## EXTENDED TO AUGUST 17, 2015

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Open to Public

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

Α	For the	2014 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	THE RICHARD NIXON FOUNDATION			
	Name change	Doing business as		52-1	278303
	Initial return	,	Room/suite	E Telephone number	
	Final return/ termin-	18001 YORBA LINDA BLVD.		714-	993-5075
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	13,740,237.
F	Amend return		- m	H(a) Is this a group re	
L	tion pendin	IF Name and address of principal officer: WIDDIAM II. DANIDAO	P.T.		?Yes X No
_	Tay aya	mpt status: X 501(c)(3)	or 527	H(b) Are all subordinates in	list. (see instructions)
		mpt status.	01 321	H(c) Group exemption	
		organization: X Corporation Trust Association Other	I Year		State of legal domicile: CA
_		Summary			, otato or logar dominono,
_	1 1	Briefly describe the organization's mission or most significant activities: SEE	SCHEDU	LE O.	
Governance		,			
ern?	2	Check this box   if the organization discontinued its operations or dispose	sed of more	than 25% of its net as	
Š	1 8			3	22
∞	- '	Number of independent voting members of the governing body (Part VI, line 1b)			20
Activities		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			55 158
ţĭ		Total number of volunteers (estimate if necessary)			14,315.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			
	0	Net unrelated business taxable income from Form 990-T, line 34		7b	Current Year
•	8 (	Contributions and grants (Part VIII, line 1h)		5,908,797.	3,111,146.
nue		Program service revenue (Part VIII, line 2g)		197,337.	211,217.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,229,538.	1,388,511.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,444,972.	1,407,182.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,780,644.	6,118,056.
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,854,455.	2,063,437.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.
Εχρ	b			3,977,963.	4 01E 2E0
_	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,832,418.	4,015,250.
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,948,226.	39,369.
)r	3	Revenue less expenses. Subtract line 16 from line 12		ginning of Current Year	End of Year
Net Assets or	20	Fotal assets (Part X, line 16)		67,303,346.	68,229,528.
ASS	21	Fotal liabilities (Part X, line 26)		880,288.	890,458.
Set	22 1	Net assets or fund balances. Subtract line 21 from line 20		66,423,058.	67,339,070.
Р	art II	Signature Block	•		
	-	ties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is
true	e, correct	, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
		Cinneture of officer		Data	
Sig		Signature of officer		Date	
He	re	WILLIAM H. BARIBAULT, PRESIDENT & CEO Type or print name and title			
_		· · · · ·	- 11	Date Check	II PTIN
Pai		Print/Type preparer's name  JANE M. WARREN  Preparer's signature	'	if	
	parer	Firm's name FRAZER, LLP		self-employe	95-4108809
	-	Firm's address 135 S STATE COLLEGE BLVD, STE 3	0 0	THIII 3 LIN	23 120000
-	,	BREA, CA 92821		Phone no.71	4-990-1040
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No
_					

	990 (2014) THE RICHARD NIXON FOUNDATION 52-1278303 Page 2 TIII 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:
	SEE SCHEDULE O, FORM 990 PART I LINE 1.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	the prior Form 990 or 990-EZ?  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 X No  If "Yes," describe these changes on Schedule O.
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
1a	revenue, if any, for each program service reported.  (Code:) (Expenses \$ 52,325 • including grants of \$) (Revenue \$ 8,586 • )
ıa	(Code: ) (Expenses \$ 52,325 · including grants of \$ ) (Revenue \$ 6,386 · )  BI-PARTISAN LECTURE SERIES AT THE LIBRARY IN YORBA LINDA, CA.
	DI TIMITOTAL DEGLES III IME DIDILATI IN TONDII DINDII, CIIV
	118 952
łb	(Code: ) (Expenses \$ 118,952. including grants of \$ ) (Revenue \$ )  EDEE CINDAY CONCERT SERIES ADMISSION FREE MEET THE DESCRIPTION (Revenue \$ )
łb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS
łb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION
łb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS
lb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION
łb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION
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ŀb	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION
·b	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: ) (Expenses \$ 51,885. including grants of \$ ) (Revenue \$ )
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: ) (Expenses \$ 51,885 · including grants of \$ ) (Revenue \$ )
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS  IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION  AND FREE 9/11 MEMORIAL ADMISSION.  (Code:)(Expenses \$ 51,885. including grants of \$) (Revenue \$)  FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA,  CA:
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS  IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION  AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses 51,885 including grants of \$ ) (Revenue \$ )  FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA,  CA:  JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS  IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION  AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses \$\frac{51,885.including grants of \$}{2000 } ) (Revenue \$\frac{1}{2} \)  FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA,  CA:  JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY  FEBRUARY 17, 2014 FOR PRESIDENTS DAY
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses 51,885. including grants of \$ ) (Revenue \$ ) FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA, CA: JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY FEBRUARY 17, 2014 FOR PRESIDENTS DAY MARCH 16, 2014 FOR PAT NIXON'S BIRTHDAY
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses \$ 51,885. including grants of \$ ) (Revenue \$ ) FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA, CA: JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY FEBRUARY 17, 2014 FOR PRESIDENTS DAY MARCH 16, 2014 FOR PAT NIXON'S BIRTHDAY MAY 26, 2014 FOR MEMORIAL DAY
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses \$ 51,885. including grants of \$ ) (Revenue \$ ) FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA, CA: JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY FEBRUARY 17, 2014 FOR PRESIDENTS DAY MARCH 16, 2014 FOR PRESIDENTS DAY MARCH 16, 2014 FOR MEMORIAL DAY JULY 4, 2014 FOR MEMORIAL DAY JULY 4, 2014 FOR MEMORIAL DAY
	FREE SUNDAY CONCERT SERIES ADMISSION, FREE MEET THE PRESIDENTS IMPERSONATOR SERIES ADMISSION, FREE NIXON LEGACY FORUM SERIES ADMISSION AND FREE 9/11 MEMORIAL ADMISSION.  (Code: )(Expenses \$ 51,885. including grants of \$ ) (Revenue \$ ) FREE ADMISSION TO THE RICHARD NIXON LIBRARY AND MUSEUM IN YORBA LINDA, CA: JANUARY 9, 2014 FOR RICHARD NIXON'S BIRTHDAY FEBRUARY 17, 2014 FOR PRESIDENTS DAY MARCH 16, 2014 FOR PAT NIXON'S BIRTHDAY MAY 26, 2014 FOR MEMORIAL DAY

Other program services (Describe in Schedule O.)

 $\boldsymbol{4}$  , 896 , 221 . including grants of  $\boldsymbol{\$}$ 

344,169.) ) (Revenue \$

5,119,383. Total program service expenses ▶ 4e

Form **990** (2014)

## Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		x
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		7.7	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		Х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
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		x
٨	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		Х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
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		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u></u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(201 <i>4</i> )

## Part IV Checklist of Required Schedules (continued)

			Yes	No
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		Х
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		X
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	Х	
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			\ <sub>3,7</sub>
	Schedule K. If "No", go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	<b>.</b>		
	any tax-exempt bonds?	24c		
	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	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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	OEh		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		22
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
ZI	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		X
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		X
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	X	

Form **990** (2014)

## Form 990 (2014) THE RICHARD NIXON FOUNDATION Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		37	
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 55			
_			v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<b>—</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		
48	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)?	40	х	
h	If "Yes," enter the name of the foreign country: ► CAYMAN ISLANDS	4a	21	
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	46		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
1.	Note. See the instructions for additional information the organization must report on Schedule O.			
D	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  Enter the amount of reserves on hand  13b  13c			
	Did the appropriation was in a property for independence or property that the territory	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990	(2014

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

	Check if Schedule O contains a response or note to any line in this Part VI					Λ
Sec	tion A. Governing Body and Management					
		1 1			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	22			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any other				
	officer, director, trustee, or key employee?		L	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?		L	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	Г	5		Х
6	Did the organization have members or stockholders?		Г	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
	more members of the governing body?		7	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		···			
	persons other than the governing body?		- 1 7	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?		8	Ва	Х	
b	Each committee with authority to act on behalf of the governing body?			Bb B	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read		····			
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F			<u> </u>		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<b>1</b>	0a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such or		····	-		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?		1	0b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing boo			1a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ay before ming the form	'' <b> </b>	Iu		
12a	51.11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	2a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		⊢	2b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "		···· ├	20		
·			4	2c	Х	
13			···· ⊢	13	X	
	Did the organization have a written whistleblower policy?		⊢	14	X	
14 15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approve		····	14	21	
15		•				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			5-	Х	
	The organization's CEO, Executive Director, or top management official			5a	X	
D	Other officers or key employees of the organization		├	5b	21	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	mont with a				
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange			6-		Х
1.	taxable entity during the year?		├¹	6a		Λ
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluating in initial venture agreements under applicable federal toy law, and take stone to agree and the agree					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization with respect to such a such a such as			Ch		
800	exempt status with respect to such arrangements? tion C. Disclosure		1	6b		
17 10	List the states with which a copy of this Form 990 is required to be filed CA	T (Caption 501/-)(0):	-l-/	nila '- '	lo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	1 (Section 501(C)(3)\$ 01	ııy) ava	aliabl	е	
	for public inspection. Indicate how you made these available. Check all that apply.	in Coha-list- C'				
40		n in Schedule O)	1 0		-1-1	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict of interest policy	, and fi	nand	cial	
	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 be	ooks and records:				
	IRENE KLEPP - 714-993-5075	10				
	18001 YORBA LINDA BLVD, YORBA LINDA, CA 92886-394	ĿЭ				

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unle	ss pe	more rson	than is bot	th an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	od a d	Key employee	Highest compensated the highes		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) RONALD H. WALKER	4.00			_	_					
CHAIRMAN OF THE BOARD		Х						0.	0.	0.
(2) JOHN H. BARR	5.00									
TREASURER		Х						0.	0.	0.
(3) TRICIA NIXON COX	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) JULIE NIXON EISENHOWER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(5) JAMES H. CAVANAUGH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) GAVIN S. HERBERT, SR	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(7) JOHN W. HAMILTON	1.00								_	
BOARD MEMBER		Х						0.	0.	0.
(8) LAWRENCE M. HIGBY	1.00									
BOARD MEMBER	1 00	Х						0.	0.	0.
(9) EDWARD NIXON	1.00	l								
BOARD MEMBER	1 00	Х						0.	0.	0.
(10) MAUREEN D. NUNN	1.00	l								
BOARD MEMBER	1 00	Х						0.	0.	0.
(11) J. PETER SIMON	1.00	١								•
BOARD MEMBER	1 00	Х						0.	0.	0.
(12) PETE WILSON	1.00									•
BOARD MEMBER	1 00	Х						0.	0.	0.
(13) TOD R. HULLIN	1.00	,,								0
BOARD MEMBER	1 00	Х						0.	0.	0.
(14) GEORGE L. ARGYROS	1.00	٠,,								0
BOARD MEMBER	1 00	Х				-		0.	0.	0.
(15) EVERETT ALVAREZ, JR	1.00	<b>.</b> ,							_	0
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(16) ROBERT J. BROWN	1.00	x						0.	0.	0.
BOARD MEMBER	1.00	^	$\vdash$	$\vdash$		$\vdash$	$\vdash$	0.	<u> </u>	<u> </u>
(17) KENNETH L. KHACHIGIAN BOARD MEMBER	1.00	x						0.	0.	0.
432007 11-07-14	1	22		Ь		1			0.	Form <b>990</b> (2014)

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Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) BARBARA HACKMAN FRANKLIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(19) FREDERIC V. MALEK	1.00									
BOARD MEMBER		Х						0.	0.	0.
(20) JOHN H. CARLEY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(21) CHERYL SAREMI	40.00									
SECRETARY		Х						62,457.	0.	24,690.
(22) BOB BRIGHT	40.00									
VICE PRESIDENT & CFO		Х		Х				120,909.	0.	32,517.
(23) RICHARD M. QUINN	40.00									
PRESIDENT & CEO		Х		Х				255,296.	0.	26,449.
(24) WILLIAM H. BARIBAULT	40.00									
PRESIDENT & CEO		Х		Х				136,320.	0.	10,175.
(25) ANTHONY CURTIS	40.00									
EXECUTIVE VP & COO				Х				104,181.	0.	19,663.
1b Sub-total							<u> </u>	679,163.	0.	113,494.
c Total from continuation sheets to Part \							•	0.	0.	0.
d Total (add lines 1b and 1c)							<b>&gt;</b>	679,163.	0.	113,494.
2 Total number of individuals (including but							20 re		000 of reportable	

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

Test No

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

S X

## Section B. Independent Contractors

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

the organization: Heport compensation for the calculat year chaing with or with	in the organization of tax year.					
(A)	(B)	(C)				
Name and business address	Description of services	Compensation				
DWIGHT CHAPIN	MANAGEMENT					
P.O. BOX 5032, EAST HAMPTON, NY 11937	CONSULTING SERVICE	156,000.				
FRANK A. GANNON	MANAGEMENT					
P.O. BOX 1237, NORTH BEACH, MD 20714	CONSULTING SERVICE	104,000.				

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

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			Check if Schedule O cont	ains a response	e or note to any lin	e in this Part VIII			X
			Check if Schedule O cont			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
Gra		b	Membership dues	1b	239,859.				
ts, (		С	Fundraising events	1c					
Giff		d	Related organizations	1d					
JS,		е	Government grants (contribut	ions) <b>1e</b>					
tior ≫r S		f	All other contributions, gifts, gran	ts, and					
ibu			similar amounts not included above	ve 1f	2,871,287.				
d O		g	Noncash contributions included in lines	1a-1f: \$	2,330,558.				
a Co		h	Total. Add lines 1a-1f		<b>&gt;</b>	3,111,146.			
					Business Code				
ė	2	а	ADMISSION REVENUE		713110	254,900.	254,900.		
e Ķ		b	LECTURES-SCHEDULE 1		713990	<43,683.	> <43,683.	•	
Se		С							
Program Service Revenue		d							
ogr R		е							
P		f	All other program service reve	nue					
		g	Total. Add lines 2a-2f			211,217.			
	3		Investment income (including						
			other similar amounts)		•	975,524.			975,524.
	4		Income from investment of tax			2,081.			2,081.
	5		Royalties		·				
			•	(i) Real	(ii) Personal				
	6	а	Gross rents	1,550,990					
			Less: rental expenses	299,661					
			Rental income or (loss)	1,251,329					
		d	Net rental income or (loss)		<b>&gt;</b>	1,251,329.			1,251,329.
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory	7,436,403					
		b	Less: cost or other basis						
			and sales expenses	7,025,497	.				
		С	Gain or (loss)						
			Net gain or (loss)			410,906.			410,906.
ø			Gross income from fundraising						
			including \$	of					
eve			contributions reported on line	1c). See					
F.			Part IV, line 18	•					
Other Revenu		b	Less: direct expenses						
0			Net income or (loss) from fund						
	9	а	Gross income from gaming ac	tivities. See					
			Part IV, line 19		1				
		b	Less: direct expenses						
			Net income or (loss) from gam						
	10	а	Gross sales of inventory, less	returns					
			and allowances		452,876.				
		b	Less: cost of goods sold						
			Net income or (loss) from sale			155,853.	141,538.	14,315.	
			Miscellaneous Revenu		Business Code				
	11	а							
		b							
		С							
			All other revenue						
			Total. Add lines 11a-11d						
	12		Total revenue. See instructions.			6,118,056.	352,755.	14,315.	2,639,840.
43200 11-07	9 -14								Form <b>990</b> (2014)

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (C) Do not include amounts reported on lines 6b, Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 391,616. 286,896. 77,456. 27,264. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,255,745. 1,023,067. 47,441. 185,237. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 412,658. 324,591. 14,468. 73,599. Other employee benefits 9 3,388. 3,418. 16. 14. Payroll taxes 10 Fees for services (non-employees): a Management ..... 31,177. 31,177. Legal 67,281. 67,281. Accounting Lobbying Professional fundraising services. See Part IV, line 17 95,756. 95,756. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 70,933. 70,933. Advertising and promotion ..... 12 92,599. 91,346. 1,253. 13 Office expenses 25,751. 19,428. 6,323. 14 Information technology 15 Royalties 3,075. <465. <3,540. 16 Occupancy 140,948. 126,819. 14,129. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates \_\_\_\_\_ 21 1,111,795. 1,235,237. 61,721. 61,721. Depreciation, depletion, and amortization ..... 22 60,748. 60,748. 23 Other expenses. Itemize expenses not covered 24 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.) OTHER EXPENSES - SCH. 2,195,285. 1,997,297. 10,860. 187,128.

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556,668.

С

25

5,119,383.

6,078,687.

Check here

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.

if following SOP 98-2 (ASC 958-720)

402,636.

Form 990 (2014)
Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			2,611,384.	1	4,954,980.
	2	Savings and temporary cash investments			4,015,067.	2	2,098,215.
	3	Pledges and grants receivable, net			2,776,311.	3	2,012,323.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sect					
ţ		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
ğ	8	Inventories for sale or use			705,611.	8	348,357.
	9	5			18,237.	9	22,659.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	37,576,477.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	21,365,188.	16,563,410.	10c	16,211,289.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1			40,613,326.	12	42,581,705.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	67,303,346.	16	68,229,528.		
	17	Accounts payable and accrued expenses	880,288.	17	890,458.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
es	22	Loans and other payables to current and former					
≣		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa		I			
		parties, and other liabilities not included on lines		· · ·			
		Schedule D			880,288.	25	890,458.
	26	Total liabilities. Add lines 17 through 25		<b>V</b>	000,200.	26	030,430.
		Organizations that follow SFAS 117 (ASC 958		ck nere 🚩 🔼 and			
Ses	07	complete lines 27 through 29, and lines 33 an			21,567,980.	07	19,600,244.
Fund Balances	27	Unrestricted net assets			31,353,998.	27 28	34,237,746.
Ba	28	Temporarily restricted net assets  Permanently restricted net assets			13,501,080.	29	13,501,080.
ů	29	Organizations that do not follow SFAS 117 (A	13,301,000.	23	13,301,000		
Ē			SC 95	b), check here			
S O	20	and complete lines 30 through 34.				30	
Se	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or		Retained earnings, endowment, accumulated in				32	
Š	32	Total net assets or fund balances			66,423,058.	33	67,339,070.
	34				67,303,346.	34	68,229,528.
	J-4	TOTAL HADIILIES AND HEL ASSELS/TUHU DAIAHUES			J.,JJJ,J±0•	J-+	Form <b>990</b> (2014)

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Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,11			
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,07			
3	Revenue less expenses. Subtract line 2 from line 1	3			69.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66,42			
5	Net unrealized gains (losses) on investments	5	87	6,6	43.	
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			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	67,33	9,0	70.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				X	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	X 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 oversight of th	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit				
	Act and OMB Circular A-133?		За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b			
			Form	990	(2014)	

### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE RICHARD NIXON FOUNDATION

**Employer identification number** 52-1278303

Pa	rt I	Reason for Public (	Charity Status (	All organizations must co	omplete th	is part.) Se	ee instructions.	
The	organ	ganization is not a private foundation because it is: (For lines 1 through 11, check only one box.)						
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)						
3	一	A hospital or a cooperative		· · · · · · · · · · · · · · · · · · ·	ection 170	γьγ1γΔγii	i)	
4	Ħ	A medical research organiz					-	the hospital's name
7		city, and state:	ation operated in 60	njanotion with a noopita	1 000011500	3 111 000010	ii ii o(b)( i)(i-)(iii). Liitoi	the hoopital o hame,
_			or the benefit of a co	llogo or university owne	d or operat	tod by a g	avaramantal unit dagarik	and in
5		An organization operated for		mege of difficersity owner	u or opera	ted by a gi	overninental unit descrit	Jeu III
_		section 170(b)(1)(A)(iv). (C				-00 V4VA	<i>(</i> )	
6	v	A federal, state, or local gov	-					
7	X	An organization that norma	•	intial part of its support	from a gov	ernmental	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (C						
8	Ш	A community trust describe						
9		An organization that norma						
		activities related to its exen						
		income and unrelated busing		(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See <b>section 509(a)(2).</b> (Cor						
10	Н	An organization organized a	•	•	•			
11		An organization organized a	•	•	=		•	
		more publicly supported or						Check the box in
		lines 11a through 11d that	* *			-	<del>_</del>	
а			•	•	•			
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting
		organization. <b>You must o</b>	-					
b			•					•
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С			grated. A supporting	g organization operated	in connec	tion with, a	and functionally integrate	ed with,
	_	its supported organization	n(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.	
d			<b>integrated.</b> A supp	orting organization oper	rated in co	nnection v	vith its supported organi	zation(s)
		that is not functionally int	-		•			iveness
		requirement (see instruct	·	· ·				
е		□ Check this box if the organic					Type I, Type II, Type III	
		functionally integrated, or						
f		er the number of supported o						
g		vide the following information		ed organization(s).  (iii) Type of organization	(iv) Is the o	rganization	(u) Amount of monotons	(vi) Amount of
	,	i) Name of supported organization	(ii) EIN	(described on lines 1-9	listed i	n your	(v) Amount of monetary support (see	(vi) Amount of other support (see
		organization.		above or IRC section	governing o		Instructions)	Instructions)
				(see instructions))	Yes	No	,	,
Γota	ı							

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

## Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,170,994.	688,586.	2,014,262.	5,908,797.	3,111,146.	12,893,785.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,170,994.	688,586.	2,014,262.	5,908,797.	3,111,146.	12,893,785.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						12,893,785.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	1,170,994.	688,586.	2,014,262.	5,908,797.	3,111,146.	12,893,785.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,876,579.	1,966,390.	2,033,683.	2,073,562.	2,528,595.	10,478,809.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	111,360.	78.	62.	922.	14,315.	126,737.
10	Other income. Do not include gain						
	or loss from the sale of capital		050 054		<b>504</b>		252 255
	assets (Explain in Part VI.)	633.	850,374.	538.	521.		852,066.
11	<b>Total support.</b> Add lines 7 through 10						24,351,397.
12	Gross receipts from related activities,						,569,522.
13	First five years. If the Form 990 is for	ŭ	first, second, third	l, fourth, or fifth tax	k year as a sectio	n 501(c)(3)	. $\square$
50.	organization, check this box and stor		roontogo				<u></u>
	etion C. Computation of Publ						52.95 %
	Public support percentage for 2014 (					14	40 55
15	Public support percentage from 2013					15	
Iba	33 1/3% support test - 2014. If the content have The experience qualifies						x and ► X
h	<ul><li>stop here. The organization qualifies</li><li>33 1/3% support test - 2013. If the organization</li></ul>						
L.	and <b>stop here.</b> The organization qual	•		•		•	IIS DOX
170	10% -facts-and-circumstances tes						or more
17 a	and if the organization meets the "fac	•					•
	meets the "facts-and-circumstances"						
h	10% -facts-and-circumstances tes						
i.	more, and if the organization meets the						
	organization meets the "facts-and-circ		·		•		
12	Private foundation. If the organization			•			
	i i i ato i odi i dationi. Il tile organizatio	an alla flot officiol a	DON OIT III IC TO, TOA	, 100, 110, 01 110,	CHOOK HIS DOX a	ina see manacidell	·

Schedule A (Form 990 or 990-EZ) 2014

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

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

Section A. Public Support	elow, please com	ipiete Fart II.)				
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and	(-,/ =	(-,	(-,	(1) = 1 1	(=,====	(-)
membership fees received. (Do not						
include any "unusual grants.")						
<b>2</b> Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
in a constant and in EdO						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
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>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support			1	1		T
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on	_					
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here						<b>&gt;</b>
Section C. Computation of Publ	ic Support Pe	ercentage				
15 Public support percentage for 2014 (I	ine 8, column (f) o	divided by line 13,	column (f))		15	%
16 Public support percentage from 2013	Schedule A, Par	t III, line 15			16	%
Section D. Computation of Inves	stment Incom	ne Percentage	)			
17 Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from 2	<b>2013</b> Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2014. If the					33 1/3%, and line	17 is not
more than 33 1/3%, check this box a						<b>&gt;</b> □
b 33 1/3% support tests - 2013. If the						and
line 18 is not more than 33 1/3%, che	-					
20 Private foundation. If the organizatio						

## Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** 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 made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** 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 or supervised by or in connection with its supported organizations.
- c 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 all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a 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 amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a 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)(1) or (2))? If "Yes," provide detail in part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
40		
4c		
40		
5a		
5b 5c		
- 00		
6		
7		
8		
9a		
9b		
30		
9с		
10a		
10b n 990 or 99	O-E2\	2014

Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
	,		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	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 organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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 how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	)_	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those 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 constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
•	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b				
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970. See instru	uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Soot	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
<del></del>	ion A - Adjusted Net Income		(A) FIIOI Teal	(optional)
_1_	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	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)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly-integrat	ted Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2014

Par	rt V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	IS		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
3ecti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u>i</u>	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
_	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	DISCUSSION OF HITO 1.			
b				
c				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE RICHARD NIXON FOUNDATION

**Employer identification number** 52-1278303

Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	5.	
		(a) Donor advised funds	(b) 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 advisors in wr	iting that the assets held in donor advised	funds
	are the organization's property, subject to the organization's ex	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or o		
Pai			
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or edu	ucation) Preservation of a historic	ally important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic struc	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired aft	ter 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release		
	year ▶		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the perio		
	violations, and enforcement of the conservation easements it h	nolds?	Yes
6	Staff and volunteer hours devoted to monitoring, inspecting, ar		
7	Amount of expenses incurred in monitoring, inspecting, and en		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizatio	on's financial statements that describes the	organization's accounting for
Da	conservation easements.	Art Historical Transcures or Othe	er Cimilar Assats
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" to Form 99		
та	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		d b alanca abandanada abanda bisabada al
D	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance of public	service, provide the following amounts
	relating to these items:		Α
	(i) Revenue included in Form 990, Part VIII, line 1		
_		All and the state of the state	
2	If the organization received or held works of art, historical treas	_	un, provide
_	the following amounts required to be reported under SFAS 116	, ,	Δ
a	Revenue included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		• • <u> </u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

Pai	rt III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Ot	her Sir	nilar Ass	ets(continue	d)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a	significa	ant use of its	collection ite	ems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further t	he organization's e	xempt p	urpose in Pa	ırt XIII.	
5	During the year, did the organization solicit o							
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	ollection?			Yes	No
Pai	rt IV Escrow and Custodial Arran						line 9, or	
	reported an amount on Form 990, Par		-					
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contribution	s or other assets r	ot includ	led		
	on Form 990, Part X?					[	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	owing table:					
							Amount	
С	Beginning balance				1	С		
	Additions during the year					d		
	Distributions during the year					е		
f	Ending balance					lf		
2a	Did the organization include an amount on Fo						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	olanation has been	provided in Part X	III		<u></u>	
Pai	rt V Endowment Funds. Complete it	the organization and	swered "Yes" to Fo	rm 990, Part IV, lin	e 10.			
		(a) Current year	(b) Prior year	(c) Two years back	( <b>d)</b> Thi	ree years back	(e) Four yea	ırs back
1a	Beginning of year balance	42,485,068.	37,687,124.	34,884,711	. 4	2,302,913	. 38,97	9,111.
b	Contributions							
С	Net investment earnings, gains, and losses	2,201,034.	6,602,043.	4,520,288		<487,189	. 5,21	4,780.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	1,931,774.	1,723,645.	1,579,108		6,778,729	. 1,78	1,029.
f	Administrative expenses	99,885.	80,454.	138,767		152,284	. 10	9,949.
g	End of year balance	42,654,443.	42,485,068.	37,687,124	. 3	4,884,711	. 42,30	2,913.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment	5.00	_%					
b	Permanent endowment ► 32.00	%						
С	Temporarily restricted endowment ▶6	3.00 <sub>%</sub>						
	The percentages in lines 2a, 2b, and 2c should	ld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	nd administered fo	r the org	anization		
	by:						Ye	
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" to Form 990,	Part IV, line 11a. S	ee Form 990, Part	X, line 10	).		
	Description of property	(a) Cost or ot		or other (c)	Accumu	ılated	(d) Book va	alue
		basis (investm	,	` '	depreciat	tion		
	Land			3,000.			1,993,	
	Buildings				,365	,188.	12,151,	
	Leasehold improvements			9,382.			129,	
d	Equipment			0,801.			260,	
	Other			6,722.			1,676,	
Tota	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	K, column (B), line 1	0c.)		▶ [ ]	16,211,	289.

Schedule D (Form 990) 2014

	NIXON FOUNDA	TION	52 <sup>-</sup>	-1278303	Page
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	-of-year market	value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) MONEY FUND	37,472,200.	END-OF-Y	EAR MARKET		
(B) EQUITY SECURITIES	5,109,505.	END-OF-Y	EAR MARKET	VALUE	
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	42,581,705.				
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11c. See Form 990,	Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end	-of-year market	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.	•				
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11d. See Form 990,	Part X, line 15.		
(a)	Description			(b) Book v	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<b>•</b>		
Part X Other Liabilities.	<del>/</del>		······		
Complete if the organization answered "Yes"	to Form 990. Part IV. line	11e or 11f. See Forn	n 990, Part X. line 25.		
1. (a) Description of liability		(b) Book value	,		
(1) Federal income taxes					
(., . odorar moorno taxoo					

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

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

Schedule D (Form 990) 2014

Sche	edule D (Form 990) 2014 THE RICHARD NIXON FOUNDA				1278303 Page <b>4</b>
Pai	rt XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per R	eturn	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	6,898,943.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	876,643.		
b	Donated services and use of facilities	2b			
С					
d					
е				2e	876,643.
3	Subtract line 2e from line 1			3	6,022,300.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	95,756.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	95,756.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,118,056.
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ements With	n Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	12a.			
1	Total expenses and losses per audited financial statements			1	5,982,931.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С					
d					
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	5,982,931.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	95,756.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	95,756.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,078,687.
Pa	rt XIII Supplemental Information.				
	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Is 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any				
_					

## SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

**Statement of Activities Outside the United States** 

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

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2014
Open to Public Inspection

Name of the organization

**Employer identification number** 

TH:	HE RICHARD NIXON FOUNDATION 52-1278303							
Pa	Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on							
	Form 990, Part IV, line 14b.							
1	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,							
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No							
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and o	ther assistance outs	side the	
	United States.							
3	Activities per Region. (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is i	needed.)			
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region		vity listed in (d)	(f) Total	
		offices	employees, agents, and	(by type) (e.g., fundraising, program		gram service,	expenditures for and	
		in the region	independent contractors	services, investments, grants to		e specific type	investments	
			in region	recipients located in the region)	of servi	ce(s) in region	in region	
NO Z	ACTIVITY IN 2014						0.	
3 a	Sub-total	0	0				0.	
	Total from continuation							
	sheets to Part I	0	0				0.	
С	Totals (add lines 3a							
	and 3b)	0	0				0.	

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

Schedule F (Form 990) 2014

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.									
r	ecipient who rec	ceived more than \$5,	000. Part II can be dupli	icated if additional space is ne	eded.				
1 (a) Name	of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter	total number of	recipient organizatio	ns listed above that are	recognized as charities by the	foreign country	, recognized as tax-e	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

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

Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

Part IV	Foreign	<b>Forms</b>

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

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

## **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

THE RICHARD NIXON FOUNDATION

**Questions Regarding Compensation** 

**Employer identification number** 52-1278303

	adoctions risgaraning compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		103	110
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions  Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
	Discretionary spending account.			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	10		
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
	trustees, and officers, including the OLO/Executive Director, regarding the items checked in line 1a:			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
Ū	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Three periodic compensation consultant Compensation compensation committee  Three periodic compensation committee Compensation committee  Three periodic compensation committee Compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
4	organization or a related organization:			
_		40		х
	Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
		40 4c		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	40		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
~	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the net earnings of:			
а	The organization?	6a		х
b	Any related organization?	6b		X
~	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			_ <u>-</u>
5	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	Ť		
9	Regulations section 53.4958-6(c)?	9		
	riegulations section 33.4300°U(c):	J	l	

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

Schedule J (Form 990) 2014

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred benefits		(E) Total of columns	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990	
(1) CHERYL SAREMI	(i)	61,957.	500.	0.	0.	24,690.	87,147.	0.	
SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) BOB BRIGHT	(i)	115,409.	5,500.	0.	0.	32,517.	153,426.	0.	
VICE PRESIDENT & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) RICHARD M. QUINN	(i)	245,296.	10,000.	0.	0.	26,449.	281,745.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) WILLIAM H. BARIBAULT	(i)	136,320.	0.	0.	0.	10,175.		0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) ANTHONY CURTIS	(i)	99,181.	5,000.	0.	0.	19,663.		0.	
EXECUTIVE VP & COO	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)							_	
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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.					

## **SCHEDULE M** (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

**Employer identification number** THE RICHARD NIXON FOUNDATION

52-1278303 Part I Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining amounts reported on contributions or applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1a Art - Works of art 1 Art - Historical treasures Art - Fractional interests ..... 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 2,330,558. FAIR MARKET VALUE Securities - Publicly traded ..... 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies ..... 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other -26 Other 27 Other ▶ 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes." describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II.

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

Schedule M (Form 990) (2014)

432142 08-12-14

Schedule M (Form 990) (2014)

## SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

. Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

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

**Employer identification number** 52-1278303

THE RICHARD NIXON FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE RICHARD NIXON FOUNDATION IS AN EDUCATIONAL INSTITUTION, A 501 (C) (3) NOT-FOR-PROFIT CORPORATION, DELAWARE, 1983. ITS MISSION IS TO ILLUMINATE AND PROTECT THE LEGACY OF THE 37TH PRESIDENT THROUGH ITS OWN PROGRAMS AND EXHIBITS AT THE RICHARD NIXON PRESIDENTIAL LIBRARY AND MUSEUM IN YORBA LINDA, CALIFORNIA. AT THE PRESIDENTIAL LIBRARY AND MUSEUM IN YORBA LINDA, SPECIAL FREE ADMISSION DAYS THROUGHOUT THE YEAR ENCOURAGE COMMUNITY INVOLVEMENT. ALSO, ON SUNDAY AFTERNOONS, A FAMILY CONCERT SERIES IS OFFERED WITHOUT CHARGE FEATURING MUSICIANS FROM THE SOUTHERN CALIFORNIA AREA.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EVENTS TO EDUCATE AND INFORM ABOUT THE LIFE AND TIMES OF RICHARD NIXON ON SELECT DAYS AND HOLIDAYS SUCH AS 9/11 MEMORIAL EVENT, MEET THE PRESIDENTS SERIES, PAT NIXON'S BIRTHDAY CELEBRATION, HOLIDAY RECEPTION, PRESIDENT NIXON'S BIRTHDAY CELEBRATION, MEMORIAL DAY, PRESIDENT'S DAY, INDEPENDENCE DAY, AND LEGACY FORUM.

EXPENSES \$ 4,896,221. INCLUDING GRANTS OF \$ 0. REVENUE \$ 344,169.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS TRICIA NIXON COX AND JULIE NIXON EISENHOWER ARE SISTERS AND DAUGHTERS OF THE FORMER UNITED STATES PRESIDENT RICHARD NIXON.

BOARD MEMBER EDWARD NIXON IS THE YOUNGEST BROTHER OF THE FORMER UNITED STATES PRESIDENT RICHARD NIXON; THEREFORE, HE IS THE UNCLE OF TRICIA NIXON COX AND JULIE NIXON EISENHOWER.

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

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization **Employer identification number** THE RICHARD NIXON FOUNDATION 52-1278303 FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE FOUNDATION ARE THE DAUGHTERS OF FORMER PRESIDENT NIXON: TRICIA NIXON COX AND JULIE NIXON EISENHOWER. THE OTHER SIX MEMBERS ARE: RONALD H. WALKER-CHAIRMAN OF THE BOARD, CHAIRMAN OF EXECUTIVE COMMITTEE, AND CHAIRMAN OF THE LIBRARY RENOVATION OVERSIGHT COMMITTEE. JOHN H. BARR-CHAIRMAN OF THE BUDGET AND FINANCE COMMITTEE, AND TREASURER OF THE BOARD KENNETH L. KHACHIGIAN-CHAIRMAN OF THE AUDIT COMMITTEE LAWRENCE M. HIGBY-CHAIRMAN OF THE COMPENSATION COMMITTEE J. PETER SIMON-CHAIRMAN OF THE INVESTMENT COMMITTEE JOHN CARLEY - CHAIRMAN OF THE PROGRAM COMMITTEE FORM 990, PART VI, SECTION A, LINE 7A: THE RESPONSIBILITY OF THE MEMBERS AT THE ANNUAL MEMBERS MEETING IS TO ELECT THE DIRECTORS FOR A ONE YEAR TERM. THERE WERE A TOTAL OF 22 DIRECTORS ELECTED AT THE 2014 ANNUAL MEETING. FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTEE SHALL HAVE THE RESPONSIBILITY FOR REVIEWING THE FORM 990 (INCLUDING ALL PERTINENT SCHEDULES) BEFORE IT IS FILED WITH THE

INTERNAL REVENUE SERVICE.

A DRAFT OF THE FORM 990 SHOULD BE READY FOR REVIEW BY THE AUDIT COMMITTEE NO LATER THAN ONE MONTH PRIOR TO THE FILING DEADLINE.

AFTER THE DRAFT OF THE FORM 990 HAS BEEN PROVIDED TO THE AUDIT COMMITTEE,

IT WILL HAVE NO MORE THAN TWO WEEKS TO COMPLETE ITS REVIEW.

Employer identification number 52-1278303

IN CONDUCTING ITS REVIEW OF THE DRAFT OF THE FORM 990, IT IS PREFERRED THAT THE AUDIT COMMITTEE SHALL CONDUCT A TOP-LEVEL OR BIG-PICTURE TYPE OF REVIEW. HOWEVER, IF THE AUDIT COMMITTEE DESIRES OR DEEMS IT NECESSARY TO CONDUCT A MORE DETAILED REVIEW OF THE FORM 990, THEN IT SHOULD CONTACT THE PREPARER OF THE FORM 990 TO REQUEST COPIES OF THE RELEVANT DETAILED TAX RETURN WORKPAPERS WHICH IT WOULD LIKE TO SEE.

ONCE THE AUDIT COMMITTEE HAS COMPLETED ITS INITIAL REVIEW OF THE FORM 990,

A MEETING OR CONFERENCE CALL WILL BE SCHEDULED WITH THE PREPARER OF THE

FORM 990 (REGARDLESS OF WHETHER THE FORM 990 IS EXTERNALLY OR INTERNALLY

PREPARED) TO DISCUSS ANY QUESTIONS, COMMENTS, AND SUGGESTED REVISIONS

IDENTIFIED BY THE AUDIT COMMITTEE.

THE PREPARER OF THE FORM 990 SHOULD MAKE ANY REVISIONS TO THE FORM 990 AS SOON AS FEASIBLY POSSIBLE TO ENSURE THAT THE FORM 990 IS FILED WITH THE INTERNAL REVENUE SERVICE ON A TIMELY BASIS.

ALL OF THE QUESTIONS, COMMENTS, AND SUGGESTED REVISIONS SET FORTH BY THE

AUDIT COMMITTEE SHOULD BE DOCUMENTED, ALONG WITH ANY RESPONSES FROM THE

PREPARER OF THE FORM 990, IF APPLICABLE.

AFTER THE FORM 990 HAS BEEN REVIEWED AND APPROVED BY THE AUDIT COMMITTEE, A

COPY IS DISSEMINATED TO THE FULL BOARD PRIOR TO FILING WITH THE INTERNAL

REVENUE SERVICE.

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

MANAGEMENT REGULARLY MONITORS TRANSACTIONS FOR CONFLICT OF INTEREST. THREE

432212
08-27-14
Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization
THE RICHARD NIXON FOUNDATION

BIDS ARE REQUIRED ON SIGNIFICANT CONTRACTS AND MANGAGEMENT APPROVAL IS

FORM 990, PART VI, SECTION B, LINE 15:

REQUIRED FOR ALL OTHER TRANSACTIONS.

THE ORGANIZATION HAS A WRITTEN POLICY IN PLACE OUTLINING PROCEDURES FOR

EXECUTIVE COMPENSATION REVIEW. THE EXECUTIVE COMMITTEE OF THE BOARD

ANNUALLY REVIEWS THE EXECUTIVE COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 18:

THE PUBLIC INSPECTION COPY OF THE FORM 990 AND FORM 990-T, FROM THE PREVIOUS THREE YEARS (AT MINIMUM), WILL BE AVAILABLE (FOR INSPECTION OR COPYING) AT THE MAIN OFFICE DURING NORMAL BUSINESS HOURS AT NO CHARGE;

ADDITIONALLY, THESE SAME FORMS 990 AND 990-T WILL ALSO BE POSTED ON THE WEB SITE AT WWW.NIXONFOUNDATION.ORG AND WWW.GUIDESTAR.ORG.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOLLOWING ORGANIZATIONAL DOCUMENTS OF THE ORGANIZATION WILL BE

AVAILABLE FOR PUBLIC INSPECTION: PREVIOUS THREE YEAR TAX RETURNS (FORM 990

AND FORM 990-T) AND IRS CONFIRMATION OF EXEMPT STATUS.

ALL OF THE AFOREMENTIONED ORGANIZATIONAL DOCUMENTS WILL ALSO BE POSTED ON
THE WEB SITE. THE ORGANIZATION WILL USE ITS BEST EFFORTS TO ENSURE THAT THE
DOCUMENTS POSTED ON THE WEBSITE ARE THE MOST UPDATED VERSIONS OF SUCH.

THE PUBLIC INSPECTION COPY OF THE FORM 990 WILL NOT INCLUDE THE SCHEDULE OF SCHEDULE A EXCESS CONTRIBUTORS OR THE SCHEDULE B NAMES AND ADDRESSES OF CONTRIBUTORS.

Name of the organization THE RICHARD NIXON FOUNDATION	Employer identification number 52-1278303
THE ORGANIZATION WILL USE ITS BEST EFFORTS TO ENSURE THAT	THE FORMS 990 AND
990-T HELD AT THE MAIN OFFICE AND POSTED ON THE WEBSITE A	RE THE MOST
UPDATED VERSIONS OF SUCH. FOR EXAMPLE, IN THE INSTANCE WH	ERE A FORM 990 HAS
BEEN AMENDED, THE AMENDED VERSION OF THE FORM 990 OR FORM	990-T SHOULD BE
THE ONE AVAILABLE FOR PUBLIC INSPECTION.	
WHEN RESPONDING TO A PUBLIC INSPECTION REQUEST FOR ANY OR	GANIZATIONAL
DOCUMENT OR FORM 990 (INCLUDING FORM 990-T) BY ANYONE, TH	E ORGANIZATION
SHALL FULFILL SUCH REQUEST IN A TIMELY FASHION WITHOUT IN	QUIRING AS TO THE
REASON FOR THE PUBLIC INSPECTION REQUEST.	
THE ORGANIZATION WAS GRANTED EXEMPT STATUS BY THE INTERNA	L REVENUE SERVICE
IN AUGUST 1983. THE FOUNDATION POSTS, ON ITS WEBSITE, A L	ETTER FROM THE IRS
DATED JUNE 22, 1998 CONFIRMING ITS EXEMPT STATUS EFFECTIV	E AUGUST 1983.
FORM 990, PART VIII, LINE 1F:	
THIS AMOUNT INCLUDES \$2,670,497 OF CONTRIBUTIONS GENERATE	D FROM THE
RICHARD NIXON CENTENNIAL CAMPAIGN IN 2014.	
FORM 990, PART XII, LINE 2C:	
THE RICHARD NIXON FOUNDATION'S AUDIT COMMITTEE MEMBERS RE	VIEW THE
AUDITED FINANCIAL STATEMENTS AND SELECT INDEPENDENT ACCOU	NTANTS.

# The Richard Nixon Foundation FEIN: 52-1278303 Schedule 1

# Attachment to Form 990, Part VIII, Line 2b January 1, 2014 to December 31, 2014

	Summary	Income	Expenses	Net Income
Lectures		\$23,355.67	\$40,067.56	-\$16,711.89
Luncheon		<u>-\$14,770.00</u>	\$12,201.23	<u>-\$26,971.23</u>
Total		\$8,585.67	\$52,268.79	-\$43,683.12

Event	Event Date	Income	Expense	Net Income
Lecture-Oliver North	06/06/2014	\$3,973.05	\$4,626.55	-\$653.50
Lecture-JC Watts	01/20/2014	\$1,040.00	\$958.57	\$81.43
Lecture-Lynn Cheney	05/19/2014	\$3,635.02	\$9,716.02	-\$6,081.00
Lecture-Greg Gutfield	04/19/2014	\$6,257.10	\$5,340.85	\$916.25
Lecture-Pat Buchanan	07/21/2014	\$1,662.06	\$7,498.65	-\$5,836.59
Lecture-Jake Tapper	11/11/2013	\$6.00	\$2,325.82	-\$2,319.82
Lecture-Newt Gingrich	10/20/2014	\$5,817.36	\$700.00	\$5,117.36
Lecture-Ben Carson	10/19/2014	\$689.31	\$889.24	-\$199.93
Lecture-KRLA Ed Klein	08/05/2014	\$275.77	\$8,011.86	-\$7,736.09
Luncheon-Cui Tiankai	05/27/2014	-\$14,770.00	\$12,201.23	-\$26,971.23
TOTAL	-	\$8,585.67	\$52,268.79	-\$43,683.12

# The Richard Nixon Foundation FEIN: 52-1278303 Schedule 2

## Attachment to Form 990, Part VIII, Line 7a, 7b, 7c (Sales of Assets other than Inventory) January 1, 2014 to December 31, 2014

Description	Purchase	Number	Purchase	Sale	Number	Sale Price	Gain/(Loss)
	Date	of Shares	Price	Date	of Shares	(Line 7a)	(Line 7c)
American Fund Europacific Grwth	01/01/2010	488	\$23,946.16	07/08/2014	488	\$25,000.00	\$1,053.84
American Funds Europacific Growth	05/13/2002	519	\$25,467.33	03/24/2014	519	\$25,000.00	-\$467.33
American Funds Europacific Growth	01/01/2010	3552	\$174,296.64	01/22/2014	3552	\$175,000.00	\$703.36
American Funds Europacific Gwth	01/01/2009	1009	\$49,511.63	08/05/2014	1009	\$50,000.00	\$488.37
Ansys Inc	07/22/2011	482	\$42,030.40	06/10/2014	482	\$36,338.34	-\$5,692.06
Ansys Inc	11/23/2011	105	\$9,156.00	07/01/2014	105	\$7,765.24	-\$1,390.76
Ansys Inc	08/18/2011	831	\$72,463.20	06/10/2014	831	\$62,650.23	-\$9,812.97
Ansys Inc	11/23/2011	183	\$15,957.60	07/01/2014	183	\$13,533.72	-\$2,423.88
Cohen & Steers Inst	01/15/2014	1128	\$47,078.71	03/24/2014	1128	\$50,000.00	\$2,921.29
Delaware US Growth Fd	02/06/2008	3966	\$98,912.04	03/24/2014	3966	\$100,000.00	\$1,087.96
Delaware US Growth FD	02/06/2008	2830	\$70,580.20	07/08/2014	2830	\$75,000.00	\$4,419.80
Delaware US Growth Fd	02/06/2008	2665	\$66,465.10	09/23/2014	2665	\$70,000.00	\$3,534.90
Diamond Hill Large Cap Fd	01/01/2010	6925	\$149,510.75	01/22/2014	6925	\$150,000.00	\$489.25
Diamond Hill Large Cap Fd	06/04/2012	2245	\$48,469.55	05/28/2014	2245	\$50,000.00	\$1,530.45
Diamond Hill Large Cap FD		3256	\$70,297.04	07/08/2014	3256	\$75,000.00	\$4,702.96
<b>.</b>	06/04/2012	3256 1298			3256 1298		
Diamond Hill Large Cap FD	06/04/2012		\$28,023.82	09/23/2014		\$30,000.00	\$1,976.18
Diamond Hill Large Cap Fd	06/04/2012	4450	\$96,075.50	08/05/2014	4450	\$100,000.00	\$3,924.50
Dodge & Cox Intl Stock	01/01/2010	866	\$37,272.64	08/05/2014	866	\$40,000.00	\$2,727.36
Dodge & Cox Intl Stock Fd	04/15/2005	585	\$25,178.40	03/24/2014	585	\$25,000.00	-\$178.40
Dodge & Cox Intl Stock Fd	01/01/2010	1087	\$46,784.48	05/28/2014	1087	\$50,000.00	\$3,215.52
Dodge & Cox Intl Stock FD	01/01/2010	534	\$22,983.36	07/08/2014	534	\$25,000.00	\$2,016.64
Dodge & Cox Intl Stock Fund	01/01/2010	1736	\$74,717.44	01/22/2014	1736	\$75,000.00	\$282.56
EMC Corp Mass	08/22/2008	2298	\$54,984.48	02/06/2014	2298	\$54,891.60	-\$92.88
EMC Corp Mass	08/22/2008	3860	\$92,358.61	02/06/2014	3860	\$92,202.60	-\$156.01
Frontier Mid Cap Growth Fund	01/01/2010	100000	\$100,000.00	02/11/2014	100000	\$100,000.00	\$0.00
Frontier Mid Cap Growth Fund	01/01/2010	200000	\$200,000.00	02/11/2014	200000	\$200,000.00	\$0.00
Golden Tree CL SP1-1	01/01/2010	5	\$5,885.32	12/29/2014	5	\$6,003.54	\$118.22
Golden Tree CL Sp1-1	06/01/2010	4	\$4,708.26	11/21/2014	4	\$4,393.04	-\$315.22
Golden Tree CL SP1-3	01/01/2010	1	\$2,939.84	12/29/2014	1	\$2,920.32	-\$19.52
Golden Tree CL SP-C	12/01/2014	278	\$13,496.32	12/29/2014	278	\$12,151.05	-\$1,345.27
Golden Tree CL SP-C	02/03/2003	176	\$7,682.81	04/03/2014	176	\$14,457.65	\$6,774.84
Golden Tree CL SP-C	02/03/2003	283	\$12,353.71	07/30/2014	283	\$16,550.08	\$4,196.37
Golden Tree Offshore SP1-1	06/14/2003	8	\$9,416.51	06/27/2014	8	\$9,569.83	\$153.32
Golden Tree Offshore SP1-1	01/01/2010	2	\$2,354.13	02/14/2014	2	\$2,148.25	-\$205.88
Golden Tree Offshore SP1-1	01/01/2010	3	\$3,531.19	12/29/2014	3	\$4,040.59	\$509.40
Golden Tree Offshore SP1-1	06/01/2010	2	\$2,354.13	11/21/2014	2	\$2,956.67	\$602.54
Golden Tree Offshore SP1-3	06/14/2003	7	\$20,578.90	06/30/2014	7	\$2,028.25	-\$18,550.65
Golden Tree Offshore SP1-3	01/01/2010	1	\$2,939.84	02/14/2014	1	\$1,000.25	-\$1,939.59
Golden Tree Offshore SP1-3	01/01/2010	1	\$0.00	12/29/2014	0	\$1,965.36	\$1,965.36
Golden Tree Offshore SP-C			\$11,682.32				
	01/01/2014	191		07/30/2014	191	\$11,138.69	-\$543.63
Golden Tree Offshore SP-C	01/01/2007	118	\$5,150.98	04/03/2014	118	\$9,730.45	\$4,579.47
Golden Tree Offshore SP-C	01/01/2010	186	\$8,119.33	12/29/2014	186	\$8,177.89	\$58.56
Golden Tree SP1-1	06/01/2003	11	\$12,947.70	06/27/2014	11	\$14,218.90	\$1,271.20
Golden Tree SP1-1	01/01/2010	3	\$3,531.19	02/14/2014	3	\$3,191.89	-\$339.30
Golden Tree SP1-3	06/01/2003	1	\$2,939.84	06/27/2014	1	\$3,013.77	\$73.93
Golden Tree SP1-3	01/01/2010	1	\$2,939.84	02/14/2014	1	\$1,486.27	-\$1,453.57
Hospira Inc Com	06/12/2012	129	\$5,325.12	07/18/2014	129	\$6,481.08	\$1,155.96
Hospira Inc Com	06/12/2012	261	\$10,774.08	07/18/2014	261	\$13,113.38	\$2,339.30
Legg Mason BW Glbl	12/15/2010	4359	\$47,382.33	05/28/2014	4359	\$50,000.00	\$2,617.67
Legg Mason BW Glbl	12/15/2010	6555	\$71,252.85	08/05/2014	6555	\$75,000.00	\$3,747.15
Legg Mason BW Global	12/15/2010	2283	\$24,816.21	03/24/2014	2283	\$25,000.00	\$183.79
Loomis Sales Inv Gr	02/26/2009	4088	\$48,647.20	09/23/2014	4088	\$50,000.00	\$1,352.80
Loomis Sayles Inv	02/26/2009	4042	\$48,099.80	05/28/2014	4042	\$50,000.00	\$1,900.20
Loomis Sayles Inv Gr	02/26/2009	8264	\$98,341.60	03/24/2014	8264	\$100,000.00	\$1,658.40
							ψ1,030. <del>4</del> 0

Mastercard Inc-A	04/23/2009	320	\$26,736.00	02/12/2014	320	\$24,148.18	-\$2,587.82
Pimco Commodity RR	12/31/2013	8576	\$46,396.16	03/24/2014	8576	\$50,000.00	\$3,603.84
Pimco Total Return Fund	05/04/1998	68368	\$730,853.92	10/15/2014	68368	\$750,000.00	\$19,146.08
Pimco Total Return Fund	05/04/1998	123062	\$1,315,532.78	10/15/2014	123062	\$1,350,000.00	\$34,467.22
Post Lmt High FD Class E	12/01/2011	870	\$963,080.60	04/29/2014	870	\$1,052,197.62	\$89,117.02
Post Lmt High Fd Class E	04/30/2014	1082	\$1,110,000.00	04/30/2014	1082	\$1,290,562.71	\$180,562.71
Robert Half Intl Inc	06/29/2010	436	\$18,307.64	08/01/2014	436	\$21,558.08	\$3,250.44
Robert Half Intl Inc	06/30/2010	766	\$32,164.34	08/05/2014	766	\$37,875.35	\$5,711.01
Securities	12/22/2014	1	\$0.00	01/26/2237	1	\$50,217.00	\$50,217.00
Stanley Black & Decker Inc	10/01/2012	385	\$31,065.65	07/18/2014	385	\$33,045.78	\$1,980.13
Stanley Black & Decker Inc	10/01/2012	634	\$51,157.46	07/18/2014	634	\$54,417.39	\$3,259.93
Starwood Hotels & Resorts	06/10/2011	62	\$4,925.90	04/22/2014	62	\$4,735.93	-\$189.97
Starwood Hotels & Resorts	06/10/2011	67	\$5,323.15	04/23/2014	67	\$5,170.14	-\$153.01
Starwood Hotels & Resorts	06/10/2011	664	\$52,754.80	06/12/2014	664	\$52,029.01	-\$725.79
Starwood Hotels & Resorts	06/10/2011	105	\$8,342.25	04/22/2014	105	\$8,020.52	-\$321.73
Starwood Hotels & Resorts	06/10/2011	1124	\$89,301.80	06/12/2014	1124	\$90,528.15	\$1,226.35
Starwood Hotels & Resorts	07/20/2011	111	\$8,818.95	04/23/2014	111	\$8,565.45	-\$253.50
Touchstone Small Cap Core	03/27/2012	1183	\$24,949.47	03/24/2014	1183	\$25,000.00	\$50.53
Touchstone Small Cap Core	03/27/2012	2344	\$49,434.96	07/08/2014	2344	\$50,000.00	\$565.04
Touchstone Small Cap Core	03/27/2012	2364	\$49,856.76	09/23/2014	2364	\$50,000.00	\$143.24
Waters Corp	09/26/2012	93	\$9,300.00	09/30/2014	93	\$9,360.20	\$60.20
Waters Corp	09/26/2012	373	\$37,300.00	10/01/2014	373	\$36,766.05	-\$533.95
Waters Corp	09/26/2012	829	\$82,900.00	09/25/2014	829	\$84,091.07	\$1,191.07
	•		\$7,025,496.53		•	\$7,436,402.99	\$410,906.46

# The Richard Nixon Foundation FEIN: 52-1278303 Schedule 3

# Attachment to Form 990, Part IX Line 24a, Other Expenses (Statement of Functional Expenses) January 1, 2014 to December 31, 2014

Lino			(P) Program	(C) Managament	
Line Number	Account Description	(A) Total	(B) Program Services	(C) Management	(D) Eupdraising
511-01	Docent Activities-Administrati	\$4,524.34	\$4,524.34	& General	(D) Fundraising
512-09	Inventory Scrap	\$304,279.00	\$304,279.00		
536-01	Postage & Freight - Administra	\$15,268.43	\$15,268.43		
536-02	Postage & Freight - Pro & Mkt	\$3,647.34	\$3,647.34		
536-02	Postage & Freight - Advancmnt	\$38.67	ψ5,047.54		\$38.67
536-03	Postage & Freight - Sales & Ev	\$1,455.92	\$1,455.92		φ30.07
536-04	Postage & Freight - Mus Store	\$1,435.92 \$11,636.94	\$1,435.92 \$11,636.94		
543-01			φ11,030.9 <del>4</del>	\$2,769.53	
545-04	Equipment Rent-Admin General U Repairs & Maint-Sales/Event	\$2,769.53 \$110.00	\$110.00	Ψ2,709.55	
545-04	Repairs & Maint-Sailes/Event	\$60,248.31	\$60,248.31		
551-01	Printing/Copies-Administration	\$726.63	φου,240.31	\$726.63	
570-03	Pres Council Exp - Adv & Admin	\$742.95		φ120.03	\$742.95
570-03 571-03	Associate Club Exp - Adv & Admi	\$11,122.05			\$11,122.05
572-19	Event-Hometown Heros	\$350.50	\$350.50		\$11,122.00
572-19	Event-9/11 Memorial	\$2,392.00	\$2,392.00		
572-23 572-24	Event-Retrace China Steps 3/12	\$2,392.00 \$56.61	\$56.61		
572-24	Event-Meet Presidents	\$6,873.99	\$6,873.99		
572-23	Event-Concert Series	\$11,112.24	\$11,112.24		
572-30	Event-WH Staff/Domestic Council	\$20,716.75			
572-31	Event-Pat Nixon Birthday 03/16	\$1,616.61	\$20,716.75 \$1,616.61		
572-33 572-38	Event-Bring Kids to Work Day 07/16/201	\$1,065.74			
572-36 572-46	Event-RN Birthday 01/09	\$13,354.72	\$1,065.74 \$13,354.72		
572- <del>4</del> 0 572-50	Event-40th Ann Resignth 08/14	\$7,005.98	\$7,005.98		
572-53	Event-Memorial Day	\$6,720.90	\$6,720.90		
572-53 572-54	Event-Presidents Day	\$5,990.33	\$5,990.33		
572-54 572-60	Event-4th of July (Every Year)	\$4,132.46	\$4,132.46		
572-62	Event-China Youth Summ 07/24/14	\$539.44	\$539.44		
572-62 572-64	Event-Veterans Day 11/11	\$3,010.64	\$3,010.64		
572-65	Event-Christmas Every Year	\$17,059.22	\$17,059.22		
572-05 572-75	Event-Nixon Legacy Forum	\$68,895.26	\$68,895.26		
574-03	Legacy Fundraising-Centennial	\$123,270.05	φ00,095.20		\$123,270.05
583-08	Grounds Maint - Facil Manageme	\$405,615.81	\$405,615.81		Ψ123,270.03
584-01	Outside Services - Administrat	\$312,238.47	\$312,238.47		
584-02	Outside Services - Promot/Mkt	\$64,917.32	\$64,917.32		
584-03	Outside Services - Adv & Admin	\$51,953.80	Ψ0+,317.32		\$51,953.80
584-04	Outside Services - Sales & Eve	\$57,996.99	\$57,996.99		ψ51,955.00
584-08	Outside Services - Facilty Mgm	\$21,780.12	\$21,780.12		
584-09	Outside Services - Museum Store	\$38,114.44	\$38,114.44		
584-10	Outside Services - Centennial	\$12,000.00	\$12,000.00		
591-00	Property Taxes	\$63,098.94	\$63,098.94		
592-00	Taxes - Other	\$236.88	\$236.88		
593-01	Licenses & Fees-Administration	\$150.00	Ψ230.00	\$150.00	
593-09	Licenses & Fees-Museum Store	\$758.00	\$758.00	ψ130.00	
595-08	Utilities - Facilities	\$244,532.27	\$244,532.27		
596-01	Professional Mem-Administratio	\$1,250.00	ΨΖ++,002.27	\$1,250.00	
596-03	Professional Mem-Sales/Events	\$238.00	\$238.00	Ψ1,230.00	\$0.00
596-09	Professional Mem-Museum Store	\$446.50	\$446.50		ψ0.00
597-01	Subscriptions-Admin General Us	\$2,015.30	Ψ++0.50	\$2,015.30	
597-01	Subscriptions-Marketing	\$3,570.26	\$3,570.26	ΨΖ,010.00	
597-02	Subscriptions-Adv & Admin	\$3,948.45	ψ5,57 0.20	\$3,948.45	\$0.00
597-03 597-04	Subscriptions-Event Sales	\$134.00	\$134.00	ψυ,940.40	ψ0.00
605-30	Exhibits-Trains	\$4,295.60	\$4,295.60		
000-00	Exhibito Hullo	ψτ,233.00	Ψτ,∠33.00		

# The Richard Nixon Foundation FEIN: 52-1278303

## Schedule 3

## Attachment to Form 990, Part IX Line 24a, Other Expenses (Statement of Functional Expenses) January 1, 2014 to December 31, 2014

Line			(B) Program	(C) Management	
<u>Number</u>	Account Description	(A) Total	<u>Services</u>	& General	(D) Fundraising
605-36	Exhibit-Helicopter	\$5,360.39	\$5,360.39		
605-37	Exhibit-Christmas Every Year	\$3,131.72	\$3,131.72		
605-41	Exhibits-Fairwell 04/04-10/04	\$456.62	\$456.62		
605-84	Exhibits-Farewell Mr. P 2014	\$34,181.02	\$34,181.02		
605-89	Exhibits-RN Exhibit	\$34,115.00	\$34,115.00		
605-90	Exhibits-Baseball 04/2014	\$17,372.62	\$17,372.62		
605-98	Kissinger Lunch 10/22/14	\$37,333.24	\$37,333.24		
697-09	Bank Charges-Museum Store	\$58,695.58	\$58,695.58		
698-09	Cash - Over/Short	\$4,613.95	\$4,613.95		
24a	Total other expenses	\$2,195,284.84	\$1,997,297.41	\$10,859.91	\$187,127.52