Form	990-T	Exemp	ot Organization Bus	iness In	come	Tax Return	(and proxy	tax under secti	on 6033(e))	OMB	No. 1545-0687		
	For calendar year 2012 or other tax year beginning , 2012, and									2012			
	I Revenue Service	<u> </u>	ending	, 20			e separate i				Public Inspection for Organizations Only		
A L	Check box if address changed		Name of organization (X	Check bo	ox if nar	ne changed and s	ee instruction	s.)			cation number ee instructions.)		
ВЕхе	mpt under section	1	BILL, HILLARY	& CHE	LSEA	CLINTON	FOUNDA	TION					
X	501(C <u>)(3</u>)	Print	Number, street, and room	or suite no. I	faP.O.	box, see instructi	ons.		31-1	580204			
	408(e) 220(e)	or Type								lated businenstructions.)	ess activity codes		
	408A530(a)		1200 PRESIDEN	T CLIN	TON	AVENUE			(300 11	istructions.)			
	529(a)		City or town, state, and ZIP										
	k value of all assets nd of year		LITTLE ROCK,	AR 722	01				7223	320			
	•		up exemption number (se										
			ck organization type				501(c		401(a)	trust	Other trust		
			rimary unrelated busines										
	-		corporation a subsidiary		_		-subsidiary o	controlled group	?	▶ ∟	Yes X No		
			identifying number of the	parent cor	rporation	on. ►			501-74	0 0471			
			ANDREW KESSEL			(4) 1		C Hamber P		0-0471	(0) 11 (
			2,406,835.	•		(A) Inc	ome	(B) Exp	enses		(C) Net		
1 a						2 40	6,835.						
ь	Less returns and allows			Balance >			9,180.						
2	_		ule A, line 7)		2		7,655.				1,597,655.		
3			2 from line 1c		3	1,00	7,055.				1,007,000.		
4a			ttach Schedule D)		4a								
b			Part II, line 17) (attach Form		4b 4c								
с 5			ps and S corporations (attach										
6			ps and 3 corporations (attach	-	6								
7			come (Schedule E)		7								
8			ties, and rents from o		<u> </u>								
·					8								
9			section 501(c)(7), (9),										
					9								
10			ncome (Schedule I)		10								
11			lule J)		11								
12			tions; attach statement).		12								
13	Total. Combine li	nes 3 thre	ough 12		13	1,59	7,655.				1,597,655.		
Par			Taken Elsewhere (s		uctio	ns for limita	tions on c	eductions)	except fe	or contrib	outions,		
	deduction	ıs must	be directly connect	ed with t	he ur	related busi	ness inco	me)					
14	Compensation of	officers,	directors, and trustees (S	chedule K)					14				
15	Salaries and wage	es							15		970,096.		
16													
17											3,906.		
18													
19													
20			see instructions for limitat						20				
21			4562)						—				
22			on Schedule A and elsev						22k				
23													
24			compensation plans								285,618.		
25 26			Schedule I)								2007010.		
27													
28			chedule J)								518,735.		
29			s 14 through 28								1,778,355.		
30			e income before net ope								-180,700.		
31			on (limited to the amoun	_									
32			e income before specific								-180,700.		
33			ally \$1,000, but see line				-		🛌		1,000.		
34			le income. Subtract line										
	enter the smaller					_			34		-180,700.		

JSA For Paperwork Reduction Act Notice, see instructions. 2E1610 1.000

PAGE 67

Par	t III	Tax Computation							
35	Organi	zations taxable as corpo	rations (see instruction	s for tax computat	tion). Controlled gre	oup			
	member	s (sections 1561 and 1563) cho	eck here See ins	tructions and:					
а		our share of the \$50,000, \$25			ets (in that order):				
	(1) \$	(2)		(3) \$					
b		ganization's share of: (1) Addition			\$				
-	(2) Addi	tional 3% tax (not more than \$10	0.000)	,,.	\$				
С		tax on the amount on line 34 .				▶ 35	5c		
36	Trusts	taxable at trust rates	(see instructions for						
	the amo	unt on line 34 from: Tax ra	te schedule or So	chedule D (Form 1041))	. ▶ 3	6		
37		ax (see instructions)				-			
38		ive minimum tax							
39	Total. A	dd lines 37 and 38 to line 35c or	36, whichever applies			3			
Par		Tax and Payments				, .			
		tax credit (corporations attach F	orm 1118: trusts attach For	m 1116) 40	a				
b	-	redits (see instructions)	· ·	· · · · · —					
С		business credit. Attach Form 380			С				
d		or prior year minimum tax (attach							
		edits. Add lines 40a through 40d					0e		
41		t line 40e from line 39					1		
42		es. Check if from: Form 4255							
43		x. Add lines 41 and 42			_		3		
44 a		ts: A 2011 overpayment credited		1	1	–	<u> </u>		
		timated tax payments							
c		osited with Form 8868							
d		organizations: Tax paid or withhe							
e	-	withholding (see instructions) .	•						
f		or small employer health insuran							
g g		redits and payments:	Form 2439	,	'				
3		orm 4136	Other	Total ► 44	a				
45		yments. Add lines 44a through 4				4	.5		
46	-	ed tax penalty (see instructions).	-			\Box	6		
47		. If line 45 is less than the total of				-			
48		ment. If line 45 is larger than the							
49		amount of line 48 you want: Credited		enter amount overpaid	Refunde				
Par	t V	Statements Regarding	Certain Activities	and Other Inforn	nation (see instru		-		
1		ime during the 2012 calendar ye					ver a financi	ial Yes	No
	•	(bank, securities, or other) in a fo	•		•	•			
		d Financial Accounts. If "Yes," ent						X	
2		he tax year, did the organization				foreign	trust?	-	Х
		see instructions for other forms the			,			·	
3	Enter th	e amount of tax-exempt interest	received or accrued during	the tax year ▶\$					
Sch		A - Cost of Goods Sold.			FIFO				
1		y at beginning of year . 1			l of year		6		
2		es 2	809,180.		ls sold. Subtract				
3		abor 3		6 from line	5. Enter here and	in			
4 a		al section 263A costs				- 1	,	809,	180.
	(attach	statement)4a			of section 263A			to Yes	No
b		osts (attach statement). 4b		1	uced or acquired	•			
5		dd lines 1 through 4b . 5	809,180.		on?		,	- 1 1	X
	Under	penalties of perjury, I declare that I have		accompanying schedules a	nd statements, and to the	best of m	y knowledge a	nd belief, it	is true
Sign	correct	, and complete. Declaration of preparer (oth	er than taxpayer) is based on all inf	ormation of which preparer ha	as any knowledge.		the IDO dies	41-1-	
Her				•		with	the IRS disc the preparer	r shown l	
		ature of officer	Date	Title		(see ins	structions)? X	Yes	No
		Print/Type preparer's name	Preparer's sign	gnature	Date	Check	if PTIN		
Paid		ERNIE SKYRME				self-empl		135326	52
	arer	Firm's name ▶ BKD, LLP	'			Firm's Ell	110	160260)
use	Only	Firm's address P.O. BOX	3667			Phone no	F 0 1	372-10	140
	_			_		_			$\overline{}$

BILL, HILLARY & CHELSEA CLINTON FOUNDATION

LITTLE ROCK, AR 72203-3667

Form **990-T** (2012)

Page 3 Form 990-T (2012)

Schedule C - Rent Income (see instructions)	e (From Real P	roperty	and	Personal Prope	rty	Leased W	ith Real Prope	erty)	r age •	
Description of property										
(1)										
(0)										
(3)										
(4)										
(4)	2 Rent receiv	ed or acc	rued							
for personal property is more than 10% but not percen				n real and personal pro e of rent for personal pro the rent is based on pro	exceeds			nnected with the income) (attach statement)		
(1)										
(2)										
(3)										
(4)										
Total		Total								
(c) Total income. Add totals of c here and on page 1, Part I, line 6	. ,	o). Enter					(b) Total deducti Enter here and o Part I, line 6, colu	n page 1,		
Schedule E - Unrelated D	ebt-Financed Ir	ncome	(see	instructions)						
1. Description of del	bt-financed property			2. Gross income from allocable to debt-finance			debt-finan	onnected with or allocable to need property		
1. Description of depermanded property			\perp	property			line depreciation statement)	(b) Other deductions (attach statement)		
(1)			\perp							
(2)			\perp							
(3)										
(4)										
4. Amount of average acquisition debt on or allocable to debt-financed property (attach statement) 5. Average adjus of or allocal debt-financed (attach statement)				6. Column 4 divided by column 5			7. Gross income reportable (column 2 x column 6)		illocable deductions in 6 x total of columns 3(a) and 3(b))	
(1)					%					
(2)					%					
(3)					%					
(4)					%					
Totals		 Jumn 8 .			>	Part I, line	and on page 1, 7, column (A).		nere and on page 1, line 7, column (B).	
Schedule F - Interest, Ani	nuities. Rovalti	es. and	Ren	ts From Contro	led	Organizat	ions (see instru	uctions)		
				npt Controlled Org			(000 1110111	20110110)		
1. Name of controlled 2. Employer organization identification number			3. N	let unrelated income ss) (see instructions)	4 . T	otal of specified	5. Part of column included in the corganization's gro	controlling	6. Deductions directly connected with income in column 5	
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organ	nizations								·	
7. Taxable Income 8. Net unrelated income (loss) (see instructions)			inc		includ	10. Part of column 9 that is included in the controlling organization's gross income		11. Deductions directly connected with income in column 10		
(1)										
(2)										
(3)										
(4)			\top							
						Enter	columns 5 and 10. here and on page 1, , line 8, column (A).	En	dd columns 6 and 11. ter here and on page 1, art I, line 8, column (B).	
Totals						>			5 000 T (00.40)	

Form **990-T** (2012)

Form 990-T (2012)				SEA CLINTON					580204	Page 4
Schedule G - Investment In	come of a Sec	tion 501(c)	(7), (nizat	ion (see inst	ruct	ions)		
1. Description of income	income		3. Deductions directly connected (attach statement)		4. Set-asides (attach statement)			 Total deductions and set-asides (col. 3 plus col. 4) 		
(1)										
(2)										
(3)										
(4)										
	Enter here and Part I, line 9, co								Enter here ar Part I, line 9,	
Totals ▶										
Schedule I - Exploited Exe	mpt Activity In	come. Other	r Tha	n Advertising In	com	e (see instru	ction	ns)		
2. Gross unrelated 1. Description of exploited activity business income from trade or business		3. Expenses directly connected wi production o unrelated business incor	ith of	4. Net income (loss) from unrelated trade or business (column 2 minus column is		5. Gross income for activity that attributable attributable		6. Expenses ttributable to column 5	exp (colum column mor	ss exempt enses n 6 minus 5, but not e than mn 4).
(1)										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and page 1, Part line 10, col. (E	Ι,						on p	here and page 1, , line 26.
Totals										
Schedule J - Advertising In										
Part I Income From Peri	iodicals Report	ed on a Con	nsolic	dated Basis						
1. Name of periodical	2. Gross advertising income	3. Direct advertising cos	sts	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		6. Readership costs		costs (minus co not m	s readership column 6 dumn 5, but ore than mn 4).
(1)			$\neg \uparrow$						+	
(2)			\neg						\dashv	
(3)			$\neg \neg$						\dashv	
(4)			$\neg \neg$						\dashv	
(1)			$\overline{}$							
Totals (carry to Part II, line (5))										
Part II Income From Per	iodicals Report	ted on a Sen	parate	e Basis (For ea	ch pe	eriodical liste	ed i	n Part II. fi	II in colur	nns 2
through 7 on a line				2 24010 (1 01 04	o	ono aroar not			iii iii oolal	
1. Name of periodical	2. Gross advertising income	3. Direct advertising cos	sts	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5.	. Circulation income	6	. Readership costs	costs (minus co not m	s readership column 6 llumn 5, but ore than mn 4).
(1)			\dashv							
(2)			\neg							
(3)			\dashv							
(4)			\neg							
Totals from Part I			\neg							
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and page 1, Part line 11, col. (8	1						on	here and page 1, I, line 27.
Totals, Part II (lines 1-5)	n of Officers 7	inant-us -	al T-	-4 ()		- \				
Schedule K - Compensatio	n of Officers, D	irectors, an	a Iru	istees (see instru	iction:					
1. Name			2	2. Title		3. Percent of time devoted to business	0	unr	ensation attrib related busine	
(1) ATCH 2		+			-+		%			
(2)		+			+		%			
(3)		+			+		%			
(4)	ort II. line 4.4						%			
Total. Enter here and on page 1, P	art II, line 14						. 🖊		Eor. 00	0-T (2012)

Form **990-T** (2012)

ATTACHMENT 1

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

LICENSES & FEES SUPPLIES EXPENSES PURCHASE SERVICES OTHER PAYROLL EXPENSES CREDIT CARD EXPENSES OTHER EXPENSES	3,781. 97,244. 226,914. 92,006. 34,511.
OTHER EXPENSES UTILITIES	63,147. 1,132.
PART II - LINE 28 - OTHER DEDUCTIONS	518,735.

ATTACHMENT 2

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
BRUCE R LINDSEY 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	CEO E	0	0
ANDREW KESSEL 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	CFO E	0	0
STEPHANIE S STREETT 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	EXECUTIVE DIRECTOR	0	0
TERRENCE MCAULIFFE 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	DIRECTOR E	0	0
CHELSEA V. CLINTON 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	DIRECTOR E	0	0
SCOTT TAITEL 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	COO OF CGSGI E	0	0
MARK GUNTON 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	CEO, CGSGI E	0	0
THERESE SHERIDAN 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	HR DIRECTOR E	0	0
DENNIS CHENG 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	CDO E	0	0
VALERIE ALEXANDER 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	MARKETING DIRECTOR E	0	0

ATTACHMENT 2 (CONT'D)

SCHD.	Κ,	FORM	990-T,	COMPENSATION	OF	OFFICERS,	DIRECTORS,	&	TRUSTEES
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BUSINESS NAME AND ADDRESS TITLE PERCENT COMPENSATION

TOTAL COMPENSATION

FEDERAL FOOTNOTES

FORM 990-T RENTAL CATERING BUSINESS NET OPERATING LOSS (NON-SRLY)

CARRYOVER GENERATED YE 12/31/2011 \$34,437 CARRYOVER GENERATED YE 12/31/2012 \$180,700 NONE TOTAL UTILIZATION

CARRIED FORWARD TO 12/31/2013 \$215,137

FEDERAL FOOTNOTES

FORM 990-T, PART V, LINE 1 INTEREST IN OR A SIGNATURE OR OTHER AUTHORITY OVER A FINANCIAL ACCOUNT IN A FOREIGN COUNTRY. AUSTRALIA, COLUMBIA, INDONESIA, KENYA, MALAWI, PERU, RWANDA, TANZANIA, UNITED KINGDOM.