

EXTENDED TO NOVEMBER 16, 2020

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning 1912 and ending
Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

A Check box if address changed
B Exempt under section
[X] 501(c)(3)
[] 408(e) [] 220(e)
[] 408A [] 530(a)
[] 529(a)

Name of organization () Check box if name changed and see instructions.
BILL, HILLARY & CHELSEA CLINTON FOUNDATION
Number, street, and room or suite no. If a P.O. box, see instructions.
1200 PRESIDENT CLINTON AVE
City or town, state or province, country, and ZIP or foreign postal code
LITTLE ROCK, AR 72201

D Employer identification number (Employees trust, see instructions)
31-1580204
E Unrelated business activity code (See instructions)
525990

C Book value of all assets at end of year 318,631,559.
F Group exemption number (See instructions.)
G Check organization type [X] 501(c) corporation [] 501(c) trust [] 401(a) trust [] Other trust

H Enter the number of the organization's unrelated trades or businesses. 2 Describe the only (or first) unrelated trade or business here CATERING, MUSEUM SALES. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? [] Yes [X] No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of ANDREW KESSEL, CFO Telephone number 510-748-0471

Part I Unrelated Trade or Business Income
Table with columns: (A) Income, (B) Expenses, (C) Net
1a Gross receipts or sales 3,075,036.
1c Balance 3,075,036.
2 Cost of goods sold (Schedule A, line 7) 803,204.
3 Gross profit. Subtract line 2 from line 1c 2,271,832.
13 Total. Combine lines 3 through 12 2,271,832.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)
(Deductions must be directly connected with the unrelated business income)
Table with columns: Line number, Description, Amount
14 Compensation of officers, directors, and trustees (Schedule K)
15 Salaries and wages 1,793,851.
16 Repairs and maintenance 5,797.
17 Bad debts
18 Interest (attach schedule) (see instructions)
19 Taxes and licenses 15,623.
20 Depreciation (attach Form 4562) 87,328.
21a Less depreciation claimed on Schedule A and elsewhere on return 87,328.
21b
22 Depletion
23 Contributions to deferred compensation plans
24 Employee benefit programs 43,989.
25 Excess exempt expenses (Schedule I)
26 Excess readership costs (Schedule J)
27 Other deductions (attach schedule) SEE STATEMENT 1 465,763.
28 Total deductions. Add lines 14 through 27 2,412,351.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 -140,519.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) SEE STATEMENT 2 0.
31 Unrelated business taxable income. Subtract line 30 from line 29 -140,519.

Internal Revenue Service
Received US Bank - USB
335
NOV 12 2020
Ogden, UT

44 Received in Batching Open DEC 11 2020

SCANNED MAY 10 2021

Part III Total Unrelated Business Taxable Income

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	100,869.
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules) STMT 4 STMT 5	34	10,087.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	90,782.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	90,782.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	89,782.

Part IV Tax Computation

40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	18,854.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	18,854.

Part V Tax and Payments

46a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	18,854.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	18,854.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b	51,720.
c	Tax deposited with Form 8868	51c	61,280.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other <input type="checkbox"/> Total	51g	
52	Total payments. Add lines 51a through 51g	52	113,000.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	287.
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	93,859.
56	Enter the amount of line 55 you want credited to 2020 estimated tax <input type="checkbox"/> 93,859. Refunded <input type="checkbox"/>	56	0.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <input type="checkbox"/> SEE STATEMENT 3	Yes	No
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> \$		

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

Lori Rothe Yokobosky 11/5/2020 CFO
Signature of officer Date Title

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	LORI ROTHE YOKOBOSKY, CPA	LORI ROTHE YOKOBOSKY, CPA	10/27/20		P01273422
	Firm's name <input type="checkbox"/> COHNREZNICK LLP	Firm's EIN <input type="checkbox"/> 22-1478099		1301 AVENUE OF THE AMERICAS	
	Firm's address <input type="checkbox"/> NEW YORK, NY 10019	Phone no. 212-297-0400			

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶ N/A

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">1</td> <td style="width: 75%;">Inventory at beginning of year</td> <td style="width: 5%; text-align: center;">1</td> <td style="width: 15%; text-align: right;">0.</td> </tr> <tr> <td style="text-align: center;">2</td> <td>Purchases</td> <td style="text-align: center;">2</td> <td style="text-align: right;">803,204.</td> </tr> <tr> <td style="text-align: center;">3</td> <td>Cost of labor</td> <td style="text-align: center;">3</td> <td></td> </tr> <tr> <td style="text-align: center;">4a</td> <td>Additional section 263A costs (attach schedule)</td> <td style="text-align: center;">4a</td> <td></td> </tr> <tr> <td style="text-align: center;">4b</td> <td>Other costs (attach schedule)</td> <td style="text-align: center;">4b</td> <td></td> </tr> <tr> <td style="text-align: center;">5</td> <td>Total. Add lines 1 through 4b</td> <td style="text-align: center;">5</td> <td style="text-align: right;">803,204.</td> </tr> </table>	1	Inventory at beginning of year	1	0.	2	Purchases	2	803,204.	3	Cost of labor	3		4a	Additional section 263A costs (attach schedule)	4a		4b	Other costs (attach schedule)	4b		5	Total. Add lines 1 through 4b	5	803,204.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">6</td> <td style="width: 75%;">Inventory at end of year</td> <td style="width: 5%; text-align: center;">6</td> <td style="width: 15%; text-align: right;">0.</td> </tr> <tr> <td style="text-align: center;">7</td> <td>Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2</td> <td style="text-align: center;">7</td> <td style="text-align: right;">803,204.</td> </tr> <tr> <td></td> <td>8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">-</td> <td style="text-align: center;">X</td> </tr> </table>	6	Inventory at end of year	6	0.	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	803,204.		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No			-	X
1	Inventory at beginning of year	1	0.																																						
2	Purchases	2	803,204.																																						
3	Cost of labor	3																																							
4a	Additional section 263A costs (attach schedule)	4a																																							
4b	Other costs (attach schedule)	4b																																							
5	Total. Add lines 1 through 4b	5	803,204.																																						
6	Inventory at end of year	6	0.																																						
7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	803,204.																																						
	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No																																						
		-	X																																						

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	
0.	0.	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B)

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			0.	0.
Total dividends-received deductions included in column 8			▶	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	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)					
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
			0.	0.	

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 25
		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 1
DESCRIPTION		AMOUNT
BANK & MISCELLANEOUS		207.
BANQUET EXPENSES		118,304.
CREDIT CARD		32,498.
EQUIPMENT RENTAL		6,398.
FACILITY EXPENSES		68,924.
MARKETING AND OUTREACH		44,660.
OTHER EXPENSES		179,737.
TELEPHONE		8,183.
TRAVEL		6,125.
MENU AND WINE LIST		727.
TOTAL TO FORM 990-T, PAGE 1, LINE 27		465,763.

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	85,330.	0.	85,330.	85,330.
NOL CARRYOVER AVAILABLE THIS YEAR			85,330.	85,330.

FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT 3
NAME OF COUNTRY		
COLOMBIA		
EL SALVADOR		
HAITI		
INDIA		
MALAWI		
RWANDA		
TANZANIA		

FORM 990-T

CONTRIBUTIONS

STATEMENT 4

DESCRIPTION/KIND OF PROPERTY

METHOD USED TO DETERMINE FMV

AMOUNT

50% CASH ONLY

N/A

1,808,579.

TOTAL TO FORM 990-T, PAGE 2, LINE 34

1,808,579.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 5

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT
 QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS
 FOR TAX YEAR 2014
 FOR TAX YEAR 2015
 FOR TAX YEAR 2016
 FOR TAX YEAR 2017
 FOR TAX YEAR 2018

TOTAL CARRYOVER		
TOTAL CURRENT YEAR 10% CONTRIBUTIONS	1,808,579	
TOTAL CONTRIBUTIONS AVAILABLE	1,808,579	
TAXABLE INCOME LIMITATION AS ADJUSTED	10,087	
EXCESS CONTRIBUTIONS	1,798,492	
EXCESS 100% CONTRIBUTIONS	0	
TOTAL EXCESS CONTRIBUTIONS	1,798,492	
ALLOWABLE CONTRIBUTIONS DEDUCTION		10,087
TOTAL CONTRIBUTION DEDUCTION		10,087

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income from an
Unrelated Trade or Business**

ENTITY

2

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning _____, and ending _____

▶ **Go to www.irs.gov/Form990T for instructions and the latest information.**

▶ **Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).**

Open to Public Inspection for
501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

Name of the organization **BILL, HILLARY & CHELSEA CLINTON
FOUNDATION** Employer identification number **31-1580204**

Unrelated Business Activity Code (see instructions) ▶ **525990**

Describe the unrelated trade or business ▶ **INVESTMENT IN PARTNERSHIPS**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances				
c Balance ▶	1c			
2 Cost of goods sold (Schedule A, line 7)	2			
3 Gross profit Subtract line 2 from line 1c	3			
4a Capital gain net income (attach Schedule D)	4a	548,414.		548,414.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5	335,457.		335,457.
6 Rent income (Schedule C)	6			
7 Unrelated debt-financed income (Schedule E)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10 Exploited exempt activity income (Schedule I)	10			
11 Advertising income (Schedule J)	11			
12 Other income (See instructions, attach schedule)	12			
13 Total. Combine lines 3 through 12	13	883,871.		883,871.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14		
15 Salaries and wages	15		31,407.
16 Repairs and maintenance	16		
17 Bad debts	17		
18 Interest (attach schedule) (see instructions)	18		
19 Taxes and licenses	19		
20 Depreciation (attach Form 4562)	20		
21 Less depreciation claimed on Schedule A and elsewhere on return	21a		21b
22 Depletion	22		
23 Contributions to deferred compensation plans	23		
24 Employee benefit programs	24		
25 Excess exempt expenses (Schedule I)	25		
26 Excess readership costs (Schedule J)	26		
27 Other deductions (attach schedule)	27		751,595.
28 Total deductions. Add lines 14 through 27	28		783,002.
29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	29		100,869.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30		0.
31 Unrelated business taxable income. Subtract line 30 from line 29	31		100,869.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019