EXTENDED TO NOVEMBER 15, 2016

Form	990-T	E	Exempt Orga	ו	OMB No. 1545-0687				
			-	nd proxy tax und	er se	ction 6033(e))		0045	
		For cal	lendar year 2015 or other tax ye	_ ·	2015				
	nent of the Treasury		·	orm 990-T and its instru		-		L	
Internal	Revenue Service	•	Do not enter SSN number				ation is a 501(c)(3)		Open to Public Inspection for 501(c)(3) Organizations Only
A L_	☐ Check box if address changed		Name of organization (L	(Emp	oyer identification number loyees' trust, see uctions.)				
R Fxe	empt under section	Print	THE RICHARD	1	2-1278303				
	501(c)(3)	or		n or suite no. If a P.O. box				E Unrel	lated business activity codes
	408(e) 220(e)	Туре		LINDA BLVD				(See i	instructions.)
	408A 530(a)			vince, country, and ZIP o		n postal code			
	529(a)			, CA 92886				453	220
C Book	value of all assets		exemption number (See		>				
			k organization type 🕨	. , .		501(c) trust	401(a) trust	L	Other trust
			ary unrelated business act	····y· •		STATEMENT 1			[]
			ooration a subsidiary in an		nt-subs	idiary controlled group?	▶ L	Ye	es X No
			tifying number of the pare	nt corporation.			7	1 /	002 5075
			IRENE KLEPP		1	Teleph (A) Income	one number > 7		(C) Net
			de or Business Inc			(A) IIICUIIIC	(B) Expenses	•	(C) Net
	Gross receipts or sale ess returns and allo		00,404.	c Balance	1c	60,404.			
			A, line 7)		2	36,275.			
	Gross profit. Subtrac				3	24,129.			24,129.
	•		ch Schedule D)		4a	24,125.			24,125.
			Part II, line 17) (attach Forn		4b				
			sts		4c				
			ips and S corporations (at		5				
	. , , .			,	6				
7 l	Jnrelated debt-financ	ced incor	me (Schedule E)		7				
			and rents from controlled o		8				
9 I	nvestment income o	f a sectio	on 501(c)(7), (9), or (17) o	organization (Schedule G)	9				
			me (Schedule I)		10				
11 A	Advertising income (Schedule	e J)		11				
			ns; attach schedule)		12				
			gh 12		13	24,129.			24,129.
Par			ot Taken Elsewhe utions, deductions mus						
				•			<u> </u>		1
			rectors, and trustees (Sch					14	17,236.
								15 16	17,230.
								17	
								18	
								19	
20	Charitable contribut	ions (Se	e instructions for limitatior	rules)				20	
			562)						
			n Schedule A and elsewhe					22b	97.
								23	
24	Contributions to def	ferred co	mpensation plans					24	
								25	
			chedule I)					26	
27	Excess readership of	osts (Sc	hedule J)					27	
28	Other deductions (a	ttach sch	nedule)			SEE STAT	EMENT 2	28	5,677.
			nes 14 through 28					29	23,010.
			ncome before net operatin					30	1,119.
31	Net operating loss d	leduction	n (limited to the amount on	Ine 30)		SEE STAT	гигил. 2	31	923. 196.
			ncome before specific ded					32	1,000.
			y \$1,000, but see line 33 in income. Subtract line 33					33	1,000.
			e income. Subtract line 33		•	•		34	0.
523701	UL							UT	

Part II	I Tax Computation											
35	Organizations Taxable as Corporations. See instructions for tax computation.											
	Controlled group members (sections 1561 and 1563) check here See instructions and:											
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):											
	(1) \$ (2) \$ (3) \$											
	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)											
	(2) Additional 3% tax (not more than \$100,000)											
	Income tax on the amount on line 34	35c	0.									
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:											
	Tax rate schedule or Schedule D (Form 1041)	36										
37 Proxy tax. See instructions Sincular B (1911) 1941)												
38 Alternative minimum tax 39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies 39 39 39 39												
	✓ Tax and Payments		0.									
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a											
	Other credits (see instructions) 40b											
c	General business credit. Attach Form 3800 40c											
	Credit for prior year minimum tax (attach Form 8801 or 8827) 40d											
	Total credits. Add lines 40a through 40d	40e										
		41	0.									
42	Subtract line 40e from line 39 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	42										
		43	0.									
	Total tax. Add lines 41 and 42 Payments: A 2014 overpayment credited to 2015 44a 125.	40										
	2015 estimated tax payments 44b											
	Tax deposited with Form 8868 44c											
ď	Foreign organizations: Tax paid or withheld at source (see instructions) 44d											
	Backup withholding (see instructions) 44e											
	Credit for small employer health insurance premiums (Attach Form 8941) 44f											
	011 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
9	Other credits and payments:											
45	Total payments. Add lines 44a through 44g	45	125.									
46	Estimated tax penalty (see instructions). Check if Form 2220 is attached	46										
	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47										
	Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48	125.									
	Enter the amount of line 48 you want: Credited to 2016 estimated tax	49	0.									
Part V												
	ny time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial acc	ount (b	oank. Yes No									
	irities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Finar		, <u> </u>									
Acco	ounts. If YES, enter the name of the foreign country here CAYMAN ISLANDS		х									
2 Durin	bunts. If YES, enter the name of the foreign country here CAYMAN ISLANDS Ig the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? S, see instructions for other forms the organization may have to file.		X									
3 Ente	r the amount of tax-exempt interest received or accrued during the tax year ▶\$											
	ule A - Cost of Goods Sold. Enter method of inventory valuation											
	ntory at beginning of year 1 38,958. 6 Inventory at end of year	6	40,930.									
	chases 2 33,938. 7 Cost of goods sold. Subtract line 6											
3 Cost	of labor 3 4,309. from line 5. Enter here and in Part I, line 2	7	36,275.									
	tional section 263A costs (att. schedule) 4a 8 Do the rules of section 263A (with respect to		Yes No									
b Othe	er costs (attach schedule) 4b property produced or acquired for resale) apply to											
5 Tota	II. Add lines 1 through 4b 5 77, 205. the organization?		Х Х									
0:-	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	/ledge a	nd belief, it is true,									
Sign	Ma	y the IR	S discuss this return with									
Here			er shown below (see									
	Signature of officer Date Title		s)? X Yes No									
	Print/Type preparer's name Preparer's signature Date Check if	PTII	N									
Paid	self- employed		0040000									
Prepa	rer JANE M. WARREN		00420281									
Use O	rily Firm's name ► FRAZER, LLP Firm's EIN ►	9	5-4108809									
	135 S STATE COLLEGE BLVD, STE 300	1 4	000 1040									
		<u> 14 – </u>	990-1040									
523711 01-	06-16		Form 990-T (2015)									

(1) Care decreased processor of the proc	Schedule C - Rent Incor	me (From Real	Property an	d Personal	Property	y Lease	ed With Real Pr	ope	erty)(see instructions)	
Best received or accessed Control page of the processing of th	1. Description of property									
(a) Tent processing property of the accretage of rest by prescular property of the processing process of the processing processing processing of the processing process of the process of the processing process of the process of	(1)									
Committee of the properties	(2)									
(a) Trans personal property of the personal property of the personal property of the personal property in the personal property in the personal property in the personal property in product should be provided and the personal product in product in control (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(3)									
Company of the concentration of the concentration of the concentration of the control of the c	_(4)	• • • •					<u> </u>			
Comparison of the process of the p	(a) From payaged pyopowhy (if h			and navaanal avana	the /if the mount	nto a o	3(a) Deductions direc	ctly con	nnected with the income in	
(2) (3) (4) (4) (5) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	` ' rent for personal property is	s more than	` 'of rent for p	personal property ex	ceeds 50% or	ntage · if	columns 2(a)	and 2((b) (attach schedule)	
(d) Total Coloration Colora	1									
Colorate Income. Add totals of columns 2(a) and 2(b). Enter Colorate Income. Add totals of columns 2(a) and 2(b). Enter Colorate Co										
Total income, Aud totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)										
(a) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 2, column (b) Cohecule E - Unrelated Debt-Financed Income (see instructions) 2. Gross income form of financed property 1. Description of debt-financed property (a) Strength in expression of debt-financed property (b) Description of debt-financed property (c) Strength in expression of debt-financed property (d) Strength in expression of debt-financed property (e) Strength in expression of debt-financed property (d) Strength in expression of debt-financed property (e) Strength in expression of debt-financed property (d) Strength in expression of debt-financed property (e) Strength in expression of debt-financed property (d) Strength in expression of debt-financed property (0	Total			0				
Column (A) Col						<u> </u>	 (b) Total deductions	_		
Commence Controlled Contr						0.	Enter here and on page 1		0.	
1. Description of debt financed property 2. Gross income from or allocable to debt-financed property (1) (2) (3) (4) (4) (5) Calculate to the schedule) (6) (7) Calculate to the schedule) (8) (8) (9) (9) (9) (9) (1) (9) (9) (9				instructions)		•	rarti, inic o, column (b)			
1. Description of debt-financed property 1. Amount of average acquisition description of a silication to a a silicat				I						
1. Description of debt-franced property (1) (2) (3) (4) (4) (4) (5) (4) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6				2. Gross in	come from	(2)		anced p	·	
(d) 4. Amount of average acquisition debt on all collection or allocable to debt-financed property (attach schedule) (1) (2) (3) (4) Totals Totals Total dividends-received deductions included in column 8 Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations 1. Name of controlled organization 1. Name of controlled Organizations Total dividends-received deductions included in column 8 Exempt Controlled Organizations (3) 1. Name of controlled Organizations 8. Net unrelated income (loss) (see instructions) (see instru	1. Description of d	lebt-financed property				(a)			(D) Other deductions (attach schedule)	
(d) 4. Amount of average acquisition debt on all collection or allocable to debt-financed property (attach schedule) (1) (2) (3) (4) Totals Totals Total dividends-received deductions included in column 8 Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations 1. Name of controlled organization 1. Name of controlled Organizations Total dividends-received deductions included in column 8 Exempt Controlled Organizations (3) 1. Name of controlled Organizations 8. Net unrelated income (loss) (see instructions) (see instru										
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Gardinary Gard	1									
4. Amount of severage acquisition debt on a disorbate of debt-financed property (attach schedule) (1)	1									
debt on or allocable is debt-financed properly (affach schedule) (1)	(4)									
(2) (3) (4) 9% (4) 9% (5) (6) (4) 9% (7) (6) (7) (7) (7) (8) (7) (8) (7) (8) (8) (9% (14) (14) (14) (14) (14) (14) (14) (14)	debt on or allocable to debt-financed	of or a debt-fina	allocable to by column sinced property				reportable (column		(column 6 x total of columns	
(2) (3) (4) 9% (4) 9% (5) (6) (4) 9% (7) (6) (7) (7) (7) (8) (7) (8) (7) (8) (8) (9% (14) (14) (14) (14) (14) (14) (14) (14)	(1)				0/			-+		
(3)	1									
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Totals	_(')	I				Er	nter here and on page 1.		Enter here and on page 1.	
Total dividends-received deductions included in column 8 Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) 1. Name of controlled organization 2. Employer identification number 1. Name of controlled Organizations 3. Net unrelated income (loss) (see instructions) 1. Name of controlled Organizations 1. Name of controlled Organizations 2. Employer identification number 1. Name of controlled Organizations 3. Net unrelated income (loss) (see instructions) 1. Name of controlled Organizations 7. Taxable Income 8. Net unrelated income (loss) (see instructions) 9. Total of specified payments made 10. Part of column 9 that is included in the controlling organization's gross income with income in column 10 11. Deductions directly connected with income in column 5 12. Employer identification number 13. Net unrelated income (loss) (see instructions) 14. Name of controlled Organization's gross income 15. Part of column 4 that is included in the controlling organization's gross income 16. Deductions directly connected with income in column 5 17. Taxable Income 8. Net unrelated income (loss) (see instructions) 9. Total of specified payments made 10. Part of column 9 that is included in the controlling organization's gross income 17. Deductions directly connected with income in column 10 18. Deductions directly connected with income in column 10 19. Part of column 9 that is included in the controlling organization's gross income 19. Part I, line 8, column 6 and 11. Enter here and on page 1, Part I, line 8, column (A). 19. Part of columns 5 and 10. Enter here and on page 1, Part I, line 8, column (B). 10. Page of the controlling organization's gross income 11. Deductions directly connected with income in column 10						Р	art I, line 7, column (A).		Part I, line 7, column (B).	
Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) 2	Totals				>	▶		0.	0.	
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Employer identification number (loss) (see instructions)				•	organization	าร				
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(see instructions) made in the controlling organization's gross income (1) (2) (3) (4) Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Totals Totals Totals			<i>a</i>			•				
(2) (3) (4) Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	/ Taxable Income				ments	in the con	trolling organization's			
(2) (3) (4) Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	(1)									
(3) (4) Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).										
Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (A). O • O •										
Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Totals Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).										
			•			Enter here	and on page 1, Part I,	Ent	ter here and on page 1, Part I,	
	Totale								_	
	10tals						0.		Form 990-T (2015	

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Schedule G - Investme (see inst	ent Income of a tructions)	Section	501(c)(7), (9), or (17) Oı	rganizat	ion		
1 . Desc		2. Amount of income		onnected	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)		
(1)								
(2)								
(3)								
(4)								
			1	Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1, Part I, line 9, column (B).
Totals			▶	0.				0.
Schedule I - Exploited (see instru	Exempt Activi			Than Advertis	ing Inco	me		
	_	3. Exr	penses	4. Net income (loss)	_			7. Excess exempt
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly of with pro	connected oduction elated s income	from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross from acti is not ur business	ivity that nrelated	6. Expenses attributable to column 5	expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
	Enter here and on page 1, Part I, line 10, col. (A).	line 10,	, Part I, col. (B).			·		Enter here and on page 1, Part II, line 26.
Totals	0		0.					0.
Schedule J - Advertisi								
Part I Income From	Periodicals Re	ported o	n a Cons	solidated Basis	.			
1. Name of periodical	2. Gross advertising income	,	3. Direct ertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		rculation come	6. Readership costs	 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals (carry to Part II, line (5))	▶	0.	0 .					0.
Part II Income From columns 2 through			n a Sepa	rate Basis (For	each perio	dical listed in l	Part II, fill in	
	<u> </u>	<u> </u>		1 4				7
1. Name of periodical	2. Gross advertising income	. 1	3. Direct ertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		rculation come	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals from Part I	▶	0.	0 .	•				0.
	Enter here and page 1, Part line 11, col. (I, pa	r here and on ge 1, Part I, 11, col. (B).					Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	▶	0.	0.					0.
Schedule K - Compen	sation of Office	ers, Dire	ctors, an	d Trustees (see	instructio			
1. 1	Name			2. Title		3. Percent of time devoted to business		ensation attributable related business
(1)							%	
(2)							%	
(3)							%	
(4)							%	
Total. Enter here and on page 1, I	Part II, line 14						>	0.
								Form 990-T (2015)

523731 01-06-16

FORM 990-T	DESCRIPTION OF	ORGANIZATION'S	PRIMARY	UNRELATED	STATEMENT	1							
	BUSINESS ACTIVITY												

THE NIXON FOUNDATION OPERATES A MUSEUM STORE OFFERING REPLICAS OF ITEMS ON DISPLAY IN THE LIBRARY AND BIRTHPLACE, BOOKS, AND OTHER EDUCATIONAL ITEMS, A CAFE, AS WELL AS MEMORABILIA ASSOCIATED WITH THE EXHIBITS. SALES OF MISCELLANEOUS ITEMS, FOOD, BEVERAGES, AND ITEMS NOT IN FURTHERANCE OF THE ORGANIZATION'S EXEMPT PURPOSE ARE CONSIDERED UNRELATED BUSINESS INCOME AND ARE INCLUDED IN THIS RETURN.

TO FORM 990-T, PAGE 1

FORM 990-T	ORM 990-T OTHER DEDUCTIONS							
DESCRIPTIO	N				AMOUNT			
SUPPLIES BANK CHARG TRAVEL ADVERTISIN POSTAGE TELEPHONE OUTSIDE SE REPAIRS EQUIPMENT	754. 2,234. 40. 343. 1,081. 138. 254. 31. 802.							
TOTAL TO F	ORM 990-T, PA	GE 1, LINE 28			5,6	77.		
FORM 990-T		NET OPERATING L	oss di	EDUCTION	STATEMENT	3		
TAX YEAR	LOSS SUSTAI	LOSS PREVIOUSL NED APPLIED	Y	LOSS REMAINING	AVAILABLE THIS YEAR			
12/31/14	9:	23.	0.	923.	92	3.		
NOL CARRYO	VER AVAILABLE	THIS YEAR		923.	92	3.		

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Business or activity to which this form relates

OMB No. 1545-0172

990-T

Identifying number

TH.	<u>E RICHARD NIXON FOUN</u>	IDATION		FOR	M 990-	r PAGE 1		52-1278303
Pa	rt Election To Expense Certain Proper	ty Under Section 1	79 Note: If yo	u have any lis	sted property	, complete Part	V before y	
1	Maximum amount (see instructions)						1	500,000.
2	Total cost of section 179 property place	ed in service (see	instructions)				2	
3	Threshold cost of section 179 property	before reduction	in limitation				3	2,000,000.
4	Reduction in limitation. Subtract line 3 f	rom line 2. If zero	or less, ente	er -0-			4	
5	Dollar limitation for tax year. Subtract line 4 from line	1. If zero or less, enter	-0 If married fili	ng separately, se	e instructions		5	
6	(a) Description of pro	perty		(b) Cost (busin	ess use only)	(c) Elected	l cost	
7	Listed property. Enter the amount from	line 29			7			
8	Total elected cost of section 179 prope	rty. Add amounts	s in column (d	c), lines 6 and	7		8	
	Tentative deduction. Enter the smaller							
10	Carryover of disallowed deduction from	line 13 of your 2	014 Form 45	62			10	
	Business income limitation. Enter the sr							
12	Section 179 expense deduction. Add lii	nes 9 and 10, but	t do not ente	r more than li	ne 11		12	
	Carryover of disallowed deduction to 20				▶ 13			
	e: Do not use Part II or Part III below for							
	rt II Special Depreciation Allowa		-	-				
14	Special depreciation allowance for qual	ified property (oth	ner than liste	d property) p	laced in servi	ce during		
	the tax year							
	Property subject to section 168(f)(1) ele	ction						
							16	
Pa	rt III MACRS Depreciation (Do no	t include listed pi			.)			
				ction A			- I	
	MACRS deductions for assets placed in		ears beginnin	g before 201			17	
	If you are electing to group any assets placed in serv	ice during the tax year	ears beginnin	g before 201 general asset acc	ounts, check here	▶ □		200
		ice during the tax year Placed in Service	ears beginnin into one or more ee During 20	g before 201 general asset acc	ounts, check here Using the Ge	neral Deprecia		em
	If you are electing to group any assets placed in serv	ice during the tax year	ears beginnin into one or more te During 20 (c) Basis for (business/ir	g before 201 general asset acc 15 Tax Year depreciation vestment use	ounts, check here	neral Deprecia		em (g) Depreciation deduction
18	If you are electing to group any assets placed in serving Section B - Assets (a) Classification of property	Placed in Servic (b) Month and year placed	ears beginnin into one or more te During 20 (c) Basis for (business/ir	g before 201 general asset acc 15 Tax Year depreciation	Using the Ge	neral Deprecia	ation Syst	
18 1 19a	If you are electing to group any assets placed in serv Section B - Assets (a) Classification of property 3-year property	Placed in Servic (b) Month and year placed	ears beginnin into one or more te During 20 (c) Basis for (business/ir	g before 201 general asset acc 15 Tax Year depreciation vestment use	Using the Ge	neral Deprecia	ation Syst	
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Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

24a Dr you have evidence to support the business investment use claimed?				on and Other					_							
Type of Property (list vehicles) 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use: 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Property used 50% or less in a qualified business use: 29 Add amounts in column (ft), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 29 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 29 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 29 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 29 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 20 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 20 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 20 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 20 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 20 Add amounts in column (ft), lines 26 through 27. Enter here and on line 21, page 1 21 Add lines 20 Add	248	Do you have evidence to s	support the bu	siness/investme	nt use cla	imed?	<u> </u>	es L	_ No	24 b If "Y	es," is th	e evide	nce writt	ten? L	J Yes ∟	No
used more than 50% in a qualified business use: 1		(a) Type of property (list vehicles first)	/pe of property Date Business/ type of property placed in investmen		Cost or (business/investme		estment	Recovery	ecovery Method		lethod/ Depreci		Ele sectio	cted on 179		
Property used more than 50% in a qualified business use:	25	Special depreciation alle	owance for q	ualified listed	property	placed	in servi	ce durin	g the t	ax year an	nd					
96 SrL		used more than 50% in	a qualified b	usiness use								25				
96 S.L. 1 96 S.L. 27 Property used 50% or less in a qualified business use:	26	Property used more that	ın 50% in a q	ualified busin	ess use:											
Section B - Information on Use of Vehicle Sch.			: :	9	6											
27 Property used 50% or less in a qualified business use:			: :	9	6											
Section Sect			1 1	9	6											
28 Add amounts in column (h), lines 26 through 27. Enter here and on line 21, page 1	27	Property used 50% or le	ess in a quali	ified business	use:											
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Section B - Information on Use of Vehicles Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "incore than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (a) (b) (c) (d) (e) (f) Vehicle Vehi			: :	1	_						+					
28 Add amounts in column (ft), lines 25 through 27. Enter here and on line 21, page 1			1 1		_						1					
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year (32 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 33 Total miles driven during the year. Add lines 30 through 32 44 Was the vehicle available for personal use during off-duty hours? 55 Was the vehicle available for personal use than 5% owner or related person? 36 Is another vehicle available for personal uses? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? Description of costs that begins during your 2015 tax year. 42 Amortization of costs that begins during your 2015 tax year. 43 Amortization of costs that begins during your 2015 tax year. 44 Total. Add amounts in column (f), See the instructions for where to report. 44 Total. Add amounts in column (f), See the instructions for where to report.				· · · · · · · · ·	-											
Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 1 Total obusiness/investment miles driven during the year (do not include commuting miles) 1 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 1 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 1 Was the vehicle available for personal use during off-duty hours? 3 Total miles driven during the year. Add lines 30 through 32 3 Was the vehicle available for personal use during off-duty hours? 3 Total miles driven during the year. Add lines 30 through 32 3 Was the vehicle available for personal use during off-duty hours? 3 Total miles driven during the year. Add lines 40 through 32 3 Total miles driven during the year. Add lines 90 through 32 3 Was the vehicle available for personal use during off-duty hours? 3 Total miles driven during the year. Add lines 90 through 32 3 Total miles driven during the year. Add lines 90 through 32 3 Total miles driven during the year. Add lines 90 through 32 3 Was the vehicle available for personal use 90 through 40 throu																
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to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f)								_								
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