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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Fo	r ca	ilen	dar year 2013 or tax year	beginning			<u>, and ending</u>						
N	am	e of	foundation						A Employ	er ide	ntification	number	
	NE	CA:	L C. NICHOLS	FOUN	DATION	N, INC.			1				
	C/	<u>′0</u>	NEAL C. NIC	HOLS					20-	<u>5</u> 8:	13748		_
N	umb	er a	nd street (or P O box number if	f mail is not de	elivered to stree	t address)	Room	/suite	B Telepho	ne nu	mber		
	32	25	1 WASHINGTON	BLVD					703	<u>-5</u> 2	<u> 25-09</u>	00	
С	ity i	or to	own, state or province, cou		P or foreign p	postal code			C If exempt	ion app	olication is pe	ending, check here	
	ΑF	<u> </u>	INGTON, VA_	22201]				
G	Ch	ieck	all that apply:	Initial return	n	Initial return of a f	ormer public charity		D 1. Fore	gn org	ganizations	, check here	
				Final return		Amended return			2			-4 4b - 050/ 44	
_		_		Address ch		Name change			2. Foreig	n orga here a	nizations me nd attach co	eting the 85% test, mputation	
H_	Ch	ieck	type of organization:	X Section	n 501(c) <u>(3)</u> e	xempt private foundation			E If privat	e four	idation stat	tus was terminat	ed
		Se	ction_4947(a)(1) nonexem	pt charitable		Other taxable private found	lation		unders	ection	507(b)(1)	(A), check here	▶
I	Fair	ma	irket value of all assets at e	end of year	J Account	ting method: X Cash	Accrual		F If the fo	undat	ion is in a 6	60-month termin	ation
	•		Part II, col (c), line 16)			Other (specify)			under s	ection	507(b)(1)	(B), check here	
	<u>></u>					umn (d) must be on cash	basis.)		ļ				
F	'aı	<u>t I</u>	Analysis of Revenue an (The total of amounts in column	mns (b), (c), an	d (d) may not	(a) Revenue and	(b) Net investm	ent		djuste		(d) Disburse for charitable p	
_			necessarily equal the amount	ts in column (a	1))	expenses per books	income		ļ	ncome	3	(cash basis	
		1	Contributions, gifts, grant	•		63,458.			<u> </u>	I/A			
*		2	Check If the foundation interest on savings and temporary	n is not required to examp	o attach Sch B		-		 				
2014	Î	3	cash investments			14 005	14.0						1
ග		4	Dividends and interest fro	m securities	3	14,085.	14,0	185.				STATEME	NT I
0			Gross rents										
	ł	_	Net rental income or (loss)			732.			ļ				
SE	e l		Net gain or (loss) from sale of a Gross sales price for all		,783.	134.			 				
	нечепие	7	assets on line 6a Capital gain net income (from the following from th		, 103.		-	732.	 	-	REC	EIVED	
SCANNED	2	r R	Net short-term capital gail				· · · · · · · · · · · · · · · · · · ·	72.	ļ				181
ź		9	Income modifications	"					 	8	SFP	1 0 2014	있
X		0 10a	Gross sales less returns						 	=	الملات	1 0 2011	122
တ္တ			Less Cost of goods sold						 	1	OG[EN IIT	
			Gross profit or (loss)										
	-	11	Other income										
		12	Total. Add lines 1 through	h 11		78,275.	14,8	317.					
	T	13	Compensation of officers, dire	ctors, trustees	s, etc	2,000.	1,0	000.				1	,000.
		14	Other employee salaries a	nd wages									
	ומי		Pension plans, employee	benefits									
	Ses	16a	Legal fees										
į	Expense		Accounting fees	ST	MT 2	1,575.		788.					<u>787.</u>
Ú	Ĭ	C	Other professional fees										
	۱ ا	17	Interest			255			ļ <u> </u>				
-	₽		Taxes		MT 3	377.	1	<u> 189.</u>	 				188.
	Ĕ .		Depreciation and depletion	n		· · · · · · · · · · · · · · · · · · ·							
4			Occupancy						 				
3	<u> </u>		Travel, conferences, and r	neetings					 -				
			Printing and publications	СШ	Mm 4	2 250		111					1 / /
į	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		Other expenses		MT 4	2,358.	_4,4	214.	<u>. </u>		<u> </u>		144.
	E 4	24	Total operating and admi			6,310.	1 1	91.				2	,119.
ć	5 ,	25	Contributions, gifts, grant	-		19,000.	4,1	. J L •					,000.
	- 1		Total expenses and disb			10,000.						1.7	, o o o •
	'	-0	Add lines 24 and 25	w. 06		25,310.	4,1	91				21	,119.
	1	27	Subtract line 26 from line	12:		23,310.	, 1	<u></u>				<u> </u>	<u>, + + / •</u>
			Excess of revenue over expens		rsements	52,965.							
			Net investment income (4			3=1500	10,6	26.	<u> </u>				
_		C	Adjusted net income (if ne						N	[/A			
200	En 4												

10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

NEAL C. NICHOLS FOUNDATION, INC. C/O'NEAL C. NICHOLS · 20-5813748 Form 990-PF (2013) Page 2 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year (c) Fair Market Value (a) Book Value (b) Book Value 29,248. 36,288. 36,288. 1 Cash - non-interest-bearing 114,733 2 Savings and temporary cash investments 19,034. 19,034. 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less, allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 483,414. 624,993. STMT 5 **b** Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis ▶ Less accumulated depreciation 15 Other assets (describe ► DIVIDEND RECEIVABLE) 0 45. 45. 16 Total assets (to be completed by all filers - see the 627,395 680,360. 734,493. instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted \triangleright \mathbf{x} Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 0. 27 Capital stock, trust principal, or current funds 0. 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 627,395. 680,360. 30 Total net assets or fund balances 627,395. 680,360. 627,395. 680,360 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	627,395.
2 Enter amount from Part I, line 27a	2	52,965.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	680,360.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	680,360.

	and Losses for Tax on Ir		t Income					0 301.	3740 Tugut
(a) List and descr	be the kind(s) of property sold (e.g ehouse; or common stock, 200 sh	., real estate,		(b)	low ac - Purcl - Dona	iase į '	c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a									
b SEE ATTACHED	STATEMENTS						_		
<u>c</u>				-					
e						1			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			1	(h) Ga (e) plus	ain or (loss) s (f) minus (g)
a									
b			 						
C		 							
d 007 702			007.05	1				<u> </u>	732.
e 807,783.	g gain in column (h) and owned by	the foundation	807,05	1		/IX	Gaine (C	ol. (h) gaın	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)			còl. (k), but n	ot less than (from col. (I	1 -0-) or
a								_	_
b					_				
C									
d									
e									732.
2 Capital gain net income or (net ca	pital loss) { If gain, also ente	r ın Part I, line)- ın Part I, line	7 7	}	2				732
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) a	nd (6):							
If gain, also enter in Part I, line 8,	column (c).				_			37/3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(e) for	r Reduced	Tay on Net	Inv	3 estr	ent Inco	me	N/A	
(For optional use by domestic private									
(1 of optional use by domestic private	Tournations subject to the section	יוט איטינען נמא טוו	i not investment ii	icom	·· <i>)</i>				
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the sect	ion 4942 tax on the distributable ar	nount of any ye	ear in the base pe	rıod?					Yes X No
If "Yes," the foundation does not qual									
	ach column for each year; see the	nstructions be	fore making any e	entries	i.				(4)
(a) Base period years Calendar year (or tax year beginnir	<u> </u>		Net value of no	(c) oncha	rıtable-		+	Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2012		28,171.				<u>6,039</u>			.051592
2011		4,521.			47	9,504	·	-	.030283
2010		6,153.				8,781			.043801
2009		52,725. 4,536.			23	8,856. 2,662.	· 		.062477
2008	\	4,550.			43	<u> </u>	+		.00247
2 Total of line 1, column (d)	_	b O b 5					2		.339290
3 Average distribution ratio for the 5 the foundation has been in exister	· ·	on line 2 by 5,	or by the number	r or ye	ars		3		.067858
4 Enter the net value of noncharitab	le-use assets for 2013 from Part X,	line 5					4		615,775
5 Multiply line 4 by line 3							5		41,785
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		106
7 Add lines 5 and 6							7		41,891
8 Enter qualifying distributions from	ı Part XII, line 4						8		21,119
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	olete that part usir	ng a 1	% tax ı	ate.			

NEAL C. NICHOLS FOUNDATION, INC.

	1 990-PF (2013) C/O NEAL C. NICHOLS 20-58 ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	13748	otio	Page 4
		e msuc		113)
12	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		2	12
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	_		<u>13.</u>
_	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			Λ
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3			$\frac{0.}{13.}$
				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5			13.
	Credits/Payments:			1).
	2013 estimated tax payments and 2012 overpayment credited to 2013		_	-
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 1,000.			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		1 0	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<u> </u>	00.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
			7	87.
	· · · · · · · · · · · · · · · · · · ·			0.
	Enter the amount of line 10 to be: Credited to 2014 estimated tax ► 787 • Refunded ► 11 Int VII-A Statements Regarding Activities			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
Ia	any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	""		<u> </u>
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	10		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10		<u>A</u>
u	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
-	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
-	If "Yes," attach a detailed description of the activities	-		1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
Ū	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
٠	If "Yes," attach the statement required by General Instruction T.			<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
·	The first of the f	,		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	İ		
	VA	_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	_		}
_	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			_
-	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		х
10		10	X	_
		Form 990		(2013)

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had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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Total number of other employees paid over \$50,000

Total. Add lines 1 through 3

NEAL C. NICHOLS FOUNDATION, INC. .20 - 5813748C/O NEAL C. NICHOLS Page 8 Form 990-PF (2013) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 508,268. a Average monthly fair market value of securities 1a 116,884. Average of monthly cash balances 16 b 16 c Fair market value of all other assets 625,152. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 3 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 615,775. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 5 30,789. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 30,789. Minimum investment return from Part X, line 6 213. 2a Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) 2c c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 4 576. 5 30, 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) ĥ 576. 30 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 21,119. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За

b Cash distribution test (attach the required schedule) 3b 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

5

Adjusted qualifying distributions. Subtract line 5 from line 4

income. Enter 1% of Part I, line 27b

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

C/O NEAL C. NICHOLS

Page 9 Undistributed Income (see instructions) Part XIII (a) (b) (c) (d) 2013 Years prior to 2012 2012 Corpus 1 Distributable amount for 2013 from Part XI, 30,576. line 7 2 Undistributed income, if any, as of the end of 2013 0 a Enter amount for 2012 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2013: a From 2008 26,794. **b** From 2009 c From 2010 d From 2011 991 e From 2012 27,785. f Total of lines 3a through e 4 Qualifying distributions for 2013 from 21,119. Part XII, line 4: ►\$ 0. a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 21,119. d Applied to 2013 distributable amount 0 e Remaining amount distributed out of corpus 9,457. Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount 9,457. must be shown in column (a)) 6 Enter the net total of each column as indicated below: 18,328. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 . line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2012. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2014 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2014 18,328. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 17,337. a Excess from 2009 b Excess from 2010 c Excess from 2011 991 d Excess from 2012

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e Excess from 2013

3251 WASHINGTON BLVD., ARLINGTON, VA 22201

b The form in which applications should be submitted and information and materials they should include:

LETTER REQUEST FROM IRC SECTION 501(C)(3) CHARITIES.

c Any submission deadlines:

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

PREFERENCE GIVEN TO ARLINGTON, VA COMMUNITY-BASED CHARITIES.

Form 990-PF (2013)

C/O NEAL C. NICHOLS

· 20-5813748 Page 11

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oona ibaaan	
a Paid during the year				
WASHINGTON-LEE HIGH SCHOOL	NONE	PUBLIC	CHADIMADI E	
1301 N STAFFORD ST	NONE	POBLIC	CHARITABLE	
ARLINGTON, VA 22201				1,000.
THE CHRISTIAN BROADCASTING NETWORK	NONE	PUBLIC	CHARITABLE	
977 CENTERVILLE TURNPIKE VIRGINIA BEACH, VA 23463				18,000.
VIRGINIA BEACH, VA 23403				10,000.
		ı		
	<u>-</u>		<u> </u>	
		 		
Total		1	▶ 3a	19 000.
b Approved for future payment				
NONE				
110112				
		1		
Total		_1	▶ 3b	0.
	-			

(b) Amount	Excluded by (C) Exclusion code	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
	(C) Exclu- sion	(d)	Related or exempt
			
			·
	14	14,085.	
	+ =	14,003.	
	18	732.	
			···
(0.	14,817.	14,81
· · · · · ·		0.	

(See worksheet in line 13 instructions to verify calculations.)

13 Total Add line 12, columns (b), (d), and (e)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	N/A
	
	

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	NEAL	C. NICHO	LS FOUN	DATION,	INC.			040540	_	
		<u>IÈAL C. N</u>						<u>813748</u>		ge 13
Part)	Exempt Organ		nsters to a	ind Transact	ions ar	nd Relations	ships With Nonc	naritable	•	
4 5 1				11					Yes	No
	the organization directly or indi		-	-	-		tion 501(c) of		162	140
	Code (other than section 501(c				cai organiz	ations			:	
	nsfers from the reporting found	ation to a noncharit	table exempt or	ganization or:						77
٠,	Cash							1a(1)		X
	Other assets							1a(2)		X
	er transactions:									37
	Sales of assets to a noncharita							1b(1)		X
	Purchases of assets from a no		organization					1b(2)		X
٠,	Rental of facilities, equipment,							1b(3)		X
	Reimbursement arrangements	ř						1b(4)		X
	Loans or loan guarantees							1b(5)		X
	Performance of services or me							1b(6)		X
	ring of facilities, equipment, ma	• .					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			X
	e answer to any of the above is		=			-			ets,	
	ervices given by the reporting f			ed less than fair m	arket value	in any transactio	n or snaring arrangeme	ent, snow in		
(a) Line no	umn (d) the value of the goods, (b) Amount involved	•		exempt organizat	ıon	(d) D		and charge an	ongomo	
(a) Line no	(b) Amount involved	(c) Name		exempt organizat		(u) Description	n of transfers, transactions,	, and sharing an	angeme	
_			N/A				_			
_		 				 				
-										
										
						 				
						 				
		<u> </u>				 				
						 				
		 				 				
		 				<u> </u>	<u> </u>			
							- · · · · · · · · · · · · · · · · · · ·	-		
						-				
		 								
-		 								
		1								
	ne foundation directly or indirec				pt organiza	ations described			7.7	
	ection 501(c) of the Code (othe		(c)(3)) or in sect	ion 52/7				Yes	LA	☐ No
b it "Y	es," complete the following sch (a) Name of org			(b) Type of orga	nızatıon		(c) Description of relat	tionship		
	N/A	Janization		(b) Type of orga	IIIZation		(c) Description of relati	попоттр		
	N/A									
				· · · · · · · · · · · · · · · · · · ·						
										
-	Under penalties of perjury, I declare	that have examined t	this return: include	I rg accompanying sche	edules and st	tatements, and to the	e best of my knowledge			
Sign	and belief, it is true, correct, and co	mplete Declaration of	preparer (other than	n taxpayer) is based o	n all informa	ition of which prepare	er has any knowledge	May the IRS of return with the	e prepar	rer
Here	N/	- //		18-2	1-14	PRESI	DENT	shown below X Yes		str)? No
	Signature of officer or trustee	e g l		Date		Title	T 111 T	LAL TES		7 140
	Print/Type preparer's n		Preparer's s			Date	Check If P	TIN		
		_	XV	X	0		self- employed			
Paid	THOMAS F F	_{''T-OOD} (Ima	Doos	(CA)	08/14/14	, ,	P00339	853	
Prepa			SON, WH	ITE & AS			P Firm's EIN ► 54	-10325	07	
		,,	,							

Form **990-PF** (2013)

Phone no. 703-237-2500

Preparer **Use Only**

Firm's address ▶ 6402 ARLINGTON BLVD., SUITE 1130

FALLS CHURCH, VA 22042-2333

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.

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

OMB No 1545-0047

2013

Name of the organization

NEAL C. NICHOLS FOUNDATION, INC.

C/O NEAL C. NICHOLS

Employer identification number

20-5813748

Organiz	ation type (check or	ne)
Filers of	:	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	=	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.
General	Rule	·
X	For an organization contributor. Compl	i filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II
Special	Rules	
	509(a)(1) and 170(b	e)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
	total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III
	contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year
but it mi	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

NEAL C. NICHOLS FOUNDATION, INC.

C/O NEAL C. NICHOLS

Employer identification number

20-5813748

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	NEAL C. NICHOLS 3251 WASHINGTON BLVD. ARLINGTON, VA 22201-4415	\$63, 4 58.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

NEAL C. NICHOLS FOUNDATION, INC. C/O NEAL C. NICHOLS

20-5813748

Part II	Noncash Property (see instructions) Use duplicate co	pies of Part II if additional space is needed
---------	------------------------------------------------------	-----------------------------------------------

(a)			
No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.	(b)	(c)	(d)
om art I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
_ _			

(a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (e) Transfer	lame of organi	zation			Employer identification number				
Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through etc. and the following line religious, charitable, etc., contributions of \$1,000 or less for the year. exerum membrane etc.)			iC.						
Section Color Co	<u>'/O NEA</u>	L C. NICHOLS	al contributions to section 501/c	\(7\ (8\ or (10\ organizatio	20-5813748				
(a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift (from Part) (from Part) (g) No. (h) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 (from Part) (g) No. (h) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (from Part) (from Part) (g) No. (h) Purpose of gift (d) Description of how gift is held (e) Transfer of gift (d) Description of how gift is held (from Part) (g) No. (h) Purpose of gift (d) Description of how gift is held (e) Transfer of gift (d) Description of how gift is held	Part III	year. Complete columns (a) through (e) and the for the total of exclusively religious, charitable, etc., c Use duplicate copies of Part III if additional s	ollowing line entry. For organization on tributions of \$1,000 or less for pace is needed.	ns completing Part III, enter	e) > \$				
(e) Transfer of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift (f) Purpose of gift (h) Purp	(a) No. from Part I			(d) Des	cription of how gift is held				
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	from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee		(e) Transfer of gift							
	-	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee				
1	-								

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECU	RITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
COMMONWEALTH FINANCIAL NETWORK COMMONWEALTH	14,085		0. 14,085	. 14,085.	
FINANCIAL NETWORK	8,338	. 8,33	8. 0	. 0.	
TO PART I, LINE 4	22,423	. 8,33	8. 14,085	14,085.	
FORM 990-PF		ACCOUNTI	NG FEES	sı	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING		1,575.	788.		787.
TO FORM 990-PF, PG 1	, LN 16B	1,575.	788.		787.
FORM 990-PF		TAX	ES	Sī	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES FOREIGN TAXES		122. 255.	61. 128.		61. 127.
TO FORM 990-PF, PG 1	, LN 18	377.	189.		188.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ANNUAL LICENSE FEE OFFICE EXPENSE INVESTMENT FEES	25. 238. 2,095.	119.		25. 119. 0.
TO FORM 990-PF, PG 1, LN 23	2,358.	2,214.		144.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 5
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE
1,035.921 SHS AMERICAN EUROPA INTERMEDIATE AMERICAN BD FD O 1,113.118 SHS AMERICAN INVEST 337.140 SHS AMERICAN NEW WORL SHORT TERM BOND FUND OF AMERI 309.970 SHS AMERICAN WASHINGT 600.803 SHS ARTISAN INTL VALU 1,079.148 SHS COHEN STEERS RE 2,185.233 SHS COLUMBIA ACORN 4,681.216 SHS COLUMBIA DIVIDE 2,896.472 SHS DOUBLELINE LOW 2,238.878 SHS MAINSTAY MARKET 1,083.747 SHS NUVEEN REAL ASS 1,816.696 SHS NUVEEN SANTA BA OPPENHEIMER DEV MARKETS FUND 1,106.112 SHS OPPENHEIMER DEV 833.980 SHS OPPENHEIMER GLOBA 471.715 SHS OPPENHEIMER INTL 1,261.198 SHS OPPENHEIMER STE	OF AMERICA IMENT CO. OF LD FD ICA CLASS A ION MUTUAL I JE FD INV CL EALTY EMERGING MK END INC FD DURATION IFIELD FD CL SET INCOME F ARBARA DIV G W MKTS FD AL VALUE GROWTH FD	AMERICA NVESTORS TS ASS D RWTH	48,092. 39,034. 18,793. 0. 11,400. 21,550. 72,684. 27,272. 55,661. 29,376. 39,505. 24,850. 54,900. 38,891. 35,561. 16,677. 15,016.	50,739. 0. 40,840. 19,783. 0. 12,216. 22,092. 67,793. 29,479. 86,837. 29,486. 41,464. 23,853. 60,133. 0. 41,546. 37,379. 18,001. 15,563.
223.117 SHS PRUDENTIAL GLOBAL 276.166 SHS RS GLOBAL NATURAL RS LOW DURATION BOND FUND 1,081.092 SHS TROWE PRICE GRO 489.725 SHS TROWE PRICE EUROP	C REAL ESTAT C RESOURCES OWTH STOCK		5,041. 10,352. 0. 50,193. 10,145.	4,913. 9,671. 0. 56,833. 10,505.

624,993.

679,126.

TOTAL TO FORM 990-PF, PART II, LINE 10B

	STATEMENT 6		
		BEN PLAN	EXPENSE
CHAIRMAN/PRESI 0.00		0.	0.
SECRETARY 0.00	0.	0.	0.
VICE PRESIDENT	'/TREASURER		
0.00	0.	0.	0.
DIRECTOR 0.00	500.	0.	0.
DIRECTOR 0.00	500.	0.	0.
DIRECTOR 0.00	500.	0.	0.
DIRECTOR 0.00	500.	0.	0.
, PART VIII	2,000.	0.	0.
	TITLE AND AVRG HRS/WK CHAIRMAN/PRESI 0.00 SECRETARY 0.00 VICE PRESIDENT 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00	CHAIRMAN/PRESIDENT 0.00 0. SECRETARY 0.00 0. VICE PRESIDENT/TREASURER 0.00 500. DIRECTOR 0.00 500. DIRECTOR 0.00 500. DIRECTOR 0.00 500.	TITLE AND COMPEN-BEN PLAN CONTRIB CHAIRMAN/PRESIDENT 0.00 0. 0. SECRETARY 0.00 0. 0. VICE PRESIDENT/TREASURER 0.00 5.00. 0. DIRECTOR 0.00 500. 0. DIRECTOR 0.00 500. 0. DIRECTOR 0.00 500. 0.

Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (c) Date acquired (mó., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation 1a 95.429 SHS INTERM. BD FD OF AMERICA 10/09/13 VARIOUS b 135.021 SHS AMERICAN NEW WORLD 12/16/13 VARIOUS c 86.858 SHS AMERICAN ST BD CL A VARIOUS 03/27/13 VARIOUS |09/10/13 d 5619.904 SHS DOUBLELINE EMERGING MRTKS e 1,962.709 SHS DOUBLELINE LOW DURATION BD 09/12/13|11/27<u>/1</u> 1,964.637 SHS DOUBLELINE LOW DURATION P 09/12/13|12/03/13 P 15,632.239 SHS DOUBLELINE TOTAL RETURN BD FD 01/03/13|VARIOUS h 385.978 SHS HUSSMAN STRATEGIC TOTAL RETURN Ρ VARIOUS |01/03/13 04/25/13|12/18/13 25.124 SHS OPPENHEIMER DEV MARKETS P _ 131.057 SHS RS LOW DURATION BD FD CL A P k 2,165.374 SHS T ROWEPRICE INSTL FLOATING RATE FD P VARIOUS |10/22/13 P 17,915.605 SHS AMERICAN INTERMED BOND OF AMERICA VARIOUS VARIOUS VARIOUS 03/27/13 m 10,242.027 SHS AMERICAN SHORT TERM BD CL A Ρ n 1,095.290 SHS COLUMBIA DIVIDEND INCOME FD Ρ 06/30/1012/11/13 o 461.362 SHS OPPENHEIMER DEV MARKETS Ρ VARIOUS |12/18/13 (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -3. 1,285. 1,288. 481. b 8,000. 7.519. 874 872. 2. C 60,807. 571. 56,236. d -4. 76<u>.</u> 19,981. 19,905. 19,981. 56. 19,925. f 171,856. 229. 177,085. a 4,861 4,647 214. h 47. 930. 883. 5<u>.</u> 1,350 1,345. 22,403. -425. 21,978 106,577 104,850 ,727. 103,016 102,875. 141. m 19,981 12,897. 084. Π 17,070. 16,214. 856. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -3. а 481. 2. C -4,571. d 76. 56<u>.</u> -5,229. -214. h <u>47.</u> 5<u>.</u> -425. 727. 1 141. m 7,084. n 856. 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Pa	rt IV Capital Gains and Lo	sses for Tax on Investment Income	9			
	(a) List and 2-story b	d describe the kind(s) of property so rick warehouse; or common stock,	old, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
12 '		RS LOW DURATION		P	03/06/12	
			SIC TOTAL RETURN	P		01/03/13
	CAPITAL GAINS		JIC TOTAL KETOKK		VARTOOD	01/03/13
d	0111_111110				-	
 _						
f						
			" -			
h						
1_						
k			===:			
						
m						
П						ļ
0		(0 D	(100-4		1 (1)	<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (e)) Gain or (loss) plus (f) minus (g)	
 а	75,369.	(5) 200	75,141.	(0)1		228.
b b	170,314.		178,181.			-7,867 .
c c	8,338.		1,0,101.			8,338.
d						0,000.
e						
f						
g						
h						
<u> </u>						
<u> </u>						
<u>k</u>						
<u> </u>			<u> </u>			
m						
<u>n</u> o			1			
	Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69	/I) I os	ses (from col. (h)	1
		(j) Adjusted basis	(k) Excess of col. (I)	Gains (excess of	of col. (h) gain ove	r col. (k),
	(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	DUT 11	ot less than "-0-")	
<u>a</u>						228.
<u>b</u>						<u>-7,867.</u>
d d						8,338.
e						
f						
g						
h						
ı						
1	=					
k					-	
1						
<u>m</u>						
n						
0						
n (^	onital gain not iscome or (not on	If gain, also ente	r in Part I, line 7 0-" in Part I, line 7			5 20
	apital gain net income or (net ca		_	2		<u>732.</u>
3 Ne	et short-term capital gain or (los gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) a	nd (6):			
	gam, also enter in Part I, line 8, (loss), enter "-0-" in Part I, line 8		,	3	N/A	
						

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an-Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

				_		
If you a	re filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box			▶ X
-	re filing for an Additional (Not Automatic) 3-Month Ex	•	• • • • • • •	-		
Do not co	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	sly filed Fo	rm 8868	
	c filing (e-file). You can electronically file Form 8868 if y			•		,
	o file Form 990-T), or an additional (not automatic) 3-mor					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details o	on the elec	ctronic filing of	this form,
	urs gov/efile and click on e-file for Charities & Nonprofits			11\		
Part I	Automatic 3-Month Extension of Time				 	
•	tion required to file Form 990-T and requesting an auton	natic 6-mo	onth extension - check this box and	complete		. —
Part I only						
	corporations (including 1120-C filers), partnerships, REM ome tax returns	iCs, and ti	rusts must use Form 7004 to reques			
		-4			er's identifying	
Type or	Name of exempt organization or other filer, see instru-			Employe	ridentification	number (EIN) or
orint	NEAL C. NICHOLS FOUNDATION	, INC	•		20 E01	2740
ile by the	C/O NEAL C. NICHOLS		N	0	20-581	
due date for iling your	Number, street, and room or suite no If a PO box, so 3251 WASHINGTON BLVD	ee instruct	tions	Social se	curity number	(2211)
eturn See	City, town or post office, state, and ZIP code For a fo	roign odd	rana ana inatriustiana			
istractions	ARLINGTON, VA 22201	neigh add	ress, see instructions			
	ANDINGTON, VA 22201		 ,			
Enter the	Return code for the return that this application is for (file	a conara	to application for each return)			0 4
-11161 1116	return code for the return that this application is for the	a separa	te application for each return)			0 4
Applicati	on	Return	Application			Return
s For	011	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
orm 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720 (other than individual)			09
orm 990		04	Form 5227			10
	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	NEAL C. NICHOLS	3		•		
The bo	oks are in the care of > 3251 WASHINGTON		O - ARLINGTON, VA	22201		
	one No ► 703-525-0900		Fax No ▶			
•	rganization does not have an office or place of business	in the Un	ited States, check this box			
	s for a Group Return, enter the organization's four digit (f this is fo	r the whole gro	oup, check this
oox ▶ [If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	f all memb	ers the extens	ion is for
1 I red	quest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	until		
	AUGUST 15, 2014 , to file the exempt	t organizat	tion return for the organization name	ed above	The extension	
ıs fo	or the organization's return for					
►Ĺ	X calendar year 2013 or					
►[tax year beginning	, and	d ending			
			_			
2 If th	e tax year entered in line 1 is for less than 12 months, cl	heck reaso	on Initial return	Fınal retur	n	
L	Change in accounting period					
	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
non	refundable credits. See instructions			3a	\$	1,000.
	is application is for Forms 990-PF, 990-T, 4720, or 6069	-				_
	mated tax payments made. Include any prior year overp			3b_	\$	0.
	ance due. Subtract line 3b from line 3a Include your pa	-				4 4-4
	using EFTPS (Electronic Federal Tax Payment System)		-	3c	\$	1,000.
	If you are going to make an electronic funds withdrawal	(dırect del	oit) with this Form 8868, see Form 8	453-EO ar	nd Form 8879-l	EO for payment
nstruction						
HA F	or Privacy Act and Panerwork Reduction Act Notice	see instri	ictions		Form 886	88 (Rev. 1-2014)

Form 8868 (Rev 1-2014)			,	4	Page
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	box		▶ X
Note. Only complete Part II if you have already been granted an a				8868	·
 If you are filing for an Automatic 3-Month Extension, comple 	te only Pa	art I (on page 1)			
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origina	al (no c	opies r	needed).
		Enter filer's	dentifyir	ng numb	er, see instructions
Type or Name of exempt organization or other filer, see instru	ctions		Employe	identific	cation number (EIN)
print NEAL C. NICHOLS FOUNDATION,	INC.				
File by the C/O NEAL C. NICHOLS				20-	5813748
ing your					umber (SSN)
return See 3251 WASHINGTON BLVD					
City, town or post office, state, and ZIP code For a form	oreign add	lress, see instructions.			
ARLINGTON, VA 22201					
					[<u></u>
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
					
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
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 06	Form 6069 Form 8870			11
Form 990-T (trust other than above)					
STOP! Do not complete Part II if you were not already granted NEAL C. NICHOL:		natic 3-month extension on a previ	ousiy nie	<u>u Form</u>	0000.
• The books are in the care of ▶ 3251 WASHINGTO		D - ADI.TNOTON VA	22201		
Telephone No. ▶ 703-525-0900	N DHV.	Fax No Fax No	2201		
 If the organization does not have an office or place of business 	s in the l lr				_
 If this is for a Group Return, enter the organization's four digit 			this is fo	r the wh	ole group, check this
box ► If it is for part of the group, check this box ►	7 ·	ich a list with the names and EINs of			
	-	BER 15, 2014.	<u>u</u>	0.00	
5 For calendar year 2013, or other tax year beginning		, and ending	1		
6 If the tax year entered in line 5 is for less than 12 months, or	heck reas		Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL INFORMATION HAS BE	EN RE	QUESTED TO COMPLETE	THE	TAX	RETURN OF
THE FOUNDATION SO THAT AN ACCU	URATE	AND COMPLETE RETUR	N FO	R AN	EXEMPT
ORGANIZATION CAN BE FILED.					
8a 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			8a	\$	233
b if this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated	-		
tax payments made Include any prior year overpayment all	lowed as a	a credit and any amount paid	ļ		
previously with Form 8868			8b	\$	1,000
c Balance due. Subtract line 8b from line 8a. Include your pa	ayment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See instru			8c	\$	0
•		st be completed for Part II o	-		
Under penalties of perjury, I declare that I have examined this form, includ	ling accomp	panying schedules and statements, and to	the best o	f my kno	wledge and belief,
it is true, correct and complete and that I am authorized to prepare this for				P	12 -
Signature & KOMMAS). Love GAA Title > 1	PRESI	DENT TRANSURER	Date		-13-2014
-		,		Fo	rm 8868 (Rev. 1-201-

323842 12-31-13