efile Public Visual Render ObjectId: 001 - Submission: 2015-01-16 TIN: 20-5478191 OMB No. 1545 **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation Do not enter social security numbers on this form as it may be made public. Open to Public Department of the ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Inspection Treasury Internal Revenue Servi For the 2019 calendar year, or tax year beginning 01-01-2019 and ending 12-31-2019 C Name of organization D Employer identification number **B** Check if applicable: Address change US Chamber of Commerce Foundation 46-1561597 Name change Initial return Doing business as Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Amended return 1615 H ST NW Application pending (202) 463-5590 City or town, state or province, country, and ZIP or foreign postal code Washington, DC $\,$ 20062 G Gross receipts \$ 34,997,981 F Name and address of principal officer: H(a) Is this a group return for Stan M Harrell Yes No subordinates? 1615 H ST NW H(b) Are all subordinates □Yes □ No Washington, D C 20062 included? Tax-exempt status: 501(c)(3) If "No," attach a list. (see instructions) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 **H(c)** Group exemption number ▶ Website: http://www.uschamberfoundation.org/ L Year of formation: 2012 M State of legal domicile: DE K Form of organization: Corporation Trust Association Other Summary 1 Briefly describe the organization's mission or most significant activities: The US Chamber of Commerce Foundation conducts (Please see Schedule O for the continuation) charitable and educational activities to address issues affecting our nation, our economy, and the global business environment Activities & Governance 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . 6 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 64 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 . 4,413 Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . 23,227,972 25,056,312 Program service revenue (Part VIII, line 2g) . . . 2,268,055 2,185,316 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,387,190 1,688,104 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 269,503 309,118 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 27,152,720 29,238,850 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 1,324,998 1,208,010 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 6,886,560 7,805,274 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . Total fundraising expenses (Part IX, column (D), line 25) ▶981,623 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 15,869,307 19,515,038 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 24,080,865 28,528,322 3,071,855 Revenue less expenses. Subtract line 18 from line 12 . 710,528 d Balances Beginning of Current **End of Year** 55,857,911 20 Total assets (Part X, line 16) . 49,897,158 Total liabilities (Part X, line 26) . 317,525 497,190 49,579,633 Net assets or fund balances. Subtract line 21 from line 20 . 55,360,721 **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. 2020-11-11 Signature of officer Sign Stan M Harrell CFO Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check if P00395735 **Paid** self-employed Firm's name Frnst and Young US LLP Firm's EIN > 34-6565596 Preparer Use Only Firm's address 111 Monument Circle Ste 4000 Phone no. (317) 681-7000 Indianapolis, IN 46204 May the IRS discuss this return with the preparer shown above? (see instructions) No For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)

Form	990 (2019)	Page 2
Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	🔽
1	Briefly describe the organization's mission:	
	US Chamber of Commerce Foundation conducts charitable and educational activities to address issues affecting our	nation, our
econo	omy, and the global business environment.	
2	Did the augustical undertake any significant augusts convices during the year which were not listed on	
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 V No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	•
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation the total expenses, and revenue, if any, for each program service reported.	is to others,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 10,015,368 including grants of \$ 15,000) (Revenue \$	561,584)
	Hiring Our Heroes (HOH) is a nationwide effort to help veterans, transitioning service members, and military spouses find meaningful employed for Commerce Foundation runs the program to improve public-private sector coordination in hundreds of communities across America.	byment. The US Chamber
	or Commerce Foundation runs the program to improve public-private sector coordination in numbreds or communities across America.	
4b	(Code:) (Expenses \$ 5,710,026 including grants of \$ 190,000) (Revenue \$	267,635)
	The Center for Education and Workforce, through its research, programs, and policy on education and skills training, mobilizes the business	community to be more
	engaged partners, challenge the status quo, and connect education and workforce reforms to economic development.	
4c	(Code:) (Expenses \$ 3,896,204 including grants of \$ 52,000) (Revenue \$	196,526)
70	The US Chamber of Commerce Foundation Corporate Citizenship Center is a leading resource for educating the public and sharing best practice.	. ,
	businesses can make a difference. Our programs, events, research, and relationships with key NGOs and governments have educated the particle can improve social and environmental conditions.	oublic on how business
	(Code:) (Expenses \$ 1,025,837 including grants of \$ 0) (Revenue \$	1,117,206)
	Institute for Organization Management:Institute for Organization Management is the professional education program of the US Chamber of	
	is the premier nonprofit professional education program for association and chamber professionals, fostering individual growth through internetworking opportunities. Since 1921, the Institute has educated thousands of past, current, and future nonprofit leaders from across the co	
	the oldest and best regarded adult education programs in nonprofit management.	
	(C. L	4.400.)
	(Code:) (Expenses \$ 3,259,261 including grants of \$ 134,910) (Revenue \$ Research, public education, and meetings to drive the public policy debate on key or emerging issues affecting the business community.	4,100)
	Research, public education, and meetings to drive the public policy debate on key of emerging issues affecting the business community.	
	(Code:) (Expenses \$ 933,137 including grants of \$ 816,100) (Revenue \$	309,118)
	Contributions, ones which are over \$5,000 are detailed in Schedule I.	,
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 5,218,235 including grants of \$ 951,010) (Revenue \$ 1,430	0,424)
4e	Total program service expenses ▶ 24,839,833	
		Form 990 (2019)

Form	990 (2019)			Page 3
Pai	Checklist of Required Schedules			-
	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥌	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. S	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8	No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. S	11a	No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	N o
_	Did the organization's congrets or consolidated financial statements for the tay year include a feetnets that	l	

9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 15	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
	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)?	11f	Yes	
12a	មើរពី ^y មាន Grynnlett ទីតាំ១៩៤៤ ទីតាំ១៩៤៤ និក្សា dependent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII ំ	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

		116		N O
	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)?	11f	Yes	
12a	មីដើ ^y អាច ទល្លាង៧១៩ ទើត្ ^រ ២៩៤៩ Pse ក្រុម ដែរ Pse ក្រុម Adependent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
			Form 99	0 (2019)

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X; line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?	26		No
27	មីលើវិសាខ ចេញជាខែមានក្រាស់ ខេត្ត នៅ to rother assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Νο
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30		Νο
31	ਲਿੰਗ ⁷ ਜੀਵ ਰਿਉਕਸੀਟਰੀ ਤਿਸੀ ਜ਼ਿੰਦੀਰਿ ਸਿੰਦ terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part l</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
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?	33		Νo
34	Wayene ชาตูมโกษา เดิดเลยโลย ใช้โลกง tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νο
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. D
	Check if Schedule O contains a response of hote to any fine in this Part v	•	· ·	. No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 196		Yes	INO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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, better the name of the foreign country:	4a		No
5 a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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).			
	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		N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		N o N o
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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 Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		140
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		N o
16	IS "t'Neso" gazei żastoro catro est waced i Gihea Forrstoi (407, Sudbjecto Nathe section 4968 excise tax on net investment income?	16		N o
	If "Yes," complete Form 4720, Schedule O.	I	orm 99	0 (2019)

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" re 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	sponse	to lines	. v
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 7			
	Yethere are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		Νο
5	blad the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	401	V	
С	rise to conflicts?	12b	Yes	
	in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4 	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b	Yes	
l6a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4.41		
6-		16b		
<u>5e</u> 17	List the states with which a copy of this Form 990 is required to be filed			
.,	AL,AR,CA,CO,FL,GA,HI,IL,KS MN,MS,NH,NJ,NM,NY,OH,OR, UT,VA,WI,WV			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Vpon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record Stan M Harrell 1615 H ST NW Washington, D C 20062 (202) 463-5590	s:		

Part VII

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

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

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

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

(A)	(B)			(C))		ļ	(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations	unles d	ore th	(do nan rsor cer a or/t	not one n is and	both a tee)		Reportable compensation from the organization (W-2/1099- MISC)	Reportable compensation from related organizations (W-2/1099- MISC)	Estimated amount of other compensation from the organization and related
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		,	organizations
(1) Thomas J Donohue	1.00			Х				0	6 640 224	10 000
CEO	40.00			^				Ü	6,649,224	18,882
(2) Suzanne Clark	2.00									
President & Director	38.00	Х						0	2,998,166	147,589
(3) Justin Waller	1.00									
Operations officer	40.00				Х			0	1,140,477	27,631
(4) Stan Harrell	1.00									
CFO				Х				0	772,423	327,521
(5) Carolyn Cawley Westermann	40.00 20.00									
Senior Vice President				Х				359,669	198,600	34,036
	20.00 36.00									
(6) Eric Eversole					Х			306,702	209,823	54,652
Pres, HOH	4.00 15.00									
(7) Ryan Meyers Gnl Cnsl & Secy	25.00			х				0	379,787	33,405
(8) Kathryn Traver	40.00					.,		204 007		204.047
VP Operations, Asst Secy						X		201,087	0	201,947
(9) Cheryl Oldham	33.00									
SVP, Educ & Workf USCCF	7.00				Х			0	311,247	50,332
(10) Marc E DeCourcey SVP, CCC	40.00				Х			279,712	0	56,039
(11) Rebecca Mousseau Exec Dir, Corp Relations, CCC	40.00					х		183,960	0	147,729
(12) Michael Carney SVP Emerging Issues	40.00					х		231,915	0	48,193
	40.00									
(13) Horace C Hodges						Х		217,473	0	24,197
Sr Dir, Events & Prog, HOH	32.00									
(14) Jason Tyszko VP, CEW	8.00					х		0	193,905	35,827
(15) Diana Cantor	1.00									
Director		Х						0	0	0
(16) Jennifer L Dorn	1.00									
		X						0	0	0
Director								I		

	n 990 (2019) rt VII Section A. Officers, Direct	tors, Trustees, K	ey En	ıplo	yees	s, a	nd Hi	ighe	est Compensate	d Employees (continu	ed)	Page 8
	(A) Name and title	Name and title Average hours per week (list any hours for Average hours per week (list any hours for Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization	(E) Reportable compensation from related organization	amou com f	(F) Estimated amount of ot compensation from the	
		related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	an	d rel	ation ated ations
(18)	William G Little	1.00							0		0		
Chair	/Director	1.00	х						0		0		C
(19)	Michael S Neal	1.00	х						0		0		(
Direc	tor		^						0		Ů,		
(20)	Donald Shepard	1.00	Х						0		0		(
Direc													
	Sub-Total			•		•	•						
	Total from continuation sheets to Par Total (add lines 1b and 1c)			•			<u> </u>		1,780,518	12,853,652			1,207,98
2	Total number of individuals (includin \$100,000 of reportable compensation)	ng but not limited t	o those			bov	e) who	o red	J	12,033,032			1,207,30
	. , ,										Ye	es	No
3	Did the organization list any former on line 1a? <i>If "Yes," complete Schedu</i>			ee, ke	ey er	mplo	yee,	or h	ighest compensate		3		No
4	For any individual listed on line 1a, organization and related organization												110
	individual										4 Y	:S	
5	Did any person listed on line 1a rece services rendered to the organization								-		5		No
S	ection B. Independent Contra	ctors								•			
1	Complete this table for your five hig compensation from the organization									the organization			
	Name a	(A) and business address							Descrir	(B) otion of services	Co	(C mper	c) nsation
The N	Markham Group LLC								Consult on eve			_	,537,25
	W 3RD Street												

Name and business address	Description of services	Compensation
The Markham Group LLC	Consult on events	3,537,252
1000 W 3RD Street Little Rock, AR 72201		
Propper Daley	Public relations services	469,606
6380 Wilshire Blvd Suite 1500 Los Angeles, CA 90048		
Robert G Sheets	Educational consulting	197,486
5515 Pershing Ave Downers Grove, IL 60515		
Advoc 8 LLC	Digital and print services	149,875
PO Box 90480 Washington, DC 20090		
HCM Strategists LLC	Policy research	145,113
1156 15th St NW Suite 850 Washington, DC 20036		
2 Total number of independent contractors (including but not limited to those listed	above) who received more than	

	990 (2019)							Page 9
Part		of Revenu			It			
			is a res	ponse or note to a	any line in this Part (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Giffs, Grants and Other Similar Amounts	 Federated camp Membership du Fundraising eve Related organiz Government grants 	es ents ations	1a 1b 1c 1d 1e	5,400				
	f All other contribution and similar amount above g Noncash contribution lines 1a - 1f:\$	s not included	1f	25,050,912				
	h Total. Add lines	1a-1f	1g		25.056.212			
				Business Code	25,056,312			
e	2a Professional training			611600	1,117,206	1,117,206		
Program Service Revenue	b Govt svc grants			541900	432,584	432,584		
arvice	d Service sales			900099	333,261 264,000	333,261 264,000		
am Se	e Sales promotion			541900	19,500	,	19,500	
Progr				900099	18,765		18,765	
	f All other program	n service rever	iue.					
	9 Total. Add lines			2,185,316	-1		1	
	3 Investment income	e (including di	vidends	, interest, and	1,447,011	L	-84,758	1,531,769
	other 49imilareaffounitales	stment of tax-	exemnt	hond proceeds				
	5 Royalties							
	Dicoyarties 1	(i) R		(ii) Personal				
		(1)		(,				
	6a Gross rents b Less: rental	6a			_			
	expenses c Rental income or	6b 6c			_			
	d (Nets) ental incom							
		(i) Secu		(ii) Other▶				
	7a Gross amount from sales of assets other than inventory		5,000,224					
	b Less: cost or other basis and sales expenses	7b	5,759,131		_			
	c Gain or (loss) d Net gain or (loss	7c	241,093		241,093	3	50,906	190,187
	8a Gross income from fu			· · · <u></u>	·		·	
Other Revenue	(not including \$ contributions reporte See Part IV, line 18 b Less: direct expe	d on line 1c).	8a 8b					
ther	c Net income or (Io	iss) iroini luilai	aising 6	• vents ▶				
Ö	9a Gross income fro activities. See Part IV, line: b Less: direct expe	19 enses	9a 9b		-			
	c Net income or (Io	oss) from gami	ng activ	/ities 🛌				

10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of	inve	ntory				
		•				
Miscellaneous Revenue		Business Code				
11a Affiliate svc charges		561000	309,118	309,118		
ь						
С						
d All other revenue						
e Total. Add lines 11a-11d			309,118			
12 Total revenue. See instructions .			29,238,850	2,456,169	4,413	1,721,956

1,721,956 Form **990** (2019)

	Section $501(c)(3)$ and $501(c)(4)$ organizations must				te column (A)
	Check if Schedule O contains a response or note to	any line in this Part	IX		🔽
	not include amounts reported on lines 6b, 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 domestic organizations and domestic governments. See Part IV, line 21	1,208,010	1,208,010		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,090,810	817,733		273,077
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,922,544	4,568,862		353,682
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,791,920	1,675,205		116,715
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal	142,340	32,724	109,616	
c	:Accounting	67,000		67,000	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	116 205	116 205		
	Investment management fees	8,263,495	8,263,473		22
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,203,493	0,203,473		
12	Advertising and promotion	421,679	421,319		360
13	Office expenses	714,975	714,789		186
14	Information technology	774,682	774,682		
15	Royalties				
	Occupancy	4 555 050	4 504 400		
	Payments of travel or entertainment expenses for any	1,576,970	1,534,499		42,471
	federal, state, or local public officials .				
19	Conferences, conventions, and meetings	3,968,088	3,882,978		85,110
20	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list				
	line 24e expenses on Schedule O.)	2 520 000		2,530,000	
	a Administrative support	2,530,000	764 740	2,530,000	
	b Program support service	761,718	761,718		
	c Bad debt	176,000	66,000		110,000
	d Taxes and fees	1,806	1,556	250	
	e All other expenses				
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	28,528,322	24,839,833	2,706,866	981,623

For	n 990	(2019)			Page 11
Р	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this	Part IX		🗆
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	4,901,376	3	8,572,523
	4	Accounts receivable, net		4	
	5	Loans and other payables to any current or former officer, director, t	rustee,		
		key employee, creator or founder, substantial contributor, or 35%		5	
	6	controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defi	ined		
		under section $4958(f)(1)$), and persons described in section $4958(6)(1)$		6	6,772,493
**	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
SS	9	Prepaid expenses and deferred charges		9	
Ä		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	h	Less: accumulated depreciation 10b		10c	
		Investments—publicly traded securities .	35,316,583	11	40,512,895
	12	Investments—other securities. See Part IV, line 11	33,213,233	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
			•	15	
	15	Other assets. See Part IV, line 11 Table part 1 Add listed & blood 1 1 1 (much asked line 34)	49,897,158	16	55,857,911
	16 17	Total assets: Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	49,097,100	17	33,037,311
	18	Grants payable		18	
	19	Deferred revenue	317,525	19	497,190
	20	Tax-exempt bond liabilities	017,020	20	101,100
		Escrow or custodial account liability. Complete Part IV of Schedule I		21	
es	21			21	
Liabilities	22	Loans and other payables to any current or former officer, director, t key employee, creator or founder, substantial contributor, or 35%	rustee,		
ap		controlled entity or family member of any of these persons		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 (including federal income tax, payables to related the parties, and other liabilities not included on lines 17 - 24).	nird	25	
	26	Complete Part X of Schedule D Total liabilities. Add lines 17 through 25	317,525	26	497,190
S		Organizations that follow FASB ASC 958, check here			,
ce		lines 27, 28, 32, and 33.	phere		
lar	27	Net assets without donor restrictions	31,259,355	27	33,485,275
Ba			1	i i	
pu	28	Net assets with donor restrictions	18,320,278	28	21,875,446
Fu		Organizations that do not follow FASB ASC 958, check here 🕨 🗌 a	nd		
ssets or Fund Balances	29	complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
sts	30	Paid-in or capital surplus, or land, building or equipment fund	_	30	
SSE	21	Potagonal carriage and awment accumulated income or other funds	-	21	

49,579,633

49,897,158

32

33

55,360,721

55,857,911 Form **990** (2019)

Total net assets or fund balances

Total liabilities and het assets/fund balances

Form	n 990 (2019)			1	Page 12
Pa	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. <u>v</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		29,2	238,850
2	Total expenses (must equal Part IX, column (A), line 25)	2		28,5	528,322
3	Revenue less expenses. Subtract line 2 from line 1	3		7	710,528
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		49,5	579,633
5	Net unrealized gains (losses) on investments	5		4,9	985,802
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			84,758
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column	10		55,3	360,721
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1 2a	Accounting method used to prepare the Form 990:	ved on	2a		No
h	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
D	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	rate	21)	165	
	□ Separate basis □ Consolidated basis □ Both Consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Form **990** (2019)

Form 990 (2019)		
Additional Data		Return to Form
	Coffee ID	
	Software ID:	
	Software Version:	
Form 990, Special Co	ondition Description:	
	Special Condition Description	

	eru	efile Public Visual Render		ObjectI	d: 001 - Submiss	T	IN: 20-5478191		
990EZ)			plete if the	Charity Statu organization is a sect 4947(a)(1) nonexe Attach to Form s.gov/Form990 for i	ion 501(c)(3) o mpt charitable 990 or Form 99	rganization o trust. 0-EZ.	Ort r a section	2019	
-		the Treasury nue Service ne organizati							Inspection
		of Commerce I						Employer identific	ation number
Da	rt I	Poscon	for Dublic (Sharity Ci	t atus (All organiza	tions must so	mploto this	46-1561597	onc
					use it is: (For lines 1				ons.
1		A church, o	convention of o	hurches, or	association of churcl	hes described ir	section 170	(b)(1)(A)(i).	
2		A school d	escribed in se c	tion 170(b))(1)(A)(ii). (Attach So	chedule E (Forn	n 990 or 990-	EZ).)	
3					service organization o	•			
4		A medical	·	ization oper	rated in conjunction w				ii). Enter the
5		-	ation operated (A)(iv). (Comp		efit of a college or uni .)	versity owned o	r operated by	a governmental unit	described in section
6		A federal,	state, or local	government	or governmental unit	described in se	ction 170(b)(1)(A)(v).	
7	V	_			es a substantial part o i). (Complete Part II.		m a governm	ental unit or from the	general public
8		A commun	ity trust descri	bed in secti	on 170(b)(1)(A)(vi).	(Complete Part	t II.)		
9					described in 170(b) of agriculture. See in				
10		receipts fro from gross	om activities re investment in	elated to its come and u	es: (1) more than 331 exempt functions—su nrelated business tax e section 509(a)(2).	ubject to certain cable income (le	exceptions, a	and (2) no more than	331/3% of its support
11		An organiz	ation organized	d and opera	ted exclusively to test	for public safe	ty. See sectio	n 509(a)(4).	
12		one or mor	e publicly supp	orted organ	ed exclusively for the nizations described in t describes the type o	section 509(a)	(1) or section	509(a)(2). See section	on 509(a)(3). Check
а		supported	organization(s)	the power	erated, supervised, or to regularly appoint o t IV, Sections A and I	r elect a majorii			
b		manageme		orting organ					by having control or d organization(s). You
С					upporting organization				grated with, its
d		not functio	nally integrate	d. The orga	. A supporting organiz nization generally mu te Part IV, Sections A	st satisfy a dist	ribution requi		•
e		Check this	box if the orga	nization red	ceived a written deter lly integrated support	mination from t	he IRS that it	is a Type I, Type II,	Type III functionally
f	Ente	r the numbe	r of supported	organizatior	ns			<u> </u>	
g	<i>-</i>				ut the supported orga			T	T (D)
	(described on lines document? (see instructions)					* * * * * * * * * * * * * * * * * * * *			
		1- 10 above (see instructions)) Yes No							
									1
Tota		vork Bodust	ion Act Notice,	see the Inc	structions for	<u> </u> Cat. No. 11285	F	Schedula A (Farm	990 or 990-EZ) 2019

153,852,073

17,983,721

135,868,352

153.852.073

5,322,509

1,043,432

160.218.014

8,216,933

84.800 %

85.250 %

(f) Total

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

27,170,125

27,170,125

1,087,559

244,121

(c) 2017

23,227,972

23,227,972

1,263,477

269,503

(d) 2018

25.038.781

25,038,781

1,531,769

309,118

Schedule A (Form 990 or 990-EZ) 2019

(e) 2019

Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) Section A. Public Support

Calendar year (or fiscal year beginning in)		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	57,089,297	21,325,898	27,170,125	23,227,972	25,038,781	153,852,073
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						

21,325,898

21.325.898

885,964

154,380

16a 33 1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test—2019. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

h 10%-facts-and-circumstances test—2018. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

	membership fees received. (Do not include any "unusual grant.")	57,089,297	21,325,898	27,170,125	23,227,972	
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					

57,089,297

57,089,297

553,740

66,310

(a) 2015

(b) 2016

the organization without charge..

Total. Add lines 1 through 3

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

line 4. Section B. Total Support Calendar vear Amounts from line 4. . Gross income from interest,

Public support. Subtract line 5 from

(or fiscal year beginning in) 🕨 dividends, payments received on securities loans, rents, royalties

and income from similar sources

Net income from unrelated business activities, whether or not the business is regularly

carried on. .

or loss from the sale of capital assets (Explain in Part VI.). . Total support. Add lines 7 through 10

Other income. Do not include gain

12 Gross receipts from related activities, etc. (see instructions) 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)

Section C. Computation of Public Support Percentage

Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))

Public support percentage for 2018 Schedule A, Part II, line 14

che	edule A (Form 990 or 990-EZ) 2019						Page 3
Ρ	art III Support Schedule f	or Organiz	ations Descri	bed in Section	on 509(a)(2)		
	(Complete only if you						alify under Part
	II. If the organization	fails to qua	lify under the t	ests listed bel	ow, please com	plete Part II.)	_
	ection A. Public Support						
	ndar year fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
-	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.)						
S	ection B. Total Support						
	ndar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
-	fiscal year beginning in)			()	(7)	(-)	()
	Amounts from line 6						
.0a	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. Net income from unrelated						
11	business activities not included in						
	line 10b, whether or not the						
	business is regularly carried on.						
12							
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c,						
1.4	11, and 12.) First five years. If the Form 990 is f	or the organiz	ation's first seco	nd third fourth	or fifth tay year	as a section 501	(c)(3) organization
14	check this box and stop here	-	•				
_							
5	ection C. Computation of Pub	iic Support	rercentage				

15

Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) 15

Section D. Computation of Investment Income Percentage

- Public support percentage from 2018 Schedule A, Part III, line 15 16

- Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f)) 17 17
- Investment income percentage from 2018 Schedule A, Part III, line 17 18 19a 331/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than $\overline{33}$ 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—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18
- is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 🕨 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

you checked 12a or 12b in Part I, answer (b) and (c) below.

"Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

(1) or (2))? If "Yes," provide detail in Part VI.

organizations)? If "Yes," answer line 10b below.

whether the organization had excess business holdings).

amendment to the organizing document).

organization's organizing document?

6

or supervised by or in connection with its supported organizations.

3b

3с

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9с

10b Schedule A (Form 990 or 990-EZ) 2019

Part IV Supporting Organizations

made the determination.

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked

Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if

Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the

assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from,

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that

purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

Substitutions only. Was the substitution the result of an event beyond the organization's control?

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

the filing organization's supported organizations? If "Yes," provide detail in Part VI.

supporting organization had an interest? If "Yes," provide detail in Part VI.

12d of Part I, complete Sections A and D, and complete Part V.)

S	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization			

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,		
	describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization		
	was described in section 509(a)(1) or (2).	2	

	If "No," describe in Part v1 now the supported organizations are designated. If designated by class or purpose,		
	describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization		
	was described in section 509(a)(1) or (2).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b)		

	describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization		·	
	was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b)			
	and (c) below.			

10a

CIII	Sheddle A (101111 550 01 550 EZ) 2015			га	ge J
Pa	art IV Supporting Organizations (continued)				
			Ye	es	No
11	1 Has the organization accepted a gift or contribution from any of the following persons?				
а	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) be	elow, the			
	governing body of a supported organization?		La		
b	b A family member of a person described in (a) above?		Lb		
	c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part		Lc		
	Section B. Type I Supporting Organizations				
	Section B. Type I Supporting Organizations		Ye		No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regula appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organizactivities. If the organization had more than one supported organization, describe how the powers to appoint and/directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any to such powers during the tax year.	r? If "No," ation's or remove r, applied			
2			2		
			-		
S	Section C. Type II Supporting Organizations				
			Ye	es	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director	s or			
	trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported		L		
S	Section Type III Supporting Organizations				
_			Ye	es	No
Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the					
	organization's governing documents in effect on the date of notification, to the extent not previously provide	:d? :	L		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI organization maintained a close and continuous working relationship with the supported organization(s).	how the	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a signific in the organization's investment policies and in directing the use of the organization's income or assets at a during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in the content of the tax year?	cant voice	3		
S	Section E. Type III Functionally-Integrated Supporting Organizations		- I		
1		r (see instruc	tions)	:	
	a The organization satisfied the Activities Test. Complete line 2 below.	•	-		
	b The organization is the parent of each of its supported organizations. Complete line 3 below.				
	The organization supported a governmental entity. Describe in Part VI how you supported a governmental instructions)	ent entity (se	e		
2	Activities Test. Answer (a) and (b) below.				
			Ye	es	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify thos supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities directly furthered their exempt purposes.	e e			
	constituted substantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or m organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reason organization's position that its supported organization(s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in these activities but for the organization (s) would have engaged in the second organizati	ore of the s for the	а		
	involvement.	2	b		
3	Parent of Supported Organizations. Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trus each of the supported organizations? <i>Provide details in Part VI</i> .	tees of 3	а		

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of

(B) Current Year (optional)

Current Year

Schedule A (Form 990 or 990-EZ) 2019

Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) 1 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) Add lines 1 through 3 4

5

Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)

5

7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

1 Aggregate fair market value of all non-exempt-use assets (see instructions for

short tax year or assets held for part of year): a Average monthly value of securities

b Average monthly cash balances c Fair market value of other non-exempt-use assets

d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt use assets

Subtract line 2 from line 1d

Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Multiply line 5 by .035

Net value of non-exempt-use assets (subtract line 4 from line 3)

Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

2

Enter greater of line 2 or line 3

instructions)

7

Income tax imposed in prior year

temporary reduction (see instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Enter 85% of line 1

Adjusted net income for prior year (from Section A, line 8, Column A)

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2

4 5

7

1

1a

1b

1c

1d

2

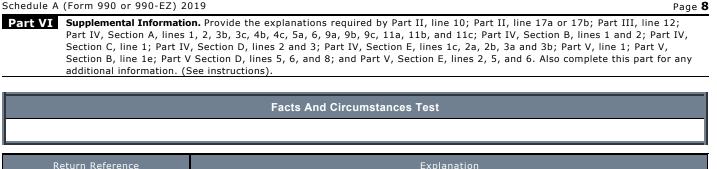
3

5

6

(A) Prior Year

Part V Type III Non-Functionally Integrate Section DOrganizations	ed 509(a)(3) Suppor	ting (continue	Current Year			
			Current rear			
1 Amounts paid to supported organizations to accompli	sh exempt purposes					
2 Amounts paid to perform activity that directly furthers excess of income from activity	s exempt purposes of suppo	orted organizations, in				
3 Administrative expenses paid to accomplish exempt p	ourposes of supported orga	nizations				
4 Amounts paid to acquire exempt-use assets						
5 Qualified set-aside amounts (prior IRS approval requ	ired)					
6 Other distributions (describe in Part VI). See instruc	tions					
7 Total annual distributions. Add lines 1 through 6.						
8 Distributions to attentive supported organizations to details in Part VI). See instructions	which the organization is re	esponsive (provide				
9 Distributable amount for 2019 from Section C, line 6						
10 Line 8 amount divided by Line 9 amount		(ii)	/:::)			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
1 Distributable amount for 2019 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI						
). See instructions.						
3 Excess distributions carryover, if any, to 2019:						
a From 2014						
b From 2015						
c From 2016						
d From 2017						
e From 2018						
f Total of lines 3a through e g Applied to underdistributions of prior years						
h Applied to 2019 distributable amount						
i Carryover from 2014 not applied (see						
instructions)						
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4 Distributions for 2019 from Section D, line 7:						
a Applied to underdistributions of prior years						
b Applied to 2019 distributable amount						
c Remainder. Subtract lines 4a and 4b from 4.						
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI						
See instructions.						
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.						
7 Excess distributions carryover to 2020. Add lines 3j and 4c.						
8 Breakdown of line 7:						
a Excess from 2015						
b Excess from 2016						
c Excess from 2017						
e Excess from 2019	d Excess from 2018					
6 LACESS HUIII 2017		Schedule A	 (Form 990 or 990-EZ) (2019			
		Schoule A	(55 0 0. 550 LL) (2013			



Section B Line 10 Affiliate service charges.

efile Public Visual Re	nder ObjectId: 001 - Submission: 2015-01-16		TIN: 20-547819				
Schedule B	Schedule of Contributors		OMB No. 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information.		2019				
Name of the organization US Chamber of Commerce Foundation			entification number				
		46-156159	7				
Organization type (che	ck one).						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	'n					
	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						
_	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions from any one contributor. Complete Parts I and II. See instructions for determining a	-					
Special Rules							
under sections 50 received from an	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33^{1/3}\%$ sup $9(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Part y one contributor, during the year, total contributions of the greater of (1) \$5,000 or or (ii) Form 990-EZ, line 1. Complete Parts I and II.	II, line 13, 16a,	or 16b, and that				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purpose for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$ this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusive religious, charitable, etc., contributions totaling \$5,000 or more during the year							
aution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 90-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 on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 90-EZ, or 990-PF).							

Name of organization US Chamber of Commerce Foundation **Employer identification number**

46-1561597

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additi	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
RESTRICTED			Payroll
		\$ RESTRICTED	Noncash
	,		(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
	-		Noncash
			(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-	-		Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
		Schodula B /E/	orm 990 990-F7 or 990-PF) (2019)

(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given (b)	(b) Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (See instructions) FMV (or estimate) (See instructions) (b) See instructions) (c) FMV (or estimate) (See instructions)

(c) (a) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) \$

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule E	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization per of Commerce Foundation			Employer identification number
Part III	Exclusively religious, charitable, etc., contributed more than \$1,000 for the year from an line entry. For organizations completing Pa of \$1,000 or less for the year. (Enter this in Use duplicate copies of Part III if additional space	y one cont art III, enter aformation	ributor. Complete colu r the total of exclusively	mns (a) through (e) and the following religious, charitable, etc., contributions
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-	Transferee's name, address, and ZIP	•) Transfer of gift Relatior	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-	Transferee's name, address, and ZIP) Transfer of gift Relatior	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIP) Transfer of gift Relatior	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-	Transferee's name, address, and ZIP) Transfer of gift Relatior	nship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

ObjectId: 001 - Submission: 2015-01-16 efile Public Visual Render **SCHEDULE D** (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No. 1545-0047

TIN: 20-5478191

Department of the Treasury Internal Revenue Service

Name of the organization

US Chamber of Commerce Foundation

▶ Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

Open to Public Inspection **Employer identification number**

			46-156	
Pa	organizations Maintaining Donor			Accounts.
	Complete if the organization answered	(a) Donor advised funds		Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor ad the organization's property, subject to the organiza	=		
6	Did the organization inform all grantees, donors, an charitable purposes and not for the benefit of the do impermissible private benefit?	nor or donor advisor, or for any othe	er purpose conferr	
Pa	ITT II Conservation Easements. Complete if the organization answered	"Yes" on Form 990, Part IV, lin	e 7.	
1	Purpose(s) of conservation easements held by the Purpose(s) of land for public use (e.g., recreat		on of an historicall	y important land area
	Protection of natural habitat	Preservation	on of a certified hi	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he	uld a qualified conservation contribut	tion in the form of	a conservation
_	easement on the last day of the tax year.	nd a quanned conservation contribut		Held at the End of the Year
а	Total number of conservation easements		2a	
b		s	2b	
c	Number of conservation easements on a certified hi	storic structure included in (a)	2c	
d	Number of conservation easements included in (c) a	• • •		
_	historic structure listed in the National Register			
3	Number of conservation easements modified, transftax year	erred, released, extinguished, or ter	rminated by the or	rganization during the
4	Number of states where property subject to conser	vation easement is located 🕨		
5	Does the organization have a written policy regarding violations, and enforcement of the conservation ea			Yes No
6	Staff and volunteer hours devoted to monitoring, in year	specting, handling of violations, and	l enforcing conser	vation easements during the
7	Amount of expenses incurred in monitoring, inspect \$	ing, handling of violations, and enfo	orcing conservatio	n easements during the year
8	Does each conservation easement reported on line (B)(i) and section $170(h)(4)(B)(ii)$?			1)(4)
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text o the organization's accounting for conservation ease	f the footnote to the organization's		•
Pa	rt III Organizations Maintaining Collecti Complete if the organization answered			Similar Assets.
1a	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide, in Part XIII, the text of the footnotes the service of the footnotes when the service is the service of the footnotes are service.	AS 116 (ASC 958), not to report in i ssets held for public exhibition, educ	ts revenue statem cation, or research	n in furtherance of public
b	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide the following amounts relating to t	ssets held for public exhibition, educ		
	(i) Revenue included on Form 990, Part VIII, line $1\cdot$			> \$
((ii) Assets included in Form 990, Part X · · · · · · ·			\$
2	If the organization received or held works of art, his	storical treasures, or other similar a	ssets for financial	gain, provide the
	following amounts required to be reported under S	, , ,		
а	Revenue included on Form 990, Part VIII, line 1 .			·
b or	Assets included in Form 990, Part X Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Cat. No.	Schedule D (Form 990) 201
			52283D	

	dule D (Form 990) 2019								Page 2
Part	Organizations Maintaining (Collections of A	Art, Hi	istoric	al Treas	ures, or	Other Si	milar Assets	(continued)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other rec	cords, cl	neck any	of the fol	lowing tha	t are a signi	ficant use of its	
а	Public exhibition		d		oan or exc	hange pro	grams		
b	Scholarly research		е		ther				
C	Preservation for future generations								
4	Provide a description of the organization's Part XIII.	collections and exp	olain ho	w they f	urther the	organizati	on's exempt	purpose in	
5	During the year, did the organization solici assets to be sold to raise funds rather than							Yes N	lo
Par	ESCROW and Custodial Arran Complete if the organization an Part X, line 21.	gements.							<u></u>
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?							Yes N	lo
ь	If "Yes," explain the arrangement in Part X	III and complete t	ho follo	wing tob	ulo.			Amount	
C	, ,	•				1c		<u> </u>	
d	Beginning balance					1d			
	Additions during the year					1e			
e f	Distributions during the year					1f			
•	Ending balance								
2a	Did the organization include an amount on \dots	Form 990, Part X,	line 21	, for esc	row or cus	stodial acc	ount liability	? Yes N	Ю
b	If "Yes," explain the arrangement in Part X	III. Check here if	the exp	lanation	has been	provided i	n Part XIII	🗆	
Pa	t V Endowment Funds.		•			•			
	Complete if the organization an	swered "Yes" on	Form	990, Pa	art IV, lin	e 10.			
		(a) Current year	(b)) Prior year	r (c) T	wo years bac	k (d) Three y	ears back (e) Four	years back
1a	Beginning of year balance								
b (Contributions								
C I	Net investment earnings, gains, and losses								
d	Grants or scholarships	1	1		ĺ		ĺ	1	
	Other expenditures for facilities								
	and programs								
f .	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cu	rrent year end bal	ance (lii	ne 1g, co	olumn (a))	held as:	•		
а	Board designated or quasi-endowment								
b	Permanent endowment								
С	Temporarily restricted endowment								
	The percentages on lines 2a, 2b, and 2c s	hould equal 100%							
3a	Are there endowment funds not in the poss	ession of the organ	nization	that are	held and	administer	ed for the	_	
	organization by:							Ye	s No
	(i) unrelated organizations(ii) related organizations					•		3a(i) 3a(ii)	<u> </u>
b	If "Yes" on 3a(ii), are the related organizations							3b	
								L	
4	Describe in Part XIII the intended uses of		endown	nent fun	ds.				
Par	Land, Buildings, and Equipm Complete if the organization an		Form	000 B	ort IV/ lin	o 115 C	oo Form OC	O Bart V line	10
	Description of property (a) Cost or oth	ner basis (b) Co		er basis (o			depreciation	(d) Book v	
	224								
	and								
	Buildings								
	Leasehold improvements								
	Equipment								
_	Other . Add lines 1a through 1e. (Column (d) must	agual Form 000 D	rt V ac	umn (D)	line 10/5\	1	•		0

(a) Description of security or category (including name of security)	(b) Book value	(c) Method (Cost or end-of-y	of valuation: ear market value
(1) Financial derivatives			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	>		
Investments—Program Related. Complete if the organization answered 'Yes' on Form 9 (a) Description of investment	990, Part IV	(b) Book value	0, Part X, line 13. (c) Method of valuation: Cost or end-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 9	90, Part IV,	line 11d. See Form 990,	
(a) Description			(b) Book value
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
			•
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 99 See Form 990, Part X, line 25.	90, Part IV,	line 11e or 11f.	
1. (a) Description of liab	lity		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII Z Schedule D (Form 990) 2019

(8)

(9)

Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)

Other (Describe in Part XIII.)

1

2

3

34,554,701

259,632

29,238,850

28,564,718

589,681

553,285

28,528,322

Schedule D (Form 990) 2019

27,975,037

1

4c

2e

3

4c

4,985,802

589,681

259,632

589,681

553,285

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements

Add lines 2a through 2d 2e 5,575,483 3 28,979,218

2b

2c 2d

4a

4b

2a

2b

2c

2d

4a

4b

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b.

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . .

Donated services and use of facilities . . .

Recoveries of prior year grants

Other (Describe in Part XIII.)

Add lines 4a and 4b . . . Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements . 2

Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities

Prior year adjustments . . .

Other losses

Other (Describe in Part XIII.) Add lines 2a through 2d . .

Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b

Other (Describe in Part XIII.)

Add lines **4a** and **4b . . .**

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII

Supplemental Information

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

Return Reference Explanation

	•
Part X, Line 2:	ASC 740 footnote from 2019 audit: Management's analysis of uncertain tax positions as required
	under Financial Accounting Standards Board Accounting Standards Codification (ASC) 740, Income
	Taxes, determined that USCCF had no uncertain tax positions, and, as such, no liability has been
	recorded as of December 31, 2019 or 2018. Management does not anticipate any material changes in
	this position in the next 12 months. USCCF is subject to routine audits by taxing jurisdictions;
	however, there are currently no audits for any tay periods in progress. Management believes USCCE is

however, there are currently no audits for any tax periods in progress. Management believes USCCF is

no longer subject to income tax examinations for years prior to 2016.

Part XI, Line 4b - Other Partnership pass through income (\$84,758) Reclass investment fees as expenses \$116,285 Interest Adjustments: revenue from agency transaction with affiliate \$228,105

Part XII, Line 4b - Other Agency transactions from affiliate \$437,000 Reclass investment fees as expenses \$116,285 Adjustments:

efile Public Visual Render ObjectId: 001 - Submission: 2015-01-16 **SCHEDULE F**

Statement of Activities Outside the United States

TIN: 20-5478191 OMB No. 1545-0047

(Form	990)

Department of the Treasury

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

Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	nal Revenue Service					
	ie of the organization Chamber of Commerce Foundatio	_			Employer id	dentification number
JS (Lnamber of Commerce Foundatio	п			46-15615	97
Pa	General Information "Yes" on Form 990, P			the United States.	Complete if the orga	anization answered
1	For grantmakers. Does the other assistance, the grante	organization	maintain recor			
	to award the grants or assis	stance?				· Yes No
2	For grantmakers. Describe assistance outside the Unite		organization's	procedures for monito	ring the use of its g	rants and other
3	Activites per Region. (The follo	wing Part I, line	3 table can be	duplicated if additional s	pace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) program service, describe specific type of service(s) in the region	for and investments in the region
(1)	East Asia	0	1	Program services.	MBA Case competitio	n. 82
(2)	Europe	0	8	Program services.	Corporate citizenship initiatives and emergi public policy educatio issues.	ng
(3)	North America	0	2	Program services.	Corporate citizenship initiatives and emergi public policy educatio issues.	ng
(4)	Europe	0	0	Seminars and speaking engagements.	Educate on corporate citizenship, emerging issues and veteran civilian transition.	
(5)	North America	0	0	Seminars and speaking engagements.	Educate on corporate citizenship and workforce issues.	3,08
	East Asia	0	0	Seminars and speaking engagements.	Educate public on veteran civilian transition.	2,24
(7)						
(8)						
(9)						
(10)						
11) (
12)						
(
13) (14)						
14) (15)						
15) (16)						
(17)						
За	Sub-total Total from continuation sheets	0	1 1			247,23
	to Part I	0	0			247.00
С	Totals (add lines 3a and 3b)	0	1.1			247,23

(12)

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										

(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

^{.} 3 Enter total number of other organizations or entities .

	Other Assistance e duplicated if add			ited States. Complete	if the organization a	answered "Yes" on Form	990, Part IV, line 16.
(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					1		
(2)		+ +		+	+		
(3)					+		
(4)			·		+		
(5)							
(6)							
(7)							[
(8)			·				
(9)			·	-			1
(10)				1			1
(11)							
(12)				1			
(13)							1
(14)						1	

. ,				
(3)				
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(16)				
(17)				
(18)				

Additional Data Software ID:

Software Version:

Part I General Information on Grants and Assistance

TIN: 20-5478191

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

Schedule I (Form 990)

Department of the

Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

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

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
US Chamber of Commerce Foundation

Employer identification number 46-1561597

Does the organization mai the selection criteria used						assistance, and	✓ Yes No
Describe in Part IV the orgPart III Grants and Other As	•				nization answered "Yes" (on Form 990. Part IV. line	21. for any recipient
that received more		II can be duplicated if	additional space is need		ı		
(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 noncash assistance	(h) Purpose of grant or assistance
(1) Alzheimers Association- National Capital Area Chapter 8180 Greensboro Dr Suite 400 McLean, VA 22102	13-3039601	501(c)(3)	10,000				The Foundation supports organizations enhancing social well being.
(2) American Legislative Exchange Council 2900 Crystal Drive Arlington, V A 22202	52-0140979	501(c)(3)	42,000				To support broad educational programs on business and the law.
(3) Battle Creek Area Chamber Foundation 34 West Jackson St Battle Creek, MI 49017	38-3506154	501(c)(3)	7,500				Grant to implement Sharing Solutions - opioid misuse in the workplace program.
(4) Blue Star Families PO BOX 230637 Encinitas, CA 92023	80-0369895	501(c)(3)	10,000				Contribution in support of the Blue Star Families White Oak Conference whose goal is to better support American veterans. We have worked with Blue Star Families in the past and are confident our contribution wil be well spent.
(5) Buffalo Niagara Partnership Foundation 257 West Genesee Street Buffalo, NY 14202	16-0761958	501(c)(3)	25,000				Grant to implement a work-based learning program to better connect students with learning opportunities to graduate ready for college and career.
(6) Chamber of Commerce for Greater Philadelphia Regional Foundation 200 South Broad Street Philadelphia, PA 19102	23-2653189	501(c)(3)	40,000				Grant to pilot test the Foundation's Job Data Exchange, a program designed to improve how clearly employers communicate their hiring needs to learners and workers.
(7) Convergence Center for Policy Resolution 1133 19th Street NW Washington, D C 20036	32-0280279	501(c)(3)	20,000				The Foundation supports organizations enhancing civil society.
(8) George Mason Foundation 3301 Fairfax Drive Arlington, V A 22201	54-1603842	501(c)(3)	325,000				To support broad educational programs on business and the law.
(9) Hands on DC 2600 Crystal Drive Arlington, V A 22202	52-2265271	501(c)(3)	5,500				The Foundation supports organizations enhancing civil society.
(10) Harlem Children's Zone 35 East 125th Street New York, NY 10035	23-7112974	501(c)(3)	60,000				The Foundation supports organizations enhancing civil society.
(11) Institute for Workforce Development & Economic Sustainability 1414 Cherry Street Olympia, WA 98501	91-2140837	501(c)(3)	20,000				Grant to produce a report highlighting child care costs and challenges in Washington state. Also sponsorship of an event series to promote the challenges

					posed by a lack of accessible and affordable childcare.
(12) Maryland Chamber of Commerce 60 West Street	52-1784310	501(c)(6)	5,410		Grant to implement Sharing Solutions - opioid misuse in the
Annapolis, M D 21401 (13) Miriam's Kitchen	52-1331552	501(c)(3)	10,000		workplace program. The Foundation
2401 Virginia Ave NW Washington, D C 20037	25 225225	501()(0)	10.000		supports organizations enhancing civil society.
(14) National 4-H Council Po Box Baltimore, MD 21297	36-2862206	501(c)(3)	12,000		The Foundation supports organizations enhancing civil society.
(15) National Cryptologic Museum Foundation PO Box 1563 Millersville, MD 21108	52-1986104	501(c)(3)	100,000		The Foundation supports organizations enhancing civil society.
(16) Partnership for Public Service 1100 New York Ave Suite 200 East Washington, D C 20005	06-1540513	501(c)(3)	8,000		The Foundation supports organizations enhancing civil society.
(17) Prevent Cancer Foundation 1600 Duke Street Alexandria, V A 22314	52-1429544	501(c)(3)	10,000		The Foundation supports organizations enhancing social well being.
(18) Reporters Committee for Freedom of the Press 1156 15th Street NW Washington, D C 20005	52-0972043	501(c)(3)	25,000		The Foundation supports organizations enhancing civil society.
(19) So Others Might Eat 60 O Street NW Washington, D C 20001	23-7098123	501(c)(3)	35,000		The Foundation supports organizations enhancing civil society.
(20) Southeast Michigan Community Alliance 25363 Eureka Taylor, MI 48180	38-2675191	501(c)(3)	40,000		Grant to pilot test the Foundation's Job Data Exchange, a program designed to improve how clearly employers communicate their hiring needs to learners and workers.
(21) The Advertising Council 815 Second Ave New York, NY 10017	13-0417693	501(c)(3)	50,000		Support for the Foundation's workforce readiness campaign to inspire and empower Americans to achieve career success, created in cooperation with leading private, public and nonprofit sector partners.
(22) The Federalist Society 1776 Eye Street NW Washington, DC 20006	36-3235550	501(c)(3)	70,000		To support broad educational programs on business and the law.
(23) The John F Kennedy Center for the Performing Arts 2700 F Street NW Washington, D C 20566	53-0245017	501(c)(3)	25,000		The Foundation supports organizations enhancing civil society.
(24) The Leukemia and Lymphoma Society National Captial Area Chapter 3601 Eisenhower Ave SUITE 450 Alexandria, VA 22303	13-5644916	501(c)(3)	10,000		The Foundation supports organizations enhancing social well being.
(25) The Recycling Partnership Inc 125 Rowell Court Falls Church, V A 22046	37-1622018	501(c)(3)	25,000		This is another implementation partner for our Beyond 34 sustainability project. Both CCC and our corporate partners have worked with TRP for many years.
(26) University of Southern California University Gardens Los Angeles, C A 90089	95-1642394	501(c)(3)	50,000		 Contribution to support research on media representations of professions and businesses.
(27) Urban Alliance Foundation 2030 Q Street NW Washington, D C 20009	52-1938443	501(c)(3)	50,000		The Foundation supports organizations enhancing civil society.
(28) Washington Humane Society 71 Ogelthrope Street NW	53-0219724	501(c)(3)	30,000		The Foundation supports organizations enhancing civil society.

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

Cat. No. 50055P

Schedule I (Form 990) 2019

Return Reference Explanation Part I, Line 2:

efi	le Public Visu	ual Render ObjectId: 001 -	Subr	mission: 2015-01-16		TIN: 20-	<u>54</u> 78	191
	edule J			ntion Information		OMB No.		-
(For	m 990)	_		, Trustees, Key Employees, and Higl	hest			
		Co	ompen	sated Employees		20	110)
				swered "Yes" on Form 990, Part IV, ch to Form 990.	line 23.	2 0	/ 1 /	
-	tment of the Treasury			or instructions and the latest infor	mation.	Open i		
	al Revenue Service me of the organiz	zation			Employer identif		ectio	n
	Chamber of Comme				Linployer identi	ication nui	iibei	
					46-1561597			
Рa	rt I Questi	ons Regarding Compensation						
1a	Chack the appr	opiate box(es) if the organization provi	dod a	ay of the following to or for a person	listed on Form		Yes	No
Ia		Section A, line 1a. Complete Part III to						
	First-class	or charter travel		Housing allowance or residence for	or personal use			
	Travel for	companions		Payments for business use of per	sonal residence			
	Tax idemn	ification and gross-up payments	V	Health or social club dues or initia	ation fees			
	Discretion	ary spending account		Personal services (e.g., maid, chai	uffeur, chef)			
b	If any of the bo	xes on Line 1a are checked, did the or	naniza	tion follow a written policy regarding	a navment or			
	•	or provision of all of the expenses de	_	. , .		1b	Yes	
,	Did the eventing		سييط معا	sing or allowing oversees incomed by	ov. all	2	Lvas	
2		ation require substantiation prior to re ees, officers, including the CEO/Execu					Yes	
_	Tadiaakabiak	if any of the fallowing the filing average	: k !		6 -1			
3	·	if any, of the following the filing organ CEO/Executive Director. Check all that		•				
	-	ed organization to establish compensa		•				
	Compensa	tion committee		Written employment contract				
	Independe	nt compensation consultant		Compensation survey or study				
	Form 990	of other organizations		Approval by the board or compen	sation committee			
4	During the year	r, did any person listed on Form 990, F	Part VI	I Section A line 1a with respect to	n the filing			
•		a related organization:	are vi	1, Section 11, mile 14, With respect to	o the ming			
а	Receive a seve	rance payment or change-of-control p	aymeı	nt?		4a		Νo
b	Participate in, o	or receive payment from, a supplement	al nor	nqualified retirement plan?		4b	Yes	
C		or receive payment from, an equity-ba				4c		Νo
	If "Yes" to any.	of lines 4a-c, list the persons and prov	vide th	ne applicable amounts for each item	in Part III.			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organizati	ons m	ust complete lines 5-9.				
5		ed on Form 990, Part VII, Section A, I			e any			
	compensation of	contingent on the revenues of:						
а	-	on?				5a		Νo
b		janization?				5b		Νo
_	•	e 5a or 5b, describe in Part III.		and the same of the con-				
6	•	ed on Form 990, Part VII, Section A, I contingent on the net earnings of:	ine 1a	a, did the organization pay or accru-	e any			
а	•	on?				6a		Νo
b		panization?				6b		No
		e 6a or 6b, describe in Part III.						
7		ed on Form 990, Part VII, Section A, I						
	. ,	described in lines 5 and 6? If "Yes," de				7	Yes	<u> </u>
8		ints reported on Form 990, Part VII, paintial contract exception described in						
	-		_	* * * * *	•	8		No
9	If "Yes" on line	8, did the organization also follow the	rebut	table presumption procedure descri	bed in Regulations			
-		58-6(c)?					L	
For F	Paperwork Reduc	ction Act Notice, see the Instructions f	or For	m 990. Cat. No	. 50053T Sch	edule J (Fo	rm 990) 2019

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 on 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.

instructions, on row (ii). Do not list any individuals that are not listed Note. The sum of columns (B)(i)-(iii) for each listed individual must e	d on F equal t	orm 990, Part VII the total amount o	<u>if Form</u> 990, Part \	VII, Section A, lin	e 1a, applicable co	olumn (D) and (E	<u>) amoun</u> ts for	that individual.
(A) Name and Title		wn of W-2 and/or compensation		(C) Retirement and other	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1Thomas J Donohue CEO	(i)	0	0	0	0	0	0	0
	(ii)	1,046,228	 5 ,500,000	102,996	 8,200	10,682	6,668,106	0
2Suzanne Clark President & Director	(i)	0	0	0	0	0	0	0
	(ii)	734,514	 2,050,000	213,652	 115,100	32,489	3,145,755	
3 Justin Waller Operations officer	(i)	0	0	0	0	0	0	0
	(ii)	 522,869	575,000	42,608	18,200	9,431	1,168,108	 0
4Stan Harrell CFO	(i)	0	0	0	0	0	0	0
	(ii)	493,135	210,000	69,288	306,400	21,121	1,099,944	
5Carolyn Cawley Westermann Senior Vice President	(i)	359,669	0	0	29,400	4,636	393,705	0
	(ii)	118,600	80,000				198,600	
6 Eric Eversole Pres, HOH	(i)	305,382	0	1,320	29,400	25,252	361,354	0
	(ii)		190,000	19,823			209,823	
7Ryan Meyers Gnl Cnsl & Secy	(i)	0	0	0	0	0	0	0
	(ii)	296,093	75,000	 8,694	29,400	4,005	413,192	
8 Kathryn Traver VP Operations, Asst Secy	(i)	181,087	20,000	0	169,320	32,627	413,192	0
-, - ,,,	(ii)							
9Cheryl Oldham SVP, Educ & Workf USCCF	(i)	0	0	0	0	0	0	0
, a 3335.	(ii)	248,247	62.000			20.022	261 570	
10Marc E DeCourcey SVP, CCC	(i)	219,152	63,000 57,500	0 3,060	29,400 29,400	20,932 26,639	361,579 335,751	0
301, 660	(ii)							
11Rebecca Mousseau	(i)	146,460	0 37,500	0	0 123,607	0 24,122	0 331,689	0
Exec Dir, Corp Relations, CCC	(ii)							
12Michael Carney	(i)	211,915	20,000	0	0 15,092	0 33,101	0 280,108	0
SVP Emerging Issues	(ii)							
13Horace C Hodges	(i)	192,473	0 25,000	0	22,902	0 1,295	0 241,670	0
Sr Dir, Events & Prog, HOH	(ii)							
14Jason Tyszko	(i)	0	0	0	0	0	0	0
VP, CEW	(ii)	102.005						
	 	183,905	10,000	0	20,606	15,221	229,732	0
		S	Schedule J (Form 9	90) 2019				



Schedule J (Form 990) 2019	Page 3						
Part III Supplemental Information							
Provide the information, explanation,	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Return Reference	Explanation						
	None of the executives listed on Part VII of the core form have taken first class travel. Social club dues are available to two of the executives listed in Part VII of the core form for business use only. None of these expenses are treated as taxable benefits.						
	The US Chamber of Commerce Foundation relied on the performance and compensation committee of a related organization. Total compensation is reviewed annually by an independent compensation consultant. The consultant prepares a compensation study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities. Based on this information, total compensation is determined by the related organization's Performance and Compensation Committee on an annual basis for the US Chamber of Commerce Foundation's top official, who is not paid by the US Chamber of Commerce Foundation.						
,	Supplemental Pension list: Suzanne Clark 209,664 Stan Harrell 69,288 Justin Waller 42,608 Eric Eversole 19,694 Ryan Meyers 8,694 The Supplemental Pension Plan provides cash payments to participants based on a formula that coordinates with the benefits that cannot be paid by the Retirement Plan due						

Ito the qualified plan pay cap under the law. These benefits are calculated and paid annually; there is no deferred component.

Part I, Line 7 The US Chamber of Commerce Foundation's executive compensation is provided in the form of base salaries and performance based bonuses. The bonuses

Schedule J (Form 990) 2019

are contingent upon individual and organizational results and are not quaranteed in future years.



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ObjectId: 001 - Submission: 2015-01-16

TIN: 20-5478191

OMB No. 1545-0047

SCHEDULE O

(Form 990 or 990-EZ)

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.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

Inspection

Department of the Treasury Namel Brythecologainezation
US Chamber of Commerce Foundation

Employer identification number

IS Chamber of Co	mmerce Foundation
Return	Explanation
Form 990, Part IV Question 12	Auditing of financial statements The US Chamber of Commerce Foundation is a related organization within the consolidated financial statements of the US Chamber of Commerce. Schedule R lists some additional related organizations included in the US Chamber of Commerce consolidated financial statements.
Form 990, Part IV Question 26	The loan in Part X Line 6 is with the US Chamber of Commerce, which meets the definition of a disqualified person for the purposes of Line 6. However according to the Schedule L instructions, the Chamber does not meet the requirement of an interested person; thus, this loan is not disclosed on Schedule L.
Form 990 Part V Item 1a	Number reported on 1096 US Chamber of Commerce Foundation is part of a consolidated treasury function with affiliated organizations where an affiliated organization, the Chamber of Commerce of the USA makes payments on behalf of the US Chamber of Commerce Foundation. The number in box 1a is the number of information returns filed by the Chamber of Commerce of the USA on behalf of the US Chamber of Commerce Foundation.
Form 990 Part V Item 2a	Number reported on W-3 US Chamber of Commerce Foundation is part of a consolidated payroll function where all payroll functions are handled by an affiliated organization, the Chamber of Commerce of the USA. The Chamber of Commerce of the USA is the statutory employer for the employees of the US Chamber of Commerce Foundation and pays compensation on behalf of the US Chamber of Commerce Foundation. The number in box 2a is the number of the US Chamber of Commerce Foundation's employees reported on Form W-3 by the Chamber of Commerce of the USA.
Form 990, Part VI, Section A, line 2	Suzanne Clark has a business relationship with Tom Donohue, Justin Waller, Stan M Harrell, Ryan Meyers, Cheryl Oldham, and Jason Tyszko.
Form 990, Part VI, Section A, line 6	The US Chamber of Commerce Foundation (USCCF) has one class of membership. The sole member of USCCF is the Chamber of Commerce of the USA.
Form 990, Part VI, Section A, line 7a	The sole member of the US Chamber of Commerce Foundation is the Chamber of Commerce of the USA, which has the right to elect or appoint a majority of members of the governing body of US Chamber of Commerce Foundation.
Form 990, Part VI, Section A, line 7b	The following actions require the prior written approval of the Member: 1 Amending the Certificate of Incorporation; 2 Amending or repealing the bylaws or adopting new bylaws; 3 Adopting an agreement of merger or consolidation; 4 Adopting a plan of wind-up and dissolution; 5 The sale, lease, transfer, or other disposition of all or any substantial part of the Corporation's assets or properties; and 6 The creation of a subsidiary or another related organization.
Form 990, Part VI, Section B, line 11b	The draft Form 990 was provided in advance to the Board of Directors and reviewed individually with each member prior to filing. The board receives the most recently completed tax return at the next regularly scheduled meeting. The 990 is reviewed by an independent accounting firm.
Form 990, Part VI, Section B, line 12c	We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any transaction or relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the attention of a supervisor, a senior manager in the Talent Solutions department or the Office of the General Counsel. In addition, we issue an annual written questionnaire to all members of the board of directors asking for information on potential conflicts of interest, which is gathered by the Chief Financial Officer. All reports of potential conflicts will be evaluated by the General Counsel in consultation with other senior management and staff, as appropriate. Any conflicts of interest involving board members or staff are resolved in accordance with the USCCF's conflicts of interest policies.
Form 990, Part VI, Section B, line 15b	Part VI Question 15a The Chief Executive Officer is an employee of the US Chamber of Commerce and is not compensated by the organization. Part VI Question 15b The process for determining total compensation for the four key employees, whose compensation is charged to the US Chamber of Commerce Foundation, is as follows. An independent compensation consultant provides supporting data and analysis to the US Chamber of Commerce Foundation's Senior Vice President and the US Chamber of Commerce's Vice President, Talent Solutions who establishes job classifications and compensation ranges for all employees. These two executives then make their recommendations to the US Chamber of Commmerce Foundation's President. Based on this information, individual total compensation is determined by the individual's supervisor and the US Chamber of Commerce Foundation's President, and the Vice President, Talent Solutions on an annual basis.
Form 990, Part VI, Section C, line 19	The Form 990 is made available to any member of the public who requests a copy. Any requestor is forwarded to the Administrative Director of Finance of the US Chamber of Commerce, who will forward a copy of the document to the requestor. The organization's governing documents and conflict of interest policy were made available during the filing period with the organization's Form 1023 which was filed on February 4, 2013. The organization's financial statements are not made available to the public but are reflected in the financial data of the Form 990.
Form 990, Part IX, line 11g	Policy and Research Consulting: Program service expenses 7774861. Management and general expenses 0. Fundraising expenses 22. Total expenses 7774883. Temp Salaries: Program service expenses 127892. Management and general expenses 0. Fundraising expenses 0. Total expenses 127892. Video production: Program service expenses 334151. Management and general expenses 0. Fundraising expenses 0. Total expenses 334151. Photographic services: Program service expenses 26569. Management and general expenses 0. Fundraising expenses 0. Total expenses 26569.
Form 990, Part XI, line 9:	Flow through loss from partnership investments 84758.

efile Public Visual Render ObjectId: 001 - Submission: 2015-01-16 **SCHEDULE R**

(Form 990)

Department of the Treasury

US Chamber of Commerce Foundation

Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

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

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

TIN: 20-5478191 OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

46-1561597

Part I Identification of Disregarded Entities. Comp	ete if the	organization a	nswere	d "Yes" on	Form 99	0, Part IV,	line	33.				
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activ	rity	(c) Legal domicile or foreign co	e (state ountry)	(d) Total incon	ne	(e) End-of-year asset	:S	(f) Direct controlling entity	ng	
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	zations. C ne tax year	r.	organ		vered "Y		m 99		e 34 be			
(a) Name, address, and EIN of related organization	Pri	(b) mary activity		(c) lomicile (state eign country)	Exempt	(d) Code section		(e) lic charity status ection 501(c)(3))	Dir	(f) ect controlling entity	Sec 512 (1 cont	(g) ction 2(b) 13) crolle tity?
(1)Chamber of Commerce of the USA 1615 H St NW Washington, DC 20062		cate for the businesses to leaders		DC	501(c)(6))	N/A		N/A		Yes	No
53-0045720 (2) Center for International Private Enterprise 1155 15th St NW Washington, DC 20005 52-1398742	through _I	s democracy private enterprise ket reform.		DC	501(c)(3))	7		Chambe the USA	r of Commerce of		No
For Paperwork Reduction Act Notice, see the Instructions for Form 99				at. No. 5013	- V							

Part III Identifica	tion of Related Organizations Taxable	as a Partno	ership	. Complete	if the organiza	ition answ	ered "Yes	" on Form 9	990, Part I\	/, line 34	,
because it	had one or more related organizations treat	ed as a part	nership	during the	tax year.						
		7		7.13				<i></i>	· · · ·	(1)	

				, ,								
(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	(i Disprop alloca	n) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	i) eral or laging tner?	(k) Percentage ownership
							Yes	No		Yes	No	

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)	(g) Share of end-of- year assets	(h) Percentage ownership	(13) cc	n 512(b) ontrolled tity?
(1)USIBC Global Private Limited Jeevan Bharti Branch New Dehli, New Dehli IN	To enhance bilateral trade between India and USA	IN		С				No

hedule R (Form 990) 2019		Paç	ge 3
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
Uuring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
$f b$ Gift, grant, or capital contribution to related organization(s) $\dots \dots \dots$	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
f h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s) \dots	1 i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
$ \bullet \text{Sharing of paid employees with related organization(s)} \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot $	10	Yes	
p Reimbursement paid to related organization(s) for expenses · · · · · · · · · · · · · · · · · ·	1 p	l	
q Reimbursement paid by related organization(s) for expenses · · · · · · · · · · · · · · · · · ·	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r	i	No

2 If the answer to any of the above is "Yes," see the instructions for information o	on who must complete this line, including co	overed relationships	s and transaction thresholds.
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)Chamber of Commerce of the USA	S	235,310	Calculated interest
(2)Chamber of Commerce of the USA	N	2,530,000	Cost allocation discounted 33%
(3)Chamber of Commerce of the USA	0	7,805,274	Actual salaries & benefit alloc
(4)Chamber of Commerce of the USA	P	761,718	Alloc amt at 33% disc & act cost
(5)Chamber of Commerce of the USA	Q	309,118	Alloc amt actual cost

 ${f s}$ Other transfer of cash or property from related organization(s)

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income (related, unrelated,	Ar	(e) The all partners section Sol(c)(3) Transparent sections?	(f) (g) Share of total income assets		(h) Disproprtionate allocations?		(i) (j) Code V-UBI General or managing box 20 partner?		r 9	(k) Percentage ownership
		country)	excluded from tax under sections 512- 514)					Yes	No	K-1 (Form 1065)	Yes	No	
										•			

Schedule R (Form 990) 2019		Page 5					
Part VII Supplemental Information							
Provide additional information for	responses to questions on Schedule R. (see instructions).						
Return Reference	Explanation						
Schedule R (Form 990) 2019							
Additional Data		Return to Form					
	Software ID: Software Version:						