

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

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning , 2015, and ending , 20

Name of foundation OTICON HEARING FOUNDATION, INC.		A Employer identification number 27-4849403
Number and street (or P O box number if mail is not delivered to street address) 580 HOWARD AVENUE		B Telephone number (see instructions) (800) 526-3921
City or town, state or province, country, and ZIP or foreign postal code SOMERSET, NJ 08873		C If exemption application is pending, check here. <input type="checkbox"/>
G Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here. <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 34,409.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)		213,933.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.					
3 Interest on savings and temporary cash investments.		1.	1.		ATCH 1
4 Dividends and interest from securities					
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			0		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11		213,934.	1.		
13 Compensation of officers, directors, trustees, etc.		0.			
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)					
c Other professional fees (attach schedule) [2]		11,993.			11,993.
17 Interest					
18 Taxes (attach schedule) (see instructions)					
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings		1,561.			1,561.
22 Printing and publications		36,545.			36,545.
23 Other expenses (attach schedule) ATCH 3.		9,113.			9,113.
24 Total operating and administrative expenses. Add lines 13 through 23.		59,212.			59,212.
25 Contributions, gifts, grants paid		281,000.			281,000.
26 Total expenses and disbursements. Add lines 24 and 25		340,212.			340,212.
27 Subtract line 26 from line 12		-126,278.			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)			1.		
c Adjusted net income (if negative, enter -0-)				0.	

g-36 13

SCANNED DEC 6 2016

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing	8,887.	9,209.	9,209.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	c	Investments - corporate bonds (attach schedule)			
	Liabilities	11	Investments - land, buildings, and equipment basis ▶		
		Less accumulated depreciation (attach schedule) ▶			
12		Investments - mortgage loans			
13		Investments - other (attach schedule)			
14		Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
15		Other assets (describe ▶ ATCH 4)	151,800.	25,200.	25,200.
16		Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	160,687.	34,409.	34,409.
17		Accounts payable and accrued expenses			
18		Grants payable			
Net Assets or Fund Balances	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds	160,687.	34,409.		
30	Total net assets or fund balances (see instructions)	160,687.	34,409.		
31	Total liabilities and net assets/fund balances (see instructions)	160,687.	34,409.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	160,687.
2	Enter amount from Part I, line 27a	2	-126,278.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	34,409.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	34,409.

Form 990-PF (2015)

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="font-size: 2em;">{</div> <div> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> <div style="font-size: 2em;">}</div> </div> </div>		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="font-size: 2em;">{</div> <div> If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 </div> <div style="font-size: 2em;">}</div> </div> </div>		3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	64,016.	158,351.	0.404266
2013	144,086.	135,964.	1.059736
2012	7,154.	156,056.	0.045843
2011	35,960.	89,581.	0.401424
2010			
2 Total of line 1, column (d)			1.911269
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.477817
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			8,782.
5 Multiply line 4 by line 3			4,196.
6 Enter 1% of net investment income (1% of Part I, line 27b)			
7 Add lines 5 and 6			4,196.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			340,212.

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
	Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	0.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . .	2	
3	Add lines 1 and 2	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . .	4	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	0.
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► NJ, _____ -----		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	X	

0012KN 3526 8/10/2016 3:29:41 PM V 15-6.1F

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
Website address OTICONHEARINGFOUNDATION.ORG		
14 The books are in care of MATT MOUND Telephone no 732-560-1220		
Located at 580 HOWARD AVENUE SOMERSET, NJ ZIP+4 08873		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. 15 N/A		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country N/A		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b N/A		
Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? 1c X		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," list the years 2a		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) 2b N/A		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 2c		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.) 3b N/A		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a X		
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? 4b X		

Form 990-PF (2015)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **5b** ☒ XOrganizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** ☐ ☒ X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** ☐ ☒ N/A**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 5		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		0.	0.	0.

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0

Total number of others receiving over \$50,000 for professional services ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 ASSIST NEEDY INDIVIDUALS WITH PROCURING HEARING AIDS	59,212.
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3 ▶	

Form 990-PF (2015)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	NONE
b	Average of monthly cash balances	1b	8,916.
c	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	8,916
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,916.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	134.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,782.
6	Minimum investment return. Enter 5% of line 5	6	439.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	439
2a	Tax on investment income for 2015 from Part VI, line 5	2a	
b	Income tax for 2015 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	439.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	439.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	439.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	340,212
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	340,212.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	340,212.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				439.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20 13 , 20 12 , 20 11				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011 30,832.				
c From 2012				
d From 2013 137,288.				
e From 2014 56,098.				
f Total of lines 3a through e	224,218.			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 340,212.				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions).				
d Applied to 2015 distributable amount.				439
e Remaining amount distributed out of corpus.	339,773			
5 Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	563,991.			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	563,991.			
10 Analysis of line 9				
a Excess from 2011 30,832.				
b Excess from 2012				
c Excess from 2013 137,288.				
d Excess from 2014 56,098.				
e Excess from 2015 339,773.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)) or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ATCH 6

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

SEE ATTACHED

c Any submission deadlines

N/A

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

ATCH 7

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year ATCH 8				
Total			3a	281,000.
b Approved for future payment				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments .			14	1.	
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property. .					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory. . .					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)				1.	
13	Total. Add line 12, columns (b), (d), and (e)				13	1

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

[illegible]

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Name of the organization

OTICON HEARING FOUNDATION, INC.

Employer identification number

27-4849403

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. 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 ▶ \$ _____

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

Name of organization **OTICON HEARING FOUNDATION, INC.**Employer identification number
27-4849403**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	EARCARE CENTERS HUTCHINSON 2602 N. MAIN STREET HUTCHINSON, KS 67502	\$ 15,600.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
2	BROADWATER HEARING CARE 4107 5TH AVENUE SAINT PETERSBURG, FL 33713	\$ 7,200.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
3	AUDIOLOGY & COMMUNICATION SERVICES 777 LARKFIELD RD, STE 108 COMMACK, NY 11725-3136	\$ 8,400.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
4	LAURA MORAN 4700 POINT FOSDICK DR., STE 2 GIG HARBOR, WA 98335	\$ 6,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
5	OTICON, INC. 580 HOWARD AVENUE SOMERSET, NJ 08873	\$ 58,533.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
6	VARIOUS OTHER - SEE ATTACHED 	\$ 118,200.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization **OTICON HEARING FOUNDATION, INC.**

Employer identification number

27-4849403

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	26 HEARING AIDS	\$ 15,600.	01/02/2015
2	12 HEARING AIDS	\$ 7,200.	11/11/2015
3	14 HEARING AIDS	\$ 8,400.	11/13/2015
4	10 HEARING AIDS	\$ 6,000.	11/20/2015
6	197 HEARING AIDS	\$ 118,200.	VARIOUS

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
BANK SAVINGS INTEREST	1.	1.
TOTAL	<u>1.</u>	<u>1.</u>

ATTACHMENT 2

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>
LEGAL/PROFESSIONAL (TAX) FEES	11,993.
TOTALS	<u>11,993.</u>

CHARITABLE
PURPOSES
11,993.
11,993.

ATTACHMENT 3

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	CHARITABLE PURPOSES
BANK FEES	180.	180.
ADVERTISING	2,584.	2,584.
DIRECT MAIL MARKETING	6,349.	6,349.
TOTALS	<u>9,113.</u>	<u>9,113.</u>

FORM 990PF, PART II - OTHER ASSETS

ATTACHMENT 4

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
DONATED HEARING AIDS	25,200.	25,200.
TOTALS	<u>25,200.</u>	<u>25,200.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 5

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
PEER LAURITSEN 580 HOWARD AVENUE SOMERSET, NJ 08873	PRESIDENT 1.00	0.	0.	0.
RASMUS BORSTING 580 HOWARD AVENUE SOMERSET, NJ 08873	TRUSTEE & VICE PRESIDENT 1.00	0.	0.	0.
MATTHEW MOUND 580 HOWARD AVENUE SOMERSET, NJ 08873	TRUSTEE & TREASURER 1.00	0.	0.	0.
MARIANN CADIEU 580 HOWARD AVENUE SOMERSET, NJ 08873	SECRETARY 10.00	0.	0.	0.
DONALD J. SCHUM 580 HOWARD AVENUE SOMERSET, NJ 08873	VICE PRESIDENT 1.00	0.	0.	0.
SHEENA OLIVER 580 HOWARD AVENUE SOMERSET, NJ 08873	VICE PRESIDENT 1.00	0.	0.	0.
GRAND TOTALS		0.	0.	0.

ATTACHMENT 6

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MARIANN CADIEU
580 HOWARD AVENUE
SOMERSET, NJ 08873
800-526-3921

ATTACHMENT 7

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

REQUESTS ARE GRANTED TO ASSIST THOSE IN NEED WITH THE ACQUISITION OF
HEARING INSTRUMENTS.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 8

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNIVERSITY OF BUFFALO 122 CARY HALL BUFFALO, NY 14214	N/A GOV	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	23,400
ENT & AUDIOLOGY ASSOCIATES 3820 ED DRIVE RALEIGH, NC 27612	N/A NC	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	23,400
HEALING THE CHILDREN 4310 ROSELAND ST HOUSTON, TX 77006	N/A PC	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	15,000
MEXICAN MEDICAL 7850 LESTER AVENUE LEMON GROVE, CA 91945	N/A PC	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	7,200
FIRST BAPTIST CHURCH OF INDIAN ROCKS 7431 114TH AVE N, SUITE 101 LARGO, FL 33773	N/A SO I	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	60,000
COLORADO GERONTOLOGICAL SOCIETY 8321 S SANGRE DE CRISTO #202 LITTLETON, CO 80127	N/A PC	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	75,600

ATTACHMENT 8

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 8 (CONT'D)

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND
FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SWEDISH NEUROSCIENCE INSTITUTE 550 17TH AVE, SUITE 500 SEATTLE, WA 98125	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	7,200
OLIVE OSMOND FOUNDATION P O. BOX 282 EPHRAIM, UT 84627	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	29,000
LIFE FOR RELIEF AND DEVELOPMENT, INC 17300 W 10 MILE RD SOUTHFIELD, MI 48075	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	25,200
TWIN RIVERS HEARING HEALTH, INC 151 DOUGLAS PIKE SMITHFIELD, RI 02917	PROVIDE HEARING AIDS TO NEEDY INDIVIDUALS	15,000
TOTAL CONTRIBUTIONS PAID		281,000

Oticon Hearing Foundation, Inc.

EIN: 27-4849403

Year Ended: December 31, 2015

Form 990-PF, Part VII-A, Question 10 Persons Becoming Substantial Contributors During the Year

Earcare Centers Hutchinson

2602 N. Main Street

Hutchinson, KS 67502

Oticon Hearing Foundation, Inc.

EIN: 27-4849403

Year Ended: December 31, 2015

Oticon Hearing Foundation, Inc. does not value each donated hearing aid individually, but instead applies an average fair market value to all contributions received and distributed of \$600 per unit. This value was utilized in calculating the amount of contributions, gifts, and grants paid reported on Form 990-PF.

Oticon Hearing Foundation, Inc.
Expenditure Responsibility Statement
Attachment to 2015 Form 990-PF
EIN: 27-4849403

Page 5, Part VII-B, Line 5c

The following information is provided in accordance with IRC Sec. 4945(h)(3) and Reg. 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to this grant.

Name and Address of Grantee:	Dr. Lena Kyman ENT & Audiology Associates 3820 Ed Drive Raleigh, NC 27612
Amount and Date of Grant:	39 Hearing Instruments with total FMV of \$23,400; December 2015
Purpose:	For charitable, religious, scientific literary of educational purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code 1986.
Date Confirmation Received From the Grantee:	The Foundation received confirmation on November 4, 2016 that the hearing aids were given to needy individuals by Dr. Lena Kyman.
Amount Expended by Grantee:	\$23,400
Diversion:	To the knowledge of the grantor, no property has been diverted to any activity other than the activity for which the grant was originally made.
Verification:	The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Oticon Hearing Foundation, Inc.
Expenditure Responsibility Statement
Attachment to 2015 Form 990-PF
EIN: 27-4849403

Page 5, Part VII-B, Line 5c

The following information is provided in accordance with IRC Sec. 4945(h)(3) and Reg. 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to this grant.

Name and Address of Grantee:	Swedish Neuroscience Institute 550 17th Ave, Suite 500 Seattle, WA 98122
Amount and Date of Grant:	12 Hearing Instruments with total FMV of \$7,200; July 9, 2015
Purpose:	For charitable, religious, scientific literary of educational purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code 1986.
Date Confirmation Received From the Grantee:	The Foundation received confirmation on November 4, 2016 that the hearing aids were given to needy individuals by Swedish Neuroscience Institute.
Amount Expended by Grantee:	\$7,200
Diversion:	To the knowledge of the grantor, no property has been diverted to any activity other than the activity for which the grant was originally made.
Verification:	The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Oticon Hearing Foundation, Inc.
Expenditure Responsibility Statement
Attachment to 2015 Form 990-PF
EIN: 27-4849403

Page 5, Part VII-B, Line 5c

The following information is provided in accordance with IRC Sec. 4945(h)(3) and Reg. 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to this grant.

Name and Address of Grantee:	Twin Rivers Hearing Health, Inc. 151 Douglas Pike Smithfield, RI 02917
Amount and Date of Grant:	25 Hearing Instruments with total FMV of \$15,000; February 10, 2015
Purpose:	For charitable, religious, scientific literary of educational purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code 1986.
Date Confirmation Received From the Grantee:	The Foundation received confirmation on August 25, 2016 that the hearing aids were given to needy individuals by Twin Rivers Hearing Health, Inc.
Amount Expended by Grantee:	\$15,000
Diversion:	To the knowledge of the grantor, no property has been diverted to any activity other than the activity for which the grant was originally made.
Verification:	The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

OTICON HEARING FOUNDATION, INC.
FORM 990-PF, SCHEDULE B, PART I, NO. 6 DETAIL

EIN: 27-4849403
YEAR ENDED: DECEMBER 31, 2015

Note: The following individuals donated hearing instruments or accessories with an estimated fair market value as follows:

<u>Name</u>	<u>Address</u>	<u>Donation</u>
Alan Ryder	103 Wakefield Drive New Bern, NC 28562	3,600
Alastair Burton	18503 Grapevine Way Olney, MD 20832	1,200
All Ears Hearing Center	59 Industrial Park Rd Ste 2200 Plymouth, MA 02360	4,200
Ann R Kraus	5303 Mill Street Erie, PA 16509	1,200
Audiology Of New Bern	2111 Neuse Blvd, STE 1 New Bern, NC 28560	600
Audrey N Lewis	400 Somerset Corporate Blvd Bridgewater, NJ 08807	2,400
Barbara Dwyer	18003 Harvard Ct Sonoma, CA 95476	600
Barbara Snider	165 Grey Dove Ct Longwood, FL 32779	1,200
Bennie Pedraza	1242 Walker Lane Lahabra, CA 90631	1,200
Betty Davis	17803 Imperial Hwy#233 Unknown	1,200
Beverly Bilderback	97 Marsh Trace Brunswick, GA 31525	2,400
Beverly Lew	4001 W Alameda, Suite 101 Burbank, CA 91505	3,000
Bill Ditman	5333 Mt McKinley Rd Fort Worth, TX 76137	1,200
Brent Caffee	2416 Steeplechase Road Edmond, OK 73034	1,200
Buffalo Hearing & Speech Ctr	5225 Sheridan Dr Buffalo, NY 14221	600
Carol Fish	2532 Crown Way Fullerton, CA 92833	1,200
Christine Stewart	360 Kingstown Rd Narragansett, RI 02882	600
Complete Hearing Solutions	1530 South 70th Street Lincoln, NE 68506	600
Cove Audiology & Hearing	130 Forest Ave Glen Cove, NY 11542-2015	1,200

OTICON HEARING FOUNDATION, INC.
FORM 990-PF, SCHEDULE B, PART I, NO. 6 DETAIL

EIN: 27-4849403
YEAR ENDED: DECEMBER 31, 2015

Culpeper Hearing Center LLC	2002 Orange Rd, STE 105 Culpeper, VA 22701	1,200
Dale Shepp	3502 N Carhill Ave Scottsdale, AZ 85251	1,200
Donald Wingard	3010 59th St SO 3106 Saint Petersburg, FL 33707	1,200
DonnaLee Miller	9629 E Palo Verde Drive Phoenix, AZ 85018	1,800
Doris Strosnider	4266 Congressional Drive Myrtle Beach, SC 29579	1,200
Douglas Pollock	3614 60th St Ct NW Gig Harbor, WA 98335	1,200
Eleanor Smith	51 Cricket Ln Stamford, CT 06903	600
Elizabeth Short	609 E Ameila St Cassville, WI 53806	600
Emily Doughty	816 Big Willow Fort Worth, TX 76179	1,200
ENT Associates	2350 N Lake Dr, STE 406 Milwaukee, WI 53211-4507	600
Family Hearing Centers	Unknown	600
Gary Prush	W166 N1554 Westminster Ct Germantown, WI 53022	1,200
Georgia Earp	3140 7th Ave N Saint Petersburg, FL 33713	1,800
Glen Baldwin	180 Ocean Ave Northport, NY 11768	1,800
Hearing Aid Associates	140 Prospext Ave Apt 3p Hackensack, NJ 07601-1974	1,200
Hearing and Balance Centers of New England	24 Park Ave Worcester, MA 01605	1,200
Hearing Solutions	408 S Mustang Road, STE B Yukon, OK 73099	1,200
Heartland Hospital West	3620 Frederick Ave Saint Joseph, MO 64506	1,200
Helen Lilley	61848 Red Meadow Ct Bend, OR 97703	1,200
Herb Shillingburg	1805 Victoria Drive Edmond, OK 73003	1,200

OTICON HEARING FOUNDATION, INC.
FORM 990-PF, SCHEDULE B, PART I, NO. 6 DETAIL

EIN: 27-4849403
YEAR ENDED: DECEMBER 31, 2015

Hope Ellis	2841 N Lakeridge Trail Boulder, CO 80302	1,800
Hunterdon Otolaryngology Assoc	6 Sand Hill Rd Flemington, NJ 08822-4946	1,800
Iona Caldwell	1579 Whiterock Circle San Jose, CA 95125	1,200
J Timothy Coltrin	723 Leslie lane Glendale Heights, IL 60139	1,200
James Beam	2414 Meadow Pond Rail Pine Bluff, AR 71602	600
Jenna Port	401 Timberdale Terrace Edmond, OK 73034	1,200
Jerry Parisi	17 Chenango Drive Bay Shore, NY 11706	1,200
Joan Zimmerman	14990 Winchester Blvd Los Gatos, CA 95030	1,200
John Bondurant	81 Draftwood Ct Arapahoe, NC 28510	1,200
Joseph Yannarella Jr	1712 S Rankin Street Edmond, OK 73013	1,800
Joyce McMillian Jones	3624 21st Ave South Saint Cloud, 56301	600
Judith Coleman	49 Nautilus Drive Brick, NJ 08723	1,200
Ken Bozeman	59 Industrial Park Rd Plymouth, PA 02360	3,600
Kenneth Husband	6340 N 39th Place Paradise Valley, AZ 85253	1,200
Kenneth Ridman	12 Makamah Rd Northport, NY 11768	1,200
Lawrence Robillard	808 Farrar Drive Conway, SC 29526	600
Lillian Kormendi	8 Botany Lane Stony Brook, NY 11790	1,200
Lois Schneberger	8689 E Roosevelt Ave Scottsdale, AZ 85257	1,200
Lorraine Wandling	69 Beech street Belleville, NJ 07109	1,200
Louise Range	558 Botany Loop Murrells Inlet, SC 29576	1,200

OTICON HEARING FOUNDATION, INC.
FORM 990-PF, SCHEDULE B, PART I, NO. 6 DETAIL

EIN: 27-4849403
YEAR ENDED: DECEMBER 31, 2015

Martha Nail	915 Tyler Drive Santa Maria, CA 93454	1,200
Mary Ella Morley	5110 N 32nd Street Phoenix, AZ 85018	600
Mary O'Connor	750 University Ave #100 Los Gatos, CA 95032	1,200
Merle Crow	370 Northview Drive Prescott, AZ 86301	1,200
Michael Donald	2501 Copperfield DR Santa Rosa, CA 95401	1,200
Mr and Mrs Brethaupt	2507 Lytal Terrace Edmond, OK 73013	600
Patricia Plominski	5 Davis Road Port Washington, NY 11050	1,200
Peggy Beyer	72430 56th Ave Daykin, NE 68338	1,200
Portage Hearing Service	500 Campus Dr Hancock, MI 49930-1569	1,200
Puget Sound Hearing & Balance	9714 3rd Ave NE, STE 100 Seattle, WA 98115-2047	1,800
Ralph Shrauner	16328 Winding Park Drive Edmond, OK 73013	1,200
Raymond Edwards	4951 Treat Ave San Jose, CA 95124	1,200
Regina Vitolo	144 Knolls Dr Stony Brook, NY 11790	1,200
Robert Dahlinger	313 Park Street Westfield, NJ 07090	1,200
Robert Davis	1400 Madison 203 Fredericktown, MO 63645	1,200
Robert Harrington	P O Box 150 Succasunna, NJ 07876	600
Robert Wilkinson	10490 Norton Dr Houston, TX 77043	1,200
Ruth Rose	419 N 7th Street De Soto, MO 63020	1,200
South County Hearing Services	360 Kingstown Rd Narragansett, RI 02882-3239	1,200
St Joseph's Convent	1725 Brentwood Rd #1 Brentwood, NY 11717	2,400

OTICON HEARING FOUNDATION, INC.
FORM 990-PF, SCHEDULE B, PART I, NO. 6 DETAIL

EIN: 27-4849403
YEAR ENDED: DECEMBER 31, 2015

Steve Canter	6223 N 12th Street Number 2 Phoenix, AZ 85014	1,200
Steven Suttles	354 Berkshire Valley Rd Wharton, NJ 07885	1,200
Stewart Fliege	12115 Saw Vicente Blvd #409 Los Angeles, CA 90049	1,200
Susan Geisler	3487 S Linden Ste R Flint, MI 48507	1,200
Susan Wolf	210 S Estates Cove Pine Bluff, AR 71602	2,400
Sylvester Henseler	W 2694 Killsnake Road Hilbert, WI 54129	600
Theresa Gunzel	137 Spring Meadow Dr Holbrook, NY 11741	1,200
Total Hearing Care-Newton	222 High St Newton, NJ 07860-9604	1,200
Virginia Thomas	85 Camp Ave Unit 7G Stamford, CT 06907	600
Wilmington Hearing Specialists	3909 Wrightsville Ave Wilmington, NC 28403	1,200
Anonymous		3,000
	Total	<u>118,200</u>