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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Employer identification number

THE ROBERT S. FAGAN FOUNDATION

20-8552780

PART III LINE 2 - "NO"

PART III LINE 3 - "NO"

PART III LINE 4D "0" EXPENSES & GRANTS & REVENUE

PART IV LINE 3B NO, THERE WAS NO UNRELATED BUSINESS INCOME

PART IV LINE 13A NO - NO LICENSE

PART IV LINE 14B DID NOT RECEIVE PAY FOR INDOOR TANNING

PART IV LINE 1A NO MATERIAL DIFFERENCE IN VOTING RIGHTS

PART IV LINE 1A NO DELEGATED BROAD AUTHORITY TO ANY COMMITTEE

PART IV LINE 2-7B N/A

PART IV LINES 8A, 8B, 10B N/A

PART IV LINE 9 N/A

PART VI LINE 11D N/A

PART VI LINE 12B "NO"

PART VI LINE 12C NO - N/A

PART IV LINES 15A+B NO COMPENSATION - N/A

PART IV LINE 18 N/A

PART VI LINE 19 MAKE AVAILABLE UPON REQUEST - HAD NO REQUESTS

PART VII N/A - THERE IS NO COMPENSATION

PART IX LINE 11G - NO EXPENSES

PART IX LINE 24E NO EXPENSES

PART XI LINE 9 N/A

PART XII N/A