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

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. Open to Public Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection A For the 2015 calendar year, or tax year beginning , 2015, and ending , 20 D Employer identification number C Name of organization

В	Check if	applicable:	THE GEORGE W. BUSH FO	OUNDATION									
Γ		fress inge	Doing Business As		******		20-411	9317					
		ne change	Number and street (or P.O. box if mail I	s not delivered to street address) F	Room/suite	E Telephone n						
	Initi	ial return	2943 SMU BOULEVARD				(214) 20	10-4300					
r		minated	City or town, state or province, country,	, and ZIP or foreign postal code			1,221, 20						
	Ame	onded	DALLAS, TX 75205				G Gross receip	nis \$ 37.90	1,468.				
\perp	retu App	ellcation	F Name and address of principal officer:	KENNETH HERSH			H(a) Is this a grou	·····					
L	pan	gnlb	2943 SMU BOULEVARD DA			•	subordinates H(b) Are all subord	s?	\vdash				
1	Tay-e	exempt sta		· `~-:	4947(a)(1) or	527		ch a list. (see instructions	i				
÷			WWW.BUSHCENTER.ORG) (msen no.)	4947 (8)(1) 01	521		•	'4				
<u>к</u>			zation: X Corporation Trust	Association Other		I Van effer	H(c) Group exem	State of legal domici	le: TX				
Ĥ	art		nmary	Association Office		L sea or loss	mation. 2006 W	State of legal donner	ie. IA				
	1		describe the organization's mission	or most clarificant estiblica	ENDOM 7	ישרדפישם ו	MTTAL ABOUT	VE DEBOSTEC	DV				
ų,		-		-					<u></u>				
Activities & Governance	Ì	TO HOUSE & PRESERVE DOCUMENTS, PAPERS & OTHER MEMORABILIA OF PRESIDENT GEORGE W. BUSH AND PROMOTE AND OPERATE THE GEORGE W. BUSH INSTITUTE.											
Ë						~~~~~							
Š	2		this box 🕨 if the organization					1 1	13				
ଥ	3	Numbe	er of voting members of the governing	g body (Part VI, line 1a)		• • • • • •		3	13.				
S	4	Numbe	er of independent voting members of	the governing body (Part VI	l, line 1b)	• • • • • • •		4	12.				
<u> </u>	5	lotalin	number of individuals employed in ca	lendar year 2015 (Part V, lin	e 2a)	• • • • • •		5	133.				
Ę	6	lotal n	umber of volunteers (estimate if nece	ssary)				6	500.				
•	"		nrelated business revenue from Part						26,613				
	la	Net un	related business taxable income from	Form 990-T, line 34	• • • • •	<u> </u>		—- <u> </u>	23,613				
e							Prior Year	Current					
	8	Contril	outions and grants (Part VIII, line 1h)	· · · · · · · · · · · · · · · [COPY	FOR	63,585,06		32,508				
Revenue	9	Progra	m service revenue (Part VIII, line 2g)		PUBLIC INS	PECTION	1,068,44		32,464				
ě		magaft	пентисовне (пак унг, сошин (м), нг	ies 3, 4, and 70)			503,61		32,839				
	11		revenue (Part VIII, column (A), lines 5				1,676,56		55,661				
	12		evenue - add lines 8 through 11 (mus				66,833,69		03,472				
	13		and similar amounts pald (Part IX, co				683,27		59,890				
	14		s paid to or for members (Part IX, col					0.	0 59,755				
8	15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)										
Expenses	16a						403,65	7. 10	02,375				
ä	b		undraising expenses (Part IX, column			<u></u>							
	17		expenses (Part IX, column (A), lines 1	37,259,08		6,292							
	18		xpenses. Add lines 13-17 (must equa				49,659,98		88,312				
- 10	19	Revenu	ie less expenses. Subtract line 18 from	m line 12			17,173,70		34,840				
is or							ginning of Current Y						
Net Assets Fund Baland	20	Total a	ssets (Part X, line 16)				407,235,74						
뚩	21	Total li	abilities (Part X, line 26)		,		4,880,60		28,348				
			sets or fund balances. Subtract line 2	1 from line 20,	<u></u>		402,355,14	3. 388,86	55,775				
	rt II		nature Block						<u>-</u> -				
Uni	der per	nalties of ect, and c	perjury, I declare that I have examined the omplete. Declaration of preparer (other that	nis return, including accompan nyofficer) is based on all informa	ying schedule: ation of which	s and statements preparer has any	, and to the best of knowledge.	my knowledge and	bellel, it is				
		Ι.	NO.			<u></u>							
Sig	n	=	ignature of officer				11/12 Date	2/2016					
Hei				\			Date						
		1	EFFREY R. GUY	ــــــــــــــــــــــــــــــــــــــ	CFO								
			ype or print name and title	Property's sign town		Data		TOTIN					
aic	1		/pe preparer's name	Prepater's signature		Date		if PTIN	_				
	parer	DANI		DANIEL ROMANO		11/14/4	self-employe		2				
	Only	Firm's r	·					36-6055558					
	. Al 11		ddress > 666 THIRD AVENUE		U17-405	<u> </u>	Phone no. 2	212-599-0100	Т Т				
viav	the l	KS disci	uss this return with the preparer show	in above? (see instructions)	<u> </u>	<u> </u>		X Yes	No				
			eduction Act Notice, see the separa					Form 99					

THE GEORGE W. BUSH FOUNDATION

Forr	n 990 (2015) Page
Pa	art III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission: SEE SCHEDULE O
	SEE SCHEDULE (
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O. 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 other
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 28,541,877 including grants of \$ 1,469,890) (Revenue \$)
	THE GEORGE W. BUSH INSTITUTE.
	SEE SCHEDULE O.
4b	(Code:) (Expenses \$, including grants of \$) (Revenue \$, 1,282,464)
	THE GEORGE W. BUSH PRESIDENTIAL LIBRARY AND MUSEUM.
	SEE SCHEDULE O.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	SEE SCHEDULE O.
4d	Other program services (Describe in Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$)
JSA	Total program service expenses ► 35,780,810.

Part	IV Checklist of Required Schedules		. 1	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	.		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_ <u>X</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		,	
	complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			37
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10	х	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-000.02	-51-53
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			- Participal Control
а	complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
ь	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
Ū	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		1,7	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	ا ء ۾ ا		v
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	10		Х
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		- 37
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		Λ	
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
1.3	If "Yes," complete Schedule G, Part III	19		х
			990	(2015)

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? ,	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	0.4	v	1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		v	1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		·	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23	x	
	employees? If "Yes," complete Schedule J	23		\vdash
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		x
	through 24d and complete Schedule K. If "No," go to line 25a	24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
.i	to defease any tax-exempt bonds?	24d	\vdash	
d or-	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Did the organization engage in an excess benefit	24u		
25 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
L	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		<u> </u>
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		ļ	
	If "Yes," complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
26	current or former officers, directors, trustees, key employees, highest compensated employees, or	ļ		
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	-		
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	BULDY:	Continue	
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•••	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
••	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
-	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	<u></u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
•	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	
		Form	990	(2015)

Par				
	Check if Schedule O contains a response or note to any line in this Part V	· · ·		
	1 1	S. 122.11	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		The description	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			: Ciritina
	reportable gaming (gambling) winnings to prize winners?	1c	X	Control of the same
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 133			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		,	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	d£	X	
4a	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	4-		v
	account)? ,	4a	ereziasi	X
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).	5a		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	VU		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Х
	organization solicit any contributions that were not tax deductible as charitable contributions?	- Ou		
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
-	Organizations that may receive deductible contributions under section 170(c).	- 02		
7_	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	Х	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
i.	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
G	required to file Form 8282?	7с		Х
А	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
-	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	X.IProge	Control of the Contro
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	THE STATE	NEW YORK	70000000000000000000000000000000000000
	against amounts due or received from them.)		CANADA STREET	*Colored
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		**************************************
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Jilong Alian		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Ave I should be a supply of the supply of th	Control Contro
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ISSE RE	and the same of
	Note. See the instructions for additional information the organization must report on Schedule O.			
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	in the second		
	Enter the amount of reserves on hand			A P
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u> JSA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(0045)
SE 101	0.4.000	3- Orm	220	(2015)

THE GEORGE W. BUSH FOUNDATION 20-4119317 Form 990 (2015) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Νa Yes 1a 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 in Schedule O. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a The governing body?.... Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O...... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х 12c Х 13 Did the organization have a written whistleblower policy?.... 13 Х 14 Did the organization have a written document retention and destruction policy?......... 14 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? Х 15a Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ <u>ATTACHMENT</u> 1 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 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. X Upon request Other (explain in Schedule O) Own website Another's website

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

State the name, address, and telephone number of the person who possesses the organization's books and records:

JSA 5E1042 1.008

19

20

Form 990 (2015)

financial statements available to the public during the tax year.

Form 990 (2015) Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Part VII Independent Contractors

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

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

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.

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

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

Check this box if neither the organization no	any related	1 organization compensated						id any current one	Jer, director, or trustee.		
(A) Name and Title	(B) Average hours per	box,	unles	Pos neck ss pe	more rson	e than o	an	(Đ) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of	
	week (list any hours for related organizations below dotted line)	Individu	Institutional trustee	a Officer	Key employee	Highest compensated employee	ee) Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(1)DONALD L. EVANS	5.00										
CHAIRMAN/DIRECTOR	0.	Х		Х				0.	0.	0	
(2)MARVIN P. BUSH	3.00										
VICE PRES/TREASURER/DIRECTOR	0.	Х		Х				0.	0.	0	
(3)MARGARET SPELLINGS	40.00	•									
PRESIDENT/DIRECTOR	2.00	Х		Х				672,934.	0.	28,750	
(4)LAURA W. BUSH	3.00										
DIRECTOR	0.	Х						0.	0.	0	
(5)RAY L. HUNT	3.00				Г						
DIRECTOR	0.	Х						0.	0.	0	
(6)MARK LANGDALE	3.00										
DIRECTOR	0.	Х						0.	0.	0	
(7) JEANNE L. PHILLIPS	3.00										
DIRECTOR	0.	X						0.	0.	0	
(8)CRAIG R. STAPLETON	3.00										
DIRECTOR	0.	Х						0.	0.	0	
(9)R. GERALD TURNER	3.00							į			
DIRECTOR	0.	Х						0.	0.	0	
(10)CAREN H. PROTHRO	3.00										
DIRECTOR	0.	X						0.	0.	0	
(11)WILLIAM M. HICKEY	3.00							1			
DIRECTOR	0.	Х						0.	0.	0	
(12) LARRY D. THOMPSON	3.00										
DIRECTOR	0.	Х	ļ					0.	0,	0	
(13) JOHN M. ANGELO	3.00										
DIRECTOR	0.	Х					L	0.	0.	0	
(14)HARRIET MIERS	3.00							STATE OF THE PARTY			
SECRETARY	0.			Х				0.	0.	0	

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r box,	not cl	Pos heck	ition more	than of the state	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensati relate organiza (W-2/1099	ible on from d tions	(F) Estimated amount of other compensation from the organization and related organizations
(15) JEFFREY R. GUY CHIEF FINANCIAL OFFICER	40.00			х				252,427.		0.	33,787.
(16) HOLLY KUZMICH	40.00										
,	SENIOR VICE PRESIDENT 17) TOBI YOUNG	40.00			Х				276,957.		0.	28,674.
•	GENERAL COUNSEL	0.			Х				284,236.		0.	23,797.
(18) BRIAN S. COSSIBOOM	40.00			_							
,	VP, OPERATIONS	0.				Х			207,653.		0.	23,310.
ι	19) MICHAEL T. MCMAHAN VP, DEVELOPMENT	40.00				Х			178,248.		0.	31,950.
(20) CATHERINE JAYNES	40.00										
	DIRECTOR, EVAL & RESEARCH	0.					Х		212,922.		0.	37,195.
(21) MIGUEL HOWE DIRECTOR, MILITARY SERVICE	40.00					Х		189,735.		0.	21,797.
(22) OLADOYIN OLUWOLE	40.00			-				103,733.			21,737.
	EXECUTIVE DIRECTOR, PRRR	0.					Х		186,613.		0.	15,574.
(23) WILLIAM STEIGER	20.00					.,		104 800		0	12 007
í	DIRECTOR, PRRR 24) WILLIAM P. MCKENZIE	22.50 40.00				-	Х		184,880.		0.	13,887.
`	EDITORIAL DIRECTOR	0.					Х		169,804.		0.	34,509.
	1h Sub-total					L	l		672,934.	<u> </u>	0.	28,750.
	1b Sub-total	ection A						>	2,143,475.		0.	264,480.
	d Total (add lines 1b and 1c)	limited to t		liste						 \$100,000	0. of	293,230.
	3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3 X
	4 For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15 	0,0	00? • •	' If 	"Yes	ì," · ·	complete Schedu	le J for	such · · ·	4 X
	5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yestian B. Indonendant Contractors	accrue co es," comple	mpen te Sch	sati iedu	on : <i>ile J</i>	fron for	such	un <i>per</i>	related organization	on or Indiv	idual 	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 add	lress		Ü					(B) Description of se	ervices	((C) Compensation
	ATTACHMENT 2											
								+				
									···			
		la - - l	.4 1	. 1!	_ !4 -	J 4			Intend observed with a	ro a o li i a d	A STATE OF THE STA	
	2 Total number of independent contractors (in more than \$100,000 in compensation from the	iciuaing bi e organizat	ac not lion ▶	. iin ►	ше		unos 3	e I	isted above) who	receivea		

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

					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1a					
our	b	Membership dues	1 1					
A,C	c	Fundraising events	1 . 1	978,394.				
iar ilar	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contribu	itions) <u>1e</u>					
utio	f	All other contributions, gifts,	grants,					
e E		and similar amounts not included	above . 1f	32,954,114.				
50	g	Noncash contributions included		2,060,050.				
1	h	Total. Add lines 1a-1f		i	33,932,508.			
ž.		•		Business Code				
eve	2a	ENGAGE EVENTS		900099	94,561.	94,561.		
9	b	MUSEUM TICKET SALES		900099	1,117,573.	1,117,573.		
ž	С	OVAL OFFICE PHOTOS		900099	70,330.	70,330.		
Š	d							
rar	е							
Program Service Revenue	f	All other program service rev Total. Add lines 2a-2f	enue	<u> </u>	1 900 404			
	g				1,282,464.			
	3	Investment income (income and other similar amounts).	cluding dividen	•	1,062,206.		-549.	1,062,755.
	4	Income from investment of			1,002,200.			1,002,755.
	5	Royalties	-		0.			
	_	,	(i) Real	(ii) Personal				
	6a	Gross rents	582,711.					
	b	Less: rental expenses						
	c	Rental income or (loss)	i					
	d			>	582,711.			582,711.
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses	29,367.					
	c	Gain or (loss)	-29,367.					
	d	Net gain or (loss)		<u></u>	-29,367.	Edit of the second state of the second second		-29,367.
e	8a	Gross income from fundra	alsing					
Revenue		events (not including \$	978,394.					
Re		of contributions reported on	-					
Jer		See Part IV, line 18						
₽	b	Less: direct expenses			ŧ .			
	C	Net income or (loss) from fu	U		-110,215.			-110,215.
	9a	Gross income from gaming See Part IV, line 19						
	.		=-					
	b	Less: direct expenses Net income or (loss) from g			0		g. 1984. Table 1	
	10a	Gross sales of inventoreturns and allowances						
	ь	Less: cost of goods sold	· · · · ·				Andrew Control of the Control of	
	C	Net income or (loss) from sa			0.			
		Miscellaneous Revenu		Business Code	Control of the Contro			
	11a	PARKING		900009	497,771.			497,771.
	b	RESTAURANT AND CATERING		722511	343,919.		127,162.	216,757.
	c	GIFT SHOP COMMISSIONS		453220	226,356.			226,356.
	d	All other revenue		900099	15,119.	-CMA		15,119.
	e	Total. Add lines 11a-11d .		.,▶	1,083,165.			Property of the Control of the Contr
	12	Total revenue. See instruction	ons	<u> </u>	37,803,472.	1,282,464.	126,613.	2,461,887.

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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

Check if Schedule O contains a resp	r			
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
1 Grants and other assistance to domestic organizations				
and domestic governments, See Part IV, line 21	865,642.	865,642.		
2 Grants and other assistance to domestic individuals, See Part IV, line 22	512,948.	512,948.		
3 Grants and other assistance to foreign			And the second s	
organizations, foreign governments, and foreign			The state of the s	
individuals. See Part IV, lines 15 and 16	91,300.	91,300.	The state of the s	A control of the cont
4 Benefits paid to or for members	0.		Section 1 to 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5 Compensation of current officers, directors,				
trustees, and key employees	2,816,409.	1,558,258.	1,167,245.	90,906.
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	6,427,094.	4,918,559.	307,864.	1,200,671.
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	510,409.	427,409.	44,253.	38,747.
9 Other employee benefits	1,508,723.	968,138.	252,572.	288,013.
10 Payroll taxes	607,120.	400,699.	145,709.	60,712.
11 Fees for services (non-employees):				
a Management	О.	ļ		
b Legal	38,309.	36,307.	2,002.	
c Accounting	80,039.	43,541.	36,498.	
d Lobbying	0.			
e Professional fundralsing services. See Part IV, line 17.	102,375.		A STATE OF THE STA	102,375.
f Investment management fees	253,059.	136,652.	116,407.	
- 1				
g Other. (If line 11g amount exceeds 10% of line 25, column	4,164,126.	3,605,190.	450,268.	108,668.
(A) amount, list line 11g expenses on Schedule O.)	2,314,848.	146,522.	,	2,168,326.
12 Advertising and promotion	1,835,894.	1,080,074.	44,101.	711,719.
· · · · · · · · · · · · · · · · · · ·	593,330.	498,879.	28,335.	66,116.
14 Information technology	0.	230,073.	20,000.	
15 Royalties	2,009,592.	1,078,767.	725,942.	204,883.
	1,969,673.	1,858,182.	61,483.	50,008
17 Travel	2,000,010.	1,000,102.	02/1001	23,000
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
· · · · · · · · · · · · · · · · · · ·	2,632,556.	2,325,377.	84,802.	222,377.
19 Conferences, conventions, and meetings	2,032,330.	2,323,311.	04,002.	222,311.
20 Interest	0.			
21 Payments to affiliates	12,618,785.	7,548,096.	3,540,690.	1,529,999.
22 Depreciation, depletion, and amortization	224,107.	40,718.	183,389.	<u> </u>
23 Insurance		70,710.	100,000.	
24 Other expenses. Itemize expenses not covered				
above (List miscellaneous expenses in line 24e. If		And the state of t		
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
· · · · · · · · · · · · · · · · · · ·	6,718,172.	6,718,172.	Association of an all and the state of the s	
a JOINT PROGRAMMING ENDOWMENT	157,754.	157,754.		
bVIDEO PRODUCTION			21,620.	18,155.
cDUES AND SUBSCRIPTIONS	79,449.	39,674.	21,020.	
dFILING FEES	12,425.	722 052	10 100	12,425.
e All other expenses	744,174.	723,952.	12,123.	8,099
25 Total functional expenses. Add lines 1 through 24e	49,888,312.	35,780,810.	7,225,303.	6,882,199.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and the property of the collection of the				
fundraising solicitation. Check here	0			
JSA JSA	0.]			Form 990 (2015

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Form 990 (2015) Part X Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	5,026,998.	1	4,942,771
	2	Savings and temporary cash investments	1,369,799.	2	374,293
	3	Pledges and grants receivable, net	51,948,115.	3	33,932,035
	4	Accounts receivable, net	354,306.	4	502,846
-	5	Loans and other receivables from current and former officers, directors,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10000	
		trustees, key employees, and highest compensated employees.			The second secon
-			0.	5	(
į	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	Annual Control of the	20,722	A STATE OF THE STA
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			The second secon
		organizations (see instructions). Complete Part II of Schedule L	0.	6	(
Assets	7	Notes and loans receivable, net	0.	7	(
188	8	Inventories for sale or use	0.	8	(
4	9	Prepaid expenses and deferred charges	249,271.	9	776,459
1	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 239,746,985.	The state of the s	one in	
į	b	Less: accumulated depreciation	219,090,323.	10c	207,272,043
	11	Investments - publicly traded securities	95,769,267.	11	112,302,009
- !	12	Investments - other securities. See Part IV, line 11	0.	12	
1	13	Investments - program-related. See Part IV, line 11	0.	13	
- 1	14	Intangible assets .	0.	14	
1	15	Other assets. See Part IV, line 11	33,427,667.	15	33,291,66
1	16	Total assets. Add lines 1 through 15 (must equal line 34)	407,235,746.	16	393,394,123
}-	17	Accounts payable and accrued expenses	4,880,603.	17	4,528,34
- 1	18	Grants payable	0.	18	
,	19	Deferred revenue	0.	19	
- 1	20	Tax-exempt bond liabilities	0.	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	
- 1	22	Loans and other payables to current and former officers, directors,		24.12	
₽		trustees, key employees, highest compensated employees, and			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
iabilities		disqualified persons. Complete Part II of Schedule L	0.	22	
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	23	Secured mortgages and notes payable to unrelated third parties	0.	23	
- 1:	24	Unsecured notes and loans payable to unrelated third parties	0.	24	
	25	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	0.	25	
. [26	Total liabilities. Add lines 17 through 25	4,880,603.	26	4,528,348
Se		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.	The state of the s	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	The state of the s
띭	27	Unrestricted net assets	285,429,945.	27	274,496,929
39	28	Temporarily restricted net assets	106,721,497.	28	102,663,613
힐	29	Permanently restricted net assets	10,203,701.	29	11,705,233
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
<u>8</u>	30	Capital stock or trust principal, or current funds	The second secon	30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
ē	33	Total net assets or fund balances	402,355,143.	33	388,865,775
- 1	34	Total liabilities and net assets/fund balances	407,235,746.	34	393,394,123
	J-7	Total manufact drive included in the control of the			Form 990 (20)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Department of the Treasury

Attach to Form 990 or Form 990-EZ.

Open to Public

▶Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Employer identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3% 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 331/3 % 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of support (see (described on lines 1-9 isted in your governing other support (see above (see instructions) instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2015

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	76,876,074.	87,274,135.	36,796,146.	63,585,069.	33,932,508.	298,463,932.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	76,876,074.	87,274,135.	36,796,146.	63,585,069.	33,932,508.	298,463,932.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)				Maria Caragaman		130,785,038.
6	Public support. Subtract line 5 from line 4.			TOURS OF THE PARTY			167,678,894.
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	76,876,074.	87,274,135.	36,796,146.	63,585,069.	33,932,508.	298,463,932.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	784,839.	522,209.	2,558,746.	1,254,770.	1,644,917.	6,765,481
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0,.	10,364.	36,331.	195,898.	242,593.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATICH. 1	57,968.		25,477.	1,027,035.	935,129.	2,147,159.
11	Total support. Add lines 7 through 10	Final Control of the			A second control of the control of t		307,619,165.
12	Gross receipts from related activities, etc. (s			<i>.</i>		12	2,370,150.
13	First five years. If the Form 990 is f organization, check this box and stop here						
	tion C. Computation of Public Sup						54.51%
14	Public support percentage for 2015 (li						69.67%
15	Public support percentage from 2014					15	
16a	331/3% support test - 2015. If the o						
1.	this box and stop here. The organization 331/3% support test - 2014. If the organization						• • —
Б	check this box and stop here. The org-						
179	10%-facts-and-circumstances test - 2						
11a	10% or more, and if the organization						
	Part VI how the organization meets 1						
	organization						. ! !
b	10%-facts-and-circumstances test -	2014. If the ord	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	and line
_	15 is 10% or more, and if the orga						
	Explain in Part VI how the organizati						
	supported organization						. 1 1
18	Private foundation. If the organization						
	instructions						<u> ▶ ∐</u>

Schedule A (Form 990 or 990-EZ) 2015

0179053

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

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

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total				
1	Gifts, grants, contributions, and membership fees										
	received. (Do not include any "unusual grants.")										
2	Gross receipts from admissions, merchandise										
	sold or services performed, or facilities										
	furnished in any activity that is related to the										
	organization's tax-exempt purpose										
3	Gross receipts from activities that are not an										
_	unrelated trade or business under section 513										
4	Tax revenues levied for the										
7											
	organization's benefit and either paid										
_	to or expended on its behalf			- · · · · · · · · · · · · · · · · · · ·							
5	The value of services or facilities										
	furnished by a governmental unit to the										
	organization without charge										
6	Total. Add lines 1 through 5										
7 a	Amounts included on lines 1, 2, and 3										
	received from disqualified persons										
α	Amounts included on lines 2 and 3 received from other than disqualified				www						
	persons that exceed the greater of \$5,000										
	or 1% of the amount on line 13 for the year										
c	Add lines 7a and 7b										
8	Public support. (Subtract line 7c from	The state of the s									
	line 6.)	Total Control of the			**************************************						
Sec	tion B. Total Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total				
9	Amounts from line 6										
	Gross income from interest, dividends,										
	payments received on securities loans,						and the same of th				
	rents, royalties and income from similar sources						this same and the				
h	Unrelated business taxable income (less										
U	section 511 taxes) from businesses						1				
	acquired after June 30, 1975						į				
_	i i										
	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						<u> </u>				
12	Other income. Do not include gain or										
	loss from the sale of capital assets						- Annual				
	(Explain in Part VI.)										
13	Total support. (Add lines 9, 10c, 11,										
	and 12.)										
14	First five years. If the Form 990 is for	or the organiza	tion's first, seco	nd, third, fourth	, or fifth tax ye	ear as a sectio	ก 501(c)(3)				
	organization, check this box and stop here.			<u> </u>			▶				
Sec	tion C. Computation of Public Sup	port Percenta	age								
15	Public support percentage for 2015 (line 8,	column (f) divide	ed by line 13, colur	nn (f))		15	%				
16	Public support percentage from 2014 Sche	dule A, Part III, lin	ne 15			16	%				
	tion D. Computation of Investmen			-							
17	Investment income percentage for 2015 (lir			(f))		17	%				
18	Investment income percentage from 2014					18	%				
	331/3% support tests - 2015. If the org					L					
174	17 is not more than 331/3%, check this										
b	b 331/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization										
20 JSA	Private foundation. If the organization	uiu noi check	a dox on line	14, 198, 01 191			990 or 990-EZ) 2015				

Part IV **Supporting Organizations**

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

Secti	on A. All Supporting Organizations		1	
		Face and the	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	The second secon	100 100 100 100 100 100 100 100 100 100
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		The second secon
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	10.000000000000000000000000000000000000	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100 mg 10
¢	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	V 10 10 10 10 10 10 10 10 10 10 10 10 10	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	1	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7	1, hardy 100 pt
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		0.45.05
6	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			200
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			18000
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	10 10 10 10 10 10 10 10 10 10 10 10 10 1	- 150
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		100 mg 10
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		1
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? If "Yes," provide detail in Part VI.	9b	1.00.000	
С	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? If "Yes," provide detail in Part VI.	9с		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section	HEALTH.		

4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated

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

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

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determine whether the organization had excess business holdings.)

JSA

Schedule A (Form 990 or 990-EZ) 2015

10a

20-4119	1317		
.U 4115		ı	ege 5
		Vaa	Na
;)	11a	Yes	No
	11b		
rt VI.	11c		
	C	Yes	No
the			No
rted	1	7. C.	
art	2	A Company of the Comp	
			,
ctors ol d	1	Yes	No
he ne prior pies of	1	Yes	No
orted /I how s).	2	CALLED TO THE CONTROL OF THE CONTROL	1111 (111)
			11 miles have a service of the control of the contr
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ar (see ins entity (see			
	· · · · · · · · · · · · · · · · · · ·	Yes	No
es of		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ned	2a	11/2/12/2016	
more ne	<u>La</u>		100 100 100 100 100 100 100 100 100 100

	le A (Form 990 or 990-EZ) 2015			age 5
Part	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			404.0
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
-	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	5,464.0		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			STEATES TOTAL
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		X	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		\/	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			52000
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		Market Cal	udtania:
C4:		1_		
Secti	on D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	ficelos	163	
	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?	1		anderie e
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		Jestina	
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		aroner
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
Ū	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	(*) ********	
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons):	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		369933	woner.
	that these activities constituted substantially all of its activities.	2a	nisa.in	ASSYS
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		335 24	7270317
	activities but for the organization's involvement.	2b	1,000	-11:51 VIII I
3	Parent of Supported Organizations. Answer (a) and (b) below.			gradi Regular
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	172113		XE5-40
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izatior	15	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970. See ins	tructions. All
other Type III non-functionally integrated supporting organizations must con			
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 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	10 mm		All Annua annu
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 Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			151
factors (explain in detail in Part VI):		1	The state of the s
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	200 200 200 200 200 200 200 200 200 200		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	8.7		
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y-integr	ated Type III supporting of	rganization (see
instructions).	. •		-

Schedule A (Form 990 or 990-EZ) 2015

Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6_	Other distributions (describe in Part VI). See instructions.						
	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI). See instructions.						
9_	Distributable amount for 2015 from Section C, line 6						
<u> 10</u>	Line 8 amount divided by Line 9 amount	I					
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(ili) Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015	The state of the s		The second secon			
	(reasonable cause required-see instructions)	A		The second section of the se			
3	Excess distributions carryover, if any, to 2015:			A STATE OF THE STA			
a	The state of the s			The state of the s			
b		The same of the sa					
С		And the second s	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
d	From 2013	The state of the s	A A A A A A A A A A A A A A A A A A A				
e	From 2014			2 Company of the Comp			
f	Total of lines 3a through e		The second secon	Total Control of the			
g	Applied to underdistributions of prior years	A Control of the Cont					
<u>h</u>	Applied to 2015 distributable amount		And the state of the best of the state of th				
i_	Carryover from 2010 not applied (see instructions)			And the second of the second o			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2015 from Section	7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	TOTAL CONTROL OF THE PROPERTY	The second secon			
	D, line 7: \$	A STATE OF THE STA	A large section of the section of th				
a	Applied to underdistributions of prior years						
<u>b</u>	Applied to 2015 distributable amount Remainder. Subtract lines 4a and 4b from 4.		Day Control of the Co	ADMINISTRAÇÃO			
<u>C</u>	Remaining underdistributions for years prior to 2015, if		A STATE OF THE PARTY OF T				
J	any. Subtract lines 3g and 4a from line 2 (if amount			14 () () () () () () () () () (
	greater than zero, see instructions).						
6	Remaining underdistributions for 2015. Subtract lines 3h						
Ū	and 4b from line 1 (if amount greater than zero, see						
	instructions).		A CONTRACTOR OF THE CONTRACTOR				
7	Excess distributions carryover to 2016. Add lines 3j	- NA	ar Denga Pangana Limbertan at Cost				
-	and 4c.			A Vanish of the Control of the Contr			
8	Breakdown of line 7:						
a				A Control of the Cont			
b				1.00			
C	Excess from 2013						
d	Excess from 2014						
е	Excess from 2015						

Schedule A (Form 990 or 990-EZ) 2015

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOME	Ξ				
DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
WARRIOR OPEN GOLF TOURNAMENT	21,001.	46,529.	3,299.			70,829.
BOOK ADVANCE	15,938.	30,475.	15,938.			62,351.
		·				
MAILING LIST RENTAL	790.					790.
SPECIAL EVENTS	20,239.	24,546.	6,240.	15,479.	48,414.	114,918.
GIFT SHOP				219,201.	226,356.	445,557.
PARKING				520,438.	497,771.	1,018,209.
FOOD SERVICE				238,187.	147,469.	385,656.
BOOK SIGNING		•		15,064.	•	15,064.
					45 440	22 725
MISCELLANEOUS				18,666.	15,119.	33,785.
TOTALS	57,968	101,550	25,477	1,027,035	935,129	2,147,159

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

► 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. Employer identification number Name of the organization

THE GEORGE W. BUSH FOR	UNDATION	20-4119317		
Organization type (check one):		20-4119317		
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation		
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion		
501(c)(3) taxable private foundation				
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				
	e year, total contributions of more than \$1,000 <i>exclusively</i> for religious, ch I purposes, or for the prevention of cruelty to children or animals. Complet			
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. Do not 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				
aution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 90-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its orm 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

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) (2015)

Name of organization THE GEORGE W. BUSH FOUNDATION

Employer identification number 20-4119317

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		\$\$.	Person X Payroli Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2_		\$ 4,999,977.	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
3		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
4		\$\$_1,000,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
5		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
6_		\$ 994,431.	Person X Payroll Noncash (Complete Part If for noncash contributions.)					

4133AN 649C 11/15/2016 10:18:04 AM

Employer identification number 20-4119317

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				
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroli 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.)				

Employer identification number

20-4119317

ı) No.		(c)	
rom Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
i) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
i) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
i) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			

Employer identification number 20-4119317

	Exclusively religious, charitable, etc., c (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	e year from any one con ns completing Part III, ente year. (Enter this informatio	tributo r. Co r the total of	mplete columns (a) through (e) and exclusively religious, charitable, etc
(a) No. from	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I				
	Transferee's name, address, and	(e) Transfer of gift ZIP + 4	Relations	hip of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I	(b) i dipose di giit	(o) ose of gift		(-) 2000 (kula 3) (kula 3) (kula 1) (kula 1)
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relations	hip of transferor to transferee
(a) No. from Part I	(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	Relations	hip of transferor to transferee
(a) No. from Part I	(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	Relations	hip of transferor to transferee
			· <u> </u>	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2015

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

		' on Form 990, Part IV, line 3, or Fo : Complete Parts I-A and B. Do not cor		46 (Political Campaign Activi	ties), then
	* * * -	ion 501(c)(3)) organizations: Complet		Do not complete Part I-B.	
	Section 527 organizations: Com		or and mand o botom.	Do not complete t art is	
	-	on Form 990, Part IV, line 4, or Fo	rm 990-EZ. Part VI. line	47 (Lobbying Activities), the	1
		that have filed Form 5768 (election			
		that have NOT filed Form 5768 (ele			
If the	e organization answered "Yes."	on Form 990, Part IV, line 5 (Pro	xy Tax) (see separate	instructions) or Form 990-I	Z, Part V, line 35c (Proxy
Tax)	(see separate instructions), the	n	, , , ,	•	
	Section 501(c)(4), (5), or (6) org	ganizations: Complete Part III.			
Nam	e of organization			' '	ntification number
THE	GEORGE W. BUSH FOU			20-41	
Pai	rt I-A Complete if the	organization is exempt unde	er section 501(c) or	ris a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirect	t political campaign a	activities in Part IV.	
2	Political expenditures		<i></i>	▶\$	
3					
Par		organization is exempt unde			
1		cise tax incurred by the organiza			
2	Enter the amount of any ex	cise tax incurred by organization	managers under sec	tion 4955 ▶ \$	
3	If the organization incurred	a section 4955 tax, did it file For	m 4720 for this year?		. Yes No
4a	Was a correction made? .		<i></i>		. Yes No
b	If "Yes," describe in Part IV.				
	t I-C Complete if the	organization is exempt unde	er section 501(c), e	except section 501(c)(3).
1		expended by the filing organizat			
2		ng organization's funds contribut			
2	527 exempt function activit	ies			
3	line 17b	enditures. Add lines 1 and 2.		▶\$	
4 5	Enter the names, addresses organization made payment the amount of political con	le Form 1120-POL for this year? s and employer identification nur its. For each organization listed, atributions received that were pro- ind or a political action committee	nber (EIN) of all sect enter the amount pa omptly and directly d	ion 527 political organiz id from the filing organiz elivered to a separate po	ations to which the filing ration's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Nume	(5) / (6)	(4)	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
For I	Paperwork Reduction Act Notic	ce, see the Instructions for Form 990	or 990-EZ.	Schedul	e C (Form 990 or 990-EZ) 2015

Sch			BUSH FOUNDATIO			11931/ Page Z
Pa	art II-A Complete if the orga section 501(h)).					
A	Check ▶ if the filing organi name, address, Ell	N, expenses, and	share of excess lo	obbying expenditur	es).	oup member's
В	Check ► if the filing organi	ization checked b	ox A and "limited	control" provisions	apply.	
	Limits o (The term "expenditur	n Lobbying Expend es" means amoun) 0	(a) Filling rganization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to inf	luence public opini	on (grass roots lobb	ying)		
, k	Total lobbying expenditures to infi	luence a legislative	body (direct lobbyir	ng)		
c	Total lobbying expenditures (add	lines 1a and 1b)				
c	d Other exempt purpose expenditur	res . ,			42,877,791.	
	Total exempt purpose expenditure				42,877,791.	
	Lobbying nontaxable amount. E	•	·		***************************************	
	columns.		-		1,000,000.	
	If the amount on line 1e, column (a)	or (b) is: The lobbyin	g nontaxable amount i	s:		A CONTRACTOR OF THE CONTRACTOR
	Not over \$500,000		amount on line 1e.	- 10 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		A Parameter of the Control of the Co
	Over \$500,000 but not over \$1,000,0	000 \$100,000 pl	us 15% of the excess	over \$500,000.		A Commence of the Commence of
	Over \$1,000,000 but not over \$1,500		us 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,00		us 5% of the excess o		A CONTROL OF THE PROPERTY OF T	The state of the s
	Over \$17,000,000	\$1,000,000.		100 mm of 100		Annual Control of the
	Grassroots nontaxable amount (e	enter 25% of line 1f)			250,000.	
-	n Subtract line 1g from line 1a. If ze				0.	0.
	Subtract line 1f from line 1c. If ze				0.	0.
i	If there is an amount other than				file Form 4720	
3	reporting section 4911 tax for this					Yes X No
	. ops. m.g	4-Year Aver	aging Period Under	r section 501(h)		
	(Some organizations that I				all of the five colum	ns below.
	, ,	See the separat	e instructions for li	ines 2a through 2f.)		
		Lobbying Exper	nditures During 4-Ye	ear Averaging Period	ı	
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total				
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.				
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.				
c Total lobbying expenditures									
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.				
f Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2015

Sche	dule C (Form 990 or 990-EZ) 2015					P	age 3
Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	η		m 57€			
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		a) (b)			
	cription of the lobbying activity.	Yes	No		Amou	nt	
a b c d e f g h i j 2a b	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912		No		Amou	nt	
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	192.5	School				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			777.00	727/2006		100000
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 50	l (c)(5)	, or s	sectio	n		
1 2 3 Pa 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 507 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	(c)(5) OR (b) Pa	ection	1 2 3	Yes	No
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year?	n of th	ne	3 4			
5	Taxable amount of lobbying and political expenditures (see instructions)		<u></u>	5			
Prov 2 (s	rt IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate ee instructions); and Part II-B, line 1. Also, complete this part for any additional information. HEDULE C, PART II-A			t); Part	II-A, lin	ies 1	and
THI	E ORGANIZATION HAD A 501(H) ELECTION IN PLACE BUT DID NOT INCUR AN	Υ					
	BBYING EXPENSES DURING THE YEAR.						
			•••				

Schedule C (Form 990 or 990-EZ) 2015

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization

THE GEORGE W. BUSH FOUNDATION 20-4119317 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1. 1 19,461. Aggregate value of contributions to (during year) 2 865,642. Aggregate value of grants from (during year) . . 22,517,916. Aggregate value at end of year, Did the organization inform all donors and donor advisors in writing that the assets held in donor advised X Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year > Number of states where property subject to conservation easement is located > _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 928,001. (ii) Assets included in Form 990, Part X..... ▶ \$_ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1............

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

Schedule D (Form 990) 2015

Sched	tule D (Form 990) 2015												Page 2
Par													
3	Using the organization's acquisitio collection items (check all that appl		sion, and o	ther r	ecords	s, check	any	of the	follow	ing that a	re a sigr	ificant us	e of its
_	X Public exhibition	у).		ď	[]	Loon	r oveh	anaa	progran	me			
a				e		Other	JI GAGII	ange	prograi				
b	Scholarly research	ations		е		Other							
C	Preservation for future gener					4	t <i>t</i>						in Dort
4	Provide a description of the organ XIII.	lization's	collections	and 6	expiair	i now t	ney tu	riner	the org	janization	s exemp	i purpose	m rait
5	During the year, did the organizatio	n solicit d	or receive d	lonatio	ns of	art, histe	orical ti	reasu	res, or e	other simil	ar _	_	
	assets to be sold to raise funds rath	er than to	o be mainta	ained a	s part	of the o	organiz	ation'	s collec	tion?		Yes	X No
Par	t IV Escrow and Custodial Ar												
	Complete if the organizati	on answ	ered "Yes	on F	orm s	990, Pa	art IV, I	line 9	, or re	ported an	amount	on Form	1
	990, Part X, line 21.			٠.			. "						
1a	Is the organization an agent, truste											-	 .
	included on Form 990, Part X?									• • • • •	L	Yes	∐ No
b	If "Yes," explain the arrangement in	ı Part XII	I and comp	olete th	e follo	wing tab	ole:						
										Α	mount		
C	Beginning balance							1c					
d	Additions during the year							1d					
e	Distributions during the year							1e					
f	Ending balance							1f					
	Did the organization include an am											Yes	No
b	If "Yes," explain the arrangement in	ı Part XII	I. Check he	ere if the	пе ехр	lanation	has be	en pr	ovided	on Part XII		.	
Par													
	Complete if the organizat	ion answ	vered "Yes	on F	orm	990, Pa	art IV,	line 1	0.				
		(a) Cu	rrent year	(b) Prior y	/ear	(c) Tv	vo year	s back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance	74,3	53,094.										
b	Contributions	11,5	20,825.	73,	845	,768.							
	Net investment earnings, gains,												
-	and losses	-3	80,613.		568	,803.							
d	Grants or scholarships												
e	Other expenditures for facilities												
Ŭ	and programs	-9	54,000.										
f	Administrative expenses	-2	53,059.		61	,477.							
g	End of year balance	84,2	86,247.	74,	353	,094.							
2	Provide the estimated percentage	of the cu	rrent vear	end ha	lance	(line 1a	columi	n (a))	held as	•			
a	Board designated or quasi-endowm	ent ►	64.3000	%	ici ioo	(ano igi	COIGITII	. (4))	nora ao	•			
b	Permanent endowment ▶ 9.1			_									
c	Temporarily restricted endowment		5700 %										
	The percentages on lines 2a, 2b, a			100%.									
3a	Are there endowment funds not in		•		nizati	on that	are he	ld and	d admir	istered for	the		
	organization by:	•		ŭ								Y	es No
	(i) unrelated organizations											3a(i)	X
	(ii) related organizations											3a(ii)	X
b	If "Yes" on line 3a(ii), are the relate											3b	
4	Describe in Part XIII the intended u	-			•							1	
Par	W Land Buildings and Four	nment.											
	Complete if the organizar	tion ansv											
	Description of property		(a) Cost or (invest		SIS	(b) Cost c (o	r other b ther)	asis		umulated eciation	(0	i) Book value	;
1a	Land		,					1					
b	Buildings					149,1	21,8	63.	10,2	92,835.		138,829	3,028.
C	Leasehold improvements				-		71,0			65,468.			5,615.
d	Equipment			•			61,6			18,066.		20,143	
	Other						92,4			98,573.		47,993	
	Add lines 12 through 1e (Column	(d) must	equal Form	n 000	Part Y							207.273	

Schedule D (Form 990) 2015

(nvestments - Other Securities. Complete if the organization answered	l "Yes" on Form 990	. Part IV. line 11b. See Form 990. I	Part X, line 12.
*	Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market	n:
1) Financial (derivatives			
	eld equity interests			
•				
/ ^ `				
(B)				
(C)				
(D)				
<u>(E)</u>		,		
_(F)				
<u>(G)</u>				
_(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII i	I nvestments - Program Related. Complete if the organization answered	I "Voc" on Form 000	Part IV line 11c See Form 990 I	Part X line 13
			(c) Method of valuation	
	(a) Description of investment	(b) Book value	Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13.)			The second secon
Part IX C				
(Other Assets. Complete if the organization answered	l "Yes" on Form 990	, Part IV, line 11d. See Form 990, i	
	Complete if the organization answered (a) De	l "Yes" on Form 990 scription	, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	
(1) GROUND	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4) (5)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4) (5) (6)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4) (5) (6) (7)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered (a) De		, Part IV, line 11d. See Form 990,	(b) Book value
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered (a) De) LEASE, NET OF AMORT.	scription		(b) Book value 33,291,66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered (a) De D LEASE, NET OF AMORT.	scription		(b) Book value 33,291,66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Complete if the organization answered (a) De (a) LEASE, NET OF AMORT. On (b) must equal Form 990, Part X, col. (B) in Other Liabilities.	scription		(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Complete if the organization answered (a) De D LEASE, NET OF AMORT. On (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answered	scription		(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Complete if the organization answered (a) De (a) LEASE, NET OF AMORT. (b) must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25.	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) ootal. (Column Part X	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	scription	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Complete if the organization answered (a) De (a) LEASE, NET OF AMORT. (b) must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25.	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colum Part X (1) (1) Federal (2) (3)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Column Part X (1) (1) Federal (2) (3) (4)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colum Part X (1) (1) Federal (2) (3)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column Part X (1) (1) Federal (2) (3) (4) (5) (6)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X (1) Federal (2) (3) (4) (5) (6) (7)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column Part X () (1) Federal (2) (3) (4) (5) (6)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66
(1) GROUND (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered (a) De (b) LEASE, NET OF AMORT. (c) LEASE, NET OF AMORT. (d) Must equal Form 990, Part X, col. (B) in the Complete if the organization answered line 25. (a) Description of liability	ine 15.) I "Yes" on Form 990 (b) Book valu	, Part IV, line 11e or 11f. See Form	(b) Book value 33, 291, 66

Part	Reconciliation of Revenue per Audited Financial Statements W Complete if the organization answered "Yes" on Form 990, Part I			n.	
1	Total revenue, gains, and other support per audited financial statements			1	37,077,585.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			Ness 2.752	
ъ a	Net unrealized gains (losses) on investments	2a	-1,404,528.		
a b	Donated services and use of facilities	2b	520,012.		
Ç	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d			2e	-884,516.
3	Subtract line 2e from line 1			3	37,962,101.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-158,629	1	
c	Add lines 4a and 4b			4c	-158,629.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u> </u>	5	37,803,472.
Part	XII Reconciliation of Expenses per Audited Financial Statements V Complete if the organization answered "Yes" on Form 990, Part I			ırn.	
1	Total expenses and losses per audited financial statements			1	50,566,953.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	i	•	100000000000000000000000000000000000000	
а	Donated services and use of facilities	2a	520,012		
b	Prior year adjustments			-200	
c	Other losses		150 500		
d	Other (Describe in Part XIII.)	2d	158,629		CEO C 41
е	Add lines 2a through 2d			2e	678,641.
3	Subtract line 2e from line 1		, <i></i> .	3	49,888,312.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-			
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)			4c	
С 5	Add lines 4a and 4b			ļ	49,888,312.
	XIII Supplemental Information.	/ · · ·		1 -	
2; Par	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; tXI, lines 2d and 4b. Also complete this part to page 5	provid	e any additional infor	mation	
	A A A A A A A A A A A A A A A A A A A				
•					

Schedule D (Form 990) 2015

PAGE 35

Part XIII Supplemental Information (continued)

WORKS OF ART

SCHEDULE D, PART III, LINE 4

WORKS OF ART ARE DISPLAYED IN THE PUBLIC SPACES OF THE GEORGE W. BUSH PRESIDENTIAL CENTER.

ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE FOUNDATION'S ENDOWMENT WAS STARTED IN 2014 AND CONSISTS OF INDIVIDUAL ENDOWMENT FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF DIRCTORS TO FUNCTION AS ENDOWMENTS. ENDOWMENT DISTRIBUTIONS ARE INTENDED TO SUPPORT GENERAL OPERATING EXPENSES AND OTHER DESIGNATED PURPOSES AS DIRECTED BY THE BOARD OR DONORS.

FIN 48 (ASC 740)

SCHEDULE D, PART X, LINE 2

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (IRC) OF 1986, AS AMENDED, AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE IRC, AS EVIDENCED BY THE FOUNDATION'S CONFIRMATION LETTER DATED MARCH 2006. THE FOUNDATION HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER IRC SECTION 509(A)(1), AND AS SUCH, CONTRIBUTIONS TO THE FOUNDATION QUALIFY FOR DEDUCTION AS CHARITABLE CONTRIBUTIONS. HOWEVER, INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE FOUNDATION'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER IRC SECTION 511. AS OF DECEMBER 31, 2015 AND 2014, UNRELATED BUSINESS INCOME TAX LIABILITY AND EXPENSE WERE IMMATERIAL TO THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2015

Part XIII Supplemental Information (continued)

THE FOUNDATION FOLLOWS GUIDANCE THAT ESTABLISHED CRITERION THAT AN INDIVIDUAL TAX POSITION MUST MEET FOR SOME OR ALL OF THE BENEFITS OF THAT POSITION TO BE RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. THIS STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION

"MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. NO TAX ACCRUAL FOR UNCERTAIN TAX POSITIONS WAS RECORDED AS MANAGEMENT BELIEVES THERE ARE NO UNCERTAIN TAX POSITIONS FOR THE FOUNDATION.

THE FOUNDATION HAS CONCLUDED THAT IT DOES NOT HAVE ANY UNRECOGNIZED TAX
BENEFITS RESULTING FROM CURRENT OR PRIOR PERIOD TAX POSITIONS. THE
FOUNDATION DOES NOT HAVE ANY OUTSTANDING INTEREST OR PENALTIES, AND NONE
HAVE BEEN RECORDED IN THE STATEMENT OF ACTIVITIES FOR THE YEARS ENDED
DECEMBER 31, 2015 AND 2014. THE TAX YEARS ENDING DECEMBER 31, 2011, 2012,
2013 AND 2014 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE
PURPOSES.

RECONCILIATION OF REVENUE

SCHEDULE D, PART XI, LINE 4B

FUNDRAISING DIRECT EXPENSES -158,629

Part XIII Supplemental Information (continued)

RECONCILIATION OF EXPENSES

SCHEDULE D, PART XII, LINE 2D

FUNDRAISING DIRECT EXPENSES

158,629

Statement of Activities Outside the United States

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

► Attach to Form 990.

2015

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the Yes X No grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total region (by type) (e.g., fundraising, program services, a program service, describe specific type of service(s) in region expenditures for and investments offices in the employees, region agents, and in region independent investments, grants to recipients contractors in region located in the region) (1) SUB-SAHARAN AFRICA PROGRAM SERVICES HEALTH PROGRAMS 40,375. (2) MIDDLE EAST AND NORTH AFRICA PROGRAM SERVICES CANCER SCREENING 50,925. (3) (4) (5) (6) (7) (8) _(9) (10)(11)(12)(13)(14)(15) (16) (17)3a Sub-total....... 91,300. Total from continuation sheets to Part I

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

Totals (add lines 3a and 3b)

Schedule F (Form 990) 2015

91,300.

20-4119317

THE GEORGE W. BUSH FOUNDATION

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, other)
1)						***************************************			
2)									
(3)	s sweether days								
41									
(5)									
(6)									
(7)									
8)									
(9)									
(10)			* " " " "						
(11)									
(12)							***************************************		
(13)-									
(14)									
(15)	in a de despesarios. Emperadades contratados						1. 10. MA		
(16) 2 Ente	er total number of recipies the IRS, or for which the gr	nt organizations listed above t	hat are recognized a	es charities by the	foreign country, r	ecognized as ta	k-exempt ▶	:	1

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PAGE 40

Schedule F (Form 990) 2015

THE GEORGE W. BUSH FOUNDATION

20-4119317

Schedule F (Form 990) 2015

Part III

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

Part III can be diministed if additional space is peeded Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (e) Manner of cash disbursement (f) Amount of non-cash assistance (g) Description of non-cash assistance (c) Number of recipients (d) Amount of cash grant (a) Type of grant or assistance (b) Region _(1)___ (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)

Schedule F (Form 990) 2015

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(14) (15) (16) (17) (18)

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

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Part V Sup

Supplemental Information

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

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

on entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047
2015
Open to Public

Department of the Treasury Internal Revenue Service

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

Employer Identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Χ Mail solicitations e X Solicitation of non-government grants Х Internet and email solicitations Solicitation of government grants b Х Х Special fundraising events ¢ Phone solicitations d X In-person solicitations 2a 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? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser have (iv) Gross receipts (or retained by) (i) Name and address of individual (or retained by) custody or control of contributions? (ii) Activity from activity fundraiser listed in or entity (fundraiser) organization col. (i) ATTACHMENT 1 6 8 9 10 3,526,441. 102,375 3,424,066. 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, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MI, MN, MS, MO, 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,

		e G (Form 990 or 990-EZ) 2015				Page 2
Pa	rt l					
		than \$15,000 of fundraising ever		ss income on Form 990	-EZ, lines 1 and 6b. l	List events with
		gross receipts greater than \$5,0	00.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			BASEBALL DINNER	LAS VEGAS		(add col. (a) through col. (c))
			. (event type)	(event type)	(total number)	Coi. (C)
an o			-			
Revenue	1	Gross receipts	421,748.	605,060.		1,026,808
ፙ						000 001
	2	Less: Contributions	382,147.	596,247.		978,394
	3	Gross income (line 1 minus				40 414
	_	line 2)	39,601.	8,813.		48,414
	4	Cash prizes				
	_	Nian and pulman				
	Ð	Noncash prizes				<u> </u>
Ø	_	Dantifacility and	25,671.			25,671
Sus	В	Rent/facility costs	25,6/1.			23,071
×pe	,	Food and haverages	32,815.	51,920.		84,735
Direct Expenses	1	Food and beverages	32,013.	J1, 320.		04,733
jrec	۰	Entartainment	2,200.			2,200
Δ	٩	Entertainment	2,200.			2,200
		Other direct expenses	31,575.	14,448.		46,023
	1	Other direct expenses	31/3731	1 21/110.		10,010
	10	Direct expense summary. Add lines	4 through 9 in column (d)	•	158,629
		Net income summary. Subtract line				-110,215
Pa						
		than \$15,000 on Form 990-E		00 011 1 01111 000, 1 0	1111, mile 10, 51 10p	.,,
a				(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c))
e e	l					
œ	1	Gross revenue				
S	2	Cash prizes				
Expenses			The state of the s			
ad X	3	Noncash prizes				
H H						
irect	4	Rent/facility costs				
Ö						
	5	Other direct expenses			1	11.5.17.5.17.5.18.18.18.18.18.18.18.18.18.18.18.18.18.
			Yes%	Yes%	Yes%	The second section of the second section secti
	6	Volunteer labor	No No	No	No	
						1
	7	Direct expense summary. Add lines :	2 through 5 in column (d)		
	8	Net gaming income summary. Subtra	act line / from line 1, co	lumn (d)	<u> ▶</u>	
_	_			45. 545		
9		nter the state(s) in which the organiza				Yes No
		the organization licensed to conduct				. Yes No
r) ["No," explain:				
	_		•			
40-	1.4	/ere any of the organization's gaming	licaneae rayokad ayan	anded or terminated durin	ng the tay year?	Yes No
		11X - 11 - 1-1-1-1	•		19 HIV IMA YOUR :	162 . 140
L	, 11	100, Gapiain.				

Schedule G (Form 990 or 990-EZ) 2015

THE GEORGE W. BUSH FOUNDATION

20	47	10	317
20-	- 4 J	- T >	1 + C

Sched	ule G (Form 990 or 990-EZ) 2015
11 12	Does the organization conduct gaming activities with nonmembers? Yes No 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
b 14	An outside facility
14	records:
	Name ►
	Address >
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
b	revenue?
	amount of gaming revenue retained by the third party ▶ \$
С	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
b	retain the state gaming license? Yes No Enter the amount of distributions required under state law to be distributed to other exempt organizations
Par	or spent in the organization's own exempt activities during the tax year > \$ V Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and
rai	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
SCH	EDULE G, PART I, COLUMN V
THE	FOUNDATION'S AGREEMENT WITH THE PROFESSIONAL FUNDRAISER LISTED
PRO'	VIDES FOR THE PAYMENT OF SPECIFIED FEES LISTED IN PART I COLUMN V IN
ADD	ITION TO THE REIMBURSEMENT OF FUNDRAISING EXPENSES INCLUDING LIST
REN'	TAL, DESIGN, PRINTING AND POSTAGE. FOR THE EXPENSE REIMBURSEMENT, THE
FOU	NDATION IS BILLED FOR THE VARIOUS ITEMS AT COST AS PRE-APPROVED BY THE
FOU	NDATION.
	Schedule G (Form 990 or 990-EZ) 2015

THE GEORGE W. BUSH FOUNDATION

20-4119317 ATTACHMENT 1

FUNDRAISER

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER

WARFIELD AND WALSH, INC.

ACTIVITY

DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?

FROM ACTIVITY

GROSS RECEIPTS AMOUNT PAID TO AMOUNT PAID TO

(OR RETAINED BY (OR RETAINED BY ORGANIZATION

YES

DIR MAIL

3,526,441.

102,375.

3,424,066.

601 S. WASHINGTON ST ALEXANDRIA VA 22314

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.

OMB No. 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Part II 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of non-cash assistance (h) Purpose of grant or assistance (e) Amount of non-cash assistance 1 (a) Name and address of organization or government (b) EiN (d) Amount of cash (c) IRC section if applicable (1) PINE GROVE ELEMENTARY SCHOOL IBRARY BOOKS STATE OF AL 7,000 43980 PINE GROVE ROAD BAY MINETTE, AL 36507 631130062 (2) HILLCREST HIGH SCHOOL STATE OF AL 7,000. IBRARY BOOKS 1989 JAGUAR DRIVE EVERGREEN, AL 36401 63100344E (3) LITCHFIELD MIDDLE SCHOOL 7,000 1BRARY BOOKS 1109 HOKE STREET GADSDEN, AL 35903 063600089 STATE OF AL (4) CALLOWAY-SMITH MIDDLE SCHOOL IBRARY BOOKS 636000774 STATE OF AL 7,000. 350 NORTH LAWRENCE STREET MOBILE, AL 36603 (5) RIDGECREST ELEMENTARY SCHOOL 1806 8TH PLACE SOUTH PHENIX CITY, AL 36869 636001032 STATE OF AL 7,000. IBRARY BOOKS (6) HOLT ELEMENTARY SCHOOL 1001 CRESCENT RIDGE ROAD 636001128 STATE OF AL 7,000 IBRARY BOOKS (7) MABELVALE MAGNET MIDDLE SCHOOL 6,992 IBRARY BOOKS 10811 MABELVALE WEST ROAD 071601471 STATE OF AR (8) PARK ELEMENTARY SCHOOL 866007505 7,000 IBRARY BOOKS P.O. BOX 640 HOLBROOK, AZ 86025 STATE OF AZ (9) WASHINGTON ELEMENTARY SCHOOL 8033 NORTH 27TH AVENUE PHOENTX, AZ 85051 866000484 STATE OF AZ 7,000. (10) LOS ANGELES ACADEMY MIDDLE SCHOOL 956001908 STATE OF CA 7,000 IERARY BOOKS 644 EAST 56TH STREET LOS ANGELES, CA 90011 (11) VIRGIL MIDDLE SCHOOL

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

Enter total number of other organizations listed in the line 1 table . . .

956003424

956001908

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

STATE OF CA

STATE OF CA

Schedule I (Form 990) (2015)

LIBRARY BOOKS

LERARY BOOKS

JSA 5E1288 1,600

152 NORTH VERMONT AVENUE

(12) YOUNG OAK KIM ACADEMY 615 SOUTH SHATTO PLACE

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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.

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

2015
Open to Public Inspection

OMB No. 1545-0047

Name of the organization
THE GEORGE W. BUSH FOUNDATION
Part I General Information on Grants and Assistance

Employer Identification number 20-4119317

1	Doe:	s the organization maintain records to substantiate the amount of the grants or assistance, the grantees eligibility for the grants or assistance, and	
	the s	selection criteria used to award the grants or assistance?	No
2	Des	cribe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	
Рa			m
		990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	

(f) Method of valuation (book, FMV, appraisal, other) (g) Description of ion-cash assistance (e) Amount of non-cash assistance 1 (a) Name and address of organization or government (h) Purpose of grant or assistance (b) EfN (d) Amount of cash grant (1) MORENO VALLEY HIGH SCHOOL IBRARY BOOKS 521770792 23300 COTTONWOOD AVENUE STATE OF CA 7,000 (2) PARTHENIA STREET ELEMENTARY SCHOOL 16825 NAPA STREET NORTH HILLS, CA 91343 956001908 STATE OF CA 7,000. LIBRARY BOOKS (3) RIO ROSALES ELEMENTARY SCHOOL 956002550 LIBRARY BOOKS 1001 KOHALA STREET OXNARD, CA 93030 STATE OF CA 5,300 (4) REDWOOD ELEMENTARY SCHOOL IBRARY BOOKS 095600254 STATE OF CA 331 SHAFTER AVENUE SHAFTER, CA 93263 (5) SOUTH EL MONTE HIGH SCHOOL 1001 NORTH DURFEE AVENUE 095600107 STATE OF CA 7,000. LIBRARY BOOKS (6) MONTE VISTA HIGH SCHOOL 3230 SWEETWATER SPRINGS BOULEVARD 956001517 STATE OF CA 7,000 JERARY BOOKS (7) CORONADO HILLS ELEMENTARY SCHOOL STATE OF CO 989185800 7,000. IBRARY BOOKS 8300 DOWNING DRIVE DENVER, CO 80229 (8) GUST ELEMENTARY SCHOOL IBRARY BOOKS 3440 WEST YALE AVENUE DENVER, CO 80219 846001099 STATE OF CO 7,000. (9) RAMON E. BETANCES EARLY READING LAB SCHOOL IBRARY BOOKS 42 CHARTER OAK AVENUE HARTFORD, CT 06106 006600187 STATE OF CT 6,000. (10) J.O. WILSON ELEMENTARY SCHOOL 660 K STREET, NE WASHINGTON, DC 20002 052153332 OF COLUMBIA 7,000 IBRARY BOOKS (11) EAST DOVER ELEMENTARY SCHOOL 852 SOUTH LITTLE CREEK ROAD DOVER, DE 19901 LIERARY BOOKS 516000279 STATE OF DE 6,000. (12) CONGRESS MIDDLE SCHOOL 101 SOUTH CONGRESS AVENUE 596090783 STATE OF FL 6,500. 2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . IBRARY BOOKS

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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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.

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

OMB No. 1545-0047 2015

Open to Public Inspection

Name of the organization

Employer Identification number 20-4119317

1111	GEORGE W. BOSH FOUNDATION	20 1113317	
Pa			
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?	X Yes	No
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Pa	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization		m

990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TEDDER ELEMENTARY SCHOOL							
4157 NE FIRST TERRACE	596000530	STATE OF FL	7,000.				LIBRARY BOOKS
(2) L. C. SWAIN MEDDLE SCHOOL							
5332 LAKE WORTH ROAD GREENACRES, FL 33463	596000783	STATE OF FL	7,000.				LIBRARY BOOKS
(3) LEADERSHIP ACADEMIES AT EUGENE J. BUTLER MI							
900 ACORN STREET JACKSONVILLE, FL 32209	059600058	STATE OF FL	6,500				LIBRARY BOOKS
(4) FRANK HARTSFIELD ELEMENTARY SCHOOL	_						
1414 CHOWKEEBIN NENE TALLAHASSEE, FL 32301	596000709	STATE OF FL	6,800.				LIBRARY BOOKS
(5) EASTBROOK MIDDLE SCHOOL							
1382 EASTBROOK DRIVE DALTON, GA 30721	586000347	STATE OF GA	7,000.	<u></u>			LIBRARY BOOKS
(6) SHOSHONE SCHOOLS							
61 EAST HWY 24 SHOSHONE, ID 83352	826003374	STATE OF ID	7,000				LIBRARY BOOKS
(7) HENRY W COWHERD MIDDLE SCHOOL							
441 NORTH FARNSWORTH AVENUE	366004752	STATE OF IL	7,000.				LIBRARY BOOKS
(8) W.S. BEAUPRE ELEMENTARY SCHOOL							
954 EAST BENTON AVENUE AURORA, IL 60505	363604752	STATE OF IL	7,000				LIBRARY BOOKS
(9) ANNA R. LANGFORD COMMUNITY ACADEMY							
6010 SOUTH THROOP STREET CHICAGO, IL 60636	366005821	STATE OF IL	7,000.				LIBRARY BOOKS
(10) EDWIN G. FOREMAN HIGH SCHOOL	_						
3235 NORTH LECLAIRE AVENUE	366005821	STATE OF IL	7,000.				LIBRARY BOOKS
(11) FRANK W. BEILLY ELEMENTARY SCHOOL	_[
3650 WEST SCHOOL STREET CHICAGO, IL 60618	366005821	STATE OF IL	7,000.				LIBRARY BOOKS
(12) HENRY D. LLOYD ELEMENTARY SCHOOL			1				
2103 NORTH LAMON AVENUE CHICAGO, IL 60639	009619531	STATE OF IL	7,000_	<u> </u>			LIBRARY BOOKS
2 Enter total number of section 501(c)(3) an	d governmer	nt organizations	listed in the line 1 t	able			

3 Enter total number of other organizations listed in the line 1 table...... For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2015)

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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.

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

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Open to Public Inspection

Name of the organization
THE GEORGE W. BUSH FOUNDATION
Part | General information on Grants and Assistance

Employer Identification number 20-4119317

1	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	٦.,
	the selection criteria used to award the grants or assistance?	N
	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	
Pai	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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(is) Purpose of grant or assistance
(1) THOMAS KELLY HIGH SCHOOL							
4136 SOUTH CALIFORNIA AVENUE	036005821	STATE OF IL	7,000.				LIBRARY BOOKS
(2) GROVER CLEVELAND ELEMENTARY SCHOOL]						1
3121 WEST BYRON STREET CHICAGO, IL 60618	366005821	STATE OF IL	7,000.				LIBRARY BOOKS
(3) BLOCKINGDALE ELEMENTARY SCHOOL]						
1300 ORCHARD STREET FORT WAYNE, IN 46808	356006351	STATE OF IN	7,000.				LIBRARY BOOKS
(4) HIGHLAND-TURNER ELEMENTARY SCHOOL							
10355 HWY 30 WEST BOONEVILLE, KY 41314	616001304	STATE OF KY	7,000.				LIBRARY BOOKS
(5) WILLIAM WELLS BROWN ELEMENTARY SCHOOL	J						
555 EAST 5TH STREET LEXINGTON, KY 40508	616001059	STATE OF KY	7,000.				LIBRARY BOOKS
(6) FRAYSER ELEMENTARY SCHOOL							
1230 LARCHMONT AVENUE LQUISVILLE, KY 40215	616001316	STATE OF KY	7,000.				LIBRARY BOOKS
(7) HILL CREEK ELEMENTARY SCHOOL - THE LEADERSH							
3816 DIXIE HIGHWAY LOUISVILLE, KY 40216	616001316	STATE OF KY	7,000.				LIBRARY BOOKS
(8) PORTLAND ELEMENTARY SCHOOL							
3410 NORTHWESTERN PARKWAY	616001316	STATE OF KY	7,000.				LIBRARY BOOKS
(9) STEPHEN FOSTER TRADITIONAL ACADEMY							
1401 SOUTH 41ST STREET LOUISVILLE, KY 40211	616001316	STATE OF KY	7,000.				LIBRARY BOOKS
10) CRISTO REY BOSTON HIGH SCHOOL							
100 SAVIN HILL AVENUE BOSTON, MA 02125	562438544	STATE OF MA	6,500.				LIBRARY BOOKS
11) JOHN W. MCCORNACK MIDDLE SCHOOL							
315 MOUNT VERNON STREET BOSTON, MA 02125	046001380	STATE OF MA	7,000.				LIBRARY BOOKS
12) THE ENGLISH HIGH SCHOOL							
144 MCBRIDE STREET BOSTON, MA 02130	046001380	STATE OF MA	7,000.				LIBRARY BOOKS

Schedule ! (Form 990) (2015)

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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.

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

Inspection Employer Identification number

20-4119317

OMB No. 1546-0047

2015

Open to Public

Department of the Treasury internal Revenue Service Name of the organization

THE GEORGE W. BUSH FOUNDATION

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? X Yes
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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) EXCEL HIGH SCHOOL							
95 G STREET SOUTH BOSTON, MA 02127	146001380	STATE OF MA	7,000				LIBRARY BOOKS
(2) HARMONY HILLS ELEMENTARY SCHOOL	_]						
13407 LYDIA STREET SILVER SPRING, MD 20906	006000989	STATE OF MD	7,000.				LIBRARY BOOKS
(3) THE JAMES AND GRACE LEE BOGGS SCHOOL	_						
4141 MITCHELL STREET DETROIT, MI 48207	463002637	STATE OF MI	7,000.				LIBRARY BOOKS
(4) PILLSBURY ELEMENTARY SCHOOL							
2250 GARFIELD STREET NE	041085198	STATE OF MN	7,000.				LIBRARY BOOKS
(5) THOMAS EDISON HIGH SCHOOL							
700 22ND AVENUE NE MINNEAPOLIS, MN 55418	410851980	STATE OF MN	7,000.				LIBRARY BOOKS
(6) KOCH ELEMENTARY SCHOOL							
1910 EXUMA DRIVE ST. LOUIS, MO 63136	436003016	STATE OF MO	7,000.				LIBRARY BOOKS
(7) BOYS TOWN HIGH SCHOOL							
13803 FLANAGAN BOULEVARD	047037660	STATE OF NE	7,000.				LIBRARY BOOKS
(8) BEECH STREET ELEMENTARY SCHOOL							
333 BEECH STREET MANCHESTER, NH 03103	020468196	STATE OF MH	7,000.				LIBRARY BOOKS
(9) CHERRY STREET ELEMENTARY SCHOOL							
20 CHERRY STREET BRIDGETON, NJ 08302	216000144	STATE OF NJ	7,800.				LIBRARY BOOKS
(10) INDIAN AVENUE SCHOOL							
399 INDIAN AVENUE BRIDGETON, NJ 08302	216000144	STATE OF NJ	7,000.				LIBRARY BOOKS
(11) QUARTER MILE LANE ELEMENTARY SCHOOL			1				
300 QUARTER MILE LANE BRIDGETON, NJ 08302	216000144	STATE OF NJ	7,000.				LIBRARY BOOKS
(12) PATERSON PUBLIC SCHOOLS ±10							
48 MERCER STREET PATERSON, NJ 07524	226002199	STATE OF NJ	7,000				LIBRARY BOOKS
2 Enter total number of section 501(c)(3) ar	id governmer	nt organizations	listed in the line 1 t	able	 .		

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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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.

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OMB No. 1545-9047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HAVAJO PINE HIGH SCHOOL]						
P.O. BOX 1286 NAVAJO, NM 87328	856005550	STATE OF NM	7,000.				LIBRARY BOOKS
(2) ACADEMY OF MOUNT ST. URSULA	_						[
330 BEDFORD PARK BOULEVARD BROHX, NY 18458	013174043	STATE OF NY	7,000.				LIBRARY BOOKS
(3) ROLAND PATTERSON INTERMEDIATE SCHOOL 229	}						
275 HARLEM RIVER PARK BRIDGE	136400434	STATE OF NY	7,000.				LIBRARY BOOKS
(4) THE CASTLE HILL MIDDLE SCHOOL 127	_						
1560 PURDY STREET BRONX, NY 10462	690210637	STATE OF NY	7,000.				LIBRARY BOOKS
(5) PERFORMING ARTS AND TECHNOLOGY HIGH SCHOOL	_						
400 PENNSYLVANIA AVENUE BROOKLYN, NY 11207	690210637	STATE OF NY	7,000.				LIBRARY BOOKS
(6) NAVAJO PREPARATORY SCHOOL							
1220 WEST APACHE STREET	850395073	STATE OF NY	7,000.				LIBRARY BOOKS
(7) High school for health professions and huma	_						
345 EAST 15TH STREET NEW YORK, NY 10003	690210637	STATE OF NY	7,000.				LIBRARY BOOKS
(8) CHILDREN'S SCHOOL OF ROCHESTER NO. 15							
494 AVERILL AVENUE ROCHESTER, NY 14607	166002010	STATE OF NY	6,000.				LIBRARY BOOKS
(9) ROCHESTER INTERNATIONAL ACADEMY							
1 EDGERTON PARK ROCHESTER, NY 14608	166002010	STATE OF NY	7,000.				LIBRARY BOOKS
(10) BERTA A. DREYFUS INTERMEDIATE SCHOOL 49							
101 WARREN STREET STATEN ISLAND, NY 16304	690210637	STATE OF NY	7,000.				LIBRARY BOOKS
(11) JOHN G. WHITTIER ELEMENTARY SCHOOL P.S. 18							
221 BROADWAY STATEN ISLAND, NY 10310	690210637	STATE OF NY	7,000.				LIBRARY BOOKS
(12) ARBOR GROVE ELEMENTARY SCHOOL							
4711 NORTH TOLSA AVENUE	731073057	STATE OF OK	6,800.				LIBRARY BOOKS
2 Enter total number of section 501(c)(3) an	d governmer	t organizations	listed in the line 1 t	able		<i>.</i> . •	

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

Schedule I (Form 990) (2015)

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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.

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OMB No. 1545-0047

Inspection

2015 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

THE GEORGE W. BUSH FOUNDATION

Employer identification number

THE	E GEORGE W. BUSH FOUNDATION	20-4119317	
Рa	tt 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		
	the selection criteria used to award the grants or assistance?	X 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grent	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LINWOOD BLEMENTARY SCHOOL							
3416 NW 17TH STREET OKLAHOMA CITY, OK 73107	736021175	STATE OF OK	7,000.				LIBRARY BOOKS
(2) HARTIN LUTHER KING, JR. ELEMENTARY SCHOOL							
1201 NE 48TH STREET OKLAHOMA CITY, OK 73111	073602117	STATE OF OK	6,500				LIBRARY BOOKS
(3) GEORGE J. WEST ELEMENTARY SCHOOL							
145 BEAUFORT STREET PROVIDENCE, RI 02908	050514230	STATE OF RI	7,000.				LIBRARY BOOKS
(4) MORNINGSIDE MIDDLE SCHOOL							
1999 SINGLEY LANE CHARLESTON, SC 29405	576000322	STATE OF SC	7,000.				LIBRARY BOOKS
(5) TYGER RIVER HIGH SCHOOL							
4444 BROAD RIVER ROAD COLUMBIA, SC 29210	576007591	STATE OF SC	7,000.				LIBRARY BOOKS
(6) SOUTH CONWAY ELEMENTARY SCHOOL							
3001 4TH AVENUE CONWAY, SC 29527	576000364	STATE OF SC	7,000.				LIBRARY BOOKS
(7) MYRTLE BEACH PRIMARY SCHOOL							
612 29TH AVENUE NORTH	576000364	STATE OF SC	7,000.				LIBRARY BOOKS
(8) CALHOUN COUNTY HIGH SCHOOL							
150 SAINTS AVENUE ST. MATTHEWS, SC 29135	576000864	STATE OF SC	7,000.				LIBRARY BOOKS
(9) MANASSAS HIGH SCHOOL							
IIII NORTH MANASSAS STREET	626000834	STATE OF TN	7,000.				LIBRARY BOOKS
(10) TREADWELL MIDDLE SCHOOL]	
920 NORTH HIGHLAND STREET MEMPHIS, TN 38122	626000834	STATE OF TN	7,000.				LIBRARY BOOKS
(11) MARCIA R. GARZA ELEMENTARY SCHOOL	1					1	
810 EL GATO ROAD ALAMO, TX 78516	108909134	STATE OF TX	7,000.				LIBRARY BOOKS
(12) ANITA UPHAUS BARLY CHILDHOOD CENTER						1	
5200 FREIDRICH LANE AUSTIN, TX 78744	074600006	STATE OF TX	6,000.				LIBRARY BOOKS
2 Enter total number of section 501(c)(3) and	d governmer	nt organizations	listed in the line 1 t	able		<i></i> >	

Enter total number of other organizations listed in the line 1 table . For Paperwork Reduction Act Notice, see the instructions for Form 990.

Schedule I (Form 990) (2015)

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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.

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No. 1545-0047

2015

Open to Public

THE	GEORGE W. BUSH FOUNDATION	20-4119317	
Pal	t 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 of the selection criteria used to award the grants or assistance?	or assistance, and	do
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Par	til Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization	on 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. (f) Method of valuation (book, FAV, appraisal, other) 1 (a) Name and address of organization or government (c) IRC section if applicable (g) Description of (h) Purpose of grant (b) EIN (d) Amount of cash (e) Amount of non-cash assistance (1) BLACKSHEAR ELEMENTARY FINE ARTS ACADEMY 1712 EAST 11TH STREET AUSTIN, TX 78702 746000064 STATE OF TX 7,000 IBRARY BOOKS (2) MARGARET T. REILLY ELEMENTARY SCHOOL 405 DENSON DRIVE AUSTIN, TX 78752 746000064 STATE OF TX 7,000. JERARY BOOKS (3) WILLIAM B. TRAVIS HIGH SCHOOL

1211 EAST OLTORF STREET AUSTIN, TX 78704 746000064 7,000. JIBRARY BOOKS STATE OF TX (4) CROMACK ELEMENTARY SCHOOL 7,000. LIBRARY BOOKS 3200 EAST 30TH STREET BROWNSVILLE, TX 78521 746000418 STATE OF TX (5) HUBERT R. HUDSON ELEMENTARY SCHOOL 2980 FM 802 BROWNSVILLE, TX 78520 746000418 STATE OF TX 7,000. (6) JOSEPHINE CASTAMEDA ELEMENTARY 3201 LIMA STREET BROWNSVILLE, TX 78521 746600418 STATE OF TX 7,000. IBRARY BOOKS (7) LUCILLE SKINNER ELEMENTARY SCHOOL 411 WEST ST. CHARLES STREET 746000418 STATE OF TX 7,000. IBRARY BOOKS (8) MATTYE GENTRY STELL MIDDLE SCHOOL 7,000. IBRARY BOOKS 1105 LOS EBANOS BOULEVARD 746000418 STATE OF TX (9) PALM GROVE ELEMENTARY SCHOOL 7.000 LIBRARY BOOKS 7942 SOUTHMOST BOULEVARD 746000418 STATE OF TX (10) ROSITA E. DEL CASTILLO ELEMENTARY SCHOOL 105 MORNINGSIDE ROAD BROWNSVILLE, TX 78578 946000418 STATE OF TX 7,000. IBRARY BOOKS (11) SENATOR EDDIE A. LUCIO, JR. MIDDLE SCHOOL 300 NORTH VERMILLION ROAD 746000418 STATE OF TX 7,000 LIBRARY BOOKS

(12) VICTORIA HEIGHTS ELEMENTARY SCHOOL 2801 EAST 13TH STREET BROWNSVILLE, TX 78521 746000418 7,000. STATE OF TX

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2015)

LIBRARY BOOKS

JSA 5E1288 1.000

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

0179053

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.

2015 Open to Public

OMB No. 1545-0047

Department of the Treasury Inspection Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internat Revenue Service Employer Identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (h) Purpose of grant or assistance 1 (a) Name and address of organization or government (e) Amount of non-cash assistance (b) EIN (d) Amount of cash grant (1) ESPERANZA "HOPE" MEDRANO ELEMENTARY 756001278 7,000. IBRARY BOOKS 2221 LUCAS DRIVE DALLAS, TX 75219 STATE OF TX (2) RIVERSIDE HIGH SCHOOL 301 MIDWAY DRIVE EL PASO, TX 79915 746002473 STATE OF TX 7,000. IBRARY BOOKS (3) GALLEGOS ELEMENTARY SCHOOL 746001255 STATE OF TX 7,000. IBRARY BOOKS 7415 HARRISBURG BOULEVARD BOUSTON, TX 77011 (4) HORN ELEMENTARY SCHOOL IBRARY BOOKS 10734 BISSONNET STREET HOUSTON, TX 77099 746000019 STATE OF TX 7,600 (5) THOMAS A. EDISON MIDDLE SCHOOL 6901 AVENUE I HOUSTON, TX 77011 101912046 STATE OF TX 7,000 IBRARY BOOKS (6) TICE ELEMENTARY SCHOOL 14120 WALLISVILLE ROAD HOUSTON, TX 77049 101910111 STATE OF TX 7,600 (7) S. PEREZ SCHOOL ELEMENTARY 746028859 STATE OF TX 7,000. IBRARY BOOKS 500 SIERRA VISTA BOULEVARD LAREDO, TX 78046 (8) CARMEN ANAYA ELEMENTARY SCHOOL 1000 WEST DICKER ROAD PHARR, TX 78577 746001876 7,000 IBRARY BOOKS STATE OF TX (9) ANSON JOHES MIDDLE SCHOOL IBRARY BOOKS 1256 PINN ROAD SAN ANTONIO, TX 78227 746015904 STATE OF TX 7,000. (10) PALO ALTO ELEMENTARY SCHOOL 1725 PALO ALTO ROAD SAN ANTONIO, TX 78211 746002335 STATE OF TX 7,000 IBRARY BOOKS (11) BRYANT MIDDLE SCHOOL 40 SOUTH 800 EAST SALT LAKE CITY, UT 84102 LIBRARY BOOKS 876000515 STATE OF UT 7,600. (12) GEORGE WASHINGTON CARVER ELEMENTARY SCHOOL STATE OF VA 1110 WEST LEIGH STREET RICHMOND, VA 23220 541689909 7,000 IBRARY BOOKS 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the instructions for Form 930.

Schedule | (Form 990) (2015)

JSA 5E1288 1.000

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0179053

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.

Open to Public Inspection

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer Identification number Name of the organization 20-4119317 THE GEORGE W. BUSH FOUNDATION Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of valuation (book, FMV, appraisal, other) (h) Purpose of grant or assistance (g) Description of 1 (a) Name and address of organization or government (d) Amount of cash (e) Amount of non-cash assistance (b) EiN (c) IRC section If applicable (1) REED ELEMENTARY SCHOOL IBRARY BOOKS 1802 SOUTH 36TH STREET TACOMA, WA 98418 091600155 STATE OF WA 7,000 (2) HEBARD ELEMENTARY SCHOOL IBRARY BOOKS 413 SEYMOUR AVENUE CHEYENNE, WY 82007 836000527 STATE OF WY 7,000. (3) AUDIE MURPHY MIDDLE SCHOOL IBRARY BOOKS 924 WEST SIOUX ROAD ALAMO, TX 78516 746001876 STATE OF TX 7,000. (4) STEPHEN F. AUSTIN MIDDLE SCHOOL IBRARY BOOKS 804 SOUTH STEWART RD SAN JUAN, TX 78589 746001876 STATE OF TX 7,000. (5) ETIMANDA INTERHEDIATE SCHOOL 6925 ETIWANDA AVENUE ETIWANDA, CA 91739 956001103 STATE OF CA 7,600. LIBRARY BOOKS (6) JOHN GLENN MIDDLE SCHOOL 756002404 STATE OF TX 7,000. IBRARY BOOKS 2201 UNIVERSITY AVENUE SAN ANGELO, TX 76904 (7) HERITAGE INTERMEDIATE SCHOOL JERARY BOOKS 956001103 STATE OF CA 13766 SOUTH HERITAGE CIRCLE (8) (9) (10)(11) (12) 115. 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 . . For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule 1 (Form 990) (2015)

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0179053

THE GEORGE W. BUSH FOUNDATION

Schedule I (Form 990) (2015)

20-4119317

Page 2

(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 non-cash assistance
PELLOWSHIP STIPENDS	15.	512,948.			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U.S.

SCHEDULE I, PART I, LINE 2

THE FOUNDATION, THROUGH ITS LAURA BUSH FOUNDATION FOR AMERICA'S LIBRARIES FUND (LBF FUND), PROVIDED GRANTS TO MIDDLE AND HIGH SCHOOLS ACROSS THE UNITED STATES FOR USE IN FUNDING THEIR SCHOOL LIBRARIES. BUSH INSTITUTE PROGRAM DIRECTORS PROVIDE OVERSIGHT FOR THE USE OF GRANT FUNDS AND MONITORING THE LBF FUND.

Schedule I (Form 990) (2015)

JSA

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Department of the Treasury Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

OMB No. 1545-0047

Inspection

Name of the organization

Employer identification number THE GEORGE W. BUSH FOUNDATION

20-4119317

Part	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		Yes	No
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
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	1b		
2	explain		7-2	ESTER
2	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line	2	0000 ml 21 m-mare	has printed and community
_				
3	Indicate which, if any, of the following the filing 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.			
	Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a	Х	<u> </u>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to 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:			
а	The organization?	6a		X
b	Any related organization?	6b	************	Х
	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 non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X	o ny namba y firith i X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	1		1
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe		}	1
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		l

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

Schedule J (Form 990) 2015

THE GEORGE W. BUSH FOUNDATION

Schedule J (Form 990) 2015

Page 2

20-4119317

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

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

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.

		(B) Breakdown o	f W-2 and/or 1099-Mi	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	in column (B) reported as deferred on prior Form 990
MARGARET SPELLINGS	(i)	592,039.	80,895.	0.	20,295.	8,455.	701,684.	0.
1PRESIDENT/DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
JEFFREY R. GUY	(i)	241,059.	11,368.	0.	19,163.	14,624.	286,214.	0.
2CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
HOLLY KUZMICH	(1)	253,457.	23,500.	0.	20,295.	8,379.	305,631.	0.
3SENIOR VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
TOBI YOUNG	(i)	261,061.	23,175.	0.	20,295.	3,502.	308,033.	0.
4GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
CATHERINE JAYNES	(i)	197,983.	14,939.	0.	15,608.	21,587.	250,117.	0.
5DIRECTOR, EVAL & RESEARCH	(ii)	0.	0.	0.	0.	0.	0.	0.
BRIAN S. COSSIBOOM	(i)	189,058.	18,595.	0.	14,999.	8,311.	230,963.	0.
6 ^{VP} , OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
MIGUEL HOWE	(i)	174,070.	15,665.	0.	13,521.	8,276.	211,532.	0.
7DIRECTOR, MILITARY SERVICE	(ii)	0.	0.	0.	0.	0.	0.	0.
OLADOYIN OLUWOLE	(i)	148,445.	0.	38,168.	4,771.	10,803.	202,187.	0.
8EXECUTIVE DIRECTOR, PRRR	(ii)	0.	0.	0.	0.	0.	0.	0.
WILLIAM STEIGER	(i)	154,378.	30,502.	0.	5,546.	8,341.	198,767.	0.
gDIRECTOR, PRRR	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL T. MCMAHAN	(i)	165,908.	12,340.	0.0	12,487.	19,463.	210,198.	0.
10 ^{VP} , DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
WILLIAM P. MCKENZIE	(i)	157,144.	12,660.	0.	11,727.	22,782.	204,313.	0.
11EDITORIAL DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(it)							
							Sch	edule J (Form 990) 2015

chedule J (Form 990) 201

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THE GEORGE W. BUSH FOUNDATION

20-4119317

Page 3

Schedule J (Form 990) 2015

Part III Supplemental Information

Complete this part to 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.

SEVERANCE PAYMENTS

SCHEDULE J, PART I, LINE 4A

OLADOYIN OLUWOLE RECEIVED SEPARATION PAY OF \$27,587.

NON-FIXED PAYMENTS

SCHEDULE J, PART I, LINE 7

ACCRUAL AND PAYMENT OF BONUSES IS BASED ON THE ACCOMPLISHMENT OF

INDIVIDUAL AND ORGANIZATION-WIDE GOALS. BONUSES WERE PAID OUT DURING THE

YEAR THAT CONSTITUTED NON-FIXED PAYMENTS AND ARE REPORTED ON SCHEDULE J

PART II COL B(II).

Schedule J (Form 990) 2015

JSA

Noncash Contributions

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

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

20-4119317 THE GEORGE W. BUSH FOUNDATION Types of Property Part I (c) Noncash contribution Number of contributions or Method of determining Check if amounts reported on noncash contribution amounts items contributed applicable Form 990, Part VIII, line 1g Art - Works of art...... 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods........... 640,000 CAR AUCTION BID 1. Cars and other vehicles 6 7 Boats and planes...... 8 Intellectual property 1,288,840. AVG MKT PRICE 8. Х Securities - Publicly traded 9 Securities - Closely held stock . . . 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 18 Food inventory..... 19 Drugs and medical supplies 20 21 22 Historical artifacts Scientific specimens..... 23 24 Archeological artifacts..... 15. 131,210. COST Other ►(GIFTS IN KIND 25 Other ►í 26 27 Other ►(28 Other ►(Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes Νo 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?..... 30a Х b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х 32a contributions?................ b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) (2015)

33

describe in Part II.

Schedule M (Form 990) (2015)

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

THIRD PARTY ASSISTANCE OF NONCASH CONTRIBUTIONS

SCHEDULE M, PART I, LINE 32

THE FOUNDATION'S BROKERAGE FIRM IS AUTHORIZED TO SELL DONATED SECURITIES

ON ITS BEHALF.

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047
2015
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

THE GEORGE W. BUSH FOUNDATION

Employer identification number

20-4119317

ORGANIZATION'S MISSION

FORM 990, PART III, LINE 1

THE FOLLOWING ARE THE PURPOSES FOR WHICH THE CORPORATION IS ORGANIZED:

(I) TO ENDOW A PRESIDENTIAL ARCHIVAL DEPOSITORY, AS DEFINED BY SECTION

2101(1) OF TITLE 44 OF THE UNITED STATES CODE ANNOTATED, IN AN AMOUNT

REQUIRED BY SUBSECTION (G) OF SECTION 2112 OF TITLE 44 OF THE UNITED

STATES CODE ANNOTATED, TO HOUSE AND PRESERVE AT THE GEORGE W. BUSH

PRESIDENTIAL LIBRARY AND MUSEUM THE BOOKS, DOCUMENTS, PAPERS, PICTURES,

PHOTOGRAPHS, AND OTHER MEMORABILIA OF PRESIDENT GEORGE W. BUSH, AS WELL

AS OTHER OBJECTS OR MATERIALS RELATED TO THE PAPERS OR EVENTS OF THE

OFFICIAL OR PERSONAL LIFE OF PRESIDENT BUSH THAT HAVE HISTORICAL OR

COMMEMORATIVE VALUE, AND TO UNDERTAKE AND SUPPORT RESEARCH AND

EDUCATIONAL ACTIVITIES ON POLICY AND HISTORICAL ISSUES RELATED TO THE

LIFE AND WORK OF PRESIDENT BUSH THEREBY PROMOTING SUCH LIBRARY AND

MUSEUM,

(II) TO MAINTAIN A FUND OR FUNDS OF REAL OR PERSONAL PROPERTY, OR BOTH,
AND (SUBJECT TO THE RESTRICTIONS AND LIMITATIONS HEREINAFTER SET FORTH)
TO EXPEND OR DISTRIBUTE THE WHOLE OR ANY PART OF THE INCOME OR PRINCIPAL
THEREOF EXCLUSIVELY FOR THE PROMOTION OR OPERATION OF THE GEORGE W. BUSH
PRESIDENTIAL LIBRARY AND MUSEUM AND THE GEORGE W. BUSH INSTITUTE WHOSE
ACTIVITIES PROMOTE THE LIBRARY AND MUSEUM;

(III) TO PROMOTE LIBRARIES; AND

(IV) TO PERFORM ANY OTHER RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY, OR EDUCATIONAL ACTIVITIES THAT PROMOTE SUCH LIBRARY AND MUSEUM OR INSTITUTE.

Employer identification number 20-4119317

THE CORPORATION PLEDGES ALL OF ITS ASSETS FOR USE IN PERFORMING THESE PURPOSES.

PROGRAM SERVICES ACTIVITY

FORM 990, PART III, LINE 4A

THE GEORGE W. BUSH INSTITUTE IS DEVELOPING LEADERS TO TAKE ON OUR MOST PRESSING CHALLENGES, FROM SCHOOL PRINCIPALS AND TRANSITIONING VETERANS TO BURMESE ACTIVISTS AND WOMEN FELLOWS IN THE MIDDLE EAST. IT INSPIRES AND EQUIPS LEADERS TO IMPROVE OUR COUNTRY AND THE WORLD THROUGH THE PRESIDENTIAL LEADERSHIP SCHOLARS, A PROGRAM THAT IS COORDINATED WITH THREE OTHER PRESIDENTIAL CENTERS. THE BUSH INSTITUTE IS FOSTERING IMPORTANT POLICY BY ADVANCING ACCOUNTABILITY IN SCHOOLS, INTEGRATING ECONOMIC POLICIES BETWEEN CANADA, MEXICO, AND THE UNITED STATES, AND SUPPORTING DEMOCRATIC DISSIDENTS TO ADVANCE HUMAN FREEDOM. THE BUSH INSTITUTE RAISES AWARENESS FOR THE SERVICE AND SACRIFICE OF THE MEMBERS OF OUR ARMED FORCES AND THEIR FAMILIES AND STUDIES HOW BEST TO EMPOWER POST-9/11 VETERANS TO HELP THEIR TRANSITIONS. THE BUSH INSTITUTE IS TAKING ACTION TO SAVE AND CHANGE LIVES IN COLLABORATION WITH THE PINK RIBBON RED RIBBON PROGRAM, WHICH PREVENTS AND TREATS WOMEN'S CANCERS IN SUB-SAHARAN AFRICA AND LATIN AMERICA.

PROGRAM SERVICES ACTIVITY

FORM 990, PART III, LINE 4B

THE GEORGE W. BUSH PRESIDENTIAL CENTER IS HOME TO THE GEORGE W. BUSH
PRESIDENTIAL LIBRARY AND MUSEUM AND THE GEORGE W. BUSH INSTITUTE. AS OF

Employer identification number 20-4119317

DECEMBER 31, 2015 APPROXIMATELY 919,674 PEOPLE HAD VISITED THE MUSEUM, INCLUDING TWO TEMPORARY EXHIBITS:

'BASEBALL! AMERICA'S PRESIDENTS, AMERICA'S PASTIME': WHICH DISPLAYED
BASEBALL MEMORABILIA AND PRESIDENTIAL INFLUENCES ON THE SPORT OF
BASEBALL; AND 'A SEASON OF STORIES': A HOLIDAY EXHIBIT THAT RECREATED THE
2003 CHRISTMAS AT THE WHITE HOUSE.

EXECUTIVE COMMITTEE

FORM 990, PART VI, LINE 1A

THE BOARD OF DIRECTORS SHALL CREATE AN EXECUTIVE COMMITTEE OF THE BOARD CONSISTING OF THE CHAIR OF THE BOARD OF DIRECTORS, THE PRESIDENT OF SMU, THE PRESIDENT OF THE FOUNDATION, AND TWO OTHER MEMBERS OF THE BOARD OFDIRECTORS. A QUORUM FOR THIS EXECUTIVE COMMITTEE FOR DECISIONS SHALL REQUIRE THE CHAIR OF THE BOARD OF DIRECTORS, THE PRESIDENT OF SMU AND ONE OTHER MEMBER OF THE BOARD OF DIRECTORS SERVING ON THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL HAVE THE AUTHORITY TO ACT ON BEHALF OF THE CORPORATION IN BETWEEN REGULAR MEETINGS OF THE BOARD OF DIRECTORS. EXCEPT TO THE EXTENT AUTHORITIES OF THE BOARD OF DIRECTORS ARE DELEGATED TO THE EXECUTIVE COMMITTEE BY A DULY PASSED RESOLUTION OF THE BOARD OF DIRECTORS, THE BOARD OF DIRECTORS MUST VALIDATE THE ACTIONS OF THE EXECUTIVE COMMITTEE AT ITS NEXT REGULAR OR SPECIAL MEETING. ANY SUCH ACTION REOUIRING VALIDATION WHICH IS NOT SO VALIDATED WILL NOT BE LEGALLY BINDING ON THE CORPORATION. THE CHAIR OF THE BOARD OF DIRECTORS SHALL ACT AS CHAIR OF THE EXECUTIVE COMMITTEE. ALL DECISIONS OF THE EXECUTIVE COMMITTEE SHALL BE BY A MAJORITY VOTE OF THOSE PRESENT.

Employer identification number 20–4119317

BUSINESS AND FAMILY RELATIONSHIPS

FORM 990, PART VI, LINE 2

- DR. R. GERALD TURNER, LAURA W. BUSH, RAY L. HUNT AND JEANNE L.

PHILLIPS: BUSINESS RELATIONSHIP

- JEANNE L. PHILLIPS AND RAY L. HUNT: BUSINESS RELATIONSHIP
- DR. R. GERALD TURNER AND RAY L. HUNT: BUSINESS RELATIONSHIP
- HARRIET MIERS AND RAY L. HUNT: BUSINESS RELATIONSHIP
- LAURA W. BUSH AND MARVIN P. BUSH: FAMILY RELATIONSHIP

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

THE ORGANIZATION HIRES AN INDEPENDENT ACCOUNTING FIRM TO PREPARE AND REVIEW THE ORGANIZATION'S FORM 990 BASED ON INFORMATION PROVIDED BY THE ORGANIZATION'S ACCOUNTING STAFF. A COPY OF THE FORM 990 IS PROVIDED TO THE ORGANIZATION'S PRESIDENT, SECRETARY, CHIEF FINANCIAL OFFICER, AND LEGAL COUNSEL FOR INITIAL REVIEW. A COPY OF THE FORM 990 IS THEN PROVIDED TO ALL BOARD MEMBERS FOR A FINAL REVIEW PRIOR TO BEING FILED WITH THE INTERNAL REVENUE SERVICE AND CERTAIN STATE REPORTING AGENCIES.

CONFLICT OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

IN ACCORDANCE WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS ANNUALLY SIGNS A STATEMENT WHICH AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND

UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS
FEDERAL TAX EXEMPTION MUST ENGAGE PRIMARILY IN ACTIVITIES, WHICH
ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. IF THE GOVERNING BOARD
OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO
DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE
MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY
TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE
MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY
THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER
HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT
SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

PROCESS FOR DETERMINING COMPENSATION FORM 990, PART VI, LINE 15A & 15B

THE COMPENSATION FOR THE PRESIDENT AND CEO IS APPROVED BY THE BOARD OF DIRECTORS DURING THE EXECUTIVE SESSION OF BOARD MEETINGS. A MANAGEMENT CONSULTING FIRM PROVIDES MARKET COMPENSATION DATA TO THE BOARD FOR ITS USE IN MAKING THESE COMPENSATION DECISIONS. NATIONAL SEARCH FIRMS ARE INVOLVED IN THE RECRUITING OF TOP MANAGEMENT, AND THEY PROVIDE COMPARABILITY DATA PRIOR TO OFFERS BEING EXTENDED TO POTENTIAL CANDIDATES. THE COMPENSATION OF THE OTHER KEY EMPLOYEES IS DETERMINED BY THE PRESIDENT OF THE FOUNDATION. IN ADDITION A SALARY SURVEY WAS COMPLETED IN 2014 BY AN EXTERNAL COMPENSATION CONSULTANT TO ESTABLISH SALARY RANGES FOR EACH POSITION IN THE ORGANIZATION BASED ON COMPARABLE POSITIONS AT COMPARABLE ORGANIZATIONS.

Name of the organization

THE GEORGE W. BUSH FOUNDATION

Employer identification number 20-4119317

PUBLIC DISCLOSURE

FORM 990, PART VI, LINE 19

THE ORGANIZATION COMPLIES WITH VARIOUS STATE CHARITABLE ORGANIZATION REPORTING REQUIREMENTS BY PROVIDING, WHEN REQUIRED, A COPY OF THE ANNUAL AUDITED FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND THE FORM 990. THE STATES MAKE THE FILED INFORMATION AVAILABLE TO THE PUBLIC. THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE POSTED ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION'S FORM 1023 AND FORM 990-T ARE AVAILABLE UPON REQUEST. THE ORGANIZATION'S CONFLICT OF INTEREST STATEMENTS ARE UPDATED ANNUALLY BUT ARE NOT AVAILABLE FOR PUBLIC INSPECTION.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT, DE,

FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WI,

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

DESCRIPTION OF SERVICES NAME AND ADDRESS

WARFIELD & WALSH, INC. 601 S. WASHINGTON ST

ALEXANDRIA, VA 22314

COMMUNICATIONS CORPORATION OF AMERICA

13195 FREEDOM WAY BOSTON, VA 22713

CICERO RESEARCH LLC 515 E 100 S STE 300

SALT LAKE CITY, UT 84102

COMPENSATION

DIRECT MAIL SERVICES

1,373,194.

DIRECT MAIL SERVICES

749,068.

PROGRAM SERVICES

637,805.

Schedule O (Form 990 or 990-EZ) 2015

Name of the organization

THE GEORGE W. BUSH FOUNDATION

Employer identification number

20-4119317

ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS

DESCRIPTION OF SERVICES

COMPENSATION

THE UNIVERSITY OF TEXAS AT AUSTIN

PROGRAM SERVICES

608,244.

100 INNER CAMPUS DRIVE

AUSTIN, TX 78705

PROGRAM SERVICES

569,336.

AMERICAN INSTITUTE FOR RESEARCH 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 THE GEORGE W. BUSH FOUNDATION

20-4119317

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

OMB No. 1545-0047
2015
Open to Public

imployer identification nu 20–4119317

Department of the Treasury
Internal Revenue Service
Name of the organization
THE GEORGE W. BUSH FOUNDATION

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization			(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		g) 512(b)(13) rolled lity?
		İ				Yes	No
(1) BUSH GLOBAL HEALTH INITIATIVE D/B/A PRRR 47-4585630							
1900 L STREET, NW, SUITE 304 WASHINGTON, DC 20006	CHARITABLE FD	TX	501 (C) (3)	7	GWB FOUND.	х	
(2)							
(3)							
(4)			ļ				İ
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(6)	_						1
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(7)	_						

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

Schedule R (Form 990) 2015

JSA

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Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III (c)
Legal
domicile
(state or
foreign
country) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (5) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (a) Name, address, and EIN of related organization (b) Primary activity (d) Direct controlling entity (f) Share of total income (g) Share of end-of-year assets (k) Percentage ownership Yes No Yes No (1) (2) (3) (4) (5) (6) (7)

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EfN of related organization	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Secti 512(b) contro entit	ion)(13) olled ty?
							Yes	No
(1)								
(2)								
(3)								_
[4]								_
(5)								_
(6)								
(7)								

JSA 5E1308 1.000 Schedule R (Form 990) 2015

Schedule	R (Form 990) 2015					Pa	ge 3
Part \	Transactions With Related Organizations Complete if the organization answered	l "Yes" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note.	Complete fine 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	l .
	During the tax year, did the organization engage in any of the following transactions with one or n	nore related organizations lis	ted in Parts II-IV?				
аF	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
	Sift, grant, or capital contribution to related organization(s)				1b	Х	
c 6	Gift, grant, or capital contribution from related organization(s)				1c		X
d L	oans or loan guarantees to or for related organization(s)				1d		X
	oans or loan guarantees by related organization(s)				1e	-5.00	X
f E	Dividends from related organization(s), ,				1f		Х
	Sale of assets to related organization(s)				1g		X
h F	Purchase of assets from related organization(s)				1h		Х
i E	exchange of assets with related organization(s)				1i		X
jL	ease of facilities, equipment, or other assets to related organization(s)				1)		X
k l	ease of facilities, equipment, or other assets from related organization(s)				1k		Х
	Performance of services or membership or fundraising solicitations for related organization(s)				1]	Х	
	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	х	_
	Sharing of paid employees with related organization(s)				10	Х	
n 5	Reimbursement paid to related organization(s) for expenses		<i>.</i>		1p		Х
	Reimbursement paid by related organization(s) for expenses				1q		Х
ч .	, , , , , , , , , , , , , , , , , , ,						
r C	Other transfer of cash or property to related organization(s)				1r		Х
	Other transfer of cash or property from related organization(s),				1s		Х
2 1	the answer to any of the above is "Yes," see the instructions for information on who must comp	lete this line, including cove	ered relationships and trans	action thre	sholds		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	Melhod	(d)	zminin	ıg
(1) I	BUSH GLOBAL HEALTH INITIATIVE D/B/A PRRR	L, 0	250,000.	SEE SO	CHR I	?T '	VII
(2)							
(3)							
(4)							
(5)							
(6)							
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Schedule R (Form 990) 2015

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

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

(a) Name, address, and EIN of entity	"		income (related, section unrelated, excluded 501(c)(3 from tax under organization		(e) (f) Are all purtners Share of section total income 501(b)(3) organizations?		al income end-of-year assets	(h) Disproportionate affocations?		of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes	Nο			Yes	No		Yes	No	↓
1)	_												
2)								ļ					
3)				-									
4)													
5)												-	
6)								 				<u> </u>	
7)				-				ļ					
В)				-							 		
9)				-									
0)											<u> </u>		
1)	-							<u> </u>					
2)													-
3)											<u> </u>		
4}									<u> </u>				
5)				-								 	
6)								-	 		-		

JSA 5E1310 1.000 Schedule R (Farm 990) 2015

PERFORMING SERVICES FOR RELATED ORGANIZATIONS & SHARING OF PAID EMPLOYEES

Schedule R (Form 990) 2015

Page 5

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

ITEM V, ITEM 2, LINES (L), (O)

THE GEORGE W. BUSH FOUNDATION (GWBF) AND THE BUSH GLOBAL HEALTH

INITIATIVE, D/B/A PINK RIBBON RED RIBBON (PRRR) ARE AFFILIATED FROM A

GOVERNANCE STANDPOINT, AS, UNDER PRRR BYLAWS, THE BOARD OF DIRECTORS OF

GWBF ELECTS THE BOARD OF DIRECTORS OF PRRR, GWBF AND PRRR OPERATE

SEPERATELY AND DISTINCTLY IN ALL RESPECTS. PURSUANT TO AN ARM'S LENGTH

AGREEMENT BETWEEN THE TWO, IN 2015, EMPLOYEES OF GWBF PROVIDED SERVICES

IN THE APPROXIMATE AMOUNT OF \$250,000 ON BEHALF OF PRRR. THE AMOUNT WAS

DERIVED BY REFERENCE TO THE APPROXIMATE NUMBER OF HOURS OF SERVICES

PERFORMED AND THE SALARIES OF THOSE PERFORMING THE SERVICES.