

PUBLIC DISCLOSURE COPY

# TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING  
SEPTEMBER 30, 2021

<b>Prepared for</b>	THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE 40 PRESIDENTIAL DRIVE NO. 200 SIMI VALLEY, CA 93065-0600
<b>Prepared by</b>	ROSE, SNYDER & JACOBS, LLP 15821 VENTURA BLVD, SUITE 490 ENCINO, CA 91436
<b>Amount due or refund</b>	NOT APPLICABLE
<b>Make check payable to</b>	NOT APPLICABLE
<b>Mail tax return and check (if applicable) to</b>	NOT APPLICABLE
<b>Return must be mailed on or before</b>	NOT APPLICABLE
<b>Special Instructions</b>	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning OCT 1, 2020, and ending SEP 30, 2021

# 2020

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.**

Name of exempt organization or person subject to tax <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b>	Taxpayer identification number <b>77-0054631</b>
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Name and title of officer or person subject to tax  
**JERRY ZUK  
CHIEF FIN OFFICER**

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

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

<b>1a</b> Form 990 check here ▶ <input checked="" type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> <u>30,444,586.</u>
<b>2a</b> Form 990-EZ check here ▶ <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here ▶ <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here ▶ <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part VI, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here ▶ <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here ▶ <input type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4) .....	<b>6b</b> _____
<b>7a</b> Form 4720 check here ▶ <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1) .....	<b>7b</b> _____

## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above organization or  I am a person subject to tax with respect to (name of organization) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

I authorize ROSE, SNYDER & JACOBS, LLP to enter my PIN 12345  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

## Part III Certification and Authentication

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

**96785312851**  
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶  Date ▶ 06/30/22

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2020)

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b>	Taxpayer identification number (TIN) <b>77-0054631</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>40 PRESIDENTIAL DRIVE, NO. 200</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SIMI VALLEY, CA 93065-0600</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**PREE KARUNARATNE**

- The books are in the care of ▶ **40 PRESIDENTIAL DRIVE - SIMI VALLEY, CA 93065-0600**  
Telephone No. ▶ **(805) 577-2717** Fax No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **AUGUST 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **OCT 1, 2020**, and ending **SEP 30, 2021**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form **990**

**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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the 2020 calendar year, or tax year beginning **OCT 1, 2020** and ending **SEP 30, 2021**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>40 PRESIDENTIAL DRIVE 200</b> City or town, state or province, country, and ZIP or foreign postal code <b>SIMI VALLEY, CA 93065-0600</b> <b>F</b> Name and address of principal officer: <b>JOHN HEUBUSCH</b> <b>40 PRESIDENTIAL DR, SIMI VALLEY, CA 93065</b>	<b>D</b> Employer identification number  <b>77-0054631</b> <b>E</b> Telephone number <b>(805) 522-2977</b> <b>G</b> Gross receipts \$ <b>31,269,541.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.REAGANFOUNDATION.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>1985</b>		<b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE MISSION OF THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE IS TO COMPLETE PRESIDENT</b> <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> <b>24</b> <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> <b>24</b> <b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a) ..... <b>5</b> <b>136</b> <b>6</b> Total number of volunteers (estimate if necessary) ..... <b>6</b> <b>0</b> <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>7a</b> <b>17,950.</b> <b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>7b</b> <b>0.</b>																									
<b>Revenue</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Prior Year</th> <th style="text-align: right;">Current Year</th> </tr> </thead> <tbody> <tr> <td><b>8</b> Contributions and grants (Part VIII, line 1h) .....</td> <td style="text-align: right;">14,303,002.</td> <td style="text-align: right;">22,717,222.</td> </tr> <tr> <td><b>9</b> Program service revenue (Part VIII, line 2g) .....</td> <td style="text-align: right;">2,804,675.</td> <td style="text-align: right;">1,600,246.</td> </tr> <tr> <td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....</td> <td style="text-align: right;">4,794,395.</td> <td style="text-align: right;">5,402,321.</td> </tr> <tr> <td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....</td> <td style="text-align: right;">1,306,208.</td> <td style="text-align: right;">724,797.</td> </tr> <tr> <td><b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....</td> <td style="text-align: right;">23,208,280.</td> <td style="text-align: right;">30,444,586.</td> </tr> </tbody> </table>		Prior Year	Current Year	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	14,303,002.	22,717,222.	<b>9</b> Program service revenue (Part VIII, line 2g) .....	2,804,675.	1,600,246.	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	4,794,395.	5,402,321.	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	1,306,208.	724,797.	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	23,208,280.	30,444,586.							
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<b>Net Assets or Fund Balances</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Beginning of Current Year</th> <th style="text-align: right;">End of Year</th> </tr> </thead> <tbody> <tr> <td><b>20</b> Total assets (Part X, line 16) .....</td> <td style="text-align: right;">376,200,829.</td> <td style="text-align: right;">422,325,445.</td> </tr> <tr> <td><b>21</b> Total liabilities (Part X, line 26) .....</td> <td style="text-align: right;">15,662,572.</td> <td style="text-align: right;">17,069,578.</td> </tr> <tr> <td><b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....</td> <td style="text-align: right;">360,538,257.</td> <td style="text-align: right;">405,255,867.</td> </tr> </tbody> </table>		Beginning of Current Year	End of Year	<b>20</b> Total assets (Part X, line 16) .....	376,200,829.	422,325,445.	<b>21</b> Total liabilities (Part X, line 26) .....	15,662,572.	17,069,578.	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	360,538,257.	405,255,867.													
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**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>JERRY ZUK, CHIEF FIN. OFFICER</b> Type or print name and title	Date _____		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>CRAIG M. FRYE</b>	Preparer's signature <b>CRAIG M. FRYE</b>	Date <b>06/30/22</b>	Check <input type="checkbox"/> if self-employed PTIN <b>P00090236</b>
	Firm's name ▶ <b>ROSE, SNYDER &amp; JACOBS, LLP</b>	Firm's EIN ▶ <b>45-4095250</b>		
	Firm's address ▶ <b>15821 VENTURA BLVD, SUITE 490</b> <b>ENCINO, CA 91436</b>			Phone no. (818) 461-0600

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

**Part III 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:  
**THE MISSION OF THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE IS TO COMPLETE PRESIDENT REAGAN'S UNFINISHED WORK AND TO PRESERVE AND PROMOTE THE TIMELESS PRINCIPLES HE CHAMPIONED: INDIVIDUAL LIBERTY, ECONOMIC OPPORTUNITY, GLOBAL DEMOCRACY AND NATIONAL PRIDE. PRESIDENT**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

4 Describe the 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 revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 680,763. including grants of \$ ) (Revenue \$ 439,907.)  
**[CENTER OF PUBLIC AFFAIRS]**  
**A FORUM OF IDEAS WHERE INFLUENTIAL LEADERS FROM GOVERNMENT, BUSINESS, THE MEDIA, AND ACADEMIA APPLY THE LESSONS LEARNED DURING RONALD REAGAN'S REMARKABLE PRESIDENCY.**

**IN ADDITION TO OUR REGULAR PROGRAMMING, IN FISCAL YEAR WE LAUNCHED OUR TIME FOR CHOOSING SPEAKER SERIES, WHICH IS A FORUM FOR LEADING VOICES IN THE CONSERVATIVE MOVEMENT TO ADDRESS CRITICAL QUESTIONS FACING THE FUTURE OF THE REPUBLICAN PARTY.**

**REAGAN FORUM PARTICIPANTS - IN-PERSON**  
**> MICHAEL SMERCONISH (RADIO HOST AND AUTHOR): 9/27/2021**

4b (Code: ) (Expenses \$ 6,763,796. including grants of \$ 506,309.) (Revenue \$ )  
**[PRESIDENTIAL LEARNING CENTER (EDUCATION PROGRAMS) AND RONALD REAGAN INSTITUTE (RRI)]**

**AT THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE, OUR EDUCATION PROGRAMS ARE DEDICATED TO CULTIVATING THE NEXT GENERATION OF CITIZEN-LEADERS. EACH YEAR, WE WORK WITH THOUSANDS OF TEACHERS AND TENS OF THOUSANDS OF STUDENTS FROM ACROSS THE COUNTRY TO HELP FOSTER THE ENGAGED AND INFORMED CITIZENS THAT PRESIDENT REAGAN KNEW WERE SO VITAL TO A HEALTHY AMERICA.**

**> AIR FORCE ONE DISCOVERY CENTER: OVER 2,000 5TH THROUGH 12TH GRADE STUDENTS PARTICIPATED IN THE LIBRARY'S INTERACTIVE AND IMMERSIVE AIR**

4c (Code: ) (Expenses \$ 9,362,175. including grants of \$ ) (Revenue \$ 1,610,562.)  
**[THE MUSEUM]**

**WHEREAS THE REAGAN MUSEUM IS UTILIZED TO TELL THE STORY OF RONALD AND NANCY REAGAN AND OUR 40TH PRESIDENT'S ENDURING LEGACY, THE LIBRARY'S TEMPORARY GALLERY SPACE IS USED TO BRING IN HISTORIC AND POP-CULTURE INFLUENCED EXHIBITS AS A WAY TO PROVIDE THE LOCAL COMMUNITIES WITH A WORLD-CLASS FAMILY DESTINATION.**

**TEMPORARY EXHIBITS**

**> FBI: FROM AL CAPONE TO AL QAEDA (JULY 2, 2021 - FEBRUARY 27, 2022): THIS 11,000 SQUARE FOOT EXHIBITION COVERS THE HISTORY OF THE STORIED**

4d Other program services (Describe on Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses **▶ 16,806,734.**

**THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> .....	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		<b>X</b>
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		<b>X</b>
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>X</b>	
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>X</b>	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>X</b>	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>X</b>	
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		<b>X</b>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>X</b>	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....		<b>X</b>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>X</b>	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		<b>X</b>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		<b>X</b>
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		<b>X</b>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....	<b>X</b>	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		<b>X</b>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		<b>X</b>

THE RONALD REAGAN PRESIDENTIAL  
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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**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
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	



THE RONALD REAGAN PRESIDENTIAL  
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**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	<b>2a</b> 136		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
<b>4a</b>	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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X

THE RONALD REAGAN PRESIDENTIAL  
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Form 990 (2020)

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**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 on Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O.		
	<b>1a</b> 24		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	<b>1b</b> 24		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, AR, CA, CO, CT, DC, DE, FL, GA, HI**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **PREE KARUNARATNE - (805) 577-2717**  
**40 PRESIDENTIAL DRIVE, SIMI VALLEY, CA 93065-0600**

032006 12-23-20

SEE SCHEDULE O FOR FULL LIST OF STATES

Form 990 (2020)

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

**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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN D. HEUBUSCH EXECUTIVE DIRECTOR	40.00			X			555,000.	0.	80,056.	
(2) ROGER ZAKHEIM DIRECTOR OF THE REAGAN INSTITUTE	40.00			X			495,500.	0.	80,051.	
(3) JERRY ZUK CHIEF FINANCIAL OFFICER	40.00			X			237,900.	0.	56,411.	
(4) KEEGAN, MICHELLE POWERS CHIEF DEVELOPMENT OFFICER	40.00			X			250,000.	0.	28,940.	
(5) JOANNE M. DRAKE CHIEF ADMINISTRATIVE OFFICER	40.00			X			218,081.	0.	55,295.	
(6) COCHRAN, ROBERT A DIRECTOR OF DEVELOPMENT -	40.00				X		231,500.	0.	26,238.	
(7) GILLER, MELISSA MICHELLE CHIEF MARKETING OFFICER	40.00				X		185,000.	0.	51,021.	
(8) FITZPATRICK, MARK E CHIEF DIGITAL STRATEGY OFFICER	40.00				X		188,327.	0.	39,427.	
(9) PENNAY, ANTHONY CHIEF LEARNING OFFICER	40.00				X		174,000.	0.	49,583.	
(10) KARUNARATNE, PRIYANTHI CONTROLLER	40.00				X		153,140.	0.	35,883.	
(11) JAVIER III, ALMARIO D SENIOR DATA ARCHITECT & SY	40.00					X	141,819.	0.	34,624.	
(12) TRAN, JANET C ASSOCIATE DIRECTOR OF EDUC	40.00					X	138,740.	0.	25,393.	
(13) HOFF, RACHEL M. POLICY DIRECTOR - WASHINGT	40.00					X	125,168.	0.	13,883.	
(14) LEHNE, JOHN M AIR FORCE ONE FACILITIES M	40.00					X	106,910.	0.	30,987.	
(15) COPEL-LIVERMAN, ELIZABETH ASSISTANT CONTROLLER	40.00					X	100,375.	0.	13,416.	
(16) FREDERICK J. RYAN, JR. CHAIRMAN	1.00	X					0.	0.	0.	
(17) CATHERINE G. BUSCH SECRETARY	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOHN F. W. ROGERS TREASURER	1.00	X					0.	0.	0.	
(19) RICK J. CARUSO TRUSTEE	1.00	X					0.	0.	0.	
(20) MICHAEL P. CASTINE TRUSTEE	1.00	X					0.	0.	0.	
(21) ELAINE L. CHAO TRUSTEE	1.00	X					0.	0.	0.	
(22) ROBERT DAY TRUSTEE	1.00	X					0.	0.	0.	
(23) STEVE FORBES TRUSTEE	1.00	X					0.	0.	0.	
(24) BRADFORD M. FREEMAN TRUSTEE	1.00	X					0.	0.	0.	
(25) ANN MCLAUGHLIN KOROLOGOS TRUSTEE	1.00	X					0.	0.	0.	
(26) ANDREW J. LITTLEFAIR TRUSTEE	1.00	X					0.	0.	0.	
<b>1b Subtotal</b>							3,301,460.	0.	621,208.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							3,301,460.	0.	621,208.	

**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 15

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i>	4	X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
GABRIEL GROUP P.O. BOX 1000, SOUTHEASTERN, PA 19399	DIRECT MAIL CONSULTING	952,822.
SODEXO, INC. & AFFILIATES, 40 PRESIDENTIAL DRIVE, SIMI VALLEY, CA 93065	CATERING	530,234.
ROCATON INVESTMENT ADVISORS, 4 CHASE METROTECH CENTER, 7TH FLOOR, EAST	INVESTMENT CONSULTING	309,777.
INBUILDING SERVICES CORPORATION, 4225 EXECUTIVE SQUARE, SUITE 600, LA JOLLA, CA	IT SERVICES & SECURITY	281,313.
LEHMAN SMITH MCLEISH, LLC 1212 BANKS STREET, NW, WASHINGTON, DC 20007	ARCHITECTURE DESIGN	268,741.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 16

**SEE PART VII, SECTION A CONTINUATION SHEETS**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOE LONSDALE TRUSTEE	1.00	X						0.	0.	0.
(28) SUSAN R. MCCAOW TRUSTEE	1.00	X						0.	0.	0.
(29) K. RUPERT MURDOCH TRUSTEE	1.00	X						0.	0.	0.
(30) LACHLAN MURDOCH TRUSTEE	1.00	X						0.	0.	0.
(31) PEGGY NOONAN TRUSTEE	1.00	X						0.	0.	0.
(32) THEODORE B. OLSON TRUSTEE	1.00	X						0.	0.	0.
(33) GERALD L. PARSKY TRUSTEE	1.00	X						0.	0.	0.
(34) JIM PATTISON TRUSTEE	1.00	X						0.	0.	0.
(35) CONDOLEEZZA RICE TRUSTEE	1.00	X						0.	0.	0.
(36) PAUL RYAN TRUSTEE	1.00	X						0.	0.	0.
(37) BEN C. SUTTON, JR. TRUSTEE	1.00	X						0.	0.	0.
(38) ROBERT H. TUTTLE TRUSTEE	1.00	X						0.	0.	0.
(39) PETE WILSON TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	22,717,222.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 7,925.				
	<b>h Total.</b> Add lines 1a-1f			22,717,222.			
Program Service Revenue	<b>2 a</b> VISITOR SERVICES	<b>Business Code</b>	900099	1,160,339.	1,160,339.		
	<b>b</b> FOUNDATION SPECIAL EVENT FEES		900099	439,907.	439,907.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			1,600,246.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			2,540,294.		2,540,294.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties			103,911.		103,911.	
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	462,470.			
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>		309,757.			
	<b>c</b> Rental income or (loss)	<b>6c</b>		152,713.			
	<b>d</b> Net rental income or (loss)			152,713.		152,713.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	2,862,027.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		0.			
	<b>c</b> Gain or (loss)	<b>7c</b>		2,862,027.			
<b>d</b> Net gain or (loss)			2,862,027.		2,862,027.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		983,371.				
<b>b</b> Less: cost of goods sold	<b>10b</b>		515,198.				
<b>c</b> Net income or (loss) from sales of inventory			468,173.	450,223.	17,950.		
Miscellaneous Revenue	<b>11 a</b>	<b>Business Code</b>					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			30,444,586.	2,050,469.	17,950.	5,658,945.	

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**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  **X**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	506,309.	506,309.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	3,275,889.	1,868,984.	341,007.	1,065,898.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	2,905,650.	1,971,643.	878,024.	55,983.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	506,331.	312,275.	108,502.	85,554.
<b>9</b> Other employee benefits	940,594.	635,044.	165,176.	140,374.
<b>10</b> Payroll taxes	693,203.	484,362.	67,644.	141,197.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	242,184.	1,540.	240,644.	
<b>c</b> Accounting	61,850.		61,850.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17	71,127.			71,127.
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	526,346.	292,202.	177,194.	56,950.
<b>12</b> Advertising and promotion	478,328.	476,220.		2,108.
<b>13</b> Office expenses	64,679.	45,105.	18,633.	941.
<b>14</b> Information technology	324,768.	10,870.	313,898.	
<b>15</b> Royalties				
<b>16</b> Occupancy	2,082,279.	2,047,876.	34,403.	
<b>17</b> Travel	230,265.	125,469.	8,724.	96,072.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	272,063.		272,063.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	4,082,019.	4,028,055.	49,116.	4,848.
<b>23</b> Insurance	651,683.	579,278.	72,405.	
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>CONTRACTED SERVICES</b>	1,274,769.	964,565.	246,815.	63,389.
<b>b</b> <b>EVENT EXPENSES</b>	1,060,799.	904,533.	116.	156,150.
<b>c</b> <b>DIRECT MAIL PRINTING</b>	387,014.	0.	0.	387,014.
<b>d</b> <b>FOUNDATION EXHIBITS</b>	357,919.	357,919.	0.	0.
<b>e</b> All other expenses <b>SEE SCH O</b>	2,571,685.	1,194,485.	572,124.	805,076.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	23,567,753.	16,806,734.	3,628,338.	3,132,681.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	7,994,868.	<b>2</b>	10,162,011.
	<b>3</b> Pledges and grants receivable, net .....	53,410,636.	<b>3</b>	56,949,667.
	<b>4</b> Accounts receivable, net .....	154,042.	<b>4</b>	671,801.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	827,233.	<b>8</b>	828,796.
	<b>9</b> Prepaid expenses and deferred charges .....	1,009,031.	<b>9</b>	913,155.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 174,433,855.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 77,986,357.	99,621,625.	<b>10c</b> 96,447,498.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	212,240,544.	<b>12</b>	251,490,910.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	942,850.	<b>15</b>	4,861,607.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	376,200,829.	<b>16</b>	422,325,445.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,303,498.	<b>17</b>	1,695,551.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	4,337,422.	<b>19</b>	5,547,725.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	9,070,763.	<b>23</b>	9,060,494.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	950,889.	<b>25</b>	765,808.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	15,662,572.	<b>26</b>	17,069,578.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	194,911,770.	<b>27</b>	208,367,497.
	<b>28</b> Net assets with donor restrictions .....	165,626,487.	<b>28</b>	196,888,370.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	360,538,257.	<b>32</b>	405,255,867.
<b>33</b> Total liabilities and net assets/fund balances .....	376,200,829.	<b>33</b>	422,325,445.	

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**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	30,444,586.
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,567,753.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,876,833.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	360,538,257.
5	Net unrealized gains (losses) on investments	5	37,840,777.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	405,255,867.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE Employer identification number 77-0054631

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

The organization is not a private foundation because it is: (For lines 1 through 12, 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 (Form 990 or 990-EZ).)
3 [ ] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [ ] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8 [ ] A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 [ ] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
11 [ ] An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
a [ ] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
b [ ] Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
c [ ] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
d [ ] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document? (Yes/No), (v) Amount of monetary support, (vi) Amount of other support.

Total

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	30597415.	28375591.	19333767.	14303002.	22717222.	115326997
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	30597415.	28375591.	19333767.	14303002.	22717222.	115326997
<b>5</b> 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) .....						24678038.
<b>6 Public support.</b> Subtract line 5 from line 4.						90648959.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	30597415.	28375591.	19333767.	14303002.	22717222.	115326997
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	3803469.	4472727.	5609146.	4280432.	3106675.	21272449.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						136599446
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	34,710,351.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	66.36 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	63.14 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 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

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c 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.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in line 11a above?		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described in line 2, above, 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.		Yes	No
<b>a</b> 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 <b>Part VI</b> 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.			
<b>b</b> Did the activities described in line 2a, above, 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> 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? If "Yes" or "No" provide details in <b>Part VI</b> .			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

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

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	<b>5</b>
<b>6</b>	Other distributions (describe in Part VI). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
<b>7</b> Excess distributions carryover to 2021. Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020



THE RONALD REAGAN PRESIDENTIAL

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Name of the organization

**THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE**

Employer identification number

**77-0054631**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

Name of organization <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b>	Employer identification number <b>77-0054631</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 820,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 900,605.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 3,015,973.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A FOR PUBLIC DISCLOSURE <hr/> <hr/> <hr/>	\$ 467,066.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b>	Employer identification number <b>77-0054631</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization <b>THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE</b>	Employer identification number <b>77-0054631</b>
--	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE Employer identification number 77-0054631

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, a table for 2a-2d (Total number, acreage, historic structures), and questions about monitoring, expenses, and reporting.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and amounts required to be reported.

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THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

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

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

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	225,647,926.	222,190,607.	211,394,903.	174,657,681.	159,369,728.
b Contributions	793,529.		4,199,730.	26,329,351.	
c Net investment earnings, gains, and losses	42,127,801.	5,159,766.	8,002,907.	12,177,346.	16,417,858.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,443,354.	1,702,447.	1,406,933.	1,769,475.	1,129,905.
f Administrative expenses					
g End of year balance	267,125,902.	225,647,926.	222,190,607.	211,394,903.	174,657,681.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  \_\_\_\_\_ %
  - c Term endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| (i) Unrelated organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		24,224,633.		24,224,633.
b Buildings		115,740,382.	52,389,531.	63,350,851.
c Leasehold improvements				
d Equipment		33,402,546.	25,596,826.	7,805,720.
e Other		1,066,294.		1,066,294.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				96,447,498.

**THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE**

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other		
(A) PRIVATE EQUITY SECURITIES	52,048,260.	END-OF-YEAR MARKET VALUE
(B) EQUITY MUTUAL FUNDS	96,842,564.	END-OF-YEAR MARKET VALUE
(C) TRUST FUNDS HELD BY		
(D) OTHERS	585,228.	END-OF-YEAR MARKET VALUE
(E) FIXED INCOME MUTUAL FUNDS	102,014,858.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	<b>251,490,910.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FINANCED LEASE LIABILITY	765,808.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>765,808.</b>

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...



THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

1	Total revenue, gains, and other support per audited financial statements	1	70,660,318.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	37,840,777.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	2,374,955.
e	Add lines 2a through 2d	2e	40,215,732.
3	Subtract line 2e from line 1	3	30,444,586.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	30,444,586.

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

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

1	Total expenses and losses per audited financial statements	1	25,942,708.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	2,374,955.
e	Add lines 2a through 2d	2e	2,374,955.
3	Subtract line 2e from line 1	3	23,567,753.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	23,567,753.

**Part XIII Supplemental Information.**

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

**PART III, LINE 4:**

NATIONAL ARCHIVES AND RECORDS ADMINISTRATION ("NARA") MAINTAINS THE COLLECTION FOR THE FOUNDATION. UPON COMPLETION OF THE LIBRARY'S CONSTRUCTION IN 1991, NARA ASSUMED RESPONSIBILITY FOR THE OPERATION, SECURITY AND MAINTENANCE OF THE LIBRARY AS A PRESIDENTIAL ARCHIVAL DEPOSITORY. HOWEVER, THE OPERATION AND MAINTENANCE OF CERTAIN PORTIONS OF THE LIBRARY, INCLUDING THE AREAS DESIGNED FOR THE MUSEUM STORE, THE AIR FORCE ONE PAVILION AND THE FOUNDATION OFFICES REMAIN THE RESPONSIBILITY OF THE FOUNDATION. IN FEBRUARY 2016 THE FOUNDATION ASSUMED RESPONSIBILITY FOR VISITOR SERVICES AND OPERATES THE ADMISSIONS AREA OF THE MUSEUM. ACCOUNTS RECEIVABLE FROM NARA AMOUNTED TO \$194,201 AND \$54,744 AT SEPTEMBER 30, 2021 AND 2020, RESPECTIVELY.

**Part XIII** Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD NETTED AGAINST REVENUE	515,198.
RENTAL EXPENSES NETTED AGAINST REVENUE	309,757.
PROVISION FOR DOUBTFUL PLEDGES	1,550,000.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	2,374,955.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD NETTED AGAINST REVENUE	515,198.
RENTAL EXPENSES NETTED AGAINST REVENUE	309,757.
PROVISION FOR DOUBTFUL PLEDGES	1,550,000.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	2,374,955.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE** Employer identification number **77-0054631**

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GABRIEL GROUP - 3190 RIDER TRAIL SOUTH, EARTH CITY, MO	DIRECT MAIL CONSULTING		X	1,833,868.	827,016.	1,006,852.
DIRECT MAIL PROCESSORS - 1150 CONRAD CT, HAGERSTOWN, MD	DIRECT MAIL PROCESSING		X	0.	44,410.	-44,410.
<b>Total</b>				1,833,868.	871,426.	962,442.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, MO, DC

THE RONALD REAGAN PRESIDENTIAL

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts .....			
	2	Less: Contributions .....			
	3	Gross income (line 1 minus line 2) .....			
Direct Expenses	4	Cash prizes .....			
	5	Noncash prizes .....			
	6	Rent/facility costs .....			
	7	Food and beverages .....			
	8	Entertainment .....			
	9	Other direct expenses .....			
	10	Direct expense summary. Add lines 4 through 9 in column (d) .....			
	11	Net income summary. Subtract line 10 from line 3, column (d) .....			

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

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

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

Schedule G (Form 990 or 990-EZ) 2020

77-0054631 Page 3

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility		13a	%
b An outside facility		13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer       Employee       Independent contractor

17 Mandatory distributions:

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

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: GABRIEL GROUP

(I) ADDRESS OF FUNDRAISER: 3190 RIDER TRAIL SOUTH, EARTH CITY, MO 63045

(I) NAME OF FUNDRAISER: DIRECT MAIL PROCESSORS

(I) ADDRESS OF FUNDRAISER: 1150 CONRAD CT, HAGERSTOWN, MD 21740

**Part IV** Supplemental Information (continued)

Multiple horizontal lines for supplemental information.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization **THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE**

**Employer identification number  
77-0054631**

**Part I General Information on Grants and Assistance**

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

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ \_\_\_\_\_

**3** Enter total number of other organizations listed in the line 1 table ..... ▶ \_\_\_\_\_

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

Schedule I (Form 990) 2020

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GE REAGAN SCHOLARS AND VENTURA COUNTY SCHOLARSHIPS	73	506,309.	0.		

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

TO ENSURE APPROPRIATE USE OF THE SCHOLARSHIP FUNDS, THEY ARE SENT TO THE  
STUDENT'S SCHOOL WITH GUIDANCE FOR USE AND INSTRUCTIONS TO RETURN THE FUNDS  
IF THEY ARE NOT USED.



**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2020**

Open to Public Inspection

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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE** Employer identification number **77-0054631**

**Part I Questions Regarding Compensation**

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

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

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

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

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's 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.

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

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

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

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2020

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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 compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN D. HEUBUSCH EXECUTIVE DIRECTOR	(i)	455,000.	100,000.	0.	47,500.	32,556.	635,056.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ROGER ZAKHEIM DIRECTOR OF THE REAGAN INSTITUTE	(i)	410,500.	85,000.	0.	47,500.	32,551.	575,551.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JERRY ZUK CHIEF FINANCIAL OFFICER	(i)	237,900.	0.	0.	23,857.	32,554.	294,311.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KEEGAN, MICHELLE POWERS CHIEF DEVELOPMENT OFFICER	(i)	250,000.	0.	0.	6,387.	22,553.	278,940.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOANNE M. DRAKE CHIEF ADMINISTRATIVE OFFICER	(i)	218,081.	0.	0.	21,954.	33,341.	273,376.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) COCHRAN, ROBERT A DIRECTOR OF DEVELOPMENT	(i)	231,500.	0.	0.	23,217.	3,021.	257,738.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GILLER, MELISSA MICHELLE CHIEF MARKETING OFFICER	(i)	185,000.	0.	0.	18,567.	32,454.	236,021.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) FITZPATRICK, MARK E CHIEF DIGITAL STRATEGY OFFICER	(i)	188,327.	0.	0.	18,899.	20,528.	227,754.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) PENNAY, ANTHONY CHIEF LEARNING OFFICER	(i)	174,000.	0.	0.	17,467.	32,116.	223,583.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) KARUNARATNE, PRIYANTHI CONTROLLER	(i)	153,140.	0.	0.	15,381.	20,502.	189,023.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JAVIER III, ALMARIO D SENIOR DATA ARCHITECT & SY	(i)	141,819.	0.	0.	14,249.	20,375.	176,443.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) TRAN, JANET C ASSOCIATE DIRECTOR OF EDUC	(i)	138,740.	0.	0.	13,941.	11,452.	164,133.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

THE RONALD REAGAN PRESIDENTIAL  
FOUNDATION AND INSTITUTE

**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.

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**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

REAGAN'S UNFINISHED WORK AND TO PRESERVE AND PROMOTE THE TIMELESS  
PRINCIPLES HE CHAMPIONED: INDIVIDUAL LIBERTY, ECONOMIC OPPORTUNITY,  
GLOBAL DEMOCRACY AND NATIONAL PRIDE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

REAGAN'S MEMORY IS PRESERVED WONDERFULLY AT THE WORLD CLASS MUSEUM  
LOCATED AT THE REAGAN PRESIDENTIAL LIBRARY, THE LARGEST AND MOST  
VISITED LIBRARY OF ITS KIND IN THE UNITED STATES. THE REAGAN INSTITUTE  
PROACTIVELY PROMOTES PRESIDENT REAGAN'S IDEALS AND VISION, AS WELL AS  
SHARES HIS LEADERSHIP ACCOMPLISHMENTS THAT BROUGHT A COUNTRY TOGETHER  
AND INSTILLED ENTHUSIASM AND CONFIDENCE AMONG THE AMERICAN PEOPLE.  
ADDITIONALLY, FOR THE BENEFIT OF GENERATIONS TO COME, THE REAGAN  
INSTITUTE IS A CENTER FOR YOUTH EDUCATION AND ACADEMIC ALLIANCES,  
SCHOLARLY WORK, AND SUBSTANTIVE, ISSUE-DRIVEN FORUMS.

FUNDED SOLELY THROUGH PRIVATE GIFTS AND DONATIONS, WE HONOR THE LIFE OF  
RONALD REAGAN, ONE OF THE GREATEST AND MOST ADMIRER OF THE AMERICAN  
PRESIDENTS OF THE 20TH CENTURY.

FISCAL YEAR 2021 MARKED THE SECOND FISCAL YEAR FOR THE FOUNDATION IN  
WHICH THE CORONAVIRUS PANDEMIC (COVID-19) IMPACTED OUR MUSEUM AND  
PROGRAMMING. THE REAGAN MUSEUM, WHICH ORIGINALLY CLOSED DUE TO COVID-19  
ON MARCH 13, 2020, DIDN'T REOPEN UNTIL MAY 26, 2021 - ALMOST NINE  
MONTHS INTO OUR FISCAL YEAR. AS SUCH, TURNSTILE AND IN-PERSON EVENTS  
ONLY RAN FOR THREE MONTHS OF THE FISCAL YEAR, AND DIGITAL EVENTS WERE

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Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

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THE MAINSTAY OF OUR PROGRAMMING.

FOR THE 3 MONTHS WE WERE OPEN, 65,475 VISITORS TOURED THROUGH THE REAGAN LIBRARY, OF WHICH NONE WERE STUDENT GROUPS. ANOTHER 407 GUESTS CAME UP TO THE LIBRARY'S HILLTOP TO PARTICIPATE IN A PROGRAM OR EVENT. JUST UNDER 393 GUESTS ATTENDED IN-PERSON EVENTS AND PROGRAMS AT OUR INSTITUTE OFFICES IN WASHINGTON, D.C. 710,759 GUESTS VIEWED OUR EVENT PROGRAMMING THROUGHOUT FISCAL YEAR 2021, WHICH AIRED ON OUR YOUTUBE CHANNEL (WWW.YOUTUBE.COM/REAGANFOUNDATION).

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

> MARK LEVIN (RADIO HOST AND AUTHOR): 8/14/2021

> MICHAEL MEDVED (RADIO HOST AND AUTHOR): 7/14/2021

TIME FOR CHOOSING PARTICIPANTS- IN-PERSON

> CHRIS CHRISTIE (FORMER GOVERNOR OF NEW JERSEY): 9/9/21

> MIKE POMPEO (FORMER SECRETARY OF STATE): 7/26/21

> MIKE PENCE (FORMER VICE PRESIDENT OF THE UNITED STATES): 6/24/21

> PAUL RYAN (FORMER SPEAKER OF THE HOUSE): 5/26/2021

REAGAN FORUM PARTICIPANTS - VIRTUAL

> JEAN BECKER (AUTHOR); 9/23/21

> DAVID RUBENSTEIN (AUTHOR); 9/16/21

> JOE LONSDALE (VENTURE CAPITALIST); 7/9/21

> CHRIS MATTHEWS (TV HOST AND AUTHOR); 7/8/21

> ROBERT GATES (FORMER SECRETARY OF DEFENSE); 6/21/21

> MARCUS BROTHERTON (AUTHOR); 5/31/21

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> SEBASTIAN JUNGER (AUTHOR); 5/26/21

> SHANNON BREAM (TV HOST AND AUTHOR); 5/8/21

> JEFF IMMELT (FORMER CEO OF GE); 4/19/21

> KAREN TUMULTY (WASHINGTON POST CONTRIBUTOR); 4/12/21

> RAY SHADDICK (FORMER UNITED STATES SECRET SERVICE AGENT); 3/30/21

> TIM MCCARTHY (FORMER UNITED STATES SECRET SERVICE AGENT); 3/30/21

> RICK AHERN (FORMER WHITE HOUSE ADVANCE STAFF); 3/30/21

> DEL QUENTIN WILBUR (AUTHOR); 3/30/21

> MARI WILL (FORMER WHITE HOUSE SPEECHWRITER); 3/30/21

> DANA PERINO (TV HOST AND AUTHOR); 3/18/21

> SYDNEY BARBER (MIDSHIPMAN); 3/11/21

> NANCY MACE (CONGRESSWOMAN, SOUTH CAROLINA); 3/8/21

> MARTHA MACCALLUM (TV HOST AND AUTHOR); 3/5/21

> LEON PANETTA (FORMER SECRETARY OF DEFENSE); 3/5/21

> MARK ESPER (FORMER SECRETARY OF DEFENSE); 3/5/21

> H.R. MCMASTER (FORMER NATIONAL SECURITY ADVISOR); 3/5/21

> LIZ CHENEY (UNITED STATES REPRESENTATIVE, WYOMING); 2/23/21

> TIM TEBOW (FORMER FOOTBALL PLAYER); 2/22/21

> TOM COTTON (SENATOR, ARKANSAS); 2/18/21

> JAMES PATTERSON (AUTHOR); 2/17/21

> CONNIE MACK (FORMER SENATOR, FLORIDA); 1/25/21

> MARK SALTER (AUTHOR); 2/7/20

> DAVE BARRY (SATIRIST); 12/1/20

> MARIA BARTIROMO (TV ANCHOR AND AUTHOR); 11/18/20

> CANDACE OWENS (AUTHOR); 11/16/20

> MIKE POMPEO (FORMER SECRETARY OF STATE); 11/10/20

> DOUGLAS GINSBURG (JUDGE); 11/9/20

> NATAN SHARANSKY (ISRAELI POLITICIAN); 11/2/20

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- > MATT GAETZ (CONGRESSMAN, FLORIDA); 10/27/20
- > FRED RYAN (BOARD CHAIRMAN, REAGAN FOUNDATION); 10/23/20
- > H.R. MCMASTER (FORMER NATIONAL SECURITY ADVISOR): 10/16/20
- > SEAN SPICER (TV HOST AND AUTHOR); 10/19/20
- > PETER BAKER AND SUSAN GLASSER (AUTHORS); 10/14/20

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

FORCE ONE DISCOVERY CENTER ONLINE, WITH IN-PERSON TOURS CLOSED DUE TO COVID. DURING THIS EXPERIENCE, STUDENTS PARTICIPATE IN ROLE-PLAYING EXERCISES BASED UPON THE 1983 UNITED STATES RESCUE MISSION OF AMERICAN STUDENTS IN GRENADA TO LEARN HOW GOVERNMENT WORKS AND HOW DECISIONS ARE MADE. STUDENTS TAKE ON THE ROLES OF IMPORTANT FIGURES IN THE REAGAN ADMINISTRATION AND MAKE DECISIONS IN A VIRTUAL OVAL OFFICE.

> GE-REAGAN FOUNDATION SCHOLARSHIP PROGRAM: THIS SCHOLARSHIP, IN PARTNERSHIP WITH GE, HONORS THE LEGACY AND CHARACTER OF PRESIDENT REAGAN BY REWARDING COLLEGE-BOUND STUDENTS WHO DEMONSTRATE EXEMPLARY LEADERSHIP, DRIVE, INTEGRITY, AND CITIZENSHIP WITH FINANCIAL ASSISTANCE TO PURSUE HIGHER EDUCATION. IN 2021, MORE THAN 18,000 STUDENTS FROM ACROSS THE UNITED STATES COMPLETED APPLICATIONS. TEN STUDENTS WERE AWARDED THE SCHOLARSHIP, WHICH PROVIDES \$10,000 PER YEAR FOR FOUR YEARS. RECIPIENTS PARTICIPATED IN A VIRTUAL SCHOLARS RETREAT DUE TO THE PANDEMIC AND RECEIVE ONGOING PROGRAMMING AND SUPPORT TO DEVELOP THEIR LEADERSHIP SKILLS. IN TOTAL THIS PROGRAM HAS COMMITTED MORE THAN \$7.8 MILLION DOLLARS TO 195 SCHOLARS REPRESENTING 41 HOME STATES.

> RONALD REAGAN PRESIDENTIAL FOUNDATION SCHOLARS PROGRAM: THIS PROGRAM CELEBRATED ITS 22ND CLASS OF SCHOLARS IN 2021, EXCEEDING

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\$790,000 IN TOTAL FUNDING TO 217 OUTSTANDING STUDENT LEADERS IN VENTURA COUNTY. THE 2021 RECIPIENTS INCLUDED 10 LOCAL HIGH SCHOOL SENIORS WHO DEMONSTRATED OUTSTANDING LEADERSHIP, CHARACTER, COMMUNICATION SKILLS, ACADEMIC ACHIEVEMENT, AND COMMITMENT TO VENTURA COUNTY. STUDENTS WERE CELEBRATED DURING A VIRTUAL CEREMONY IN MAY.

> GREAT COMMUNICATOR DEBATE SERIES: THE RONALD REAGAN GREAT COMMUNICATOR DEBATE SERIES IS DESIGNED TO DEVELOP PROACTIVE, INFORMED, EDUCATED, AND CONSCIENTIOUS CITIZENS AND LEADERS BY CREATING AND HOSTING A NATIONAL SERIES OF HIGH SCHOOL DEBATES. MORE THAN 500 STUDENTS FROM ACROSS THE COUNTRY COMPETED ONLINE AT SEVEN REGIONAL QUALIFYING TOURNAMENTS, AND THE FOUNDATION PARTNERED WITH THE NATIONAL SPEECH AND DEBATE ASSOCIATION TO HOST 16 NATIONAL FINALISTS IN A NATIONAL CHAMPIONSHIP HERE AT THE REAGAN LIBRARY IN JULY. A TOTAL OF \$25,000 IN SCHOLARSHIPS WAS AWARDED. MORE THAN 116 SCHOLARS HAVE RECEIVED OVER \$300,000 IN FUNDING FROM THIS PROGRAM.

> PRESIDENTIAL LEARNING CENTER PROGRAMMING: IN 2021, THE REAGAN FOUNDATION'S WALTER AND LEONORE ANNENBERG PRESIDENTIAL LEARNING CENTER (APLC) CONTINUED TO ENGAGE STUDENTS AND TEACHERS FROM ACROSS THE COUNTRY WITH ITS GOAL OF CULTIVATING INFORMED AND ENGAGED CITIZEN-LEADERS. THE APLC HOSTED PROFESSIONAL DEVELOPMENT OPPORTUNITIES ONLINE IN CONJUNCTION WITH THE GILDER-LEHRMAN INSTITUTE. WE ALSO PARTNERED WITH SEVERAL SOUTHERN CALIFORNIA AND NATIONAL SOCIAL STUDIES ORGANIZATIONS ON A CONSTITUTION DAY EVENT FEATURING FORMER SEC. OF TRANSPORTATION NORM MINETA. WE DISTRIBUTED THOUSANDS OF COPIES OF OUR FREE CURRICULUM ONLINE. FOR STUDENTS, THE APLC HOSTED AN ONLINE MEDAL OF HONOR FORUM, A CONSTITUTION DAY LECTURE WITH LEADING HISTORIAN DR.



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GORDON LLOYD, AND A NUMBER OF REAGANEDU VIRTUAL CHATS.

> STUDENT LEADERSHIP PROGRAM: THIS PAST SUMMER, MORE THAN 130 HIGH SCHOOL STUDENTS FROM ACROSS THE COUNTRY AND AROUND THE WORLD LEARNED HOW EFFECTIVE COMMUNICATION, CIVIC DUTY, AND INFORMED DECISION MAKING ARE ESSENTIAL TO LEADERSHIP. WE HOSTED BOTH A VIRTUAL AND AN IN-PERSON SUMMER CAMP WORKING WITH EDUCATORS, COMMUNITY MENTORS, AND COLLEGE INTERNS TO CREATE THEIR OWN PERSONAL LEADERSHIP ACTION PLAN. STUDENTS GRADUATE FROM THE PROGRAM PREPARED TO MAKE A DIFFERENCE IN THEIR COMMUNITY OR SCHOOL. STUDENT GRADUATES OF THIS PROGRAM HAVE EARNED TENS OF THOUSANDS OF DOLLARS IN SCHOLARSHIPS.

RONALD REAGAN INSTITUTE (RRI)

THE RRI OPERATES THE FOLLOWING THREE CENTERS TO BUILD ON THE LEGACY AND IDEAS OF PRESIDENT REAGAN:

> THE CENTER FOR PEACE THROUGH STRENGTH (CPTS) PROMOTES U.S. NATIONAL SECURITY POLICY GROUNDED IN PRESIDENT REAGAN'S PHILOSOPHY THAT A STRONG AMERICAN MILITARY IS THE BEST DETERRENT AGAINST AGGRESSION AND SAFEGUARD FOR PEACE.

> THE CENTER FOR CIVICS, EDUCATION, AND OPPORTUNITY (CCEO) WORKS AT THE NEXUS OF CIVICS AND EDUCATION POLICY, ANSWERING PRESIDENT REAGAN'S CALL FOR AN "INFORMED PATRIOTISM" TO ENSURE A MORE PROSPEROUS FUTURE FOR AMERICA.

> THE CENTER FOR FREEDOM AND DEMOCRACY (CFD) CHAMPIONS PRESIDENT REAGAN'S VISION OF AMERICA AS A SHINING CITY ON A HILL BY

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HELPING TO RESTORE HIS OPTIMISTIC, CONFIDENT APPROACH TO PROMOTING  
FREEDOM, DEMOCRACY, AND HUMAN DIGNITY BOTH AT HOME AND ABROAD.

> REAGAN INSTITUTE SUMMIT ON EDUCATION: THE FOURTH ANNUAL REAGAN  
INSTITUTE SUMMIT ON EDUCATION (RISE) TOOK PLACE ON JULY 26- 27, 2021,  
AT THE REAGAN INSTITUTE IN WASHINGTON, DC. RISE IS A BIPARTISAN  
CONVENING THAT WILL EXAMINE THE HEALTH OF THE AMERICAN EDUCATION SYSTEM  
AFTER A SCHOOL YEAR THAT HAS ROCKED THE FOUNDATION OF OUR EDUCATIONAL  
INSTITUTIONS AND CHALLENGED FORMERLY ACCEPTED NOTIONS ABOUT HOW SCHOOLS  
NEED TO RUN. EACH YEAR, RISE BRINGS TOGETHER HUNDREDS OF LEADERS AND  
KEY STAKEHOLDERS IN EDUCATION - INCLUDING MEMBERS OF CONGRESS,  
GOVERNORS, CABINET SECRETARIES, HIGHER EDUCATION ADMINISTRATORS, AND  
LEADERS FROM THE DEPARTMENT OF EDUCATION AND INDUSTRY - TO EXAMINE THE  
CHALLENGES AND FORTIFY THE STRENGTHS OF THE U.S. EDUCATION SYSTEM.

> RISE COLLABORATIVES: THE REAGAN INSTITUTE SUMMIT ON EDUCATION (RISE)  
COLLABORATIVES ARE PLACE-BASED COLLOQUIUMS TO EXPLORE EDUCATION POLICY  
TOPICS IN-DEPTH AND CONVENE INTIMATE GROUPS OF EXPERTS TO REACH SHARED  
UNDERSTANDINGS, FINDINGS, AND RECOMMENDATIONS ON THEIR PARTICULAR AREA  
OF WORK. TOPICS EXPLORED INCLUDE SOCIAL EMOTIONAL ACADEMIC LEARNING,  
THE FUTURE OF WORKFORCE, INNOVATIVE ASSESSMENT, AND MOST RECENTLY  
"STEAM ON THE RISE IN MISSISSIPPI."

> THE STATE OF CIVICS SERIES: THE STATE OF CIVICS SERIES WAS DESIGNED  
TO HIGHLIGHT INNOVATIONS IN CIVIC EDUCATION THAT OCCUR AT THE STATE  
LEVEL BY ENGAGING THE VOICES OF STATE EDUCATION CHIEFS, EXEMPLARY  
EDUCATORS, STUDENTS, AND LEADERS IN THE FIELD OF CIVICS. THESE VIRTUAL  
PROGRAMS GIVE A GENERAL OVERVIEW OF WHAT IS HAPPENING AROUND THE

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COUNTRY, ZERO IN ON A CASE STUDY OF THE HIGHLIGHTED STATE, AND THEN  
LOOK AT WHAT IS ON THE HORIZON. FEATURED AND PROPOSED STATES INCLUDE  
TENNESSEE, WYOMING, SOUTH CAROLINA, GEORGIA, AND COLORADO.

> REAGAN NATIONAL DEFENSE FORUM: DUE TO THE ONGOING PANDEMIC, RNDF 2020  
WAS CANCELED. THE 2021 REAGAN NATIONAL DEFENSE FORUM (RNDF) TOOK PLACE  
IN PERSON ON DECEMBER 3-4 AND FEATURED KEYNOTE REMARKS BY U.S.  
SECRETARY OF DEFENSE LLYOD AUSTIN. THE ANNUAL CONVENING BRINGS TOGETHER  
LEADERS FROM ACROSS THE POLITICAL SPECTRUM AND KEY STAKEHOLDERS IN THE  
DEFENSE COMMUNITY, INCLUDING MEMBERS OF CONGRESS, CURRENT AND FORMER  
ADMINISTRATION OFFICIALS, SENIOR MILITARY LEADERSHIP, INDUSTRY  
EXECUTIVES, TECHNOLOGY INNOVATORS, AND THOUGHT LEADERS. THEIR MISSION  
IS TO REVIEW AND ASSESS POLICIES THAT STRENGTHEN AMERICA'S NATIONAL  
DEFENSE IN THE CONTEXT OF THE GLOBAL THREAT ENVIRONMENT. RNDF OFFERS  
THE DEFENSE COMMUNITY A CHANCE TO COME TOGETHER TO DISCUSS AND DEBATE  
HOW THE UNITED STATES CAN LEAD THE WORLD IN AN ERA OF INCREASINGLY  
COMPLEX CHALLENGES AND OPPORTUNITIES.

> PEACE THROUGH STRENGTH BOOT CAMP: THE PEACE THROUGH STRENGTH BOOT  
CAMP IS AN INTENSIVE FOUR-DAY PROGRAM IN WASHINGTON D.C. RUN IN  
PARTNERSHIP WITH THE ALEXANDER HAMILTON SOCIETY. THE PROGRAM AIMS TO  
EDUCATE A COHORT OF AROUND 20 ADVANCED UNDERGRADUATE STUDENTS, GRADUATE  
STUDENTS, AND RECENT GRADUATES EACH YEAR ABOUT THE VOCABULARY, THEORY,  
PRACTICE, AND ORGANIZATION OF U.S. DEFENSE POLICY. BOOT CAMP STUDENTS  
ALSO ATTEND RNDF THE YEAR OF THEIR PROGRAM.

> REAGAN NATIONAL DEFENSE SURVEY: THE REAGAN NATIONAL DEFENSE SURVEY IS  
A PUBLIC OPINION POLL THAT ASSISTS ELECTED OFFICIALS, POLICYMAKERS, AND

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KEY STAKEHOLDERS WITH UNDERSTANDING HOW AMERICANS VIEW A WIDE ARRAY OF DEFENSE, FOREIGN POLICY, AND NATIONAL SECURITY MATTERS.

> NATIONAL SECURITY INNOVATION BASE PROGRAM: THIS YEAR, THE CENTER FOR PEACE THROUGH STRENGTH IS LAUNCHING A NEW, PERMANENT PROGRAM ON THE NATIONAL SECURITY INNOVATION BASE (NSIB). THE PROGRAM BUILDS ON THE INSTITUTE'S 2019 TASK FORCE ON 21ST-CENTURY NATIONAL SECURITY TECHNOLOGY AND WORKFORCE. IT WILL ASSESS THE HEALTH AND RESILIENCE OF THE NSIB, CONVENE KEY STAKEHOLDERS, AND MAKE RECOMMENDATIONS TO FURTHER STRENGTHEN AND EMPOWER THIS ECOSYSTEM.

> REAGAN INSTITUTE STRATEGY GROUP: THE REAGAN INSTITUTE STRATEGY GROUP (RISG) CONVENES LEADERS WITH EXTENSIVE EXPERIENCE IN NATIONAL SECURITY TO STUDY, DEVELOP AND PROMOTE U.S. FOREIGN POLICY PRINCIPLES AND PRIORITIES FOR THE 21ST CENTURY. THE GROUP CONVENES BI-ANNUALLY IN THE WINTER AND SUMMER FEATURING DISCUSSIONS WITH A VARIETY OF NATIONAL SECURITY EXPERTS LIKE FORMER NATIONAL SECURITY ADVISOR JOHN BOLTON, REPRESENTATIVE LIZ CHENEY, SENATOR LINDSEY GRAHAM, AND GOVERNOR LARRY HOGAN, REPRESENTATIVE MICHAEL MCCAUL, AND SENATOR BEN SASSE.

> WESTMINSTER 2.0 WORKING GROUP: THE WESTMINSTER 2.0 WORKING GROUP CONVENES PUBLIC OFFICIALS, TECHNOLOGY EXPERTS, FREEDOM AND DEMOCRACY ADVOCATES, AND BUSINESS LEADERS FOR MEETINGS TO PRODUCE A REPORT DETAILING RECOMMENDATIONS FOR MODERNIZING EFFORTS TO PROMOTE FREEDOM IN THE CONTEXT OF 21ST-CENTURY CHALLENGES AND OPPORTUNITIES, FROM RISING AUTHORITARIANISM TO EMERGING TECHNOLOGIES. PLANNED TO BE RELEASED IN JUNE 2022 AROUND THE 40TH ANNIVERSARY OF PRESIDENT REAGAN'S WESTMINSTER ADDRESS, THAT REPORT WILL DESCRIBE WHAT NEW LEGISLATION, STRUCTURES,

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AND RESOURCES ARE REQUIRED TO ADVANCE FREEDOM, DEMOCRACY, AND HUMAN RIGHTS IN TODAY'S WORLD.

> THE LEADERSHIP AND THE AMERICAN PRESIDENCY (LTAP) PROGRAM: THE LTAP PROGRAM IS AN OPPORTUNITY FOR UNDERGRADUATE STUDENTS FROM ACROSS THE COUNTRY TO SPEND A SUMMER OR SEMESTER IN WASHINGTON, DC IMMERSSED IN AN EXPERIENTIAL LEADERSHIP PROGRAM. STUDENTS IN THE PROGRAM TAKE AN ACCREDITED COURSE, THE AMERICAN PRESIDENCY, SERVE AS INTERNS IN A FIELD ALIGNED WITH THEIR INTERESTS AND SKILL SETS, AND BUILD PROFESSIONAL SKILLS THROUGH WORKSHOPS AND SPECIAL EVENTS. STUDENTS WHO HAVE PARTICIPATED IN THE PROGRAM HAVE CITED LTAP AS A TRANSFORMATIVE EXPERIENCE IN THEIR LEADERSHIP JOURNEYS.

> REAGAN POSTDOCTORAL VISITING SCHOLARS PROGRAM: THIS PROGRAM PROVIDES A GENEROUS STIPEND TO TWO RECENTLY GRADUATED PH.D. CANDIDATES TO CONVERT THEIR REAGAN-RELATED DISSERTATIONS INTO BOOK MANUSCRIPTS. THIS YEAR'S VISITING SCHOLARS ARE DR. CHRISTOPHER CAMPBELL AND DR. FRANCES TILNEY BURKE.

> REAGANISM PODCAST: A PODCAST FEATURING CONVERSATIONS DEDICATED TO EXPLORING WHERE THE REAGAN MOVEMENT LIVES TODAY. THE SHOW HAS TWO GOALS: UNDERSTAND THE FOUNDATIONS OF THE POLITICAL PHILOSOPHY THAT POWERED THE REAGAN REVOLUTION AND HOST DISCUSSIONS ABOUT CONTEMPORARY ISSUES THROUGH THE LENS OF PRESIDENT REAGAN.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

AGENCY FROM INCEPTION TO ITS MODERN-DAY EFFORTS TO FIGHT DOMESTIC

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TERRORISM IN THE UNITED STATES. THIS IS THE FIRST TIME THAT MANY OF THESE REMARKABLE, HISTORIC ARTIFACTS AND CRIMINAL EVIDENCE HAVE BEEN ON PUBLIC DISPLAY TOGETHER, INCLUDING THE AUTHENTIC MANIFESTO WRITTEN BY THE UNABOMBER, THE ACTUAL CAR BONNIE AND CLYDE WERE SHOT AND KILLED IN, GUNS CONFISCATED BY JOHN DILLINGER, BABY FACE NELSON AND OTHER MEMBERS OF THE MAFIA, THE ACTUAL RAFT AND OARS USED DURING THE INFAMOUS ALCATRAZ ESCAPE, AND SO MUCH MORE.

#### COMMUNITY EVENTS

> PRESIDENTS' DAY AND JULY 4TH - DUE TO THE MUSEUM CLOSURE, BOTH PRESIDENT'S DAY AND JULY 4TH WERE PRESENTED AS ONLINE PROGRAMS THIS FISCAL YEAR. ALMOST 5,000 PEOPLE TUNED IN TO WATCH OUR VIRTUAL JULY 4TH PROGRAM WHICH INCLUDED PRESIDENTIAL LOOKALIKES SHARING THEIR IMPACT ON OUR NATION'S HISTORY, AS WELL AS MUSICAL ENTERTAINMENT. OVER 22,000 PEOPLE TUNED IN TO WATCH OUR VIRTUAL PRESIDENTS' DAY CELEBRATION PROGRAM, WHICH INCLUDED PRESIDENTIAL TRIVIA, MUSICAL ENTERTAINMENT, AND KEYNOTE REMARKS BY LTCOL STEVE CHEALANDER, ONE OF PRESIDENT REAGAN'S MILITARY AIDES.

> VETERAN'S DAY: THE REAGAN FOUNDATION RECEIVED PERMISSION FROM VENTURA COUNTY TO HOLD A SMALL, IN- PERSON VETERAN'S DAY EVENT FOR 100 GUESTS; AND THEN LIVE- STREAMED THE PROGRAM RECEIVING OVER 11,000 VIEWS. THE PROGRAM INCLUDED KEYNOTE REMARKS BY CONGRESSMAN (AND FORMER US NAVY SEAL) DAN CRENSHAW AND CONGRESSMAN MIKE GARCIA, REPRESENTATIVE FOR CALIFORNIA'S 25TH DISTRICT (HOME TO THE REAGAN LIBRARY) AND A FORMER US NAVY FIGHTER PILOT.

> 9-11 COMMEMORATION - IN HONOR OF THE 20TH ANNIVERSARY OF THE

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SEPTEMBER 11TH ATTACKS, THE REAGAN LIBRARY HELD AN IN- PERSON  
 COMMEMORATIVE EVENT. THE EVENT INCLUDED LIVE MUSICAL ENTERTAINMENT, AND  
 REMARKS BY COLONEL DAVID SUTHERLAND AND FORMER NEW YORK TRANSIT POLICE  
 OFFICER MARC MANFRO. 319 GUESTS ATTENDED THE IN-PERSON EVENT.

> RONALD REAGAN'S BIRTHDAY CELEBRATION: TO HONOR PRESIDENT REAGAN,  
 PRESIDENT GEORGE W. BUSH DESIGNATED UNITED STATES MARINE CORPS BASE  
 CAMP PENDLETON TO PLACE A WREATH ON PRESIDENT REAGAN'S GRAVESITE ON HIS  
 BEHALF ON EVERY FEBRUARY 6TH. THE CEREMONY INCLUDES A 21-GUN SALUTE.  
 THIS YEAR'S PROGRAM WAS VIRTUAL DUE TO THE MUSEUM'S CLOSURE. OVER 7,000  
 PEOPLE WATCHED OUR ONLINE PROGRAM.

THE YEAR AHEAD: FY 2022

REAGAN FORUM PARTICIPANTS - IN PERSON

> BRET BAIER (FOX NEWS HOST): 10/19/21  
 > MICHAEL MEDVED (RADIO HOST); 11/9/21  
 > JOEL ROSENBERG (AUTHOR); 11/30/21  
 > CHRISTOPHER WRAY (DIRECTOR OF THE FBI); 1/31/2022  
 > CRAIG SHIRLEY (AUTHOR); 2/22/22  
 > NEWT GINGRICH (FORMER SPEAKER OF THE HOUSE); 2/24/22  
 > CALLISTA GINGRICH (FORMER AMBASSADOR TO THE VATICAN); 2/24/22  
 > AMY CONEY BARRETT (SUPREME COURT JUSTICE); 4/4/22  
 > WILLIAM HURD (FORMER CONGRESSMAN, TEXAS); 4/21/22  
 > DAVID MAMET (PLAYWRIGHT); 5/11/22  
 > JACK CARR (AUTHOR); 5/18/21

TIME FOR CHOOSING PARTICIPANTS - IN PERSON

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> NIKKI HALEY (FORMER AMBASSADOR TO THE UNITED NATIONS): 10/5/21

> PEGGY NOONAN (WALL STREET JOURNAL COLUMNIST): 2/7/22

> TOM COTTON (SENATOR, ARKANSAS): 3/7/22

> KRISTI NOEM (GOVERNOR, SOUTH DAKOTA): 4/6/22

> TIM SCOTT (SENATOR, SOUTH CAROLINA): 4/19/22

> LARRY HOGAN (GOVERNOR, MARYLAND): 5/3/22

> JONI ERNST (SENATOR, IOWA): 8/26/22

REAGAN FORUM PARTICIPANTS - VIRTUAL

> MATT RIDLEY/ALINA CHAN (AUTHORS); 11/17/21

> JOHN AVLON (CNN CONTRIBUTOR); 2/28/22

SPECIAL PROGRAMS - IN PERSON

> 30TH ANNIVERSARY OF THE REAGAN LIBRARY - NOVEMBER 4, 2021 MARKS THE 30TH ANNIVERSARY OF THE OPENING OF THE REAGAN LIBRARY. AS SUCH, THE FOUNDATION IS PLANNING A SERIES OF EVENTS TO COMMEMORATE THIS HISTORIC DATE, INCLUDING:

> A COMMEMORATE PROGRAM WILL BE HELD ON NOVEMBER 7, 2021, WITH LIVE, PATRIOTIC MUSIC BY THE 1ST DIVISION MARINE BAND FROM CAMP PENDLETON, AS WELL AS REMARKS BY FORMER SECRETARY OF STATE DR. CONDOLEEZZA RICE, FORMER RONALD REAGAN SPEECHWRITER PETER ROBINSON, AND ARCHIVIST OF THE UNITED STATES DAVID FERRIERO.

> A SPECIAL EXHIBITION WILL RUN FROM NOVEMBER 1 THROUGH NOVEMBER 30, 2021. ITEMS ON DISPLAY WILL INCLUDE THE DEDICATION SHOVELS FROM THE LIBRARY'S GROUNDBREAKING, THE HARD HAT PRESIDENT REAGAN WORE WHENEVER HE VISITED THE LIBRARY'S CONSTRUCTION SITE, AND THE PODIUM FROM WHICH HE GAVE HIS REMARKABLE SPEECH ON OPENING DAY.

> LIVE MUSICAL CONCERTS WILL BE HELD NOVEMBER 13 AND NOVEMBER 20, 2021



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BY THE THOUSAND OAKS HIGH SCHOOL VOCAL ENSEMBLE HONORS, THE AMERICAN FOLK BAND THE GOLDEN PIPERS, AND THE LOS ANGELES SHERIFF'S DEPARTMENT BAND.

FORM 990, PART VI, SECTION A, LINE 7A:

THE TRUSTEES OF THE FOUNDATION CAN ELECT TRUSTEES. PROPOSED TRUSTEES REQUIRE A MAJORITY VOTE TO BE ELECTED TO A 6 YEAR TERM.

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

THE 990 IS REVIEWED WITH THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES PRIOR TO FILING. BOARD MEMBERS REVIEW FOR MINIMUM OF 10 DAYS PRIOR TO FILING.

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

THE STAFF MONITORS FOR ANY TRANSACTIONS WHICH COULD GIVE RISE TO A CONFLICT OF INTEREST. THE BOARD OF TRUSTEES IS ASKED TO RESPOND TO AN ANNUAL QUESTIONNAIRE REGARDING ANY CONFLICTS OF WHICH THEY MAY BE AWARE. ANY POTENTIAL CONFLICTS ARE FIRST REVIEWED WITH THE AUDIT COMMITTEE AND THEN, IF REQUIRED, FURTHER REVIEWED AND ACTED ON AS NECESSARY BY THE BOARD OF TRUSTEES.

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

> FOR 15A, BOARD OF TRUSTEES HIRED AN INDEPENDENT SEARCH FIRM, INTERVIEWED MULTIPLE CANDIDATES, ASKED FOR AND REVIEWED COMPETITIVE COMPENSATION INFORMATION SUPPLIED BY THE SEARCH FIRM AND VOTED AT A MEETING OF THE BOARD OF TRUSTEES ON THE HIRING AND LEVEL OF COMPENSATION FOR THE FINALIST. COMPENSATION OF THE EXECUTIVE DIRECTOR, INCLUDING ANY PROPOSED CHANGES, IS REVIEWED AT LEAST ANNUALLY BY THE BOARD OF TRUSTEES.

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>FOR 15B, CHAIRMAN OF THE BOARD AND SELECTED OTHER TRUSTEES ARE INCLUDED IN THE INTERVIEW PROCESS BASED UPON RECOMMENDATIONS OF THE EXECUTIVE DIRECTOR. AN INDEPENDENT SEARCH FIRM MAY BE USED AND MARKET/COMPETITIVE SALARY INFORMATION IS EVALUATED. INITIAL COMPENSATION AS PROPOSED BY THE EXECUTIVE DIRECTOR IS APPROVED BY THE CHAIRMAN. STAFF COMPENSATION AND PROPOSED CHANGES IS REVIEWED ANNUALLY BY THE BOARD OF TRUSTEES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
 AL, AK, AZ, AR, CA, CO, CT, DC, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MO, MS, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

FORM 990, PART VI, SECTION C, LINE 19:  
 THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. A COPY OF THE DOCUMENTS ARE AVAILABLE FOR INSPECTION AT 40 PRESIDENTIAL DR., SUITE 200, SIMI VALLEY, CA 93065

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

PROGRAM ADMINISTRATION:	
PROGRAM SERVICE EXPENSES	346,963.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	346,963.

DIRECT MAIL CONSULTING FEES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.

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FUNDRAISING EXPENSES	330,200.
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TOTAL EXPENSES	330,200.
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SOFTWARE LICENSES AND MAINT (INC SALES FORCES):

PROGRAM SERVICE EXPENSES	55,543.
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MANAGEMENT AND GENERAL EXPENSES	229,377.
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FUNDRAISING EXPENSES	0.
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TOTAL EXPENSES	284,920.
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TELEPHONE & DATA:

PROGRAM SERVICE EXPENSES	152,647.
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MANAGEMENT AND GENERAL EXPENSES	55,047.
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FUNDRAISING EXPENSES	2,363.
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TOTAL EXPENSES	210,057.
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PAYROLL PROCESSING FEE:

PROGRAM SERVICE EXPENSES	104,153.
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MANAGEMENT AND GENERAL EXPENSES	18,772.
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FUNDRAISING EXPENSES	22,470.
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TOTAL EXPENSES	145,395.
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BANK FEES AND CREDIT CARD FEES:

PROGRAM SERVICE EXPENSES	71,614.
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MANAGEMENT AND GENERAL EXPENSES	75.
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FUNDRAISING EXPENSES	66,769.
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TOTAL EXPENSES	138,458.
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DIRECT RESPONSE DIGITAL:

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PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	137,704.
TOTAL EXPENSES	137,704.

PRINTING & PUBLICATIONS:

PROGRAM SERVICE EXPENSES	115,007.
MANAGEMENT AND GENERAL EXPENSES	205.
FUNDRAISING EXPENSES	13,087.
TOTAL EXPENSES	128,299.

EQUIPMENT RENTALS:

PROGRAM SERVICE EXPENSES	108,119.
MANAGEMENT AND GENERAL EXPENSES	16,098.
FUNDRAISING EXPENSES	4,073.
TOTAL EXPENSES	128,290.

TAXES & FEES:

PROGRAM SERVICE EXPENSES	11,397.
MANAGEMENT AND GENERAL EXPENSES	107,494.
FUNDRAISING EXPENSES	7,649.
TOTAL EXPENSES	126,540.

RECRUITMENT AND BACKGROUND CHECK:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	44,756.
FUNDRAISING EXPENSES	48,998.
TOTAL EXPENSES	93,754.

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## OTHER COSTS:

PROGRAM SERVICE EXPENSES	45,809.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	42,402.
TOTAL EXPENSES	88,211.

## WEB SERVICES:

PROGRAM SERVICE EXPENSES	14,682.
MANAGEMENT AND GENERAL EXPENSES	52,955.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	67,637.

## POSTAGE &amp; FEDEX:

PROGRAM SERVICE EXPENSES	40,120.
MANAGEMENT AND GENERAL EXPENSES	6,242.
FUNDRAISING EXPENSES	10,424.
TOTAL EXPENSES	56,786.

## MARKETING EXPENSES AND RESEARCH:

PROGRAM SERVICE EXPENSES	56,064.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	56,064.

## DUES AND SUBSCRIPTIONS:

PROGRAM SERVICE EXPENSES	14,251.
MANAGEMENT AND GENERAL EXPENSES	4,035.

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FUNDRAISING EXPENSES	37,002.
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TOTAL EXPENSES	55,288.
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DIRECT MAIL CAGING & FILLFULLMENT:

PROGRAM SERVICE EXPENSES	0.
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MANAGEMENT AND GENERAL EXPENSES	0.
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FUNDRAISING EXPENSES	46,713.
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TOTAL EXPENSES	46,713.
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COMPUTER SUPPLIES:

PROGRAM SERVICE EXPENSES	12,399.
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MANAGEMENT AND GENERAL EXPENSES	29,353.
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FUNDRAISING EXPENSES	0.
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TOTAL EXPENSES	41,752.
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STAFF INCENTIVES:

PROGRAM SERVICE EXPENSES	15,068.
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MANAGEMENT AND GENERAL EXPENSES	7,314.
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FUNDRAISING EXPENSES	4,843.
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TOTAL EXPENSES	27,225.
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DIRECT MAIL POSTAGE:

PROGRAM SERVICE EXPENSES	0.
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MANAGEMENT AND GENERAL EXPENSES	0.
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FUNDRAISING EXPENSES	26,073.
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TOTAL EXPENSES	26,073.
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MUSEUM SUPPORT:

Name of the organization	THE RONALD REAGAN PRESIDENTIAL FOUNDATION AND INSTITUTE	Employer identification number	77-0054631
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PROGRAM SERVICE EXPENSES	15,611.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	15,611.

## STAFF TRAINING &amp; EDUCATION:

PROGRAM SERVICE EXPENSES	5,710.
MANAGEMENT AND GENERAL EXPENSES	401.
FUNDRAISING EXPENSES	3,963.
TOTAL EXPENSES	10,074.

## DIRECT MAIL LIST MANAGEMENT:

PROGRAM SERVICE EXPENSES	7,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,000.

## UNIFORMS EXPENSE:

PROGRAM SERVICE EXPENSES	1,828.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	343.
TOTAL EXPENSES	2,171.

## SPEAKER FEES:

PROGRAM SERVICE EXPENSES	500.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	500.

