

William J. Clinton Foundation

Independent Accountants' Report and Consolidated Financial Statements

December 31, 2010 and 2009



William J. Clinton Foundation
December 31, 2010 and 2009

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Independent Accountants' Report on Financial Statements and Supplementary Information

Board of Directors
William J. Clinton Foundation
Little Rock, Arkansas

We have audited the accompanying consolidated statements of financial position of the William J. Clinton Foundation (the Foundation) as of December 31, 2010 and 2009, and the related consolidated statements of activities, cash flows and functional expenses for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of the William J. Clinton Foundation as of December 31, 2010 and 2009, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

As discussed in *Note 13* to the financial statements, the Foundation's previously issued 2010 financial statements understated both contribution revenue and program services expenses by \$6,864,924. This discovery was made subsequent to the initial issuance of the financial statements. The financial statements have been restated to reflect this correction.

Our audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The accompanying supplementary consolidating information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic consolidated financial statements taken as a whole.

BKD, LLP
BKD, LLP

September 30, 2011, except for *Note 13*,
as to which the date is November 15, 2011

William J. Clinton Foundation
Consolidated Statements of Financial Position
December 31, 2010 and 2009

Assets

	<u>2010</u>	<u>2009</u>
Cash and cash equivalents	\$ 69,933,507	\$ 49,101,535
Assets limited as to use	86,304,698	67,568,843
Accounts receivable	1,664,642	2,617,811
Grants receivable	3,350,960	3,646,512
Contributions receivable, net	13,773,096	16,359,872
Inventory and prepaid expenses	2,002,615	1,300,933
Investments	645,630	468,304
Property and equipment, net of accumulated depreciation	<u>116,464,909</u>	<u>119,384,515</u>
Total assets	<u><u>\$ 294,140,057</u></u>	<u><u>\$ 260,448,325</u></u>

Liabilities and Net Assets

Liabilities

Accounts payable and accrued expenses	\$ 10,066,989	\$ 8,283,885
Deferred revenue	84,478,863	69,870,274
Agency funds	-	357,552
Long-term debt	<u>167,581</u>	<u>-</u>
Total liabilities	<u>94,713,433</u>	<u>78,511,711</u>

Net Assets

Unrestricted net assets	161,868,456	153,604,763
Temporarily restricted	37,308,168	28,081,851
Permanently restricted	<u>250,000</u>	<u>250,000</u>
Total net assets	<u>199,426,624</u>	<u>181,936,614</u>
	<u><u>\$ 294,140,057</u></u>	<u><u>\$ 260,448,325</u></u>

William J. Clinton Foundation
Consolidated Statements of Activities
Years Ended December 31, 2010 and 2009

	2010			
	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Revenues, Gains and Other Support				
Contributions	\$ 54,214,157	\$ 112,101,118	\$ -	\$ 166,315,275
Grants	148,599,865	-	-	148,599,865
Investment return	236,789	1,237	-	238,026
Other	2,901,105	-	-	2,901,105
In-kind	3,718,421	-	-	3,718,421
Net assets released from restrictions	101,971,263	(101,971,263)	-	-
Total revenue, gains and other support	311,641,600	10,131,092	-	321,772,692
Expenses and Losses				
Program services	286,910,158	-	-	286,910,158
Fund raising	4,522,931	-	-	4,522,931
Management and general	11,944,818	-	-	11,944,818
Provision for uncollectible pledges	-	904,775	-	904,775
Total expenses and losses	303,377,907	904,775	-	304,282,682
Change in Net Assets	8,263,693	9,226,317	-	17,490,010
Net Assets, Beginning of Year	153,604,763	28,081,851	250,000	181,936,614
Net Assets, End of Year	\$ 161,868,456	\$ 37,308,168	\$ 250,000	\$ 199,426,624

See Notes to Consolidated Financial Statements

2009			
Unrestricted	Temporarily Restricted	Permanently Restricted	Total
\$ 46,120,401	\$ 36,809,536	\$ -	\$ 82,929,937
162,738,106	-	-	162,738,106
(3,924)	208,020	-	204,096
3,126,148	-	-	3,126,148
3,662,052	-	-	3,662,052
34,654,853	(34,654,853)	-	-
<u>250,297,636</u>	<u>2,362,703</u>	<u>-</u>	<u>252,660,339</u>
225,508,357	-	-	225,508,357
4,967,595	-	-	4,967,595
7,771,009	-	-	7,771,009
-	589,726	-	589,726
<u>238,246,961</u>	<u>589,726</u>	<u>-</u>	<u>238,836,687</u>
12,050,675	1,772,977	-	13,823,652
141,554,088	26,308,874	250,000	168,112,962
<u>\$ 153,604,763</u>	<u>\$ 28,081,851</u>	<u>\$ 250,000</u>	<u>\$ 181,936,614</u>

William J. Clinton Foundation
Consolidated Statements of Cash Flows
Years Ended December 31, 2010 and 2009

	2010	2009
Operating Activities		
Change in net assets	\$ 17,490,010	\$ 13,823,652
Items not requiring (providing) operating activities cash flows		
Depreciation	4,070,777	4,508,399
Net realized and unrealized gains on investments	-	(7,316)
Changes in		
Assets limited as to use	(18,735,855)	28,425,685
Accounts receivable	953,169	(546,584)
Grants receivable	295,552	(3,646,512)
Contributions receivable	2,586,776	4,975,786
Inventory and prepaid expenses	(701,682)	(201,260)
Accounts payable and accrued expenses	1,783,104	807,429
Deferred grant revenue	14,608,589	(31,073,318)
Agency funds	(357,552)	51,465
	<u>21,992,888</u>	<u>17,117,426</u>
Net cash provided by operating activities		
Investing Activities		
Purchase of property, plant and equipment	(1,151,171)	(1,366,796)
Purchase of investments	(177,326)	1,000,000
	<u>(1,328,497)</u>	<u>(366,796)</u>
Net cash used in investing activities		
Financing Activities		
Proceeds from long-term debt	167,581	-
	<u>167,581</u>	<u>-</u>
Net cash provided by financing activities		
Increase in Cash and Cash Equivalents	20,831,972	16,750,630
Cash and Cash Equivalents, Beginning of Year	49,101,535	32,350,905
Cash and Cash Equivalents, End of Year	<u>\$ 69,933,507</u>	<u>\$ 49,101,535</u>

William J. Clinton Foundation
Consolidated Statements of Functional Expenses
Years Ended December 31, 2010 and 2009

2010				
	Program Services	Fund Raising	Management/ General	Total
Salaries and benefits	\$ 40,491,985	\$ 2,174,343	\$ 7,404,577	\$ 50,070,905
Direct program expenditures	74,706,767	1,456	487	74,708,710
Professional and consulting	10,124,463	301,964	1,153,229	11,579,656
Foundation-sponsored events	7,506,768	1,395,249	-	8,902,017
UNITAID expense	110,640,089	-	-	110,640,089
Shipping expense	266,463	-	-	266,463
Travel	11,151,952	220,486	753,741	12,126,179
Telecommunications	1,288,709	14,930	207,043	1,510,682
Meetings and trainings	3,359,804	147	6,995	3,366,946
Bank and other fees	267,662	1,854	49,842	319,358
Occupancy costs	3,875,024	80,000	278,139	4,233,163
Office expenses	2,334,767	52,886	287,490	2,675,143
Capital charges	379,770	-	-	379,770
Depreciation and interest	3,967,248	-	637,695	4,604,943
In-kind	3,181,658	-	536,763	3,718,421
Other	13,367,029	279,616	628,817	14,275,462
	<u>\$ 286,910,158</u>	<u>\$ 4,522,931</u>	<u>\$ 11,944,818</u>	<u>\$ 303,377,907</u>
Totals, year ended December 31, 2010				
	<u>\$ 286,910,158</u>	<u>\$ 4,522,931</u>	<u>\$ 11,944,818</u>	<u>\$ 303,377,907</u>
2009				
	Program Services	Fund Raising	Management/ General	Total
Salaries and benefits	\$ 32,268,210	\$ 1,838,403	\$ 4,082,517	\$ 38,189,130
Direct program expenditures	16,030,683	-	-	16,030,683
Professional and consulting	28,520,021	1,022,544	1,183,680	30,726,245
Foundation-sponsored events	6,926,207	-	-	6,926,207
UNITAID expense	111,364,675	-	-	111,364,675
Travel	10,602,373	122,350	89,776	10,814,499
Occupancy costs	4,931,131	280,497	664,000	5,875,628
Supplies, printing and media	1,740,530	109,021	172,281	2,021,832
Depreciation and interest	4,327,507	48,194	133,654	4,509,355
In-kind	3,289,771	350,921	21,360	3,662,052
Other	5,507,249	1,195,665	1,423,741	8,126,655
	<u>\$ 225,508,357</u>	<u>\$ 4,967,595</u>	<u>\$ 7,771,009</u>	<u>\$ 238,246,961</u>
Totals, year ended December 31, 2009				
	<u>\$ 225,508,357</u>	<u>\$ 4,967,595</u>	<u>\$ 7,771,009</u>	<u>\$ 238,246,961</u>

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Note 1: Nature of Operations and Summary of Significant Accounting Policies

Nature of Operations

Building on a lifetime of public service, President Bill Clinton established the William J. Clinton Foundation (the Foundation) with the mission to improve global health, strengthen economies, promote healthier childhoods and protect the environment. Throughout the past 10 years, President Clinton's vision and leadership have resulted in nearly 4 million people benefiting from lifesaving HIV/AIDS treatment; more than 12,000 U.S. schools building healthier learning environments; more than 26,000 micro-entrepreneurs, small business owners and smallholder farmers improving their livelihoods and communities; and more than 2.2 million tons of greenhouse gases cut or abated in some of the world's largest cities. He has redefined the way we think about giving and philanthropy through his Clinton Global Initiative, whose members have made more than 2,000 commitments that have already improved the lives of 300 million people in more than 180 countries.

To accomplish its goals, the Foundation has established separate initiatives, each with a distinct mission but all reflecting President Clinton's founding vision: to implement sustainable programs that improve access worldwide to investment, opportunity and lifesaving services now and for future generations. Working in diverse geographic regions and responding to local needs, the initiatives address targeted challenges in the Foundation's key areas of focus: economic empowerment, education, environment and energy, health systems and nutrition.

These initiatives are as follows:

- The Clinton Presidential Center (the Center) has welcomed more than 1.9 million visitors from all over the world to its grounds. The Center is the first LEED-certified Presidential Center in the nation, providing an energy-efficient space for 100,000 items on display, more than 20 temporary exhibits, 480 guest lectures attended by 88,000 people during the past six years. The Center also has attracted \$2 billion in investment to the Little Rock community.
- Clinton Global Initiative is a project of the Foundation that brings together a community of global leaders, university students and private citizens to identify and implement innovative solutions to the world's most pressing challenges, including poverty alleviation, climate change, global health and education. As of January 1, 2010, the Clinton Global Initiative transferred all of its activities into the Clinton Global Initiative, Inc. (CGI). CGI had no activities prior to this transfer. CGI is affiliated with the William J. Clinton Foundation, Inc. through common board members and is financially interrelated through various operational arrangements. The Foundation appoints a majority of members of the CGI board.

William J. Clinton Foundation

Notes to Consolidated Financial Statements

December 31, 2010 and 2009

- Clinton Climate Initiative (CCI) is making a difference in the fight against climate change in practical, measurable and significant ways by working with 40 of the world's largest cities to reduce their greenhouse gas emissions. CCI is assisting partner cities to make energy-saving improvements to buildings, transit systems, lighting and waste management.
- The Clinton Health Access Initiative, Inc. (CHAI) is helping to turn the tide on the HIV/AIDS pandemic by working with governments and other partners to increase the availability of high-quality AIDS care and treatment for people in need, lower the cost of essential tests and treatments and strengthen health systems in the developing world. As of January 1, 2010, the Clinton HIV/AIDS Initiative transferred all of its activities into CHAI. CHAI had no activities prior to this transfer. CHAI is affiliated with the William J. Clinton Foundation, Inc. through common board members and is financially interrelated through various operational arrangements. The Foundation appoints a majority of members of the CHAI board.
- Alliance for a Healthier Generation: The Alliance for a Healthier Generation, a partnership between the Foundation and the American Heart Association, is dedicated to ending the increase in childhood obesity and helping all kids and their families lead healthy, active lives.
- The Clinton Economic Opportunity Initiative (CEO) is helping families and individuals keep more of the money they make by supporting state and city efforts to promote access to basic financial services. CEO also matches inner-city entrepreneurs with successful business leaders to help them grow their businesses and flourish in an urban economy.
- The Clinton Development Initiative in Malawi and the Clinton Hunter Development Initiative in Rwanda work to generate income for smallholder farmers, increase agricultural productivity and enable sustainable growth to alleviate poverty.
- The Clinton Giustra Sustainable Growth Initiative (CGSGI) is an innovative partnership between the Foundation, the private sector, governments, other non-governmental organizations (NGOs) and local communities. CGSGI is working with the natural resource industry to improve health and education programs and alleviate poverty, starting in Latin America.

Principles of Consolidation

The financial statements for 2010 are consolidated and include the accounts of the Foundation, CGI and CHAI. The activities presently conducted by CHAI and CGI are included in the 2009 financial statements as unincorporated initiatives of the Foundation. All significant intercompany accounts and transactions have been eliminated in consolidation.

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash Equivalents

The Foundation considers all liquid investments with original maturities of three months or less to be cash equivalents. At December 31, 2010 and 2009, cash equivalents consisted of money market accounts held with brokers and a repurchase agreement with a financial institution.

One or more of the financial institutions holding the Foundation's cash accounts were participating in the FDIC's Transaction Account Guarantee Program. Under that program, through December 31, 2010, all noninterest-bearing transaction accounts were fully guaranteed by the FDIC for the entire amount in the account. Pursuant to legislation enacted in 2010, the FDIC will fully insure all noninterest-bearing transaction accounts beginning December 31, 2010 through December 31, 2012, at all FDIC-insured institutions.

Effective July 21, 2010, the FDIC's insurance limits were permanently increased to \$250,000. At December 31, 2010 and 2009, the Foundation's interest-bearing cash accounts exceeded federally-insured limits by approximately \$34 million and \$32 million, respectively.

Assets Limited as to Use

Assets limited as to use include assets held by CHAI under its arrangement with UNITAID, an international organization affiliated with the World Health Organization, which works to leverage price reductions for diagnostics and medicines to better treat AIDS, malaria and tuberculosis in the developing world. The assets relate to the arrangement and may be used only for the purchase of pediatric and second-line drugs and related commodities and diagnostics for UNITAID-sponsored projects.

Investments and Investment Return

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. Other investments are valued at the lower of cost (or fair value at time of donation, if acquired by contribution) or fair value. Investment return includes dividend, interest and other investment income; realized and unrealized gains and losses on investments carried at fair value; and realized gains and losses on other investments.

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Notes to Consolidated Financial Statements
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Investment return that is initially restricted by donor stipulation and for which the restriction will be satisfied in the same year is included in unrestricted net assets. Other investment return is reflected in the statements of activities as unrestricted, temporarily restricted or permanently restricted based upon the existence and nature of any donor or legally-imposed restrictions.

Grants Receivable

CHAI receives grant support from various international governmental organizations. Since the financial statements of CHAI are prepared on the accrual basis, all earned portions of the grants not yet received as of December 31, 2010, have been recorded as receivables.

Contributions Receivable

Contributions receivable are stated at the amount pledged by donors net of net present value discounts. The Foundation provides an allowance for doubtful pledges receivable, which is based upon a review of outstanding receivables, historical collection information and existing economic conditions. Delinquent pledges receivable are written off based on the specific circumstances of the donor making the pledge.

Property and Equipment

Property and equipment are stated at cost less accumulated depreciation. Depreciation is charged to expense using the straight-line method over the estimated useful life of each asset.

Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets are those whose use by the Foundation has been limited by donors to a specific time period or purpose. Permanently restricted net assets have been restricted by donors to be maintained by the Foundation in perpetuity.

Contributions

Gifts of cash and other assets received without donor stipulations are reported as unrestricted revenue and net assets. Gifts received with a donor stipulation that limits their use are reported as temporarily or permanently restricted revenue and net assets. When a donor stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Gifts that are originally restricted by the donor and for which the restriction is met in the same time period are recorded as temporarily restricted and then released from restriction.

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Notes to Consolidated Financial Statements
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Gifts of land, buildings, equipment and other long-lived assets are reported as unrestricted revenue and net assets unless explicit donor stipulations specify how such assets must be used, in which case, the gifts are reported as temporarily or permanently restricted revenue and net assets. Absent explicit donor stipulations for the time long-lived assets must be held; expirations of restrictions resulting in reclassification of temporarily restricted net assets as unrestricted net assets are reported when the long-lived assets are placed in service.

Conditional gifts depend on the occurrence of a specified future and uncertain event to bind the potential donor and are recognized as assets and revenue when the conditions are substantially met and the gift becomes unconditional.

Unconditional gifts are reported at their net realizable value.

Collections

The collections maintained at the William J. Clinton Presidential Library and Museum are the property of the National Archives, and, as such, these collections are not included on the statements of financial position of the Foundation. Furthermore, the Foundation is not responsible for the maintenance or preservation of items in the collections.

In-kind Contributions

In addition to receiving cash contributions, the Foundation receives in-kind contributions from various donors. It is the policy of the Foundation to record the estimated fair value of certain in-kind donations as an expense in its financial statements, and similarly increase contribution revenue by a like amount. For the years ended December 31, 2010 and 2009, \$3,718,421 and \$3,662,052, respectively, were received in in-kind contributions.

Government Grants

Support funded by grants is recognized as CHAI performs the contracted services or incurs outlays eligible for reimbursement under the grant agreements. Grant activities and outlays are subject to audit and acceptance by the granting agency, and, as a result of such audit, adjustments could be required.

Income Taxes

The Foundation is exempt from income taxes under Section 501 of the Internal Revenue Code and a similar provision of state law. However, the Foundation is subject to federal income tax on any unrelated business taxable income.

The Foundation files tax returns in the U.S. federal jurisdiction. With a few exceptions, the Organization is no longer subject to U.S. federal examinations by tax authorities for years before 2007.

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Functional Allocation of Expenses

The costs of supporting the various programs and other activities have been summarized on a functional basis in the statements of activities. Certain costs have been allocated among the program services, management and general and fund-raising categories based on time and effort measurements and other methods.

Deferred Revenue

Deferred revenue includes granted funds held by CHAI that may be expended only for program purposes. The use of funds is limited by the funding agencies.

Reclassifications

Certain reclassifications have been made to the 2009 financial statements to conform to the 2010 financial statement presentation. These reclassifications had no effect on the change in net assets.

Subsequent Events

Subsequent events have been evaluated through September 30, 2011, which is the date the financial statements were available to be issued.

Note 2: Assets Limited as to Use

Assets limited as to use at December 31 consisted of the following:

	<u>2010</u>	<u>2009</u>
Cash and cash equivalents	<u>\$ 86,304,698</u>	<u>\$ 67,568,843</u>

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Note 3: Investments and Investment Return

Investments at December 31 consisted of the following:

	2010	2009
Equity securities	\$ 7,500	\$ 7,500
Mutual funds	438,130	260,804
Certificates of deposit	200,000	200,000
	<u>\$ 645,630</u>	<u>\$ 468,304</u>

Total investment return is comprised of the following:

	2010	2009
Interest and dividend income	\$ 238,026	\$ 196,780
Net realized and unrealized gains (losses) on investments	<u>-</u>	<u>7,316</u>
	<u>\$ 238,026</u>	<u>\$ 204,096</u>

Note 4: Contributions and Grants Receivable

All contributions receivable are reported as a component of temporarily restricted net assets and consisted of the following:

	2010	2009
Due within one year	\$ 12,845,521	\$ 12,627,875
Due in one to five years	2,165,790	5,145,202
Due in more than five years	150,147	100,000
	<u>15,161,458</u>	<u>17,873,077</u>
Less		
Allowance for uncollectible contributions	804,215	582,267
Unamortized discount	584,147	930,938
	<u>\$ 13,773,096</u>	<u>\$ 16,359,872</u>

CHAI has received conditional promises to give of approximately \$33,900,000 at December 31, 2010. These conditional promises to give will not be recognized as an asset or revenue until the conditions are substantially met.

William J. Clinton Foundation
Notes to Consolidated Financial Statements
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CHAI receives grant support through periodic claims filed with the respective funding sources, not to exceed a limit specified in the funding agreement. Since the financial statements of CHAI are prepared on the accrual basis, all earned portions of the grants not yet received as of December 31, 2010, amounting to approximately \$3,300,000, have been recorded as receivables. CHAI has grant commitments from its grantors of approximately \$26,600,000 at December 31, 2010.

Note 5: Property and Equipment

Property and equipment at December 31 consist of the following:

	<u>2010</u>	<u>2009</u>
Land	\$ 943,690	\$ 943,690
Furniture and equipment	6,831,621	4,796,078
Buildings and fixtures	<u>134,479,687</u>	<u>134,848,995</u>
	142,254,998	140,588,763
Less accumulated depreciation	<u>25,790,089</u>	<u>21,204,248</u>
	<u><u>\$ 116,464,909</u></u>	<u><u>\$ 119,384,515</u></u>

Note 6: Net Assets

Temporarily Restricted Net Assets

Temporarily restricted net assets on December 31, 2010 and 2009, were available for the following purposes:

	<u>2010</u>	<u>2009</u>
For future periods (pledges receivable)	\$ 8,842,208	\$ 12,847,641
Haiti relief and recovery	5,514,555	-
Foundation initiatives	<u>22,951,405</u>	<u>15,234,210</u>
	<u><u>\$ 37,308,168</u></u>	<u><u>\$ 28,081,851</u></u>

William J. Clinton Foundation
Notes to Consolidated Financial Statements
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Permanently Restricted Net Assets

Permanently restricted net assets at December 31, 2010 and 2009, were restricted to:

	2010	2009
Investment in perpetuity, the income of which is expendable to support speakers' endowment	<u>\$ 250,000</u>	<u>\$ 250,000</u>

Net Assets Released from Restrictions

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of other events specified by donors.

	2010	2009
Purpose restrictions accomplished		
Collection of pledges	\$ 10,537,624	\$ 11,496,773
Haiti relief and recovery	57,410,977	-
Foundation initiatives	<u>34,022,662</u>	<u>23,158,080</u>
	<u>\$ 101,971,263</u>	<u>\$ 34,654,853</u>

Note 7: Operating Leases

The Foundation's leases are generally month-to-month operating leases for office space both domestically and internationally, while other leases are cancellable in 2011. Rental expense for all operating leases was \$836,351 and \$2,344,851 for 2010 and 2009, respectively.

Note 8: Pension Plan

The Foundation has a defined contribution pension plan covering substantially all employees. The board of directors annually determines the amount, if any, of the Foundation's contributions to the plan. Pension expense was \$673,028 and \$993,545 for 2010 and 2009, respectively.

William J. Clinton Foundation
Notes to Consolidated Financial Statements
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Note 9: Repurchase Agreement

The Foundation has entered into a repurchase agreement with a financial institution whereby excess cash in its operating account is invested in government-backed securities at the close of each business day and is redeposited, along with interest earned, in the checking account at the start of the next business day. Amounts invested through this agreement as of December 31, 2010 and 2009, were approximately \$13,674,173 and \$6,051,293, respectively.

Note 10: Transactions with the National Archives and Records Administration and Lease with the City of Little Rock, Arkansas

In 2004, the Foundation entered into a joint use, operating and transfer agreement with the National Archives and Records Administration (NARA) that expires February 29, 2101. Under the agreement, NARA agreed to operate certain areas of the facility known as the William J. Clinton Presidential Library and Museum for the purposes of housing, preserving and making available, through historical research, exhibitions, educational programs and other activities, the presidential records and historical materials of President William Jefferson Clinton.

Because the terms of the lease essentially transfer to NARA the right to use portions of the Library for a period in excess of the property's expected economic life, the cost of construction of those areas operated by NARA, which amounted to approximately \$36,000,000, have been excluded from the Foundation's statements of financial position.

The land occupied by the Library is owned by the City of Little Rock, Arkansas (the City), but is leased to the Foundation under a 99-year lease for a nominal annual amount. The Foundation is responsible for maintaining those areas within 75 feet of the buildings and certain land improvements. Maintenance of the remaining land is the responsibility of the City. Because the lease with the City does not convey exclusive right to the use of this land and because it is to be operated in a manner similar to other City parks, the Foundation does not recognize the present value of the lease's fair value within its financial statements.

Note 11: Disclosures about Fair Value of Assets

FASB Accounting Standards Codification (ASC) Topic 820 defines fair value, establishes a framework for measuring fair value and expands disclosures about fair value measurements.

Topic 820 defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Topic 820 also establishes a fair value hierarchy, which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The standard describes three levels of inputs that may be used to measure fair value:

Level 1 Quoted prices in active markets for identical assets or liabilities

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Level 2 Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

Level 3 Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities

Following is a description of the inputs and valuation methodologies used for assets and liabilities measured at fair value on a recurring basis and recognized in the accompanying statements of financial position, as well as the general classification of such assets and liabilities pursuant to the valuation hierarchy.

Assets Limited to Use and Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. Level 1 securities include money market funds, equity securities and mutual funds. If quoted market prices are not available, then fair values are estimated by using pricing models, quoted prices of securities with similar characteristics or discounted cash flows. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Foundation had no Level 2 or 3 measurements at December 31, 2010.

The following table presents the fair value measurements of assets recognized in the accompanying statements of financial position measured at fair value on a recurring basis and the level within the Topic 820 fair value hierarchy in which the fair value measurements fall at December 31, 2010 and 2009:

	Fair Value Measurements Using					
	Fair Value		Significant			
			Quoted Prices in Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
December 31, 2010						
Money market funds	\$	86,304,698	\$	86,304,698	\$	-
Equity securities		7,500		7,500		-
Mutual funds		438,130		438,130		-
December 31, 2009						
Money market funds	\$	67,568,843	\$	67,568,843	\$	-
Equity securities		7,500		7,500		-
Mutual funds		260,804		260,804		-

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

The following methods were used to estimate the fair value of all other financial instruments recognized in the accompanying statements of financial position at amounts other than fair value.

Cash and Cash Equivalents and Assets Limited as to Use

The carrying amount approximates fair value.

Contributions Receivable

The carrying amount approximates fair value.

Deferred Revenue

The carrying amount approximates fair value.

Long-term Debt

The carrying amount approximates fair value.

The following table presents estimated fair values of the Foundation's financial instruments at December 31, 2010 and 2009:

	2010		2009	
	Carrying Amount	Fair Value	Carrying Amount	Fair Value
Financial assets				
Cash and cash equivalents	\$ 69,933,507	\$ 69,933,507	\$ 49,101,535	\$ 49,101,535
Assets limited as to use	86,304,698	86,304,698	67,568,843	67,568,843
Contributions receivable, net	13,773,096	13,773,096	16,359,872	16,359,872
Investments	645,630	645,630	468,304	468,304
Financial liabilities				
Deferred revenue	84,478,863	84,478,863	69,870,274	69,870,274
Long-term debt	167,581	167,581	-	-

William J. Clinton Foundation
Notes to Consolidated Financial Statements
December 31, 2010 and 2009

Note 12: Significant Estimates and Concentrations

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates and current vulnerabilities due to certain concentrations. These matters include the following:

Assets in Foreign Countries

The Foundation maintains cash balances and equipment in Asia, Africa and South America. At December 31, 2010 and 2009, the Foundation had approximately \$12.1 million and \$6.2 million, respectively, deposited in foreign banks and equipment with an approximate net book value of \$1.75 million and \$1.8 million, respectively, in foreign countries.

Contributions Receivable

Approximately 28 percent and 29 percent of gross pledges receivable were due from one donor at December 31, 2010 and 2009, respectively.

Furthermore, allowances for uncollectible contributions receivable are based on a review of outstanding receivables, historical collection information and existing economic conditions. Events could occur that would change this estimate materially in the near-term.

Contributions

In 2010, the Foundation received approximately \$62,900,000 from donors to support relief and recovery efforts in the aftermath of the earthquake in Haiti. At December 31, 2010, the Foundation had expended approximately \$57,400,000 for Haiti relief and recovery efforts.

Grants

UNITAID contributed approximately \$108,900,000 and \$80,700,000 in 2010 and 2009, respectively. These funds were used primarily for the purchase of pediatric and second-line drugs and related commodities and diagnostics for UNITAID-sponsored projects.

Litigation

The Foundation is, from time to time, subject to claims that arise primarily in the ordinary course of its activities. Currently, management is not aware of any such claim or claims that would have a material adverse effect on the Foundation's financial position or net assets. Events could occur, however, that would change this estimate materially in the near term.

William J. Clinton Foundation
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December 31, 2010 and 2009

Current Economic Conditions

The current protracted economic decline continues to present not-for-profit organizations with difficult circumstances and challenges, which, in some cases, have resulted in large declines in the fair value of investments and other assets, declines in contributions, constraints on liquidity and difficulty obtaining financing. The financial statements have been prepared using values and information currently available to the Foundation.

Current economic conditions have made it difficult for many donors to continue to contribute to not-for-profit organizations. A significant decline in contribution or grant revenue could have an adverse impact on the Foundation's future operating results.

In addition, given the volatility of current economic conditions, the values of assets and liabilities recorded in the financial statements could change rapidly, resulting in material future adjustments in investment values and allowances for contributions receivable that could negatively impact the Foundation's ability to maintain sufficient liquidity.

Note 13: Subsequent Event

Subsequent to the initial issuance of the financial statements for the year ended December 31, 2010, the Foundation identified an error in recording certain in-kind revenues and expenses. The error had no effect on the change in net assets and resulted in both contribution revenue and program services expenses being understated by the same amount. As a result, amounts reported in these financial statements for temporarily restricted contribution revenue, program services expenses and net assets released from restriction are all greater by \$6,864,924 than corresponding amounts in previously issued financial statements, which represents approximately 2 percent of total revenues, gains and other support.

WILLIAM J. CLINTON FOUNDATION
FORM 990
TAX YEAR 2010

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2010, or fiscal year beginning _____, 2010, and ending _____, 20 _____

▶ **Do not send to the IRS. Keep for your records.**▶ **See instructions on back.****2010**Department of the Treasury
Internal Revenue Service

Name of exempt organization

WILLIAM J. CLINTON FOUNDATION

Name and title of officer

ANDREW KESSEL, CFO

Employer identification number

31-1580204**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>139994171.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5) .	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize BKD, LLP

ERO firm name

to enter my PIN

7 2 2 0 1Enter five numbers, but
do not enter all zeros

as my signature

on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Date ▶ 11/14/2011**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

7 1 0 1 5 5 7 2 2 0 3

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2010 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶ 11/14/2011

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2010)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2010**Open to Public
Inspection****A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization

WILLIAM J. CLINTON FOUNDATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

1200 PRESIDENT CLINTON AVENUE

City or town, state or country, and ZIP + 4

LITTLE ROCK, AR 72201

F Name and address of principal officer:

ANDREW KESSEL

1200 PRESIDENT CLINTON AVE LITTLE ROCK, AR 72201

D Employer identification number

31-1580204

E Telephone number

(501) 748-0471

G Gross receipts \$ 142,826,879.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.CLINTONFOUNDATION.ORG**H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation: 1997 **M** State of legal domicile: AR**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE WILLIAM J. CLINTON FOUNDATION WORKS TO STRENGTHEN THE CAPACITY OF PEOPLE IN THE U.S. AND THROUGHOUT THE WORLD TO MEET THE CHALLENGES OF GLOBAL INTERDEPENDENCE.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	3.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	2.
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	354.
	6	Total number of volunteers (estimate if necessary)	6	375.
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	242,377,043.	138,003,746.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,140,825.	1,470,776.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	196,780.	52,088.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,316,470.	467,561.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	249,031,118.	139,994,171.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	4,046,086.	56,300,663.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	38,212,782.	16,139,239.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,725,861.	309,814.	201,000.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	192,646,100.	33,199,778.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	235,214,782.	105,840,680.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	13,816,336.	34,153,491.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	260,448,325.	189,254,960.
	22	Net assets or fund balances. Subtract line 21 from line 20	78,511,711.	8,243,949.
			181,936,614.	181,011,011.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ BKD, LLP	Firm's EIN ▶			
	Firm's address ▶ P.O. BOX 3667 LITTLE ROCK, AR 72203-3667	Phone no. 501-372-1040			
May the IRS discuss this return with the preparer shown above? (see instructions)					<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒**1** Briefly describe the organization's mission:

ATTACHMENT 1

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

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

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

If "Yes," describe these changes on Schedule O.

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

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

4a (Code:) (Expenses \$ 50,546,055. including grants of \$ 51,190,372.) (Revenue \$ 0.)RELIEF AND RECONSTRUCTION WORK ASSOCIATED WITH AFTERMATH OF THE
EARTHQUAKE IN HAITI. SEE SCHEDULE O FOR FURTHER DETAILS**4b** (Code:) (Expenses \$ 11,577,612. including grants of \$ 0.) (Revenue \$ 0.)

THE CLINTON CLIMATE INITIATIVE SEE SCHEDULE O FOR FURTHER DETAILS

4c (Code:) (Expenses \$ 8,257,407. including grants of \$ 881,739.) (Revenue \$ 2,588,776.)

CLINTON PRESIDENTIAL CENTER SEE SCHEDULE O FOR FURTHER DETAILS

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 27,948,906. including grants of \$ 0.) (Revenue \$ 0.)

4e Total program service expenses ► 98,329,980.

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 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
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? <i>If "Yes," complete Schedule C, Part II</i>	4	X
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? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<input checked="" type="checkbox"/>	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
24 a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a 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? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	<input checked="" type="checkbox"/>	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	<input checked="" type="checkbox"/>	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<input checked="" type="checkbox"/>	
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule R, Part VI.</i>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	<input checked="" type="checkbox"/>	

Form **990** (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 119		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 354		
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	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If "Yes," enter the name of the foreign country: SEE SCHEDULE O See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI ☒ **X**

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 3		
b Enter the number of voting members included in line 1a, above, who are independent 1b 2		
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		X
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		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Does the organization have members or stockholders? 6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b		X
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		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c	X	
13 Does the organization have a written whistleblower policy? 13	X	
14 Does the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a		X
b Other officers or key employees of the organization 15b		X
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		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► ATTACHMENT 2**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **► ANDREW KESSEL 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201**
 501-748-0471

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII. ☒ X**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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ATTACHMENT 3										
(1) BRUCE R LINDSEY CEO	45.00	X		X				276,298.	0.	32,245.
(2) TERRENCE MCAULIFFE DIRECTOR	2.00	X						0.	0.	0.
(3) JAMES L RUTHERFORD DIRECTOR	2.00	X						0.	0.	0.
(4) ANDREW KESSEL CFO	45.00			X				155,438.	0.	26,250.
(5) STEPHANIE S STREETT EXECUTIVE DIRECTOR	50.00			X				118,558.	0.	28,432.
(6) LAURA A GRAHAM COO	45.00			X				131,144.	0.	301.
(7) MARGARET MARTINELLO DEVELOPMENT DIRECTOR	50.00					X		143,659.	0.	22,578.
(8) CARLOS FERNANDEZ MANZI CEO OF CGSGI	50.00					X		176,086.	0.	15,893.
(9) ALEXANDER CHAVAROT PROJECT DIRECTOR	50.00					X		162,440.	0.	0.
(10) VALERIE ALEXANDER MARKETING DIRECTOR	50.00					X		128,745.	0.	28,524.
(11) THERESE SHERIDAN HR DIRECTOR	50.00					X		123,484.	0.	23,440.
(12)										
(13)										
(14)										
(15)										
(16)										

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total								1,415,852.	0.	177,663.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,415,852.	0.	177,663.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **11**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

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.

(A) Name and business address	(B) Description of services	(C) Compensation
G&G MARINE FT LAUDERDALE, FL 33025	SHIPPING	870,325.
CMH MANUFACTURING INC MARYVILLE, TN 37802	CONSTRUCTION	791,000.
MACQUARIE CAPITAL ADVISORS	PROGRAM SERVICES	714,500.
UPS SUPPLY CHAIN SOLUTIONS ALPHARETTA, GA 30005	SHIPPING	680,000.
POLK STANLEY WILCOX ARCHITECTS LITTLE ROCK, AR 72202	ARCHITECT	514,225.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **30**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 62,722.				
	b	Membership dues	1b				
	c	Fundraising events	1c 887,923.				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f 137,053,101.				
	g	Noncash contributions included in lines 1a-1f: \$ 4,257,174.					
	h	Total. Add lines 1a-1f		138,003,746.			
Program Service Revenue			Business Code				
	2a	CHDI & CDI INCOME	900099	1,341,087.	1,341,087.	0.	0.
	b	LIBRARY ADMISSIONS	900099	129,689.	129,689.	0.	0.
	c						
	d						
	e						
	f	All other program service revenue				0.	0.
	g	Total. Add lines 2a-2f		1,470,776.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		52,088.	0.	0.	52,088.
	4	Income from investment of tax-exempt bond proceeds . . .		0.			
	5	Royalties		0.			
			(i) Real (ii) Personal				
	6a	Gross Rents.		332,199.			
	b	Less: rental expenses . . .		0.			
	c	Rental income or (loss) . . .		332,199.			
	d	Net rental income or (loss)		332,199.	0.	0.	332,199.
			(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		0.			
	8a	Gross income from fundraising events (not including \$ 887,923. of contributions reported on line 1c). See Part IV, line 18	a 730,865.				
	b	Less: direct expenses	b 1,042,000.				
	c	Net income or (loss) from fundraising events		-311,135.	0.	-311,135.	
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less returns and allowances	a 1,864,503.				
b	Less: cost of goods sold	b 1,790,708.					
c	Net income or (loss) from sales of inventory		73,795.	0.	0.	73,795.	
Miscellaneous Revenue		Business Code					
11a	MISCELLANEOUS REVENUE	900099	372,702.	0.	0.	372,702.	
b							
c							
d	All other revenue			0.	0.		
e	Total. Add lines 11a-11d		372,702.				
12	Total revenue. See instructions		139,994,171.	1,470,776.	0.	519,649.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	50,264,255.	50,264,255.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	6,036,408.	6,036,408.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	768,666.	566,435.	160,120.	42,111.
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	11,907,949.	8,949,246.	2,342,606.	616,097.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	541,631.	520,317.	13,418.	7,896.
9 Other employee benefits	1,543,902.	1,060,096.	387,516.	96,290.
10 Payroll taxes	1,377,091.	1,139,425.	186,952.	50,714.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	365,466.	0.	365,466.	0.
c Accounting	333,299.	0.	333,299.	0.
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	201,000.			201,000.
f Investment management fees	0.			
g Other	4,417,686.	3,688,091.	503,575.	226,020.
12 Advertising and promotion	815,845.	792,385.	18,747.	4,713.
13 Office expenses	3,185,951.	2,890,494.	154,652.	140,805.
14 Information technology	476,803.	440,939.	13,807.	22,057.
15 Royalties	0.			
16 Occupancy	2,094,687.	2,016,986.	47,956.	29,745.
17 Travel	4,860,788.	4,483,099.	134,962.	242,727.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	98,738.	95,546.	1,565.	1,627.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	4,075,183.	3,956,316.	118,867.	0.
23 Insurance	63,065.	59,675.	1,331.	2,059.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a MEDICAL SUPPLIES	103,973.	103,973.	0.	0.
b PARTNER EXPENSES	2,427,726.	2,427,726.	0.	0.
c PROVISION FOR UNCOL. PLEDGES	921,840.	921,840.	0.	0.
d OTHER DIRECT PROGRAM EXPENSE	6,433,794.	6,433,794.	0.	0.
e				
f All other expenses	2,524,934.	1,482,934.	0.	1,042,000.
25 Total functional expenses. Add lines 1 through 24f	105,840,680.	98,329,980.	4,784,839.	2,725,861.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	49,101,535.	2	62,130,588.
	3 Pledges and grants receivable, net	16,359,872.	3	8,916,808.
	4 Accounts receivable, net	6,264,323.	4	1,222,668.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	809,874.	8	1,055,874.
	9 Prepaid expenses and deferred charges	491,059.	9	507,541.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 139,032,248.		
	b Less: accumulated depreciation	10b 24,256,397.		
		119,384,515.	10c	114,775,851.
	11 Investments - publicly traded securities	468,304.	11	645,630.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	67,568,843.	15	0.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	260,448,325.	16	189,254,960.	
Liabilities	17 Accounts payable and accrued expenses	8,283,885.	17	1,317,774.
	18 Grants payable		18	
	19 Deferred revenue	69,870,274.	19	1,596,931.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	167,581.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	357,552.	25	5,161,663.
	26 Total liabilities. Add lines 17 through 25	78,511,711.	26	8,243,949.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	153,604,763.	27	162,717,464.
	28 Temporarily restricted net assets	28,081,851.	28	18,043,547.
	29 Permanently restricted net assets	250,000.	29	250,000.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	181,936,614.	33	181,011,011.
	34 Total liabilities and net assets/fund balances	260,448,325.	34	189,254,960.

Form **990** (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	139,994,171.
2	Total expenses (must equal Part IX, column (A), line 25)	2	105,840,680.
3	Revenue less expenses. Subtract line 2 from line 1	3	34,153,491.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	181,936,614.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-35,079,094.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	181,011,011.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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?	X	
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.	X	

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

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

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

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

- (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?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

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

Schedule A (Form 990 or 990-EZ) 2010

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	135,817,368.	89,393,842.	104,673,091.	126,979,554.	138,003,746.	594,867,601.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	135,817,368.	89,393,842.	104,673,091.	126,979,554.	138,003,746.	594,867,601.
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).						84,584,400.
6 Public support. Subtract line 5 from line 4.						510,283,201.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	135,817,368.	89,393,842.	104,673,091.	126,979,554.	138,003,746.	594,867,601.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	926,928.	3,436,903.	2,779,487.	364,211.	384,287.	7,891,816.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATTCH. 1	2,009,846.	2,090,624.	1,799,055.	4,372,909.	3,707,981.	13,980,415.
11 Total support. Add lines 7 through 10						616,739,832.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	82.74 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	78.58 %
16a 33 1/3 % support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3 % support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3 % support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

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

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
LIST RENTAL	66,469.	8,998.	0.	0.	0.	75,467.
MISCELLANEOUS	135,083.	547,841.	320,048.	384,201.	372,702.	1,759,875.
GROSS RECEIPTS INVENTORY SALES	1,566,291.	1,207,765.	1,025,628.	1,847,883.	1,864,503.	7,512,070.
LIBRARY ADMISSIONS	242,003.	171,566.	153,785.	184,242.	129,689.	881,285.
CHDI PROGRAM INCOME	0.	154,454.	299,594.	1,956,583.	1,341,087.	3,751,718.
TOTALS	<u>2,009,846.</u>	<u>2,090,624.</u>	<u>1,799,055.</u>	<u>4,372,909.</u>	<u>3,707,981.</u>	<u>13,980,415.</u>

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(03) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	VARIOUS CASH DONATIONS BELOW 2% LIMIT 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	\$ 107,735,644.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 5,750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 7,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 3,720,928.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 3,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	VARIOUS NONCASH DONATIONS BELOW 2% LIMIT 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	\$ 4,257,174.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 3,040,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ 3,000,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Employer identification number

Part II **Noncash Property** (see instructions)

JSA
0E1254 1.000

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

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

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

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

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2010

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- | | | | | | |
|----------|--------------------------|-------------------------------------|----------|--------------------------|---------------------------|
| a | <input type="checkbox"/> | Public exhibition | d | <input type="checkbox"/> | Loan or exchange programs |
| b | <input type="checkbox"/> | Scholarly research | e | <input type="checkbox"/> | Other _____ |
| c | <input type="checkbox"/> | Preservation for future generations | | | |
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

b If "Yes," explain the arrangement in Part XI V and complete the following table:

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

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

b If "Yes," explain the arrangement in Part XI V.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	260,804.	233,301.	227,051.		
b Contributions	0.	0.	50,000.		
c Net investment earnings, gains, and losses	43,222.	27,503.	-43,750.		
d Grants or scholarships	0.	0.	0.		
e Other expenditures for facilities and programs	0.	0.	0.		
f Administrative expenses	0.	0.	0.		
g End of year balance	304,026.	260,804.	233,301.		

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment %
- b Permanent endowment 100.0000 %
- c Term endowment %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i) unrelated organizations
- (ii) related organizations
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

	Yes	No
3a(i)		X
3a(ii)		X
3b		

Part VI Land, Buildings, and Equipment See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		943,690.		943,690.
b Buildings		134,390,906.	22,382,450.	112,008,456.
c Leasehold improvements				
d Equipment		3,697,652.	1,873,947.	1,823,705.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				114,775,851.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) AGENCY FUNDS	0.	
(3) INTRA-ORG PAYABLE, NET	5,161,663.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		5,161,663.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	139,994,171.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	105,840,680.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	34,153,491.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-35,079,094.
9	Total adjustments (net). Add lines 4 through 8	9	-35,079,094.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-925,603.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	107,723,943.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	1,115,233.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	1,693,633.
e	Add lines 2a through 2d	2e	2,808,866.
3	Subtract line 2e from line 1	3	104,915,077.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	35,079,094.
c	Add lines 4a and 4b	4c	35,079,094.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	139,994,171.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	108,649,546.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,115,233.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	1,693,633.
e	Add lines 2a through 2d	2e	2,808,866.
3	Subtract line 2e from line 1	3	105,840,680.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	105,840,680.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

REVENUE RECONCILIATION

FORM 990, SCHEDULE D, PART XII, LINE 2D

COST OF GOODS SOLD 651,633

DIRECT FUNDRAISING EXPENSE 1,042,000

TOTAL 1,693,633

EXPENSE RECONCILIATION

FORM 990, SCHEDULE D, PART XIII, LINE 2D

COST OF GOODS SOLD 651,633

DIRECT FUNDRAISING EXPENSE 1,042,000

TOTAL 1,693,633

INTENDED USES OF ENDOWMENT FUNDS

FORM 990, SCHEDULE D, PART V, LINE 4

THE INTENDED USE OF THE ENDOWMENT FUND IS TO SUPPORT BRINGING SPEAKERS TO
THE CLINTON PRESIDENTIAL CENTER.

REVENUE RECONCILIATION

FORM 990, SCHEDULE D, PART XII, LINE 4B

EXPENSES TO ENTITIES INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL
STATEMENTS BUT FILING SEPARATE 990S - \$35,079,094

Part XIV Supplemental Information *(continued)*

RECONCILIATION OF CHANGE IN NET ASSETS

FORM 990, SCH D, PART XI, LINE 8

EXPENSES TO ENTITIES INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL

STATEMENTS BUT FILING SEPARATE 990S - \$35,079,094

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

31-1580204

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

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA/CARIBBEAN	1.	2.	PROGRAM SERVICES	EARTHQUAKE RELIEF	9,162,000.
(2) EAST ASIA AND THE PACIFIC	12.	23.	PROGRAM SERVICES	CLIMATE	3,809,000.
(3) EUROPE	2.	12.	PROGRAM SERVICES	CLIMATE	312,000.
(4) MIDDLE EAST AND NORTH AFRICA	1.	1.	PROGRAM SERVICES	CLIMATE	84,000.
(5) NORTH AMERICA	0.	2.	PROGRAM SERVICES	CLIMATE	206,000.
(6) SOUTH AMERICA	5.	20.	PROGRAM SERVICES	ECONOMIC DEVELOPMENT	4,287,000.
(7) SOUTH ASIA	0.	4.	PROGRAM SERVICES	CLIMATE	149,000.
(8) SUB-SAHARAN AFRICA	7.	57.	PROGRAM SERVICES	ECONOMIC DEVELOPMENT	3,925,000.
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	28.	121.			21,934,000.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	28.	121.			21,934,000.

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

Schedule F (Form 990) 2010

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. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	SUPPORT	601,450.	WIRE XFER	0.	NA	NA
(2)			EUROPE/ICELAND/GREENLAND	RELIEF	250,000.	WIRE XFER	0.	NA	NA
(3)			EUROPE/ICELAND/GREENLAND	RELIEF	250,000.	WIRE XFER	0.	NA	NA
(4)			EUROPE/ICELAND/GREENLAND		250,000.	WIRE XFER	0.	NA	NA
(5)			CENT. AMERICA/CARIBBEAN	RELIEF	600,000.	WIRE XFER	0.	NA	NA
(6)			CENT. AMERICA/CARIBBEAN	RELIEF	1,000,000.	WIRE XFER	0.	NA	NA
(7)			CENT. AMERICA/CARIBBEAN	RELIEF	1,505,000.	WIRE XFER	0.	NA	NA
(8)			EUROPE/ICELAND/GREENLAND	RELIEF	250,000.	WIRE XFER	0.	NA	NA
(9)			EUROPE/ICELAND/GREENLAND	RELIEF	750,000.	WIRE XFER	0.	NA	NA
(10)			SOUTH AMERICA	SUPPORT	106,908.	WIRE XFER	0.	NA	NA
(11)			SOUTH AMERICA	SUPPORT	215,730.	WIRE XFER	0.	NA	NA
(12)			SOUTH AMERICA	SUPPORT	257,320.	WIRE XFER	0.	NA	NA
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 12.

3 Enter total number of other organizations or entities

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

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

Schedule F (Form 990) 2010

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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).

MONITORING PROCEDURES FOR USE OF GRANT FUNDS

FORM 990, SCHEDULE F, PART I, LINE 2

THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS

DETAILING THE USE OF GRANT FUNDS. THE RELEVANT GROUP INITIATIVE WITHIN

THE FOUNDATION REVIEWS THESE REPORTS FOR PROPER USE OF GRANT FUNDS AND

CONTINUED FUNDING.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public
Inspection

Employer identification number

31-1580204

Part I

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

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AMERICAN MARKETING	DIRECT MARKETING		X	510,000.	89,000.	421,000.
2 M&R STRATEGIES	EMAIL MARKETING		X	1,205,000.	112,000.	1,093,000.
3						
4						
5						
6						
7						
8						
9						
10						
Total				1,715,000.	201,000.	1,514,000.

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

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

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

	(a) Event #1 MILLENNIUM (event type)	(b) Event #2 GALA (event type)	(c) Other Events 0. (total number)	(d) Total events (add col. (a) through col. (c))
	Revenue			
1 Gross receipts	475,788.	1,143,000.		1,618,788.
2 Less: Charitable contributions	284,148.	603,775.		887,923.
3 Gross income (line 1 minus line 2)	191,640.	539,225.		730,865.
Direct Expenses				
4 Cash prizes				
5 Noncash prizes		2,500.		2,500.
6 Rent/facility costs		108,000.		108,000.
7 Food and beverages	10,147.	163,962.		174,109.
8 Entertainment	25,000.	99,522.		124,522.
9 Other direct expenses	159,853.	473,016.		632,869.
10 Direct expense summary. Add lines 4 through 9 in column (d)				(1,042,000.)
11 Net income summary. Combine line 3, column (d), and line 10				-311,135.

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

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()
8 Net gaming income summary. Combine line 1, column d, and line 7				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

31-1580204

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	THE GIVING BACK FUND 6033 WEST CENTURY BLVD, STE 350	04-3367888	501(C)(3)	50,000.	0.	NA	NA	HAITI RELIEF
(2)	AMERICAN JEWISH WORLD SERVICE 45 W 36TH ST NEW YORK, NY 10018	22-2584370	501(C)(3)	100,000.	0.	NA	NA	HAITI RELIEF
(3)	PLAN INTERNATIONAL USA 1730 RHODE ISLAND AVENUE NW	13-5661832	501(C)(3)	115,000.	0.	NA	NA	HAITI RELIEF
(4)	CARE 151 ELLIS STREET ATLANTA, GA 30303	13-1685039	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(5)	DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE, 2ND FLOOR	13-3433452	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(6)	INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168	13-5660870	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(7)	OXFAM 355 LEXINGTON AVENUE NEW YORK, NY 10017	23-7069110	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(8)	PARTNERS IN HEALTH 888 COMMONWEALTH AVE, 3RD FL	04-3567502	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(9)	SAVE THE CHILDREN FEDERATION INC 54 WILTON ROAD WESTPORT, CT 06880	06-0726487	501(C)(3)	250,000.	0.	NA	NA	HAITI RELIEF
(10)	CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 21201	13-5563422	501(C)(3)	300,000.	0.	NA	NA	HAITI RELIEF
(11)	HABITAT FOR HUMANITY 270 PEACHTREE STREET NW ATLANTA, GA 30303	91-1914868	501(C)(3)	300,000.	0.	NA	NA	HAITI RELIEF
(12)	EPISCOPAL RELIEF & DEVELOPMENT 815 2ND AVE NEW YORK, NY 10017	73-1635264	501(C)(3)	315,000.	0.	NA	NA	HAITI RELIEF

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Employer identification number

31-1580204

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	INTERNATIONAL MEDICAL CORPS 1919 SANTA MONICA BLVD	95-3949646	501 (C) (3)	500,000.	0.	NA	NA	HAITI RELIEF
(2)	J/P HAITIAN RELIEF ORGANIZATION 149 S. BARRINGTON AVENUE #364	27-1703237	501 (C) (3)	500,000.	0.	NA	NA	HAITI RELIEF
(3)	UNIVERSITY OF MIAMI 1320 S. DIXIE HWY CORAL GABLES, FL 33146	59-0624458	501 (C) (3)	500,000.	0.	NA	NA	HAITI RELIEF
(4)	AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	13-5613797	501 (C) (3)	705,166.	0.	NA	NA	CHILDHOOD OBESITY
(5)	CONCERN 104 EAST 40TH STREET, ROOM 903	13-3712030	501 (C) (3)	750,000.	0.	NA	NA	HAITI RELIEF
(6)	UNITED STATES FUND FOR UNICEF 125 MAIDEN LANE, 11TH FLOOR	13-1760110	501 (C) (3)	750,000.	0.	NA	NA	HAITI RELIEF
(7)	ALLIANCE FOR A HEALTHIER GENERATION 609 SE 9TH AVE PORTLAND, OR 97214	27-2028308	501 (C) (3)	1,621,528.	0.	NA	NA	CHILDHOOD OBESITY
(8)	CLINTON BUSH HAITI FUND PO BOX 632454 BALTIMORE, MD 21263	27-2122785	501 (C) (3)	37,188,311.	0.	NA	NA	HAITI RELIEF
(9)	INTERFAITH COMMITTEE 40 WEST 37TH STREET, SUITE 803	13-3628207	501 (C) (3)	10,000.	0.	NA	NA	HAITI RELIEF
(10)	CITY OF LITTLE ROCK 500 WEST MARKHAM LITTLE ROCK, AR 72201	71-6014465	GOVERNMENT	867,580.	0.	NA	NA	PRESIDENTIAL CENTER
(11)	HENDRIX COLLEGE 1600 WASHINGTON AVE CONWAY, AR 72032	71-0236897	501 (C) (3)	187,500.	0.	NA	NA	EDUCATION
(12)	THE GLOBAL FAIRNESS INSTITUTE 1225 EYE STREET, NW WASHINGTON, DC 20005	05-0563219	501 (C) (3)	500,000.	0.	NA	NA	GENERAL SUPPORT

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
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Employer identification number

31-1580204

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	CLINTON BUSH HAITI FUND PO BOX 632454 BALTIMORE, MD 21263	27-2122785	501(C)(3)	0.	3,432,462.	FMV	CLOTHES/VEH.	HAITI RELIEF
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

- 2 Enter total number of section 501(c)(3) and government organizations ☐ 23.
- 3 Enter total number of other organizations ☐ 1.

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

Schedule I (Form 990) (2010)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE U.S.

FORM 990, SCHEDULE I, PART I

THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS

DETAILING THE USE OF GRANT FUNDS. THE RELEVANT GROUP INITIATIVE WITHIN

THE FOUNDATION REVIEWS THESE REPORTS FOR PROPER USE OF GRANT FUNDS AND

CONTINUED FUNDING.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

31-1580204

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

First-class or charter travel

Travel for companions

Tax indemnification and gross-up payments

Discretionary spending account

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Housing allowance or residence for personal use

Payments for business use of personal residence

Health or social club dues or initiation fees

Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Compensation committee

Independent compensation consultant

Form 990 of other organizations

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

Written employment contract

Compensation survey or study

Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

X

2

X

4a

X

4b

X

4c

X

5a

X

5b

X

6a

X

6b

X

7

X

8

X

9

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

Schedule J (Form 990) 2010

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 BRUCE R LINDSEY	(i)	276,298.	0.	0.	16,799.	15,446.	308,543.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 ANDREW KESSEL	(i)	152,438.	3,000.	0.	9,266.	16,981.	181,685.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 MARGARET MARTINELLO	(i)	143,659.	0.	0.	8,756.	13,822.	166,237.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 CARLOS FERNANDEZ MANZI	(i)	173,586.	2,500.	0.	0.	15,893.	191,979.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 ALEXANDER CHAVAROT	(i)	162,440.	0.	0.	0.	0.	162,440.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 VALERIE ALEXANDER	(i)	124,595.	4,150.	0.	8,179.	20,345.	157,269.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Schedule J (Form 990) 2010

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

REIMBURSEMENT POLICIES

FORM 990, SCHEDULE J, LINES 1A, 1B, & 2

WHILE THE ORGANIZATION DOES NOT HAVE A WRITTEN POLICY AT THIS TIME, IT DOES HAVE STANDARDS AND A PROCESS FOR DETERMINING THE BONA FIDES OF SPOUSAL TRAVEL FOR BUSINESS PURPOSES. NO TAXABLE SPOUSAL TRAVEL OCCURRED DURING 2010. IN THE EVENT TRAVEL OCCURRED, THE AMOUNT DETERMINED TO BE TAXABLE WOULD BE INCLUDED IN THE RECIPIENT'S FORM W-2. IN ADDITION, AS NOTED ON SCHEDULE J LINE 2, THE ORGANIZATION DOES REQUIRE SUBSTANTIATION OF SUCH EXPENSES PRIOR TO REIMBURSING OR ALLOWING EXPENSES.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
► Attach to Form 990.**

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		1,688,000.	THRIFT SHOP VALUE
6 Cars and other vehicles	X	180.	1,835,000.	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	4.	255,274.	STOCK MARKET QUOTE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (SOFTWARE)	X	1.	442,500.	FMV
26 Other ► (FURNITURE)	X	1.	36,400.	FMV
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 3.

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2010)

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

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 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINES 4A - 4D

ABOUT THE CLINTON FOUNDATION

BUILDING ON A LIFETIME OF PUBLIC SERVICE, PRESIDENT BILL CLINTON
ESTABLISHED THE WILLIAM J. CLINTON FOUNDATION WITH THE MISSION TO IMPROVE
GLOBAL HEALTH, STRENGTHEN ECONOMIES, PROMOTE HEALTHIER CHILDHOODS, AND
PROTECT THE ENVIRONMENT BY FOSTERING PARTNERSHIPS AMONG GOVERNMENTS,
BUSINESSES, NONGOVERNMENTAL ORGANIZATIONS (NGOS), AND PRIVATE CITIZENS.

PRESIDENT CLINTON'S VISION AND LEADERSHIP HAVE RESULTED IN NEARLY 4
MILLION PEOPLE BENEFITING FROM LIFESAVING HIV/AIDS TREATMENT; MORE THAN
12,000 U.S. SCHOOLS BUILDING HEALTHIER LEARNING ENVIRONMENTS; MORE THAN
26,000 MICRO-ENTREPRENEURS, SMALL BUSINESS OWNERS, AND SMALLHOLDER
FARMERS IMPROVING THEIR LIVELIHOODS AND COMMUNITIES; AND MORE THAN 2.2
MILLION TONS OF GREENHOUSE GASES CUT OR ABATED IN SOME OF THE WORLD'S
LARGEST CITIES. AND PRESIDENT CLINTON HAS REDEFINED THE WAY WE THINK
ABOUT GIVING AND PHILANTHROPY THROUGH HIS CLINTON GLOBAL INITIATIVE,
WHOSE MEMBERS HAVE MADE MORE THAN 2,000 COMMITMENTS THAT HAVE ALREADY
IMPROVED THE LIVES OF 300 MILLION PEOPLE IN MORE THAN 180 COUNTRIES.

SEPARATE INITIATIVES ADDRESS TARGETED CHALLENGES WITHIN THE FOUNDATION'S
FOUR AREAS OF FOCUS. WHILE EACH HAS A UNIQUE MISSION, THEY ALL REFLECT
PRESIDENT CLINTON'S FOUNDING VISION: TO IMPLEMENT SUSTAINABLE SOLUTIONS

Name of the organization	Employer identification number
WILLIAM J. CLINTON FOUNDATION	31-1580204

THAT IMPROVE ACCESS WORLDWIDE TO INVESTMENT, OPPORTUNITY, AND LIFESAVING SERVICES AND TO ENSURE PEOPLE AND COMMUNITIES CAN ULTIMATELY TAKE CONTROL OF THEIR OWN FUTURES.

2010 INITIATIVE ACTIVITY

THE CLINTON CLIMATE INITIATIVE (CCI) CREATES AND ADVANCES SOLUTIONS TO THE CORE PROBLEMS DRIVING CLIMATE CHANGE. WORKING WITH GOVERNMENTS AND BUSINESSES AROUND THE WORLD TO DEVELOP PROGRAMS THAT ARE ECONOMICALLY AND ENVIRONMENTALLY SUSTAINABLE, CCI FOCUSES ON THREE STRATEGIC GOALS: REDUCING EMISSIONS IN CITIES; CATALYZING THE LARGE-SCALE SUPPLY OF CLEAN ENERGY; AND WORKING TO MEASURE AND VALUE THE CARBON ABSORBED BY FORESTS. CCI'S PROGRAMS PROVE THAT REDUCING CARBON EMISSIONS CAN ALSO CREATE JOBS AND LIFT ECONOMIES. CCI IS WORKING ON 10 SUSTAINABLE FOREST MANAGEMENT PROJECTS, ENCOMPASSING 644,000 HECTARES OF LAND, WHICH WILL BENEFIT MORE THAN 353,000 PEOPLE. DURING 2010, CCI SUPPORTED THE VALIDATION PROCESS FOR THE 90,000-HECTARE RIMBA RAYA PROJECT IN INDONESIA, WHICH WILL PREVENT 96 MILLION TONS OF CARBON FROM BEING EMITTED INTO THE ATMOSPHERE ONCE COMPLETE. CCI ALSO COMPLETED PRE-FEASIBILITY STUDIES ASSESSING THE POTENTIAL TO DEPLOY SOLAR ENERGY ON A LARGE SCALE IN SOUTH AFRICA, AUSTRALIA, AND INDIA, WHICH WOULD PROVIDE THESE COUNTRIES WITH CLEAN, SECURE, AND AFFORDABLE ENERGY. AS OF 2010, CCI HAS HELPED TO INITIATE 250 INDIVIDUAL AND MULTI-BUILDING RETROFIT PROJECTS, 30 WASTE MANAGEMENT PROJECTS, AND 17 OUTDOOR LIGHTING RETROFIT PROJECTS IN CITIES ACROSS THE GLOBE THAT WILL REDUCE GREENHOUSE GAS EMISSIONS BY MORE THAN 2.2 MILLION

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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TONS ANNUALLY UPON COMPLETION.

THE ALLIANCE FOR A HEALTHIER GENERATION, A PARTNERSHIP BETWEEN THE CLINTON FOUNDATION AND THE AMERICAN HEART ASSOCIATION, IS LEADING THE CHARGE AGAINST THE CHILDHOOD OBESITY EPIDEMIC BY ENGAGING DIRECTLY WITH INDUSTRY LEADERS, EDUCATORS, PARENTS, DOCTORS, AND KIDS THEMSELVES. THE GOAL OF THE ALLIANCE IS TO REDUCE THE NATIONWIDE PREVALENCE OF CHILDHOOD OBESITY BY 2015. IN 2010, THE ALLIANCE'S HEALTHY SCHOOLS PROGRAM REACHED ENROLLMENT WITH 10,000 SCHOOLS ACROSS ALL 50 STATES AND HEALTHIER SCHOOL MEALS AGREEMENTS WERE BROKERED TO REACH 30 MILLION STUDENTS ACROSS THE COUNTRY. ADDITIONALLY, THE ALLIANCE'S HEALTH CARE INITIATIVE REACHED MORE THAN 2 MILLION CHILDREN IN 2010.

THE CLINTON ECONOMIC OPPORTUNITY INITIATIVE (CEO) WORKS TO ACCELERATE ECONOMIC PROGRESS IN UNDERSERVED COMMUNITIES IN THE UNITED STATES BY PROMOTING ENTREPRENEURSHIP AND ADVANCING BUSINESS-TO-BUSINESS PUBLIC SERVICE. THROUGH PROGRAMS THAT PROVIDE ENTREPRENEURS WITH SUPPORT, IDEAS, AND TOOLS THAT CAN HELP THEM SUCCESS IN THE MARKETPLACE, CEO AIMS TO EMPOWER GROWING BUSINESSES, CREATE JOBS, GENERATE WEALTH, AND PROMOTE LASTING ECONOMIC DEVELOPMENT. IN 2010, THE AVERAGE GROWTH RATE FOR COMPANIES THAT WERE A PART OF CEO'S ENTREPRENEUR MENTORING PROGRAM (EMP) WAS 12 PERCENT AND THE AVERAGE JOB GROWTH WAS 20 PERCENT. BY 2010, THROUGH CEO'S CONSULTING PROGRAM, BUSINESS OWNERS HAVE PROVIDED MORE THAN 73,500 HOURS OF PRO BONO CONSULTING SERVICES, WORTH MORE THAN \$15 MILLION. ADDITIONALLY IN 2010, CEO LAUNCHED A STRATEGIC PARTNERSHIP WITH

Name of the organization	Employer identification number
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SEEDCO FINANCIAL SERVICES, A NOT-FOR-PROFIT COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION THAT PROMOTES ECONOMIC OPPORTUNITY IN UNDERSERVED COMMUNITIES. THE PARTNERSHIP WILL PROVIDE UP TO 20 SMALL BUSINESS OWNERS IN NEW YORK CITY WITH STRATEGIC ASSESSMENTS FROM BOOZ & COMPANY AND NEW YORK UNIVERSITY'S MBA STUDENTS WITH A LOAN OF UP TO \$750,000 FROM SEEDCO FINANCIAL.

THE CLINTON DEVELOPMENT INITIATIVE (CDI) WORKS TO GIVE SMALLHOLDER FARMERS IN RWANDA AND MALAWI THE TOOLS THEY NEED TO INCREASE THEIR HARVESTS AND INCOMES AND SUPPORT THEIR FAMILIES AND COMMUNITIES. IN CLOSE COLLABORATION WITH FARMERS AND NONGOVERNMENTAL ORGANIZATIONS AND AT THE INVITATION OF THE GOVERNMENTS OF MALAWI AND RWANDA, THESE PROGRAMS PROVIDE ACCESS TO BETTER FARMING INPUTS AND MORE STABLE MARKETS - AND ENSURE THAT COMMUNITIES CAN ULTIMATELY SUSTAIN THEMSELVES. CDI IN MALAWI IS SUPPORTED FINANCIALLY BY THE SALIDA CAPITAL FOUNDATION, AND THE CLINTON HUNTER DEVELOPMENT INITIATIVE (CHDI) IN RWANDA IS A PARTNERSHIP BETWEEN THE CLINTON FOUNDATION AND THE HUNTER FOUNDATION.

IN 2010, CDI EXPANDED THE ANCHOR FARM'S OUTREACH TO 2,505 SMALLHOLDER FARMERS. THROUGH THE ANCHOR FARM PROJECT, SMALLHOLDER FARMERS HAVE EXPERIENCED A 271 PERCENT INCREASE IN YIELDS, 111 PERCENT INCREASE IN THE SALE PRICE OF HARVESTS, AND A 185 PERCENT INCREASE IN PROFITABILITY. IN 2010, CDHI ADVANCED TWO MAJOR AGRIBUSINESSES, SOYCO LTD AND RWANDAN FARMERS COFFEE COMPANY (RFCC). CDHI AND RFCC INITIATED CONSTRUCTION ON A COFFEE ROASTING AND PACKAGING FACILITY IN 2010, IMPROVING THE INCOMES FOR

Name of the organization	Employer identification number
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UP TO 50,000 LOCAL COFFEE FARMERS. SOYCO IS CONTRACTING WITH AN ESTIMATED 30,000 LOCAL FARMERS TO GROW SOYBEANS AND PROVIDING INPUTS TO SUPPORT THEM. AS PART OF THE TREES OF HOPE PROJECT IN MALAWI, IN 2010 CDI HELPED ESTABLISH 102 COMMUNITY NURSERIES AND PLANTED 1 MILLION TREES. SINCE 2007, MORE THAN 2 MILLION TREES HAVE BEEN PLANTED BY 2,000 SMALLHOLDER FARMERS, SEQUESTERING 248,000 OF CO₂, HELPING TO REVERSE DEFORESTATION.

PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

FORM 990, PART III, LINES 4A - 4D

THE CLINTON GIUSTRA SUSTAINABLE GROWTH INITIATIVE (CGSGI) WAS LAUNCHED IN 2007 BY PRESIDENT CLINTON AND PHILANTHROPIST FRANK GIUSTRA AND SEEKS TO NARROW THE WEALTH GAP IN THE DEVELOPING WORLD BY EMPOWERING INDIVIDUALS WITH THE SKILLS, ACCESS, AND OPPORTUNITIES NEEDED TO SUSTAIN A LIVELIHOOD. AN INNOVATIVE PARTNERSHIP AMONG THE CLINTON FOUNDATION, THE PRIVATE SECTOR, GOVERNMENTS, LOCAL COMMUNITIES, AND OTHER NGOS, CGSGI FOCUSES ON ALLEVIATING POVERTY THROUGH MARKET-DRIVEN DEVELOPMENT THAT CREATES JOBS AND INCREASES INCOMES AND ON STRENGTHENING FACTORS THAT ENABLE ECONOMIC GROWTH SUCH AS HEALTH AND EDUCATION. AS PART OF CGSGI'S INCOME-GENERATION PROGRAMS IN COLOMBIA IN 2010, 717 MICROENTREPRISES CREATED 2,160 JOBS AND THROUGH THE HOTEL SUPPLIER NETWORK PROJECT, 23 LOCAL SMALL SUPPLIERS REPRESENTING 193 HOUSEHOLDS AND PRODUCERS HAVE GENERATED \$910,000 IN SALES THROUGH TRANSACTIONS WITH SIX LARGE LOCAL HOTELS AND NINE SMALL LOCAL HOTELS. IN PERU, 3,959 PRODUCERS HAVE RECEIVED TECHNICAL ASSISTANCE AND HAVE REPORTED \$2.6 MILLION IN INCREMENTAL SALES. CGSGI ALREADY OPERATES A CHILD NUTRITION PROGRAM IN

Name of the organization	Employer identification number
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COLOMBIA THAT HAS SERVED 2 MILLION MEALS TO PRIMARY SCHOOL STUDENTS IN
PIES DESCALZOS SCHOOLS. FINALLY, IN 2010, CGSGI'S CATARACTS PROGRAM
PROVIDED NEARLY 16,053 CATARACT SURGERIES TO UNDERSERVED POPULATIONS IN
PERU AND GENERATED MORE THAN \$6.7 MILLION IN POST-SURGICAL ECONOMIC
IMPACT.

THE CLINTON PRESIDENTIAL CENTER, LOCATED IN LITTLE ROCK, ARKANSAS, IS
COMMITTED TO SUPPORTING THE WORK OF THE CLINTON FOUNDATION AND SERVING
THE COMMUNITY BY PROVIDING A FIRST-CLASS VENUE FOR EXHIBITS, EVENTS, AND
EDUCATIONAL PROGRAMS. THE CENTER HAS WELCOMED 2 MILLION VISITORS FROM
AROUND THE WORLD AND PROVIDED FREE SCHOOL TOURS TO MORE THAN 100,000
ARKANSAS STUDENTS. IN ADDITION TO SERVING AS A MAJOR TOURIST ATTRACTION,
THE CENTER HAS DRIVEN ECONOMIC DEVELOPMENT THROUGHOUT THE CITY AND THE
STATE BY INITIATING MORE THAN \$2 BILLION IN REVITALIZATION AND
REINVESTMENT IN THE COMMUNITY. IN 2010, THE CLINTON FOUNDATION SECURED
FUNDING NEEDED TO CONVERT THE FORMER ABANDONED ROCK ISLAND RAILROAD
BRIDGE INTO A PEDESTRIAN AND BICYCLE PATHWAY. ALSO, THE CLINTON
FOUNDATION OFFICES IN LITTLE ROCK AND THE CLINTON SCHOOL OF PUBLIC
SERVICE AT THE UNIVERSITY OF ARKANSAS HAVE REDUCED THEIR ENERGY USE BY 60
PERCENT.

THE CLINTON FOUNDATION HAITI FUND WAS ESTABLISHED BY PRESIDENT CLINTON IN
THE IMMEDIATE AFTERMATH OF THE 7.0 MAGNITUDE EARTHQUAKE THAT STRUCK HAITI
ON JANUARY 12, 2010. THE FUND WAS FORMED TO TURN DONATIONS OF MONEY AND
SUPPLIES INTO DIRECT RELIEF FOR THE PEOPLE AND GOVERNMENT OF HAITI. MORE

Name of the organization	Employer identification number
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THAN 100,00 INDIVIDUALS DONATED MORE THAN \$16.4 MILLION TO THE FUND. THE FOUNDATION SPENT NEARLY \$2.5 MILLION TO DIRECTLY PURCHASE RELIEF SUPPLIES AND SPENT MORE THAN \$1.7 MILLION TO DELIVER AND DISTRIBUTE GOODS DONATED BY OTHER ORGANIZATIONS, BRINING THE TOTAL VALUE OF THE FOUNDATION'S EFFORT TO NEARLY \$28 MILLION. THE FOUNDATION HAS ALSO ISSUED \$5.3 MILLION IN EMERGENCY GRANTS TO 16 ORGANIZATIONS, INCLUDING \$1 MILLION FOR OPERATIONAL SUPPORT OF THE INTERIM HAITI RECOVERY COMMISSION. TO JUMP-START HAITI'S ECONOMIC GROWTH, THE FOUNDATION DONATED \$2.5 MILLION TO LONG-TERM PROJECTS AND FACILITATED ADDITIONAL PROJECTS, INVESTMENTS, AND PARTNERSHIPS. THROUGH THE HAITI RECOVERY COMMISSION TO SUPPORT THE BUILDING BACK BETTER COMMUNITIES INITIATIVE, THE FOUNDATION PROVIDED A \$500,000 GRANT TO THE HAITIAN GOVERNMENT. AND IN JUNE 2010, THE FOUNDATION COMMITTED \$1 MILLION TO CONSTRUCT EMERGENCY COMMUNAL SHELTERS IN LÉOGÂNE, HAITI, THE FIRST FINANCIAL COMMITMENT MADE TO THE INTERIM HAITI RECONSTRUCTION COMMISSION. THE FOUNDATION HAS ALSO FACILITATED INVESTMENTS ACROSS AGRICULTURAL AND RETAIL SECTORS, AND HAS NEW INVESTMENTS IN ARTISANS FROM LARGE INTERNATIONAL RETAILERS SUCH AS MACY'S, WEST ELM, AND DONNA KARAN. ADDITIONALLY, THE FOUNDATION COMMITTED \$1.5 MILLION TO THE HAITIAN MINISTRY OF HEALTH FOR CHOLERA PREVENTION IN 2010 AND HAS SINCE BUILT UPON THIS COMMITMENT. ALSO, AS PART OF ITS IMMEDIATE ASSISTANCE, THE FOUNDATION COMMITTED \$1 MILLION FOR THE TRAINING OF 10,000 COMMUNITY PUBLIC HEALTH WORKERS ACROSS THE COUNTRY, AS WELL AS THE PURCHASE OF 10,000 PORTABLE TREATMENT PACKS FOR THOSE IN NEED.

Name of the organization

WILLIAM J. CLINTON FOUNDATION

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DOCUMENTATION OF COMMITTEE MEETINGS

FORM 990, PART VI, SECTION A, LINE 8B

THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY, THEREFORE, THE MEETINGS ARE NOT CONTEMPORANEOUSLY DOCUMENTED.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, SECTION B, LINE 11B

A COPY OF FORM 990 IS CIRCULATED TO THE BOARD, AMONG THE VARIOUS OFFICERS, AND AMONG THE VARIOUS INITIATIVE HEADS FOR REVIEW PRIOR TO FILING.

CONFLICT OF INTEREST POLICY MONITORING PROCEDURES

FORM 990, PART VI, SECTION B, LINE 12C

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY REQUIRING DIRECTORS, OFFICERS, AND KEY EMPLOYEES TO DISCLOSE ANY POTENTIAL CONFLICTS ANNUALLY. THE ANNUAL DISCLOSURES ARE REVIEWED BY COUNSEL AND IF ANY POTENTIAL CONFLICT EXISTS, IT WOULD BE EXAMINED AND APPROPRIATE ACTION WOULD BE TAKEN.

COMPENSATION DETERMINATION PROCEDURES

FORM 990, PART VI, SECTION B, LINE 15A & 15B

BEGINNING IN 2011, THE ORGANIZATION BEGAN AN ANNUAL COMPENSATION STUDY THAT REVIEWS THREE SURVEYS TO DETERMINE THE REASONABLENESS OF ALL STAFF COMPENSATION INCLUDING TOP MANAGEMENT.

AVAILABILITY OF GOVERNING DOCUMENTS

Name of the organization	Employer identification number
WILLIAM J. CLINTON FOUNDATION	31-1580204

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS AUDITED FINANCIAL STATEMENTS AND ANNUAL REPORT AVAILABLE ON THEIR WEBSITE. ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT

FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S BOARD, AS A WHOLE (INSTEAD OF A COMMITTEE), ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

FUNDRAISING EXPENSES

FORM 990, SCHEDULE G, PART I

ALL FUNDRAISING AGREEMENTS ENTERED INTO BY THE ORGANIZATION STATE THAT FUNDRAISING EXPENSES WILL BE INVOICED SEPARATELY FROM FUNDRAISING FEES. BELOW ARE THE AMOUNTS PAID TO EACH PROFESSIONAL FUNDRAISER FOR FUNDRAISING EXPENSES.

AMERICAN MARKETING & COMMUNICATIONS CORP	\$13,954
--	----------

NEW PROGRAM SERVICES

FORM 990, PART III, LINE 2

THE CLINTON FOUNDATION WAS ENGAGED IN RELIEF AND RECONSTRUCTION IN HAITI AFTER THE JANUARY 2010 EARTHQUAKE.

FOREIGN FINANCIAL ACCOUNTS

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

FORM 990, PART V, LINE 4B

AUSTRALIA, BURUNDI, CAMBODIA, CHINA, COLOMBIA, DOMINICAN REPUBLIC, CONGO
(DEMOCRATIC REPUBLIC), ETHIOPIA, HAITI, INDIA, INDONESIA, KENYA, LESOTHO,
LIBERIA, MALAWI, MOZAMBIQUE, NIGERIA, PAPUA-NEW GUINEA, PERU, RWANDA,
UNITED KINGDOM, TANZANIA, UGANDA, UKRAINE, VIETNAM, ZAMBIA, ZIMBABWE

RECONCILIATION OF NET ASSETS

FORM 990, PART XI, LINE 5

EXPENSES TO ENTITIES INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL
STATEMENTS BUT FILING SEPARATE 990S - \$35,079,094

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

PRESIDENT CLINTON ESTABLISHED THE WILLIAM J. CLINTON FOUNDATION WITH
THE DUAL MISSIONS OF CONSTRUCTING & ENDOWING THE CLINTON PRESIDENTIAL
CENTER & PARK IN LITTLE ROCK, ARKANSAS & CONTINUING THE WORK OF HIS
PRESIDENCY TO STRENGTHEN THE CAPACITY OF PEOPLE IN THE UNITED STATES
& THROUGHOUT THE WORLD TO MEET THE CHALLENGES OF GLOBAL
INTERDEPENDENCE. TO ADVANCE THE MISSION, THE FOUNDATION HAS DEVELOPED
PROGRAMS & PARTNERSHIPS IN THE FOLLOWING AREAS:

-ECONOMIC EMPOWERMENT
-HEALTH SECURITY WITH AN EMPHASIS ON HIV/AIDS
-RACIAL, ETHNIC, & RELIGIOUS RECONCILIATION
-LEADERSHIP DEVELOPMENT & CITIZEN SERVICE

ATTACHMENT 2

Name of the organization	Employer identification number
WILLIAM J. CLINTON FOUNDATION	31-1580204

ATTACHMENT 2 (CONT'D)FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT, DE,

FL, GA, HI, ID, IL, IN, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, SD, TN, TX, VT, VA, WA, WV, WI, WY

ATTACHMENT 3FORM 990, PART VII, COLUMN B - ESTIMATED AVERAGE PER WEEK

NAME AND TITLE	HOURS DEVOTED FOR RELATED ORGANIZATION
BRUCE R LINDSEY	
CEO	6.00
ANDREW KESSEL	
CFO	5.00
LAURA A GRAHAM	
COO	5.00

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**

► **Attach to Form 990.**

► **See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

WILLIAM J. CLINTON FOUNDATION

Employer identification number

31-1580204

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____					
(2) _____					
(3) _____					
(4) _____					
(5) _____					
(6) _____					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WILLIAM J CLINTON FOUNDATION UK 610 PRESIDENT CLINTON AVE 2ND LITTLE ROCK, AR 72201	FUNDRAISING	UK		NA	FOUNDATION	X	
(2) CLINTON GLOBAL INITIATIVE 27-1551550 1200 PRESIDENT CLINTON AVE LITTLE ROCK, AR 72201	INTIATIVE	AR	501 (C) (3)	11B	FOUNDATION	X	
(3) CLINTON HEALTH ACCESS INITIATIVE 27-1414646 383 DORCHESTER AVE BOSTON, MA 02127	HEALTH	AR	501 (C) (3)	9	FOUNDATION	X	
(4) _____							
(5) _____							
(6) _____							
(7) _____							

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

Schedule R (Form 990) 2010

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) -----							
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1) CLINTON GLOBAL INITIATIVE	B	14,927,451.	AMT.CONTRIBUTED
(2) CLINTON HEALTH ACCESS INITIATIVE	B	20,078,060.	AMT.CONTRIBUTED
(3) CLINTON HEALTH ACCESS INITIATIVE	D	7,075,000.	YEAR END BAL.
(4) CLINTON HEALTH ACCESS INITIATIVE	I	182,313.	LEASE AGREEMENT
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) _____										
(2) _____										
(3) _____										
(4) _____										
(5) _____										
(6) _____										
(7) _____										
(8) _____										
(9) _____										
(10) _____										
(11) _____										
(12) _____										
(13) _____										
(14) _____										
(15) _____										
(16) _____										

Schedule R (Form 990) 2010

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

CLINTON GLOBAL INITIATIVE, INC.
FORM 990
TAX YEAR 2010

IRS e-file Signature Authorization
for an Exempt Organization

OMB No. 1545-1878

For calendar year 2010, or fiscal year beginning _____, 2010, and ending _____, 2010

▶ Do not send to the IRS. Keep for your records.

▶ See instructions on back.

2010

Department of the Treasury
Internal Revenue Service

Name of exempt organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

Name and title of officer

ROBERT HARRISON, CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	3,011,760.
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only



I authorize BKD, LLP

ERO firm name

to enter my PIN

1 0 0 1 9

Enter five numbers, but
do not enter all zeros

as my signature

on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.



As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶



Date ▶ 11/14/2011

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

7 1 0 1 5 5 7 2 2 0 3

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2010 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶ 11/14/2011

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2010)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2010**Open to Public
Inspection****A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization

CLINTON GLOBAL INITIATIVE, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

1200 PRESIDENT CLINTON AVENUE

City or town, state or country, and ZIP + 4

LITTLE ROCK, AR 72201

F Name and address of principal officer:

ROBERT HARRISON

1301 AVENUE OF THE AMERICAS NEW YORK, NY 10019-6022

D Employer identification number

27-1551550

E Telephone number

(501) 748-0471

G Gross receipts \$ 3,011,760.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ HTTP://CLINTONGLOBALINITIATIVE.ORG**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 2009 **M** State of legal domicile: AR**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO INSPIRE, CONNECT AND EMPOWER A COMMUNITY OF GLOBAL LEADERS TO FORGE SOLUTIONS TO AND TAKE ACTION ON THE WORLD'S MOST PRESSING CHALLENGES.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	4.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	1.
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	71.
	6	Total number of volunteers (estimate if necessary)	6	550.
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b	Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	0.	3,011,760.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	3,011,760.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
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)	0.	4,069,547.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,072,261.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	0.	10,482,109.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0.	14,745,913.
19	Revenue less expenses. Subtract line 18 from line 12	0.	-11,734,153.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	0.	3,316,899.
	22	Net assets or fund balances. Subtract line 21 from line 20	0.	123,601.
			0.	3,193,298.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer	Date			
	▶ Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ BKD, LLP	Firm's EIN ▶ 44-0160260			
	Firm's address ▶ P.O. BOX 3667 LITTLE ROCK, AR 72203-3667	Phone no. 501-372-1040			
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒**1** Briefly describe the organization's mission:

ATTACHMENT 1

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

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 8,516,193. including grants of \$ 0.) (Revenue \$ 0.)

THE CGI ANNUAL MEETING

SEE SCHEDULE O FOR FURTHER DETAILS

4b (Code:) (Expenses \$ 1,695,887. including grants of \$ 194,257.) (Revenue \$ 0.)

CGI UNIVERSITY

SEE SCHEDULE O FOR FURTHER DETAILS

4c (Code:) (Expenses \$ 53,810. including grants of \$ 0.) (Revenue \$ 0.)

THE MID-YEAR MEETING

SEE SCHEDULE O FOR FURTHER DETAILS

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 2,635,098. including grants of \$ 0.) (Revenue \$ 0.)

4e Total program service expenses ► 12,900,988.

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 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
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? <i>If "Yes," complete Schedule C, Part II</i>	4	X
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? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<input checked="" type="checkbox"/>	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
24 a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a 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? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	<input checked="" type="checkbox"/>	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	<input checked="" type="checkbox"/>	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule R, Part VI.</i>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	<input checked="" type="checkbox"/>	

Form **990** (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 48		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 71		
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	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 4		
b Enter the number of voting members included in line 1a, above, who are independent 1b 1		
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		X
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		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Does the organization have members or stockholders? 6	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
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		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c	X	
13 Does the organization have a written whistleblower policy? 13	X	
14 Does the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a		X
b Other officers or key employees of the organization 15b		X
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		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► ATTACHMENT 2**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **► ANDY KESSEL 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201 501-748-0471**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII. ☒ X**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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ATTACHMENT 3										
(1) DOUGLAS J. BAND DIRECTOR	5.00	X						0.	80,348.	9,836.
(2) ROBERT S. HARRISON DIRECTOR & CEO	50.00	X		X				159,760.	0.	15,304.
(3) BRUCE R. LINDSEY DIRECTOR	5.00	X						0.	276,298.	32,265.
(4) ERIC S. NONACS DIRECTOR	5.00	X						0.	0.	0.
(5) EDWARD F. HUGHES SECRETARY	50.00			X				140,737.	0.	13,659.
(6) LISA A. RICKERT TREASURER	50.00			X				104,107.	0.	16,778.
(7) MARILIA BEZERRA DIRECTOR OF COMMITMENTS	50.00					X		103,461.	0.	26,704.
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total								508,065.	356,646.	114,546.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								508,065.	356,646.	114,546.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **4**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

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.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **13**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	3,011,760.			
	g	Noncash contributions included in lines 1a-1f: \$		596,500.			
	h	Total. Add lines 1a-1f		3,011,760.			
Program Service Revenue				Business Code			
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f			0.		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			0.		
	4	Income from investment of tax-exempt bond proceeds . . .			0.		
	5	Royalties			0.		
		(i) Real	(ii) Personal				
	6a	Gross Rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)			0.		
		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)			0.		
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a			
	b	Less: direct expenses		b			
	c	Net income or (loss) from fundraising events			0.		
	9a	Gross income from gaming activities. See Part IV, line 19		a			
	b	Less: direct expenses		b			
	c	Net income or (loss) from gaming activities			0.		
	10a	Gross sales of inventory, less returns and allowances		a			
b	Less: cost of goods sold		b				
c	Net income or (loss) from sales of inventory			0.			
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d			0.			
12	Total revenue. See instructions			3,011,760.			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	185,757.	185,757.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	8,500.	8,500.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	460,181.	0.	460,181.	0.
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	2,834,073.	1,963,994.	208,726.	661,353.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	133,531.	97,864.	8,859.	26,808.
9 Other employee benefits	363,454.	266,373.	24,114.	72,967.
10 Payroll taxes	278,308.	203,970.	18,465.	55,873.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	3,319.	0.	3,319.	0.
c Accounting	0.			
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	1,427,418.	1,427,418.	0.	0.
12 Advertising and promotion	230,657.	199,129.	11,318.	20,210.
13 Office expenses	204,055.	138,671.	2,538.	62,846.
14 Information technology	42,235.	26,067.	0.	16,168.
15 Royalties	0.			
16 Occupancy	219,762.	164,698.	0.	55,064.
17 Travel	647,326.	542,326.	35,000.	70,000.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	7,570,161.	7,570,161.	0.	0.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	0.			
23 Insurance	0.			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e _____				
f All other expenses _____	137,176.	106,060.	144.	30,972.
25 Total functional expenses. Add lines 1 through 24f	14,745,913.	12,900,988.	772,664.	1,072,261.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	0.	2	2,044,999.
	3 Pledges and grants receivable, net	0.	3	675,400.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 596,500.		
	b Less: accumulated depreciation	10b 0.	0.	10c 596,500.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	0.	16	3,316,899.	
Liabilities	17 Accounts payable and accrued expenses	0.	17	123,601.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	123,601.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	0.	27	2,517,898.
	28 Temporarily restricted net assets	0.	28	675,400.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	0.	33	3,193,298.
	34 Total liabilities and net assets/fund balances	0.	34	3,316,899.

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Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,011,760.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,745,913.
3	Revenue less expenses. Subtract line 2 from line 1	3	-11,734,153.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	0.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	14,927,451.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,193,298.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		X
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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?		X
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.		

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☒ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

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

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

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

- (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?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A) ATTACHMENT 1									
(B)									
(C)									
(D)									
(E)									
Total									0.

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

Schedule A (Form 990 or 990-EZ) 2010

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19 a 33 1/3 % support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3 % support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

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

SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED ORGANIZATIONS						ATTACHMENT 1
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	(III) TYPE OF ORGANIZATION	(IV) YES NO	(V) YES NO	(VI) YES NO	(VII) AMOUNT OF SUPPORT
WILLIAM J. CLINTON FOUNDATION	31-1580204	03	X	X	X	0.
TOTAL AMOUNT OF SUPPORT						0.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 442,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 154,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	VARIOUS CASH DONATIONS BELOW 2% LIMIT 1301 AVENUE OF THE AMERICAS NEW YORK, NY 10019-6022	\$ 1,615,260.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	SOFTWARE	\$ 442,500.	08/31/2010
5	COMPUTERS	\$ 154,000.	08/31/2010
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2010

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

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

a

Public exhibition

d

Loan or exchange programs

b

Scholarly research

e ☐

Other

C ☐

Preservation for future generations

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

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

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

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

b If "Yes," explain the arrangement in Part XI V and complete the following table:

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XI V.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ %

b Permanent endowment ► %

c Term endowment ► %

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

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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

Part VI Land, Buildings, and Equipment See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		596,500.	0.	596,500.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				596,500.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,011,760.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,745,913.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-11,734,153.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	14,927,451.
9	Total adjustments (net). Add lines 4 through 8	9	14,927,451.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	3,193,298.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	20,005,636.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	2,066,425.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	14,927,451.
e	Add lines 2a through 2d	2e	16,993,876.
3	Subtract line 2e from line 1	3	3,011,760.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	3,011,760.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	16,812,338.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	2,066,425.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	2,066,425.
3	Subtract line 2e from line 1	3	14,745,913.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	14,745,913.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information *(continued)*

REVENUE RECONCILIATION

FORM 990, SCHEDULE D, PART XII, LINE 2D

REVENUE FROM AN ENTITY INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL
STATEMENTS BUT FILING A SEPARATE 990 - \$14,927,451

RECONCILIATION OF CHANGE IN NET ASSETS

FORM 990, SCHEDULE D, PART XI, LINE 8

REVENUE FROM AN ENTITY INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL
STATEMENTS BUT FILING A SEPARATE 990 - \$14,927,451

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

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.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

27-1551550

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

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) NORTH AMERICA	0.	0.	GRANTMAKING	NA	8,500.
(2) SOUTH ASIA	0.	0.	FUNDRAISING	NA	0.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0.	0.			8,500.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0.	0.			8,500.

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

Schedule F (Form 990) 2010

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. Check this box if no one recipient received more than \$5,000 ☐
 Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	SUPPORT	8,500.	WIRE	0.	NA	NA
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐ 1.
- 3 Enter total number of other organizations or entities ☐ 0.

Schedule F (Form 990) 2010

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

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

Schedule F (Form 990) 2010

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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).

MONITORING PROCEDURES FOR USE OF GRANT FUNDS

FORM 990, SCHEDULE F, PART I, LINE 2

THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS

DETAILING THE USE OF GRANT FUNDS.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Employer identification number

27-1551550

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	AFRICAN MILLENIUM FOUNDATION 468 NORTH CAMDEN DR BEVERLY HILLS, CA 90210	95-4787785	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(2)	ASSOC. STUDENTS OF THE UNIVERSITY OF CALIFO 400 ESHLEMAN HALL #4500 BERKELEY, CA 94720	94-0294680	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(3)	DISMAS INC. 1513 16TH AVE S. NASHVILLE, TN 37212	23-7376100	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(4)	MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594		6,000.	0.	NA	NA	GENERAL SUPPORT
(5)	OBERLIN COLLEGE 70 NORTH PROFESSOR STREET, COX 100	34-0714363	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(6)	ONE EARTH DESIGNS INC. PO BOX 382559 CAMBRIDGE, MA 02238	27-0253576	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(7)	ST OLAF COLLEGE ST OLAF COLLEGE NORTHFIELD, MN 55057	41-0693979		6,000.	0.	NA	NA	GENERAL SUPPORT
(8)	WELLO 13-18 136 STREET COLLEGE POINT, NY 11356	26-1751484	501(C)(3)	6,000.	0.	NA	NA	GENERAL SUPPORT
(9)	JOHNS HOPKINS UNIVERSITY 12529 COLLECTIONS CTR. DRIVE	52-0595110		7,000.	0.	NA	NA	GENERAL SUPPORT
(10)	US PROVINCE OF THE RELIGIOUS OF JESUS AND M 4TH FLOOR - HAITI FUND COORDINATOR	26-1973277		8,000.	0.	NA	NA	GENERAL SUPPORT
(11)	UNIVERSITY OF CALIFORNIA, BERKELEY HEARST AVENUE BERKELEY, CA 94720	94-6002123		10,000.	0.	NA	NA	GENERAL SUPPORT
(12)	UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN 601 EAST JOHN STREET CHAMPAIGN, IL 61820	37-6000511		10,000.	0.	NA	NA	GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations 6.

3 Enter total number of other organizations 6.

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

Schedule I (Form 990) (2010)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

MONITORING PROCEDURES FOR USE OF GRANT FUNDS

FORM 990, SCHEDULE I, PART I

THE ORGANIZATION REQUIRES A FINAL REPORT FROM ALL GRANT RECIPIENTS

DETAILING THE USE OF GRANT FUNDS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

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.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

27-1551550

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization? . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . .
- b** Any related organization? . . .
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . .
- b** Any related organization? . . .
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2010

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROBERT S. HARRISON	(i)	154,760.	5,000.	0.	0.	15,304.	175,064.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 BRUCE R. LINDSEY	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	276,298.	0.	0.	16,799.	15,466.	308,563.	0.
3 EDWARD F. HUGHES	(i)	135,737.	5,000.	0.	8,214.	5,445.	154,396.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Schedule J (Form 990) 2010

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

SCHEDULE J, PART I

QUESTIONS REGARDING COMPENSATION

COMPENSATION FOR ALL EMPLOYEES OF CGI ARE REVIEWED FOR SUITABILITY BY THE

"SUPPORTED" ORGANIZATION.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
► Attach to Form 990.**

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (SOFTWARE)	X	1.	442,500.	FMV
26 Other ► (COMPUTERS)	X	1.	154,000.	FMV
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0.

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2010)

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

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 990-EZ or to provide any additional information.**
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

FORM 990 REVIEW PROCESS

FORM 990, PART VI, SECTION B, LINE 11B

THE ORGANIZATION HAS A SHARED SERVICES AGREEMENT WITH THE WILLIAM J.
CLINTON FOUNDATION, AND THE FORM 990 WAS PREPARED BY THE OFFICERS OF THE
ORGANIZATION IN CONSULTATION WITH OFFICERS OF THE WILLIAM J. CLINTON
FOUNDATION AND THEIR OUTSIDE LEGAL AND ACCOUNTING COUNSEL.

CONFLICT OF INTEREST POLICY MONITORING PROCEDURES

FORM 990, PART VI, SECTION B, LINE 12C

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS COMPLIANCE WITH THE
CONFLICT OF INTEREST POLICY BY REQUIRING DIRECTORS, OFFICERS, AND KEY
EMPLOYEES TO DISCLOSE ANY POTENTIAL CONFLICTS ANNUALLY. THE ANNUAL
DISCLOSURES ARE REVIEWED BY COUNSEL AND IF ANY POTENTIAL CONFLICT EXISTS,
IT WOULD BE EXAMINED AND APPROPRIATE ACTION WOULD BE TAKEN.

AVAILABILITY OF GOVERNING DOCUMENTS

FORM 990, PART VI, SECTION C, LINE 19

THE WILLIAM J. CLINTON FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS
AND ANNUAL REPORT AVAILABLE ON THEIR WEBSITE; CGI IS CONSOLIDATED IN
THESE REPORTS. ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

SOLE MEMBER

FORM 990, PART VI, SECTION A, LINE 6 & 7A

WILLIAM J. CLINTON FOUNDATION IS THE ORGANIZATION'S SOLE MEMBER. ALSO,

Name of the organization	Employer identification number
CLINTON GLOBAL INITIATIVE, INC.	27-1551550

THE MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS ARE APPOINTED BY THE FOUNDATION.

PROGRAM SERVICE CHANGES

FORM 990, PART III, LINES 2 & 3

IN 2009, CGI OPERATED AS A PROGRAM OF THE WILLIAM J. CLINTON FOUNDATION ("FOUNDATION"), AND THUS, ALL PROGRAM SERVICE ACCOMPLISHMENTS, INCLUDING REVENUES GENERATED BY THOSE SERVICES, WERE ATTRIBUTED TO THE FOUNDATION IN 2009 AND WERE REFLECTED ON THE FOUNDATION'S 990 FOR 2009.

IN 2009, CGI BECAME A STAND ALONE SUPPORTING ORGANIZATION OF THE FOUNDATION BUT HAD NO ACTIVITY WHILE AWAITING 501(C)(3) APPROVAL, WHICH OCCURRED IN AUGUST 2009. ALL PROGRAM SERVICE ACCOMPLISHMENTS, INCLUDING REVENUES GENERATED BY THOSE SERVICES, ARE NOW REFLECTED ON CGI'S 990 FOR 2010.

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINES 4A-4D

CGI'S THREE LARGEST PROGRAMS ARE THE CGI ANNUAL MEETING, CGI U AND THE MID-YEAR MEETING.

IN 2010, CGI'S MEMBERS MADE 308 COMMITMENTS VALUED AT \$6.0 BILLION AND WILL HAVE A POSITIVE IMPACT ON THE LIVES OF MORE THAN 575 MILLION PEOPLE WHEN FULLY FUNDED AND IMPLEMENTED. COLLECTIVELY, THESE COMMITMENTS ENSURE THAT: OVER 5 MILLION CHILDREN WILL HAVE A BETTER EDUCATION, 96 MILLION PEOPLE WILL HAVE ACCESS TO SAFE DRINKING WATER, \$1 BILLION WILL

Name of the organization	Employer identification number
CLINTON GLOBAL INITIATIVE, INC.	27-1551550

BE INVESTED IN SMALL-AND MEDIUM-SIZED BUSINESSES AND 715 MILLION METRIC
TONS OF CO2 WILL NOT BE RELEASED INTO THE ATMOSPHERE.

IN 2010, CGI U WAS ATTENDED BY 1,253 STUDENTS WHO MADE 1,103 COMMITMENTS
INCLUDING: THE SCHOOL FUND - AN ONLINE PERSON-TO-PERSON LENDING PLATFORM
THAT CONNECTS IN NEED STUDENTS WITH POTENTIAL DONORS FROM AROUND THE
WORLD; A MICROFINANCE SEWING PROJECT THAT WILL CREATE REUSABLE, WASHABLE,
AND ENVIRONMENTALLY FRIENDLY MENSTRUAL SANITARY PADS IN THE RURAL VILLAGE
OF LWALA, KENYA AND PAINTING ROOFTOPS WHITE IN NEW YORK CITY TO REDUCE
BUILDINGS' OVERALL ENERGY CONSUMPTION.

THE MID-YEAR MEETING BROUGHT TOGETHER OVER 300 PEOPLE THAT MET AROUND
NINE TOPICS (EMPOWERING WOMEN, AGRICULTURE AND SUPPORT FOR SMALL HOLDER
FARMERS, INVESTING FOR SOCIAL AND ENVIRONMENTAL IMPACT, OPPORTUNITIES FOR
ACTION IN HEALTH, GREEN MOBILITY, RETHINKING WASTE AND ITS MANAGEMENT,
THE SOCIAL WEB, LOW COST TECHNOLOGIES FOR EDUCATION, COMBATING CANCER IN
THE DEVELOPING WORLD) TO FURTHER THEIR ACTIONABLE PLANS TO ADDRESS THESE
ISSUES.

AUDIT REVIEW

FORM 990, PART XII, LINE 2C

THE WILLIAM J. CLINTON FOUNDATION PERFORMS THE OVERSIGHT OF THE AUDIT OF
THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT FOR
CGI.

RECONCILIATION OF NET ASSETS

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

FORM 990, PART XI, LINE 5

REVENUE FROM AN ENTITY INCLUDED IN THE CONSOLIDATED AND AUDITED FINANCIAL

STATEMENTS BUT FILING A SEPARATE 990 - \$14,927,451

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

FOSTERING PARTNERSHIPS, PROVIDING STRATEGIC ADVICE, AND DRIVING

RESOURCES TOWARD EFFECTIVE IDEAS, CGI HELPS ITS MEMBERS -

ORGANIZATIONS FROM THE PRIVATE SECTOR, PUBLIC SECTOR AND CIVIL

SOCIETY - MAXIMIZE THEIR EFFORTS TO ALLEVIATE POVERTY, CREATE A

CLEANER ENVIRONMENT AND INCREASE ACCESS TO HEALTH CARE AND EDUCATION.

ATTACHMENT 2FORM 990, PART VI, LINE 17 - STATES

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

ATTACHMENT 3FORM 990, PART VII, COLUMN B - ESTIMATED AVERAGE PER WEEK

NAME AND TITLE

HOURS DEVOTED FOR RELATED ORGANIZATION

BRUCE R. LINDSEY
DIRECTOR

46.00

ATTACHMENT 4

Name of the organization	Employer identification number
CLINTON GLOBAL INITIATIVE, INC.	27-1551550

ATTACHMENT 4 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
FIVE CURRENTS 12400 WILSHIRE BLVD., SUITE 1275 LOS ANGELES, CA 90025	EXECUTIVE PRODUCERS	641,514.
STAGE CALL 311 WEST 43RD ST. NEW YORK, NY 10036	STAGE CREW PROVIDERS	453,000.
MEDIA VISIONS 6630 ARROYO SPRINGS ST., #80 LAS VEGAS, NV 89113-1946	VIDEO SYSTEMS VENDOR	428,000.
LANKEY & LIMEY 85 ST. JAMES TERRACE YONKERS, NY 10704	TECHNICAL PRODUCER	576,000.
FUSION IMAGING 601 WEST BORO ST. KAYSVILLE, UT 84037	PRINTED GRAPHIC	409,000.
TOTAL COMPENSATION		<u>2,507,514.</u>

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

CLINTON GLOBAL INITIATIVE, INC.

Employer identification number

27-1551550

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____					
(2) _____					
(3) _____					
(4) _____					
(5) _____					
(6) _____					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WILLIAM J CLINTON FOUNDATION 31-1580204 1200 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	ECONOMIC DEV	AR	501 (C) (3)	7	NA		X
(2) WILLIAM J CLINTON FOUNDATION UK 610 PRESIDENT CLINTON AVE 2ND LITTLE ROCK, AR 72201	FUNDRAISING	UK	NA	NA	WJC FDN		X
(3) CLINTON HEALTH ACCESS INITIATIVE 27-1414646 383 DORCHESTER AVE BOSTON, MA 02127	HEALTH	AR	501 (C) (3)	9	WJC FDN		X
(4) _____							
(5) _____							
(6) _____							
(7) _____							

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

Schedule R (Form 990) 2010

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) -----							
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) _____										
(2) _____										
(3) _____										
(4) _____										
(5) _____										
(6) _____										
(7) _____										
(8) _____										
(9) _____										
(10) _____										
(11) _____										
(12) _____										
(13) _____										
(14) _____										
(15) _____										
(16) _____										

Schedule R (Form 990) 2010

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
