 above or IRC section (see instructions))  organization organization in col (i) listed in your governing document?  the organization organization in col (i) of your col (i) organized support?  in the US?	supported organization organization in col (i) listed in your governing or IRC section (see instructions)	f g	Г	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami (iii) A 350	foundation (2) (a) (2) (a) (2) (b) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	on managers and other content of the	organization her than one etermination accessoration accessoration accessoration accessoration (i) all an described in (i) all an described	n is not cone or more put in from the I epted any gither alone of dorganization ove?	trolled direct ublicly suppor RS that it is a ft or contribu- r together wit on? ) above?	y or indirected organiz  Type I, Ty	tly by one or ations descril pe II, or Type y of the	more dis bed in se e III sup )	qualified ction 50 porting d 11g(i) 11g(ii)	d perso 9(a)(i organi	ons 1) or zation,
organization  (described on lines 1- 9 above or IRC section (see instructions))	organization  (described on lines 1 - 9 above or IRC section (see instructions))  (described on lines 1 - 9 above or IRC section (see instructions))	f g h		other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other control of the	organization her than one etermination accessoration accessorated in (i) all in described the support	n is not cone or more put in from the I epted any gither alone or dorganization ove?  d in (i) or (ii) ted organization the first ted organization in the fi	trolled direct ublicly support the support of the s	y or indirected organiz Type I, Ty ion from an	tly by one or ations describe II, or Type y of the escribed in (ii	more dis bed in se e III sup )	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation,
lines 1- 9 above your governing support? in the U.S.? or IRC section (see instructions))	lines 1 - 9 above your governing support? in the U.S.? or IRC section document? (see instructions)	f g h	Nam	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) be (ii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other control of the	organization her than one etermination accessoration accessorated in (i) all in described the support	n is not cone or more put in from the I epted any gither alone or dorganization ove?  d in (i) or (ii) ted organization the first ted organization in the fi	trolled direct ublicly support the support of the s	y or indirected organiz Type I, Ty ion from an	tly by one or ations describe II, or Type y of the escribed in (ii	more dis bed in se e III sup )	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation,
lines 1- 9 above your governing support? in the U.S.? or IRC section (see instructions))	lines 1 - 9 above your governing support? in the U.S.? or IRC section document? (see instructions)	f g h		other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other control of the	organization her than one etermination accessoration accessorated in (i) all in described the support	n is not cone or more put n from the I epted any gither alone or dorganization ove? doin (i) or (ii) ted organization the	trolled direct ublicly support RS that it is a ft or contributer together with on?  above?  ation(s)	y or indirected organiz  Type I, Ty  ion from an  persons d	tly by one or ations describe II, or Type y of the escribed in (ii	more disped in se	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No
or IRC section document?  (see instructions))	or IRC section document?  (see instructions)	f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other control of the	organization her than one etermination accessoration accessorated in (i) all in described the support	n is not cone or more put in from the I epted any gither alone or dorganization ove? If in (i) or (ii) ted organization in	trolled direct ublicly support RS that it is a ft or contributer together with on?  above? ation(s)  (v) Did you the organ	y or indirected organiz  Type I, Ty  ion from an  persons d  u notify ization	tly by one or ations describe II, or Type y of the escribed in (ii)  (vi) Is organiza	more disped in second	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
(see	(see	f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other content of the	organization her than one etermination accessoration accessoration accessoration accessoration (i) all in described in (i) all in described the supportant (iv) Is organization (i) list	n is not cone or more put in from the I epted any gither alone or dorganization (i) or (ii) ted organization in the tion in sted in	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i)	y or indirected organiz Type I, Ty tion from an persons d u notify ization of your	tly by one or ations describe II, or Type y of the escribed in (ii) organiza col (i) organiza	more disped in second	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
instructions))	instructions))	f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A perso and (iii) A fami (iii) A 350 Provide th	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other content of the	organization her than one etermination accessoration accessoration accessoration accessoration (i) all or described in (i) all organization (ii) lis your gov	n is not cone or more put in from the I epted any gither alone or dorganization (i) or (ii) ted organization in sted in erning	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i)	y or indirected organiz Type I, Ty tion from an persons d u notify ization of your	tly by one or ations describe II, or Type y of the escribed in (ii) organiza col (i) organiza	more disped in second	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
instructions)) Yes No Yes No	instructions)) Yes No Yes No Yes No	f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section	organization her than one etermination accessoration accessoration accessoration accessoration (i) all or described in (i) all organization (ii) lis your gov	n is not cone or more put in from the I epted any gither alone or dorganization (i) or (ii) ted organization in sted in erning	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i)	y or indirected organiz Type I, Ty tion from an persons d u notify ization of your	tly by one or ations describe II, or Type y of the escribed in (ii) organiza col (i) organiza	more disped in second	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
I I Yes INO IYES INO IYES INO I		f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section	organization her than one etermination accessoration accessoration accessoration accessoration (i) all or described in (i) all organization (ii) lis your gov	n is not cone or more put in from the I epted any gither alone or dorganization (i) or (ii) ted organization in sted in erning	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i)	y or indirected organiz Type I, Ty tion from an persons d u notify ization of your	tly by one or ations describe II, or Type y of the escribed in (ii) organiza col (i) organiza	more disped in second	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
1.00 1.00 1.00 1.00 1.00		f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section (see	organization her than one etermination accessoration accessoration accessoration accessoration described in (i) also described the supported the supported (iv) Is organization (i) lis your gov docum	n is not cone or more put in from the I epted any gither alone of dorganization ove? I din (i) or (ii) ted organization in sted in erning ent?	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i) support	y or indirected organized Type I, Type	(vi) Is organiza col (i) or the line th	the tion in ganized	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
		f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section (see	organization her than one etermination accessoration accessoration accessoration accessoration described in (i) also described the supported the supported (iv) Is organization (i) lis your gov docum	n is not cone or more put in from the I epted any gither alone of dorganization ove? I din (i) or (ii) ted organization in sted in erning ent?	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i) support	y or indirected organized Type I, Type	(vi) Is organiza col (i) or the line th	the tion in ganized	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount of
		f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section (see	organization her than one etermination accessoration accessoration accessoration accessoration described in (i) also described the supported the supported (iv) Is organization (i) lis your gov docum	n is not cone or more put in from the I epted any gither alone of dorganization ove? I din (i) or (ii) ted organization in sted in erning ent?	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i) support	y or indirected organized Type I, Type	(vi) Is organiza col (i) or the line th	the tion in ganized	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary
		f g h	ıoqqı	other than section 50 If the orga check this Since Aug following p (i) A personand (iii) be (ii) A fami (iii) A 350 Provide the	foundation (2) (a) (2) (a) (2) (a) (2) (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	on managers and other received a written do 2006, has the organic rectly or indirectly of governing body of the rof a person described entity of a person ginformation about  (iii) Type of organization (described on lines 1-9 above or IRC section (see	organization her than one etermination accessoration accessoration accessoration accessoration described in (i) also described the supported the supported (iv) Is organization (i) lis your gov docum	n is not cone or more put in from the I epted any gither alone of dorganization ove? I din (i) or (ii) ted organization in sted in erning ent?	trolled direct ublicly support RS that it is a ft or contributer together with on?  (v) Did you the organ in col (i) support	y or indirected organized Type I, Type	(vi) Is organiza col (i) or the line th	the tion in ganized	qualified ction 50 porting of 11g(i) 11g(ii) 11g(iii)	Yes	ons 1) or zation, No nount cetary

Page 2

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

	rait III. If the organiz	ation fails to qu	anny under the	tests listed beit	w, piedse com	piete rait III.	
	ection A. Public Support endar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	(e) 2013	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	126,979,554	136,869,303	65,232,759	49,937,264	142,885,956	521,904,836
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	136,869,303	65,232,759	49,937,264	142,885,956	521,904,836
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)						44,121,155
6	Public support. Subtract line 5 from line 4						477,783,681
	ection B. Total Support						
Cale	endar year (or fiscal year beginning in) 🟲	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	(e) 2013	<b>(f)</b> Total
7	A mounts from line 4	126,979,554	136,869,303	65,232,759	49,937,264	142,885,956	521,904,836
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	364,211	52,088	68,423	60,308	159,457	704,487
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)	5,774,084	2,530,765	5,329,830	2,464,256	4,419,621	20,518,556
11	Total support (Add lines 7						543,127,879
12	through 10) [ Gross receipts from related activi	ties, etc (see inst	ructions)			12	6,797,421
13	First five years. If the Form 990 ı	•	•	, thırd, fourth, or f	ifth tax year as a		
l <u> </u>	this box and stop here				<u> </u>		▶┌
	ection C. Computation of Pu			44! (0)		1 1	
14	Public support percentage for 201			II, column (f))		14	87 969 %
15	Public support percentage for 201					15	82 560 %
16a	33 1/3% support test—2013. If the				ne 14 is 33 1/3%	or more, check th	ıs box ▶✓
b	and <b>stop here.</b> The organization qu <b>33</b> 1/3% <b>support test—2012.</b> If th				and line 15 is 33	1/3% or more, che	•
17a	box and <b>stop here.</b> The organizati <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organiz	<b>t—2013.</b> If the org	anızatıon did not	check a box on lin	, ,	•	<b>►</b> □
	in Part IV how the organization me						
b	organization  10%-facts-and-circumstances tes  15 is 10% or more, and if the organization						▶□
10	Explain in Part IV how the organiz supported organization			,		•	y ▶ ¯

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

ınstructions

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

Cale	ndar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	( <b>f)</b> Total
_	in) ►		<u> </u>	, ,	<u> </u>	. ,	
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						
7	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)				1		
	ndar year (or fiscal year beginning	I				I	
Care	in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	<b>(f)</b> Total
	1017 E-						
9	A mounts from line 6						
9 10a	,						
	A mounts from line 6						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	or the organization	on's first, second	, third, fourth, or f	fifth tax year as a	1 501(c)(3) organ	
10a  b  c 11  12  13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here		·	, thırd, fourth, or f	fifth tax year as a	1 501(c)(3) organ	nization, ▶
10a  b  c 11  12  13 14  Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe	ercentage		fifth tax year as a		
10a  b  c 11  12  13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (	ercentage f) divided by line		fifth tax year as a	15	
10a  b  c 11  12  13 14  Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe (line 8, column (	ercentage f) divided by line		fifth tax year as a		
10a  b  c 11  12  13 14  See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column ( 2 Schedule A, Pa	ercentage f) divided by line art III, line 15	13, column (f))	fifth tax year as a	15	
10a  b  c 11  12  13 14  See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is to check this box and stop here ection C. Computation of Pub Public support percentage from 201	ic Support Pe (line 8, column ( 2 Schedule A, Pa estment Inco	ercentage f) divided by line art III, line 15 me Percenta	13, column (f))		15	
10a  b  c 11  12  13 14  Se 15 16  Se 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Public support percentage for 2013 Public support percentage from 201  ction D. Computation of Inventional section of Invention of Invention in the section of Inventional se	ic Support Pe (line 8, column ( 2 Schedule A, Pa estment Inco 2013 (line 10c, co	ercentage f) divided by line art III, line 15 me Percentage blumn (f) divided	13, column (f))  ge by line 13, colum		15 16	
10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the sale of the computation of Public support percentage for 2013 Public support percentage from 201 ection D. Computation of Inventor	ic Support Per (line 8, column (2 Schedule A, Parestment Inco 2013 (line 10 c, con 2012 Schedule A	ercentage f) divided by line art III, line 15 me Percentag blumn (f) divided A, Part III, line 1	13, column (f))  ge by line 13, colum 7	n (f))	15 16 17 18	<b>▶</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

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

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 0	000 er 000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

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

DLN: 93493320090335

OMB No 1545-0047

(Form 990) Department of the Treasury

**SCHEDULE D** 

## **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

mal Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	ion
Name of the organi	ization A CLINTON FOUNDATION		Emp	oloyer identifica	tion numbe	r
				1580204		
	izations Maintaining Donor Adv		unds	or Accounts	. Complet	e if th
organiz	zation answered "Yes" to Form 990	(a) Donor advised funds		(b) Funds and	other accou	nts
Total number a	t end of year			(-,		
Aggregate cont	tributions to (during year)					
Aggregate grar	nts from (during year)					
Aggregate valu	e at end of year					
-	zation inform all donors and donor advisor organization's property, subject to the or	<del>-</del>	nor adv	ısed	┌ Yes	┌ No
used only for c	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?				┌ Yes	┌ No
	rvation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part I\	/, line 7.	
Preservation Protection Preservation Complete lines	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a	or education)  Preservation of a Preservation of a	certifie	d historic struc	ture	
easement on ti	he last day of the tax year			Held at the	End of the	Year
a Total number o	of conservation easements		2a	Tield de tile	Lila of the	i cui
Total acreage	restricted by conservation easements		2b			
Number of con	servation easements on a certified histo	ric structure included in (a)	2c			
	servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d			
	servation easements modified, transferr 	ed, released, extinguished, or termina	ed by th	ne organization	during	
Number of stat	es where property subject to conservati	on easement is located ►				
	nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, ha	ndling of	f violations, and	┌ Yes	┌ No
Staff and volun ▶	teer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	during the year		
•	enses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year		
Does each con and section 17	servation easement reported on line 2(o'0(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the in's accounting for conservation easeme	e footnote to the organization's financia				
Comple	izations Maintaining Collection etc. If the organization answered "Y	es" to Form 990, Part IV, line 8.				
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furthera		
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	ts held for public exhibition, education				ıc
(i) Revenues i	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) Assets Inc	luded in Form 990, Part X					
If the organiza	tion received or held works of art, histor nts required to be reported under SFAS					
Revenues inclu	uded in Form 990, Part VIII, line 1			<b>▶</b> \$		
	ed in Form 990, Part X			<u></u>		

Part	Organizations Maintaining Co	llections of Art, F	<u>listor</u>	<u>ical Tr</u>	<u>easu</u>	<u>res, or Oth</u>	<u>er Similar As</u>	<b>sets</b> (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check	any of t	he foll	owing that are	a significant use	of its
а	Public exhibition	•	d 「	Loan	or excl	nange progran	ıs	
b	Scholarly research		e 「	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how the	ey furthe	r the o	rganızatıon's	exempt purpose ı	n
5	During the year, did the organization solicit							
B	assets to be sold to raise funds rather than t							Yes No
Pal	Escrow and Custodial Arrang Part IV, line 9, or reported an an					i answered	res to Form 9	190,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?					or other assets	s not	☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing	table				
							An	nount
C	Beginning balance					10		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1?					┌ Yes
b	If "Yes," explain the arrangement in Part XII	I Check here if the ex	planat	ion has l	been p	rovided in Par	t XIII	Г
Pa	rt V Endowment Funds. Complete			red "Yes	s" to F	Form 990, Pa	art IV, line 10.	
		(a)Current year	<b>(b)</b> Prio		<b>b (c)</b> T\		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
е	Other expenditures for facilities			0		0	0	0
_	and programs			0		0	0	0
т	Administrative expenses	59,096,285		267,491		250,000	250,000	250,000
g	End of year balance	, ,	,, ,				230,000	
2	Provide the estimated percentage of the cur	rent year end balance of the control	(line 1	g, columi	n (a)) r	neld as		
а	Board designated or quasi-endowment	0 %						
Ь	Permanent endowment ► 99 900 %							
С	Temporarily restricted endowment $\blacktriangleright$ 0 1 The percentages in lines 2a, 2b, and 2c sho	00 % uld equal 100%						
3a	Are there endowment funds not in the posse	ssion of the organization	on that	are held	and a	dmınıstered fo	or the	
	organization by						Γ <u>.</u> .	Yes No
	(i) unrelated organizations						3a( 3a(	<del>-                                     </del>
b	(ii) related organizations						3t	<del></del>
4	Describe in Part XIII the intended uses of the	•					· · · <u></u>	<u> </u>
Par	Land, Buildings, and Equipme 11a. See Form 990, Part X, line		orga	nızatıon	ansv	vered 'Yes' t	o Form 990, Pa	rt IV, line
	Description of property			) Cost or c sis (investn		<b>(b)</b> Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				$\neg \dagger$	943,69	0	943,690
b	Buildings					130,150,24	0 29,680,414	100,469,826
c	Leasehold improvements					6,775,32	4 3,114,929	3,660,395
d	Equipment					7,106,63	1 2,184,861	4,921,770
_ e	Other							
Tota	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X, c	olumn	(B), line .	10(c).)	· · ·		109,995,681
							Schedule D	(Form 990) 2013

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
(-, ,	<b>F</b>	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	mplete if the organization	on answered 'Yes' to Form 990, Part IV, line 11c.
(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 99	0 Part IV line 11d See Form 990 Part X line 15
(a) Descri		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)	
	nızatıon answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.  (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	

Par		wered 'Yes' to Form 990, Part IV, line 12a.	n kevenue po	er keturn Complete ir
1		er support per audited financial statements		1
2	Amounts included on line 1 be	ut not on Form 990, Part VIII, line 12	Ī	
а	Net unrealized gains on inves	tments		
b	Donated services and use of	facilities		
C	Recoveries of prior year grant	zs		
d	Other (Describe in Part XIII	)		
e	Add lines <b>2a</b> through <b>2d</b> .			2e
3	Subtract line <b>2e</b> from line <b>1</b> .		[	3
4	Amounts included on Form 99	90, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII	)		
c	Add lines <b>4a</b> and <b>4b</b>			4c
5	Total revenue Add lines <b>3</b> an	d <b>4c.</b> (This must equal Form 990, Part I, line 12)	[	5
Part		xpenses per Audited Financial Statements Wi	th Expenses	per Return. Complete
	_	nswered 'Yes' to Form 990, Part IV, line 12a.		T . T
1		er audited financial statements		1
2		ut not on Form 990, Part IX, line 25		
a		acilities		
b				
С		<u>2c</u>		
d		)		
e	Add lines <b>2a</b> through <b>2d</b>			2e
3				3
4		0, Part IX, line 25, but not on line 1:		
а		luded on Form 990, Part VIII, line 7b 4a		
b	·	)		
C			ŀ	4c
5		nd <b>4c.</b> (This must equal Form 990, Part I, line 18)		5
	XIII Supplemental In			
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, , lines 2d and 4b, and Part XII, lines 2d and 4b Also comp		
	Return Reference	Explanation		
FORM LINE	990, SCHEDULE D, PART V,	THE ENDOWMENT CONSISTS OF FUNDS ESTABLISHE OF THE BILL, HILLARY & CHELSEA CLINTON FOUNDA		T THE ONGOING MISSIO
FORM	990, SCHEDULE D, PART X, 2	THE CLINTON FOUNDATION IS EXEMPT FROM INCOUNTERNAL REVENUE CODE AND A SIMILAR PROVISION OF THE CLINTON FOUNDATION IS SUBJECT TO FEDERAL INCOME THE CLINTON FOUNDATEDERAL JURISDICTION	ON OF STATE L COME TAX ON A	AW HOWEVER,THE ANY UNRELATED

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320090335

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

	e of the organization				Employer ident	ification number
BILL	. HILLARY & CHELSEA CLINTON	FOUNDATION			31-1580204	
Pa	<b>General Information</b> "Yes" to Form 990, Par		s Outside th	ne United States. Co	omplete if the organiz	ation answered
1	<b>For grantmakers.</b> Does the or other assistance, the grantee to award the grants or assista	es' eligibility fo	the grants or	assistance, and the s	election criteria used	d ✓ Yes ┌ No
2	For grantmakers. Describe in assistance outside the United	d States.				s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed )	
	<b>(a)</b> Region	<b>(b)</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	)					
ŀ	Sub-total Total from continuation sheets to Part I	11	73			20,835,025
•	c <b>Totals</b> (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) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount 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)								

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

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

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

## Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> </u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	<u>\</u>	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)	<b>∀</b>	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	<u>\</u>	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	Г	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).	Г	Yes	<u>~</u>	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 5

### Part V Supplemental Information

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

#### 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	<u> Part I - Activi</u>	<u>ties Outside T</u>	he 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		ECONOMIC DEVELOMENT	7,156,877
Sub-Saharan Africa	4	52	l <b>3</b>	CLIMATE & ECONOMIC DEV	4,979,000

Form 990 Schedı	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
			MOTHER/CHILD NUTRITION	390,430	WIRE TRANSFE			N/A			
		Central America and the Caribbean	EARTHQUAKE RECONSTRUCT	125,000	WIRE TRANSFE			N/A			
			CARBNCAPTURE CLIMATE WORK	73,087	WIRE TRANSFE			N/A			
			CARBNCAPTURE CLIMATE WORK	422,936	WIRE TRANSFE			N/A			

Form 990 Scheau	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, 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		
			AGRICULTURAL DEVELOPMENT	250,000	WIRE TRANSFE			N/A		
		Central America and the Caribbean	RECONSTRUCT	1,250,000	WIRE TRANSFE			N/A		

Form 990 Scheau	orm 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) 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		

DLN: 93493320090335

OMB No 1545-0047

**Supplemental Information Regarding** 

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

**Fundraising or Gaming Activities** 

Inspection

Name of the organization BILL HILLARY & CHELSEA CLINTON FOUNDATION **Employer identification number** 

31-1580204

Pa	<b>rt I Fundraising Activities.</b> Complete if the Form 990-EZ filers are not required to com	organization answered "Yes" to Form 990, Part IV, line 17. nplete this part.			
1	Indicate whether the organization raised funds through any of the following activities Check all that apply				
_	Madadashara	Colombata and Sanah and Sanah and Sanah			

Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations

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

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	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
AMERICAN MARKETING AND COMMUNICATIO	DIRECT MAIL MARKETING		No	222,173	75,000	147,173
<sup>2</sup> M R STRATEGIC SERVICES	EMAIL FUNDRAISING		No	1,763,490	110,970	1,652,520
3 COMMUNITY COUNSELLING SERVICE CO PO BOX 8244885 PHILADELPHIA, PA 19182	FUNDRAISING SERVICES		No	58,763,848	448,750	58,315,098
4						
5						
6						
7						
8						
9						
10						
Total			<b>.</b>	60,749,511	634,720	60,114,791

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, IA, 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

Sche	dule	G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		or order man group recorpted g	(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col (a) through
			LONDON GALA (event type)	RECEP./DINNERS (event type)	(total number)	col <b>(c)</b> )
<u>=</u>	1	Gross receipts	3,259,940	6,130,844	5,806,754	15,197,538
Revenue	2	Less Contributions	3,113,189	6,013,669	5,706,529	14,833,387
<u>~</u>	3	Gross income (line 1 minus line 2)	146,751	. 117,175	100,225	364,151
	4	Cash prizes				
မွာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	96,659	17,340	104,492	218,491
쬬	7	Food and beverages .	105,863	73,524	49,886	229,273
Direct	8	Entertainment	3,071	8,000	43,547	54,618
ā	9	Other direct expenses .	184,703	228,580	307,516	720,799
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n (d)		(1,223,181)
	11	Net income summary Subtract li	ine 10 from line 3, columr	n (d)		-859,030
Par	t III	<b>Gaming.</b> Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	ırt IV, lıne 19, or repo	rted more than
Revenue		<del>, , , , , , , , , , , , , , , , , , , </del>	(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
cpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u></u>	5	Other direct expenses				
	6	Volunteer labor	│	┌ Yes% ┌ No	厂 Yes <u>%</u> 厂 No	
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		
	8	Net gaming income summary Sub-	tract line 7 from line 1, co	olumn (d)		
9 a b	Ist	Enter the state(s) in which the organization operates gaming activities  Is the organization licensed to operate gaming activities in each of these states? Yes No  If "No," explain				. 「Yes 「No
10a b		re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?	

_		
_	_	
	_	

5			- 2					
			5?	· ·   Yes   No				
12		•	st or a member of a partnership or other entity					
12				····   Yes   No 				
13	Indicate the percentage of gaming a	•		120				
a b								
14								
17	Enter the name and address of the person who prepares the organization's gaming/special events books and records							
	Name 🟲							
	Address ►							
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?							
c	If "Yes," enter name and address of	If "Yes," enter name and address of the third party						
	Name 🟲							
	Address ▶							
16	Gaming manager information							
	Name 🕨	ame ▶						
	Gaming manager compensation ► \$							
	Description of services provided ▶							
17	Director/officer  Mandatory distributions	Employee	Independent contractor					
а	•	ate law to make charita	able distributions from the gaming proceeds to					
	retain the state gaming license?							
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	ın the organızatıon's own exempt act	ıvıtıes durıng the tax ye	ear 🕨 💲					
Pai		15b, 15c, 16, and 17	planations required by Part I, line 2b, co b, as applicable. Also complete this part					
	Return Reference		Explanation					
NAM OF P	EDULE G, PART I - IE AND ADDRESS PROFESSIONAL DRAISER	HAGERSTOWN, MD	KETING & COMMUNICATION CORP 14201 21742 2 M + R STRATEGIC SERVICES 21 20036 3 COMMUNITY COUNSELLING SER 19182	20 L STREET, NW, SUITE 400				

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

DLN: 93493320090335

OMB No 1545-0047

Schedule I **Grants and Other Assistance to Organizations**, (Form 990) 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 Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization BILL HILLARY & CHELSEA CLINTON FOUNDATION 31-1580204 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization cash valuation non-cash assistance section grant orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 11

I, LINE 2

🛛 Gran	ts and Other Assistance to Individuals in the United States	Complete if the organization answered	"Ves" to Form 990	Dart IV line 22
	II can be duplicated if additional space is needed.	. Complete if the organization answered	163 (0101111 330,	raitiv, iiile 22.

(a)Type of grant or assistand	ce	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance		
Part IV Supplemental I	nforma	<b>tion.</b> Provide the info	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.		
Return Reference	Explana	ition						
FORM 990, SCHEDULE I, PART	THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS DETAILING THE USE OF GRANT FUNDS THE RELEVANT							

#### **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>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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, Pai	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>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance				
ARCHITECTURE FOR HUMANITY 848 FOLSOM ST SAN FRANCISCO,CA 94107	30-0038297	501(c)(3)	402,448		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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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) A mount of cash grant	(e) A mount 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, Pai	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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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, Pai	orm 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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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 1, Pai	orm 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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, Pai	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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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	'	COMM ACTION SUPPORT					

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

BILL HILLARY & CHELSEA CLINTON FOUNDATION

DLN: 93493320090335

OMB No 1545-0047

**Schedule J** (Form 990)

# **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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

**Employer identification number** 

31-1580204

Pa	TEL Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II.					
	First-class or charter travel	<u>  -                                   </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do			1b		No
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe				,	
	directors, trustees, officers, filefulfing the CLO/LXE	cutive D	mector, regarding the items checked in line 1a.	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	nat apply				
	Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ıst comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		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 compensation contingent on the net earnings of	, lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII,	oaid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$ ?	e rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable benefits	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation		columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2013

### Part III Supplemental Information

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

Also complete this part for any additional information

- mee dempiete time parties and addition	o complete this partie and account 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							
FORM 990, SCHEDULE J, PART I,	THE AMOUNTS INCLUDED ON PART II, B(II) REPRESENT BONUSES THAT WERE INCLUDED IN THE 2013 W-2							

Schedule J (Form 990) 2013

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

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

DLN: 93493320090335

OMB No 1545-0047

### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

**Transactions with Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

www.irs.gov/form990.

Open to Public Inspection

Name of the or BILL HILLARY & CH		N FOUNDATION					E	Employ	er ident/	ificatio	n numbe	er
					(3) and sectio		organı	zatıoı			40h	
	e of disqualit				90, Part IV, line en disqualified				nsaction			rected?
<b>1 (a)</b> Nam	e or disquain	ned person		on and organ		(c) Des	cription	ortia	iisactioi	' ⊢		ı
			P							-	Yes	No
												-
												-
												-
												-
												-
												-
	amount of tax	x incurred by	organızatıon	managers o	r dısqualıfıed pe	rsons during t	he year	r unde	rsection	n		
4958 .									<b>-</b> \$			
<b>3</b> Enterthe a	amount of tax	x, ıf any, on lı	ne 2, above,	reımbursed l	by the organizat	ion			<b>F</b> \$			
		d/or From								2.5		
					990-EZ, Part \		Form 9	90, P	art IV , II	ne 26, o	or if the	
					1, line 5, 6, or 22		   		T (1-)			
(a) Name of interested	<b>(b)</b> Relationsh	(c) Nip Purpose	(d) Loar		(e)Original principal	(f)Balance due	(g) In		(h) Approv	od.	(i)Wr	
person	with	loan	organizat		amount	due	laciaui		by	eu	agreer	nenc.
F	organizatio	1							board			
	-								or			
									commi	ttee?		_
			То	From			Yes	No	Yes	No	Yes	No
											_	
											_	
											_	
											_	
otal		<b> </b> ▶ s				l				1	٦	
	anto or Ac		onofitting	. Intoroct	ad Darsans		_					
					<b>ed Persons.</b> n Form 990, P	art IV line	27					
(a) Name of Ir	•					<del> </del>				<b>\</b> D		
(a) Name of it		interested p	ship betwee	1	unt of assistanc	e (a) ryp	e or ass	istant	.e   ( <b>e</b>	Purpos	se or ass	sistance
perso	''		ızatıon									
						<u></u>						
				_								
				_								

Part IV Business Transactions Complete if the organizati			ne 28a. 28b. or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's
				Yes	No
(1) FONDO ACCESO SAS	ENTITY-B LINDSEY DIRECTOR	1,175,250	PROGRAM-RELATED INVESTMENT		No
					1

### Part V Supplemental Information

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

Return Reference	Explanation
, ,	NO DIRECTORS OF FONDO ACCESO ARE PAID OR RECEIVE ANY SHARE OF PROFITS THIS AMOUNT REPRESENTS A CONTRIBUTION MADE THROUGH ACCESO FUND LLC, A RELATED PARTNERSHIP REPORTED ON SCHEDULE R

Schedule L (Form 990 or 990-EZ) 2013

BILL HILLARY & CHELSEA CLINTON FOUNDATION

DLN: 93493320090335

OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury

Internal Revenue Service

**SCHEDULE M** 

(Form 990)

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

► Attach to Form 990.

**Noncash Contributions** 

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

**Employer identification number** 

				31	-1560204			
Pa	rt I Types of Property	T			1			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr			nts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods	X		116,567	MARKET LIST P	RICE		
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	16	361 014	CASH REC'D OI	N SALI		
	Securities—Closely held stock .		10	301,014	CASITICE D' 01	1 JAL		
	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 P	RICE		
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other▶( 1PUTERS DONATED)	X	1	100,000	FM∨			
	·	-						
	Other►() Other►( )							
	Other ► ( )							
	Number of Forms 8283 received by th	L organizat	ion during the tay year for	contributions	1			
23	for which the organization completed F				9			1
	•	·	•	_			Yes	No
30a	During the year, did the organization	receive by	contribution any property r	reported in Part I, lines 1	through 28, that			
	it must hold for at least three years fr	om the date	e of the initial contribution,	, and which is not require	d to be used			
	for exempt purposes for the entire ho	ldıng period	,			30a		Νo
ь	If "Yes," describe the arrangement in							
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
32a	Does the organization hire or use thir contributions?		related organizations to s	olicit, process, or sell no	ncash • • •	32a		No
h	If "Yes," describe in Part II					524		110
33	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	is checked			
	describe in Part II	ount in co	(e) for a cype of prop	c.t, for which column (a)	is effected,			

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

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320090335

OMB No 1545-0047

2013

Open to Public
Inspection

### 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.

Name of the organization BILL HILLARY & CHELSEA CLINTON FOUNDATION

Employer identification number

31-1580204

F -	T _	
Return Reference	Explanation	
	FORM 990, PAGE 1, ITEM B - AMENDED RETURN	THE FOUNDATION IS VOLUNTARLY A MENDING ITS 2013 FORM 990 CHANGES TO PART I (SUMMARY) PART TILLINES 8 - 11 AND LINE 17 FOR PRIOR YEAR (2012) ARE AMENDED IN TORFILLET AN AMENDED 2012 FORM 990 CHANGES TO PART VI (STATEMENTS REGARDING OF CHANGES IN PARTS VIII AND IX, AS OUTLINED BELOW CHANGES TO PART VI (STATEMENTS REGARDING OF CHANGES IN PARTS VIII AND IX, AS OUTLINED BELOW CHANGES TO PART VI (STATEMENTS REGARDING OF CHANGES AND TAX COMPLIA NCE) AND SCHEDULE O (SUPPLEMENTAL INFORMATION TO FORM 990) PART VI, LINE 81 INSTRUCTS THAT THE ANMES OF FOREIGN COUNTIES IN WHICH THE FOUNDATION HAS AN INTEREST IN, OR SIGNATURE OR OTHER AUTHORITY OVER A FINANCIAL ACCOUNTS SHOULD BE LISTED ON SCHEDULE O. CHANGES A REMAIN DE TO THER AUTHORITY OVER A FINANCIAL ACCOUNTS ON A PROPERTY OF PRECIDENCY OF THE AMENDED PLING IS CONSISTENT WITH THE FOREIGN COUNTIES REPORTED ON THE FOUNDATIONS PROPRIED FOREIGN BANK AND FINANCIAL ACCOUNTS ON HOSE TO PART VI (GOVERNANCE, MANAGEMENT, AND DISCLOSURE) PART VI, SECTION, LINE 17 IS UP DATED TO LIST STATES WHERE THE FOUNDATIONS FOR PROPRIED FOR PRECIDENCY OF A CHANGES TO PART VIII (SOME NAME OF A PART VI (SOCIETION, LINE 18 REQUIRED TO THE MANNER IN WHICH THE FOUNDATIONS FORMS 1023, 990, AND 990.7 WHERE MADE AVAILABLE FOR FULLION ISSUED TO THE FOUNDATION AND RELATION OF THE FOUNDATION OF THE FOUNDATION AND RELATION OF THE FOUNDATION OF THE FOUNDATION OF THE FOUNDATION OF PART ASSETS). SCHEDULE A (FILLIC CHANGES TO PART VIII (STATEMENT OF PROCRAMS PART VIII (SUMMARY), PART III (STATEMENT OF PROCRAMS SERVICE ACCOMPLISHMENTS), PART XI (SUMMARY), PART III (STATEMENT OF PROCRAMS SERVICE ACCOMPLISHMENTS), PART XI (SUMMARY), PART III (STATEMENT OF PART VIII (SUMMARY), PART III (STATEMENT OF PART VIII (SUMMARY), PART III (STATEMENT

Return Reference	Explanation	
	FORM 990, PAGE 1, ITEM B - AMENDED RETURN	PORTS ACCESO FUND LLC AND FONDO ACCESO SAS AS RELATED ENTITIES. IN ADDITION, THERE ARE SEVERAL ENTITIES THAT WERE CREATED IN 2013 FOR FUTURE USE AS PROGRAM RELATED INVESTMENTS THAT ARE NOW REPORTED. THESE ARE AS FOLLOWS. ACCESO OFERTA LOCAL - PRODUCTOS DE EL SALVADOR, A CCESO CASHEW ENTERRISE LIMITED, TUKULA FARMING COMPANY LTD. AND ACCESO OFERTA LOCAL - PRODUCTOS DEL CARIBE LASTLY A PROGRAM INVESTMENT MADE IS NOW REPORTED AS A PARTNERSHIP, CIUD AD VERDE AMARILO TRIADA FRAILEJON III. IN ADDITION, THIS AMENDED FORM 990 REPORTS IN SCHEDULE R, PART I TWO RELATED ENTITIES AS DISREGARDED ENTITIES. TWO ADDITIONAL ENTITIES REPORTED AS DISREGARDED ENTITIES, ACACIA DEVELOPMENT CO. AND ACCESO WORLDWIDE FUND, INC., HAVE BEEN DETERMINED TO BE CORPORATIONS. THE ADDRESSES OF THREE ENTITIES ARE UPDATED TO THE ADDRESSES AS OF THE TIME OF FILING OF THIS AMENDED RETURN. THE FORM 990 INCLUDES ADDITIONAL IN FORMATION RELATING TO THESE ENTITIES, WHICH IS SHOWN IN SCHEDULE F, PART IV, LINE 5 AND SCHEDULE R, PARTS I, II, III, IV AND V. CHANGES TO SCHEDULE J. (COMPENSATION INFORMATION). THE RESPONSE TO SCHEDULE J., PART I, LINE 7 IS UPDATED TO "YES" AND A DISCLOSURE IS INCLUDED IN PART III CHANGES TO SCHEDULE L. (TRANSACTIONS WITH INTERESTED PERSONS). SCHEDULE L., PART V. ADDED A SENTENCE EXPLAINING THAT THE AMOUNT REPORTED IN SCHEDULE L., PART IV IS A CONTRIBUTION OF CAPITAL MADE THROUGH ACCESO FUND LLC. CHANGES TO HEADING AND SCHEDULE O. (SUPPLE MENTAL INFORMATION TO FORM 990). THE PRINCIPAL OFFICER IN ITEM F IS UPDATED, WITH AN EXPLA NATION ADDED IN SCHEDULE O. THE DISCLOSURE FOR PART VI, SECTION B, LINE 11 IS UPDATED TO A DDRESS THE REVIEW PROCESS OF THE AMENDED FORM 990. THE DISCLOSURE FOR PART VI, SECTION B, LINE 16B IS UPDATED TO REMOVE A SENTENCE A DISCLOSURE FOR PART VIII, LINE 11B. A DISCLOSURE FOR PART XI, LINE 9 IS UPDATED TO REVENUE AND EXPLASES REPORTED ON PART VIII, LINE 11B. A DISCLOSURE FOR PART XI, LINE 9 IS UPDATED TO CLARIFY THE PROVISION FOR UNCOLLECTIBLE PLEDGES IS FOR A PRIOR YEAR.

Т

Return Reference	Explanation
FORM 990, PAGE 1, ITEM F	ERIC BRAVERMAN WAS PRINCIPAL OFFICER AT TIME OF FILING THE ORIGINAL 2013 FORM 990 DONNA E SHALALA IS PRINCIPAL OFFICER AT TIME OF FILING THE AMENDED 2013 FORM 990

Return Reference	Explanation
	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

Return Reference	Explanation
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 BEJING 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 Explanation Reference	
FORM 990, PART III. ABILSHED THE WILLIAM J. CLINTON FOLING TO TRANSFORM LIVES AND COMMUNTES REPORT ABILSHED THE WILLIAM J. CLINTON FOLING TO TRANSFORM LIVES AND COMMUNTES REPORT ARE TOAN YO WHAT THEY CAMBE TO MODROW BY BUILDING PRETINERSHIPS BETWEN BUSINES NOS S. GOVERNMENTS. AND HOW DULLS E VERYWHERE. N. 2013, TO RECORDING THE COMPRESSIONS SECRETARY CLINTON AND CHEESE THE POLING ATTOM WAS ERRANDED THE BILL HELLARY. SO CALL TO THE THE FOLING ATTOM WAS ERRANDED THE BILL HELLARY. SO CALL CLINTON TO THE FOLING THE POLING AND THE CLINTON FOLING THE POLING AND THE POLING AND THE POLING FOLING THE POLING AND THE PO	ATTH SSOFIN SOLEA

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, SUPPLY CHAIN AND TRAINING CENTER BY 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 BYTERPRISES IN CARTAGENA, COLOMBIA, AND LAUNCHED A FEMALE BYTERPREIDE DISTRIBUTION VENTURE, CHAINE, IN SOUTHERN PEOPL, TO SUPPORT LIFE-CHANGING INCOME OPPORTUNITIES FOR 3,000 WOMEN - THE CLINTON GLOBAL INIT IATIVE'S (CG) MISSION IS TO INSPIRE, CONNECT, AND EMPOWER EVERY ONE TO FORCE SOLUTIONS TO THE WORLD'S MOST PRESSING CHAIL BRIGGS CGI CONVENES LEADERS FROM THE PRIVATE SECTOR, RUBLIC SECTOR, AND CYNLE SOCIETY TO DRIVE ACTION THROUGH ITS UNIQUE MODEL. RATHER THAN DIRECTLY IMPLEMENTING PROJECTS, CGI HELPS ITS MEMBERS TURN IDEAS INTO ACTION BY MAKING IMPACTFUL AND 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 UNIVERSITY, CGI AMERICA, AND CGI INTERNATIONAL. CGI MEMBERS MADE MORE THAN 300 COMMITMENTS IN 2013, VALUED AT OVER \$12.9 BILLION THAT, WHEN FILLY FUNDED AND IMPLEMENTED, WILL IMPACT THE LIVES OF MORE THAN 22.2 MILLION PEOPLE - THE CLINTON HEALTH ACCESS INITIATIVE WORKS TO ADDR ESS THE HIV/AIDS CRISS IN THE DEVELOPING WORLD AND STRENSTHEN HEALTH'S YEAR'S THAN THE LIVES OF MORE THAN 22.2 MILLION PEOPLE - THE CLINTON HEALTH ACCESS INITIATIVE HAS IMPROVED MARKETS FOR MEDICINES AND DIAGNOSTICS, LOWERD THE COSTS OF TREATMENT, AND EXPANDED ACCESS TO CHAIN PEOPLE AND MORE THAN 70 COUNTRIES HAD ACCESS TO CHAIN PEOPLE DAY ONE THAN THE CLINTON HEALTH ACCESS INITIATIVE (CHAI) HAS SINCE EXP ANDED THIS MODEL TO INCREASE ACCESS TO HIG

Return Reference	Explanation
PART III, LINES 4A-4D IIN CONTINUED E CONTINUED C S W B P C T T R T A T IS S T W W T W W T T T T T T T T T T T T	THE WILLIAM J. CLINTON PRESIDENTIAL CENTER (CENTER) IS THE HOME OF THE LITTLE ROCK OFFICES OF THE CLINTON FOUNDATION, THE CLINTON LIBRARY AND MUSEUM, AND THE CLINTON SCHOOL OF PUBLIC SERVICE, THE FIRST INSTITUTION IN THE NATION TO OFFER A MASTER'S OF PUBLIC SERVICE (MPS) DEGREE. THE CENTER HOSTS A VARIETY OF EDUCATIONAL PROGRAMS, WORLD-CLASS LECTURES, AND UNIQUE EXHIBITS EACH YEAR, AND IS A PLACE WHERE PEOPLE COMETO LEARN ABOUT THE HISTORY OF THEIR COUNTRY AND THE WORLD, AND BE INSPIRED TO ENGAGE IN PUBLIC SERVICE SINCE ITS GRAND OPENING IN 2004, THE CENTER HAS WELCOMED THREE MILLION VISITORS FROM AROUND THE WORLD IN 2013, THE CENTER HOSTED A SYMPOSIUM ON INTELLIGENCE AND PRESIDENTIAL POLICY MAKING DURING THE BOSNIAN WAR AND DEVELOPED AN EXHIBIT EXPLORING PRESIDENT CLINTONS ROLE IN THE NORTHERN RELAND PEACE PROCESS FOR THE CLINTON CENTER IN ENNISKILLEN, NORTHERN RELAND - TOO SMALL TO FAIL, A JOINT INITIATIVE OF THE CLINTON FOUNDATION AND NEXT GENERATION WHICH WAS LAUNCHED IN 2013, AIMS TO HELP PARRIES AND BUSINESSES TAKE MEANINGFUL ACTIONS TO IMPROVE THE HEALTH AND WELL-BEING OF CHILDREN AGES ZERO TO FIVE, SO THAT MORE DEAMER'S CHILDREN ARE PREPARED TO SUCCEED IN THE 21ST CENTURY TOO SMALL TO FAIL WORKS TO PROMOTE NEW RESEARCH ON THE SCIENCE OF CHILDREN'S BRAIN DEVELOPMENT, EARLY LEARNING AND EARLY HEALTH, AND HELPS PARENTS, BUSINESSES, AND COMMUNITIES IDENTIFY SPECIFIC ACTIONS, CONSISTENT WITH THE NEW RESEARCH, THAT THEY CAN TAKE TO IMPROVE THE LIVES OF YOUNG CHILDREN IN 2013, TOO SMALL TO FAIL WORKS TO PROMOTE NEW RESEARCH ON THE SCIENCE OF CHILDREN'S BRAIN DEVELOPMENT, EARLY LEARNING AND EARLY HEALTH, AND HELPS PARENTS, BUSINESSES, AND COMMUNITIES IDENTIFY SPECIFIC ACTIONS, CONSISTENT WITH THE NEW RESEARCH, THAT THEY CAN TAKE THE PROVE THE LIVES OF YOUNG CHILDREN IN 2013, TOO SMALL TO FAIL RELEASED A STRATEGIC ROADWAP DELINEATING A TWO-FRONGED APPROACH A PUBLIC AWARENESS CAMPAIGN, AND A CALL TO ACTION FOR THE PRIVATE SECTOR TO MAKE COMMITMENTS AND BREAK DOWN ECONOMIC BARRIERS TO VOCABULARY DEVELOPMENT SAND B

Return Reference	Explanation
FORM 990, PART V, LINE 4B - FOREIGN	- AUSTRALIA - COLOMBIA - INDIA - INDONESIA - KENYA - MALAWI - PERU - RWANDA -
COUNTRIES	TANZANIA - UKRAINE - VIETNAM

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 BY LAWS 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 BY LAWS THE AMENDED AND RESTATED BY LAWS 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
' '	A COPY OF THE FORM 990 WAS CIRCULATED TO THE BOARD, AMONG THE VARIOUS OFFICERS AND AMONG THE VARIOUS INITIATIVE HEADS FOR REVIEW PRIOR TO FILING A COPY OF THE AMENDED FORM 990 WAS CIRCULATED TO THE BOARD, AMONG THE VARIOUS OFFICERS AND AMONG THE VARIOUS INITIATIVE HEADS FOR REVIEW PRIOR TO FILING

Return Reference	Explanation
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
VI, SECTION B, LINE	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

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 VIII, LINE 11(B)	CDI FARMING IS A PROGRAM RELATED ACTIVITY THE REVENUE FROM THIS ACTIVITY IS \$512,414 AND THE EXPENSES FROM THIS ACTIVITY ARE \$1,289,284

Return Reference	Explanation
XI, LINE 9	OTHER CHANGES IN NET ASSETS PROVISION FOR PRIOR YEAR UNCOLLECTIBLE PLEDGES (\$ 225,000) TRANSFER FROM CLINTON GLOBAL INITIATIVE (MERGER) \$2,383,668 REFUND OF PRIOR YEAR CONTRIBUTION REVENUE (\$1,668,675) TOTAL \$ 489,993

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

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

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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

**DLN: 93493320090335**OMB No 1545-0047

2013

Open to Public Inspection

Schedule R (Form 990) 2013

Name of the organization BILL HILLARY & CHELSEA CLINTON FOUNDATION Employer identification number

31-1580204

Part I Identification of Disregarded Entities Complete	e if the organization a	nswered "Yes" on	Form 990, Part	: IV, line 33.			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) William J Clinton Fdn (Kenya) Char Trust ARGWINGS KOHEK ROAD NAIROBI KE	CF PROGRAMS	KE	171,613	0	BHCC FDN		
(2) CLINTON FOUNDATION HONG KONG 16/F TAK SHING HOUSE THEATER LN HONG KONG HK	CF PROGRAMS	нк	0	0	BHCC FDN		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	<b>ations</b> Complete if the tax year.	e organization ans	wered "Yes" o	n Form 990, Pa	rt IV, line 34 because	ıt had oı	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity s (if section 501(d		Section (13) contact en	<b>g)</b> n 512(b ontrolle tity?
(1) WILLIAM J CLINTON FOUNDATION UK	FUNDRAISING	UK			BHCC FDN	Yes Yes	No
Acre House 11-15 London,UK UK							
(2) CLINTON GLOBAL INITIATIVE	INITIATIVE	AR	501(c)(3)	11B	BHCC FDN	Yes	
1200 PRESIDENT CLINTON AVE							
LITTLE ROCK, AR 72201 27-1551550							
	HEALTH	AR	501(c)(3)	7	BHCC FDN	Yes	
383 DORCHESTER AVE							
BOSTON, MA 02127 27-1414646							
(4) CLINTON FOUNDATION INSALINGSSTIFTELSE	FUNDRAISING	SW			BHCC FDN	Yes	
TORNGREN MAGNELL VAST TRADGARD 8 STOCKHOLM SE-111 53 SW							

Cat No 50135Y

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.

						T (=)	T 4		T (:)	<del></del>		(1)
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	r entity	(e) Predominant income(related, unrelated, excluded from		(g) Share of end- of-year assets	(h) Dispropri	prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1	Gene mana part	( <b>j)</b> eral or naging tner?	<b>(k)</b> Percentage ownership
		country)		tax under sections 512- 514)					(Form 1065)			
				ŕ	<u> </u>	<b></b>	Yes	No		_	No	
(1) HAITI DEVELOPMENT FUND LLC	INVESTMENT	DE	NA	RELATED	-27,083	300,154		No	0	Yes		50 000 %
3819678 1271 Ave of Americas NEW YORK, NY 10020 45-3819678												
(2) ACCESO FUND LLC	INVESTMENT	DE	NA	RELATED	-667,967	2,003,919		No	0	Yes		50 000 %
1271 Avenue of Americas NEW YORK, NY 10020 27-2075171												
	FRUIT & VEG SPPLY		ACCESO WORLDWID	RELATED	0	0		No	0		No	99 990 %
CALLE EL MIRAADOR Y 93 AVENIDA NORTE,, SAN SALVADORE ES												
(4) CIUDAD VERDE AMARILO TRIADA FRAILEJONIII	INVESTMENT	СО	BHCC FDN	RELATED	71,318	902,061		No	0		No	77 210 %
Calle 67 No 7- 37 Piso 3 BOGOTA CO												

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i Section (b)( contro entr	n 512 13) olled ty?
								Yes	No
(1) ACACIA DEVELOPMENT CO	INVESTMENT	DE	BHCC FDN	C CORP	0	0	100 000 %	Yes	
1271 Avenue of Americas NEW YORK, NY 10020									
(2) ACCESO WORLDWIDE FUND INC	INVESTMENT	DE	BHCC FDN	C CORP	0	0	100 000 %	Yes	
1271 AVENUE OF AMERICAS NEW YORK, NY 10020 46-4160920									
(3) FONDO ACCESO SAS	INVESTMENT	СО	ACCESO FUND LLC	C CORP	22,322	1,361,172	50 000 %		No
CALLE 93A NO 14-17 OF 709 BOGOTA CO									
(4) ACCESO CASHEW ENTERPRISE LIMITED	Cashew Processing	IN	ACCESO WORLDWID	C CORP	0	0	100 000 %	Yes	
Office No 201 Kohinoor Paradise AROGYA, Maharashtra IN									
(5) TUKULA FARMING COMPANY LTD	FARMING	MI	ACACIA DEVLP CO	C CORP	0	0	100 000 %	Yes	
REALTY HOUSE CHURCHILL ROAD PO BOX 5133, LIMBE MI									
(6) ACCESO OFERTA LOCAL- PRODUCTOS DEL CARIBE	Fish & Seafood Su	СО	FONDO ACCESO SA	C CORP	-104,598	795,579	50 000 %		No
Diagonal 31 No 100 - 115 Cartegena, Colombia CO									

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 organization engage in any of the following transactions with one or more in	related organizations l	sted in Parts II-IV?							
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
<b>b</b> Gift, grant, or capital contribution to related organization(s)									
<b>c</b> Gift, grant, or capital contribution from related organization(s)				<b>1</b> c	Yes				
<b>d</b> 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			
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k		No			
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No			
<b>m</b> 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				
• Sharing of paid employees with related organization(s)				10		No			
<b>p</b> Reimbursement paid to related organization(s) for expenses				<b>1</b> p	Yes				
<b>q</b> 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 complet		overed relationships	and transaction thresholds						
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	nvolved				
See Additional Data Table	type (d s)								

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

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

revenue) that was not a related organization. See instructions													
(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-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations'		(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
									_		1	1	
			I		1				_	1		•	

Schedule R (Form 990) 2013

### Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013

### **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

Form 990, Schedule R, Part V - Transactions with Related Organizations			
(a) Name of other organization	<b>(b)</b> Transaction type(a-s)	(c) A mount I nvolved	(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	В	2,000,000	FMV
CLINTON FOUNDATION INSALINGSSTIFTELSE	С	9,969,393	FMV
CLINTON HEALTH ACCESS INITIATIVE	р	1,191,864	FMV
ACCESO FUND LLC	В	1,175,000	FMV
CIUDAD VERDE AMARILO TRIADA FRAILEJON III	S	528,632	