

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



### DLN: 93491270001016

2015

OMB No 1545-0052

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 instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2015, or tax y	, and ending 0	and ending 06-30-2016						
	e of foun	ndation Educational Foundation Inc			A Employer ide	entification numbe	er .			
1119	e Fauer L	Educational Foundation Inc			58-2330050					
		street (or P O box number if mail is n Tree Court	ot delivered to street address)	) Room/suite	<b>B</b> Telephone nur	mber (see instructions	s)			
	or town, usta, GA	, state or province, country, and ZIP or 30907	r foreign postal code		C If exemption application is pending, check here					
e Cl	neck all	II that apply   Tinitial return	Initial return of a fo		<del></del>		. –			
<b>G</b> C,	ieck an	Final return Address chang	Amended return	Affice public charte,	D 1. Foreign on test, check	•				
Se	ection 4	pe of organization 🔽 Section ! 4947(a)(1) nonexempt charitab I	ole trust   Cother taxable	e private foundation	E If private fou under section	undation status was t n 507(b)(1)(A), chec	erminated			
of y		et value of all assets at end rom Part II, col. (c), \$ 0	JAccounting method Other (specify)	<u> </u>	F II the lounda	ation is in a 60-month n 507(b)(1)(B), chec				
Pai	rt I	Analysis of Revenue a (The total of amounts in columns (to inecessarily equal the amounts in columnstructions))	b), (c), and (d) may not	Revenue and expenses per	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)			
	1	Contributions, gifts, grants, et	tc , received (attach							
		schedule)		53,063						
	2	Check 🟲 🦵 If the foundation is	is <b>not</b> required to attach							
		Sch B								
	3	Interest on savings and temp	orary cash investments	4	4	4				
	4	Dividends and interest from se	ecurities	10,259	10,259	10,259				
Reveilue	5a	Gross rents								
	b	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of	assets not on line 10	37,613						
	ь	Gross sales price for all asset	ts on line 6a							
œ	7	Capital gain net income (from	Part IV, line 2)		37,613					
	8	Net short-term capital gain .								
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less Cost of goods sold								
	С	Gross profit or (loss) (attach s	,	<u> </u>						
	11	Other income (attach schedul	•							
	12	<b>Total.</b> Add lines 1 through 11		100,939	, , , , , , , , , , , , , , , , , , ,					
	13	Compensation of officers, dire		4,000	4,000	<b></b>				
	14	Other employee salaries and	-							
φ	15	Pension plans, employee bene	-							
SHS.	16a	Legal fees (attach schedule).				<b></b>				
Expenses	b	Accounting fees (attach sche		<u> </u>	1,397					
	С	Other professional fees (attac	ch schedule)	5,558	5,558					
Admını strative	17	Interest								
13 13	18	Taxes (attach schedule) (see	ınstructions)	1,674	1,674					
	19	Depreciation (attach schedule	e) and depletion							
Ê I	20	Occupancy								
Δ Δ	21	Travel, conferences, and meet	tıngs							
and	22	Printing and publications								
돧	23	Other expenses (attach sched	dule)	<b>%</b> 45	45					
Operating	24	Total operating and administrated Add lines 13 through 23	-	12,674	12,674		0			
ā	25	Contributions, gifts, grants pa	-	·	·		76,550			
_	26		ľ	. 5,52			, 0,022			
	26	Total expenses and disbursem 25	ents.Add lines 24 and	89,224	12,674		76,550			
	27	Subtract line 26 from line 12								
	a	Excess of revenue over expen		11,715						
	b	Net investment income (if neg			35,202					
	С	Adjusted net income(if negation	ve, enter -0 - )			10,263				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value						
	1	Cash—non-interest-bearing	` '		(c) Full Planket Value						
	2	Savings and temporary cash investments		74,03	19						
	3	Accounts receivable	,	,							
		Less allowance for doubtful accounts -									
	4	Pledges receivable -									
	7	Less allowance for doubtful accounts -									
	5	Grants receivable									
	6	Receivables due from officers, directors, trustees, and other									
	U	disqualified persons (attach schedule) (see instructions)									
	7	Other notes and loans receivable (attach schedule)									
	,	Less allowance for doubtful accounts									
		Inventories for sale or use			+						
왍	8				+						
Assets	9		repenses and deferred charges								
ಠ	10a	Investments—U S and state government obligations (attach schedule)									
	b	Investments—corporate stock (attach schedule)									
	С	Investments—corporate bonds (attach schedule)									
	11	Investments—land, buildings, and equipment basis 🕨									
		Less accumulated depreciation (attach schedule) -									
	12	Investments—mortgage loans									
	13	Investments—other (attach schedule)	473,491	496,18	8						
	14	Land, buildings, and equipment basis 🟲									
		Less accumulated depreciation (attach schedule) -									
	15	O ther assets (describe 🟲)	729,076	774,56	07						
	16	<b>Total assets</b> (to be completed by all filers—see the									
		ınstructions Also, see page 1, item I)	1,324,368	1,344,79	0						
	17	Accounts payable and accrued expenses									
	18	Grants payable									
Ě	19	Deferred revenue									
abilities	20	$\label{loss_equal_loss} Loans \ from \ officers, \ directors, \ trustees, \ and \ other \ disqualified \ persons$									
Lial	21	Mortgages and other notes payable (attach schedule)									
_	22	O ther liabilities (describe 🟲)		<b>%</b> 19	52						
	23	Total liabilities(add lines 17 through 22)		15	52						
۰.۵		Foundations that follow SFAS 117, check here 🕨 🔽									
÷		and complete lines 24 through 26 and lines 30 and 31.									
an	24	Unrestricted	1,324,368	1,344,64	-2						
Ba	25	Temporarily restricted									
됟	26	Permanently restricted									
or Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🦵									
5		and complete lines 27 through 31.									
Ş	27	Capital stock, trust principal, or current funds									
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund									
ď	29	Retained earnings, accumulated income, endowment, or other funds									
Net	30	Total net assets or fund balances(see instructions)	1,324,368	1,344,64	2						
	31	Total liabilities and net assets/fund balances(see instructions)	1,324,368	1,344,79	4						
Pa	rt 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 a	gree							
		with end-of-year figure reported on prior year's return)		1	1,324,368						
2		Enter amount from Part I, line 27a		2	11,715						
3		Other increases not included in line 2 (itemize)			8,559						
4		Add lines 1, 2, and 3		4	1,344,642						
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)—l	art II, column (b), l	ine 30 <b>. 6</b>	1,344,642						

the Part VI instructions

Part IV Capital Gains and Losses for Tax on Investment Income

	List and describe th  (a) 2-story brick wareho	P—Purchase (b) D—Donation		ate acquired mo , day, yr )	Date sold (d) (mo , day, yr )			
1a	See Addıtıonal Data Ta	ble						
b								
С								
d								
e								
(e)	) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basıs expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)			
а	See Additional Data Ta	ble						
b								
С								
d								
e								
Cor	nplete only for assets sho	owing gain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus	
(i)	F M V as of 12/31/69	A djusted basis ( <b>j</b> ) as of 12/31/69		r col (j), if any	(I) C		ot less than -0-) <b>or</b> (from col (h))	
а	See Additional Data Ta	ble						
b							_	
С								
d								
e								
3		gaın or (loss) as defined ın sectio rt I, line 8, column (c) (see instru			3		37,613	
Part \	Qualification Un	der Section 4940(e) for R	educed Tax on	Net Investme	nt In	come		
If sectio Was the	onal use by domestic priv	unto foundations oubset to the co						
		eve this part blank section 4942 tax on the distributa	able amount of any	year in the base p		e)	┌ Yes ┌ No	
	foundation liable for the s the foundation does not	ave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do	able amount of any o not complete this	year in the base p part	erıod?	ne )	┌ Yes ┌ No	
	foundation liable for the s the foundation does not	eve this part blank section 4942 tax on the distributa	able amount of any o not complete this	year in the base p part ore making any ent	eriod? ries	(d) Distributio (col (b) divideo	n ratio	
	foundation liable for the some the foundation does not er the appropriate amoun  (a) period years Calendar	section 4942 tax on the distribute qualify under section 4940(e) Do t in each column for each year, se	able amount of any o not complete this ee instructions befo	year in the base p part ore making any ent	eriod? ries	(d) Distributio	n ratio	
	foundation liable for the some the foundation does not er the appropriate amoun  (a) period years Calendar r tax year beginning in)	section 4942 tax on the distribute qualify under section 4940(e) Do t in each column for each year, se (b) Adjusted qualifying distributions	able amount of any o not complete this ee instructions befo	year in the base p part ore making any ent ritable-use assets	eriod? ries	(d) Distributio	n ratio I by col (c))	
	foundation liable for the solution does not er the appropriate amoun  (a) period years Calendar r tax year beginning in)  2014  2013  2012	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046	able amount of any o not complete this ee instructions befo	year in the base p part ore making any ent ritable-use assets 1,225,716 1,239,543 1,107,564	eriod? ries	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227	
	foundation liable for the solution does not er the appropriate amoun  (a) period years Calendar rax year beginning in)  2014 2013 2012 2011	t in each column for each year, se  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082	able amount of any o not complete this ee instructions befo	year in the base p part pre making any ent ritable-use assets 1,225,716 1,239,543 1,107,564 1,019,976	eriod? ries	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204	
year (o	foundation liable for the souther foundation does not er the appropriate amoun  (a) period years Calendar rax year beginning in)  2014  2013  2012  2011  2010	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839	able amount of any o not complete this ee instructions befo (c) Net value of nonchai	year in the base p part ore making any ent intable-use assets 1,225,716 1,239,543 1,107,564 1,019,976 990,603	eriod?	(d) Distributio	n ratio   by col (c))   0 04641   0 08304   0 07227   0 05204   0 06949	
	foundation liable for the state foundation does not the foundation does not er the appropriate amoun  (a) period years Calendar rax year beginning in)  2014  2013  2012  2011  2010  Totalof line 1, column (A verage distribution rai	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839  d)	able amount of any o not complete this ee instructions before (c)  Net value of nonchard (c)	year in the base p part  ore making any entertable-use assets  1,225,716  1,239,543  1,107,564  1,019,976  990,603  e 2 by 5, or by	eriod?	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204 0 06949 0 323256	
year (o	foundation liable for the solution does not the foundation does not er the appropriate amount (a) period years Calendar rax year beginning in) 2014 2013 2012 2011 2010  Totalof line 1, column (a) Average distribution rat the number of years the	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839  d)	able amount of any o not complete this ee instructions before (c)  Net value of nonchard (c)	year in the base p part  ore making any entroper making any entrop	eriod?	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204 0 06949 0 323256 0 064651	
2 3 4	foundation liable for the state foundation does not the foundation does not er the appropriate amount (a) period years Calendar rax year beginning in) 2014 2013 2012 2011 2010  Totalof line 1, column (and Average distribution rate in number of years the Enter the net value of note the foundation of the state in the	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839  d)	able amount of any o not complete this ee instructions before the complete this ee instructions before the complete this end of nonchard the complete this complete the co	year in the base p part  pre making any enterpression of the part	eriod? ries  2 3 4	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204 0 06949 0 323256 0 064651 1,225,490	
2 3 4 5	foundation liable for the state foundation does not the foundation does not er the appropriate amount (a)  period years Calendar rax year beginning in)  2014  2013  2012  2011  2010  Totalof line 1, column (and Average distribution rate the number of years the Enter the net value of not multiply line 4 by line 3	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839  d)	able amount of any o not complete this ee instructions before (c)  Net value of nonchard (c)  Vide the total on line if less than 5 years (c) from Part X, line 5	year in the base p part  ore making any entertable-use assets  1,225,716  1,239,543  1,107,564  1,019,976  990,603  e 2 by 5, or by rs fs	2 3 4 5 5	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204 0 06949 0 323256 0 064651 1,225,490 79,229	
year (o	foundation liable for the so the foundation does not er the appropriate amoun  (a) period years Calendar rax year beginning in)  2014  2013  2012  2011  2010  Totalof line 1, column (A verage distribution rathe number of years the Enter the net value of not Multiply line 4 by line 3 Enter 1% of net investre	t in each column for each year, so  (b)  Adjusted qualifying distributions  56,880  102,937  80,046  53,082  68,839  d)	not complete this ee instructions before the value of nonchards of the total on line if less than 5 years from Part X, line 5 to 17b).	year in the base p part  ore making any entertable-use assets  1,225,716  1,239,543  1,107,564  1,019,976  990,603  e 2 by 5, or by rs fs	eriod? ries  2 3 4	(d) Distributio	n ratio 1 by col (c)) 0 04641 0 08304 0 07227 0 05204 0 06949 0 323256 0 064651 1,225,490	

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

	990-PF (2015)  *t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(b), 4940(b), 4940(b), 4940(b)	940(6)	or 4948—s	90 pag	18 of	the inst	ructio		age <b>4</b>
	Exempt operating foundations described in section 4940(d)(2), check here		, 01 4540 3	t page	10 01	the mac	ructio	113)	
1a	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			}					
_	(attach copy of letter if necessary–see instructions)	-11-							
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	, check		)	1				704
_	here ► Tand enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization Part I, line 12, col (b)	ations (	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndation	s only Othe	ers	_				
2	enter-0-) Add lines 1 and 2				3				704
3	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndation	oc only Oth	• orc	3				704
4	enter -0-)	iidatioi	is only Oth	C13	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter-C	)		5				704
6	C redits/P ay ments	_							
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		784					
b	Exempt foreign organizations—tax withheld at source	6b							
С	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				784
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2			_	8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun				10				80
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	80	Refunded		11				
	t VII-A Statements Regarding Activities		!		<u> </u>				
1a	During the tax year, did the foundation attempt to influence any national, state it participate or intervene in any political campaign?	e, or 100	ai iegisiatio	on or ar	u		1a	Yes	No No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	oolitica	l nurnosos	· ·	ctructi		14	$\vdash$	NO
	for definition)?			(300 111	3 Cluck	-	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	opies of anv	materia	ı Is	-			
	published or distributed by the foundation in connection with the activities.		,						
C	Did the foundation file Form 1120-POL for this year?						<b>1</b> c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impor	sed du	rıng the yea	r					
	(1) On the foundation 🕨 \$ (2) On foundation managers	<b>&gt;</b> \$ _							
e	Enter the reimbursement (if any) paid by the foundation during the year for pol	ıtıcal e	xpenditure 1	tax ımp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in $\Gamma$	_	_	•		S			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf						3	$\sqcup$	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	_					4a	$\longmapsto$	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	$\longmapsto$	No
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring th	e year?				5		No
_	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49  • By language in the governing instrument, or	45)sa	itisfied eithe	er					
	<ul> <li>By state legislation that effectively amends the governing instrument so th</li> </ul>	nat no r	mandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year							163	
•	and Part XV.		····			<i>/</i> /	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (	see ins	structions)						
	<b>►</b> GA								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G? ${\it If}$	"No," at	tach explana	ation .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the $\boldsymbol{\eta}$	meanın	g of section	4942	(3)(3)				
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	tructions for	Part X	ΊV)?				
_	If "Yes," complete Part XIV						9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes,			_				,	
	and addresses. 📆						10	Yes	

Par	Statements Regarding Activities (continued)			
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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶www fadelfoundation org			
14	The books are in care of Hossam Fadel Telephone no P			
	Located at ►3503 Lost Tree Court Augusta GA ZIP+4 ►30907			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year		- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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 )			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
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))			
а	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?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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		No
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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	1	No

Form 990-PF (2015)									Page <b>6</b>
Part VII-B Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	d)	
<b>5a</b> During the year did the foundation	рау	or incurany amount	t to						
(1) Carry on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e	e)) <sup>?</sup>	No No		
(2) Influence the outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry			
on, directly or indirectly, any	vote	registration drive?.				<b>┌</b> Yes ▽	. No		
(3) Provide a grant to an individu						r Yes r			
(4) Provide a grant to an organiza					scrit	oed			
in section 4945(d)(4)(A)? (se							- No		
(5) Provide for any purpose other						·			
educational purposes, or for t							- No		
<b>b</b> If any answer is "Yes" to 5a(1)-(		•							
Regulations section 53 4945 or i								5b	No
Organizations relying on a curren	_		110						
c If the answer is "Yes" to question									
							- Na		
tax because it maintained expend					•	Yes	NO		
If "Yes," attach the statement requi									
<b>6a</b> Did the foundation, during the year									
a personal benefit contract?									
<b>b</b> Did the foundation, during the year	r, pa	y premiums, directly	orı	ndirectly, on a perso	nal	benefit contract?	•	6b	No
If "Yes" to 6b, file Form 8870.									
<b>7a</b> At any time during the tax year, w	as tl	ne foundation a party	/ to a	a prohibited tax shelf	ter t	ransaction? <b>TYes V</b>	No		
<b>b</b> If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	to t	the transaction?		7b	No
Part William -	Of	ficers, Directors	, Tı	rustees, Founda	tio	n Managers, Highly	Paid	Employ	yees,
and Contractors									
1 List all officers, directors, trustees	s, roi	indation managers a	na t	neir compensation (s	see i				
		Title, and average	(c)	Compensation( <b>If</b>		<b>(d)</b> Contributions to		xpense a	ccount
(a) Name and address	/ <sub>b</sub>	hours per week		not paid, enter	e	mployee benefit plans		other allov	,
	(0)	(b) devoted to position		-0-)	and	d deferred compensation			
Hossam E Fadel MD	President			0					
3503 Lost Tree Court	1 0	J							
Augusta, GA 30907	L .								
Skina H Fadel MD	V (C)	Vice President		0					
3503 Lost Tree Court Augusta, GA 30907	"	J							
Ayman H Fadel	l			4.000					
3503 Lost Tree Court	3 0	retary O	4,000						
Augusta, GA 30907	"								
Mohammad Fadel	Dire	ector		0					
5 Scarth Road	1 0								
TorontoOntarioMWS,GA 00000									
2 Compensation of five highest-paid	emp	loyees (other than t	thos	e included on line 1—	see	instructions). If none, er	nter "l	NONE."	
						Contributions to			
(a) Name and address of each employee p	aid	Title, and avera		(c) Compensatio	n	employee benefit	l .	xpense a	•
more than \$50,000		(b) devoted to posi		(0,000,000		plans and deferred (d) compensation	(e)	other allov	wances
NONE						(d) compensation			
NONE									
Total number of other employees paid of	ver	\$50,000 <b></b>				· <b>.</b>			
p/ Para e			-		-	•	1		

Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,		
3 Five highest-paid independent contractors for professional serv	rices (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				
Total number of others receiving over \$50,000 for professional serv	ices			
Part IX-A Summary of Direct Charitable Activities				
List the foundation's four largest direct charitable activities during the tax year. Inclu		Expenses		
organizations and other beneficiaries served, conferences convened, research paper	•	, ,		
1 Grants of tuition and books to qualified students See itemized li	Stattached for Part 1, Line 25	<u> </u>		
2				
3				
4				
Part IX-B Summary of Program-Related Investme		<u></u>		
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	Amount		
1				
2				
		1		
All other program-related investments See instructions				
3				
3		-		
		-		
Total. Add lines 1 through 3		1		

## Form 990-PF (2015) Part X Minimum Investment Return

	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	465,587
b	Average of monthly cash balances	1b	3,999
c	Fair market value of all other assets (see instructions)	<b>1</b> c	774,566
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,244,152
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		i
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,244,152
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	18,662
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,225,490
6	Minimum investment return.Enter 5% of line 5	6	61,275
Pai	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei	rtain í	foreign organizations
	check here ► ✓ and do not complete this part.)	tuiii i	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	
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	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Dor	Qualifying Distributions (see instructions)		
Раг			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		i
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	76,550
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		
а	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	76,550
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	76,550
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

For	m 990-PF (2015)				Page <b>9</b>
Р	art XIII Undistributed Income (see instru	uctions)			
		<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2015				
а					
b			<u> </u>		
3	,,,				
a					
b					
	From 2014				
	From 2014				
	Qualifying distributions for 2015 from Part				
7	XII, line 4 🕨 \$				
а	Applied to 2014, but not more than line 2a				
	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				
	Remaining amount distributed out of corpus				
	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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
С	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				
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
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)				
۵	Excess distributions carryover to 2016.		_		
_	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2011				
b	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014				
е	Excess from 2015				

For	m 990-PF (2015)					Page <b>10</b>
ŀ	Part XIV Private Operating Founda	<b>tions</b> (see ınstru	ctions and Part	VII-A, question	9)	
1a	If the foundation has received a ruling or deter foundation, and the ruling is effective for 2015					1993-03-18
b	Check box to indicate whether the organization	ıs a prıvate operat	ıng foundatıon des	scribed in section	▼ 4942(j)(3) or	厂 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	<b>(c)</b> 2013	<b>(d)</b> 2012	(5) 15111
	year listed	10,263	12,667	16,541	12,326	51,797
b	85% of line 2a	8,724	10,767	14,060	10,477	44,028
c	Qualifying distributions from Part XII, line 4 for each year listed	76,550	56,880	103,355	80,046	316,831
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	76,550	56,880	103,355	80,046	316,831
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>	1,344,642	1,324,368	1,276,241	1,171,654	5,116,905
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
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					_
Рa	rt XV Supplementary Information (	Complete this r	art only if the	e organization	had \$5 000 o	r more in
	assets at any time during the			o organization	40,000 0	
	Information Regarding Foundation Managers: List any managers of the foundation who have obefore the close of any tax year (but only if the See Additional Data Table	y have contributed	more than \$5,000	)) (See section 50	07(d)(2))	
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of w				large portion of th	e
2	Information Regarding Contribution, Grant, Gif	ft, Loan, Scholarshir	o, etc., Programs:			
	Check here  if the foundation only makes c unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and	ontributions to pres n makes gifts, grant	elected charitable			
а	The name, address, and telephone number or e	e-mail address of th	e person to whom	applications shou	ıld be addressed	
	Ayman H Fadel 3503 Lost Tree Court Augusta, GA 30907 (706) 863-5416					
b	The form in which applications should be subm	nitted and informatio	on and materials t	hey should include	e	
_	Download application from website - www fade	foundation org - and	d return with lette	rs of recommenda	tion and transcript	S
c	Any submission deadlines					
	N4 = 14					

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

Award is distributed for tuition and other educational related expenses for a degreed or non-degreed program

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 76,550 **b** Approved for future payment

Form 990-PF (2 Part XVI-A	Analysis of Income-Produc	cing Activities	5			Page <b>1</b> 2		
nter gross am	ounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt		
<b>1</b> Program ser	vice revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions)		
a						mstructions y		
e								
	 contracts from government agencies							
Membership Interest on	o dues and assessments savings and temporary cash			14				
	nd interest from securities			14	10,259			
	ncome or (loss) from real estate							
	nced property financed property							
property.	ncome or (loss) from personal							
Gain or (los	s) from sales of assets other than					37,61:		
	or (loss) from special events or (loss) from sales of inventory							
L Other rever	nue <b>a</b> _							
b								
e								
	dd columns (b), (d), and (e) ne 12, columns (b), (d), and (e)				10,263 <b>13</b>	37,613 47,876		
(See works	heet in line 13 instructions to verify	calculations )				17,676		
	Relationship of Activities t							
Line No.	xplain below how each activity for wh ne accomplishment of the foundation' istructions)							
ASS	ESTMENTS ARE MADE IN INCOME SETS TO INCREASE AMOUNTS OF	GRANTS TO ST	UDENTS					
FUN	EREST INCOME FROM INVESTME NDS FOR THE GRANTS MADE TO E (IDEND INCOME FROM THE INVES	LIGIBLE STUDE	NTS	•				
	ANTS MADE TO ELIGIBLE STUDEN		L FIDELITY ACC	COUNT WITCH 13	THE SOURCE OF	FUNDS FOR THE		

Par	t XVI		Information Ro Noncharitable					sactio	ns and I	Relationships	With			
		organı	zation directly or i ) of the Code (othe	ndırectly (	engage	ın any of t	the following wi						Yes	No
org	ganıza	tions?	,						·					
a Tr	ansfer	s from	the reporting four	ndation to	a nonc	harıtable (	exempt organız	ation of						
(1	) Cas	h										1a(1)		No
(2	) Oth	erass	sets									1a(2)		No
<b>b</b> Ot	her tr	ansac	tions											
(1	) Sale	es of a	ssets to a noncha	rıtable ex	empt or	rganızatıoı	n					1b(1)		No
			s of assets from a									1b(2)		No
			facılıtıes, equipme									$\overline{}$		No
			ement arrangemer									1b(4)		No
			loan guarantees.									1b(5)		No
			ce of services or m									1b(6)		No
												1c		No
	_		lities, equipment, to any of the above	_										NO
	any tr	ansac	other assets, or se tion or sharing arr ) Amount involved	angement	, show	ın column		of the goo	ods, othe		ces receive	ed		nts
de	scribe	d in s	ion directly or indi ection 501(c) of th blete the following ) Name of organization	ne Code (d schedule		an sectioi		ın sectı			•••• otion of relati		es 🔽	No
Sign Here	the Info	best ormat ***	enalties of perjury, of my knowledge a ion of which prepar ***	and belief, rer has an	ıt ıs tru	ue, correct		Declar			May t May t return with t below	r) is bas he IRS di he prepai	sed on scuss th	all nis vn
		9 . 1 .								_		nstr )? 🗸	Yes N	Ю
			it/Type preparer's cott A Adkıns	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ►	PTIN	012557	20	
Use	areı	A no	n's name ► lerson Adkıns & Cı n's address ►	rews CPA:	s			•		Firm's EIN ►				
Only	1	604	Ponder Place Dri	ve Evans,	GA 30	0809				Phone no (706	5)288-200	00		

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 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 )
100 SPDR SER TR S&P HOMEBUILDERS ETF	Р	2010-01-01	2015-08-07
150 SECTOR SPDR TR SHS BEN INT TECHNOLOGY	Р	2010-01-01	2015-08-07
100 SECTOR SPDR TR SHS BEN INT UTILITIES	Р	2010-01-01	2015-08-07
200 SPDR SER TR S&P HOMEBUILDERS ETF	Р	2010-01-01	2015-08-26
200 SPDR SER TR S&P HOMEBUILDERS ETF	Р	2010-01-01	2015-10-16
100 SELECT SECTOR SPDR TR SHS BEN INT MATERI	Р	2010-01-01	2015-10-19
100 SELECT SECTOR SPDR TR HEALTH CARE FORMER	Р	2010-01-01	2015-11-05
100 SPDR SER TR S&P HOMEBUILDERS ETF	Р	2010-01-01	2015-11-17
100 SPDR SER TR S&P HOMEBUILDERS ETF	Р	2010-01-01	2015-11-17
1283 697 FIDELITY TOTAL INT'L EQUITY FUND	Р	2010-01-01	2015-12-03

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
3,714		1,940	1,774
6,322		3,172	3,150
4,373		3,170	1,203
7,543		3,975	3,568
7,292		3,678	3,614
4,397		2,785	1,612
7,264		3,365	3,899
3,556		1,248	2,308
3,548		1,297	2,251
10,000		9,716	284

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			1,774
			3,150
			1,203
			3,568
			3,614
			1,612
			3,899
			2,308
			2,251
			284

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
100 SECTOR SPDR TR SHS BEN INT UTILITIES	Р	2010-01-01	2016-03-07
100 SELECT SECTOR SPDR TR HEALTH CARE FORMER	Р	2010-01-01	2016-03-09
100 SELECT SECTOR SPDR TR HEALTH CARE FORMER	Р	2010-01-01	2016-03-22
1482 276 FIDELITY TOTAL INT'L EQUITY FUND	Р	2010-01-01	2016-04-14
100 SECTOR SPDR TR SHS BEN INT ENERGY, XLE	Р	2010-01-01	2016-04-18
100 SELECT SECTOR SPDR TR HEALTH CARE FORMER	Р	2010-01-01	2016-06-07
26 SELECT SECTOR SPDR TR HEALTH CARE FORMER	Р	2010-01-01	2016-06-07

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
4,576		3,173	1,403
6,742		3,351	3,391
6,631		3,362	3,269
11,221		11,221	
6,398		5,383	1,015
7,234		3,360	3,874
1,873		875	998

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	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	A djusted basis <b>(j)</b> as of 12/31/69	Excess of col (1) <b>(k)</b> over col (j), if any	col (k), but not less than -0-) <b>or</b> (I) Losses (from col (h))
			1,403
			3,391
			3,269
			1,015
			3,874
			998

Form 990PF Part XV Line 1a - 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).

Hns	sam	F Fa	adel	MΟ

Skina H Fadel MD

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NATALIJA KOKOREVAU OF TN HEALTH SCI 920 COURT AVE MEMPHIS,TN 38163	NONE	I	TUITION	1,500
REEM AL-ATASSIEMORY UNIVERSITY 201 DOWMAN DR ATLANTA, GA 30322	NONE	I	TUITION	1,400
MARYAM FUNMILAYOEAST CAROLINA UNIVE 1001 E 5TH ST GREENVILLE,NC 27858	NONE	I	TUITION	702
ANIKRAZA RIAZHUSEN MOMINU OF PITTSB 4200 FIFTH AVE PITTSBURGH,PA 15260	NONE	I	TUITION	2,200
OMAR TAREK EL-SADANYCARNEGIE MELLON 5000 FORBES AVE PITTSBURGH,PA 15213	NONE	I	TUITION	1,700
JOANNA GROMENORTHERN KENTUCKY UNIVE 100 NUNN DR HIGHLAND HEIGHTS,KY 41099	NONE	I	TUITION	2,400
ZAHRA T BASHIRBARD COLLEGE 30 CAMPUS RD ANNADALEONHUDSON,NY 12504	NONE	I	TUITION	2,600
O ZAIR RIZVIRUTGERS NEW JERSEY MEDIC 185 S ORANGE AVE NEWARK,NJ 07103	NONE	I	TUITION	1,400
RAZANE CHERKGEORGETOWN UNIVERSITYQA EDUCATION CITY AL LUQTA ST AR-RAYYAN,AR-RAYYAN AR-RAYYAN QA	NONE	I	TUITION	1,500
MAI ABDUSAMADU CALIFORNIA - LOS ANG U CALIFORNIA - LOS ANGELES LOS ANGELES,CA 90095	NONE	I	TUITION	302
RANIA ABSUSAMADU CALIFORNIA - LOS A U CALIFORNIA - LOS ANGELES LOS ANGELES,CA 90095	NONE	I	TUITION	700
NAFISAH SALAAM-HARPGA PERIMETER COL 3251 PANTHERSVILLE RD DECATUR,GA 30034	NONE	I	TUITION	1,150
MUHAMMAD A SALAHUDDINHARTFORD SEMIN 77 SHERMAN ST HARFORD,CT 06105	NONE	I	TUITION	3,332
MUBASHIR S BILLAHSUNY UPSTATE UNION PLAZA 408 N DUNCAN BYPASS E UNION,SC 29379	NONE	I	TUITION	1,800
ROWIDA MOHAMEDUNIVERSITY OF CONNECT UNIV OF CONNECTICUT STORRS,CT 06269	NONE	I	TUITION	1,400
Total			▶ 3a	76,550

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year  GERALD OLIVERU OFTEXAS - AUSTIN U OFTEXAS - AUSTIN AUSTIN,TX 78712	NONE	I	TUITION	1,400
MARWA MOAZGEORGE WASHINGTON UNIVERS 2121 I ST NW WASHINGTON, DC 20052	NONE	I	TUITION	1,800
ASMA DAOUDIAUGUSTA UNIVERSITY 1120 15TH ST AUGUSTA,GA 30912	NONE	I	TUITION	2,500
ROHUL MUHAMMAD AMINPOLYTECHNIC INST 6 METROTECH CENTER BROOKLYN,NY 11201	NONE	I	TUITION	800
MUSAFFA KHANLONG ISLAND UNIVERSITY 720 NORTHERN BLVD BROOKVILLE,NY 11548	NONE	I	TUITION	900
TASMIHA KHANU OF UTAH 201 PRESIDENTS CIR SALT LAKE CITY,UT 84112	NONE	I	TUITION	2,400
SANA KHANU OF ILLINOIS 1200 WEST HARRISON ST CHICAGO,IL 60607	NONE	I	TUITION	1,400
BAAQEYAH MUHAMMAD ELARCADIA UNIVERS 450 S EASTON RD GLENSIDE,PA 19038	NONE	I	TUITION	2,000
ELIZABETH MUNIRA VON BRIESENUNC CHA 9201 UNIVERSITY CITY BLVD CHARLOTTE,NC 28223	NONE	I	TUITION	1,400
ALI MUSA JAFFERU OF S FL MORSANI CO 12901 BRUCE B DOWNS BLVD TAMPA,FL 33612	NONE	I	TUITION	2,000
SEREEN UMARAH ALIGEORGIA STATE UNIV 33 GILMER ST SE ATLANTA, GA 30302	NONE	I	TUITION	1,400
NORA ZAKIU OF CHICAGO 5801 ELLIS AVE CHICAGO,IL 60637	NONE	I	TUITION	1,400
AYAH AHMED ABO- BASHAAMERICAN U IN C 74 NEW CAIRO, CAIRO 11835 EG	NONE	I	TUITION	2,200
SAMAH SELINA CHOUDHURYU OF NORTH CA 910 RALEIGH RD CHAPEL HILL,NC 27514	NONE	I	TUITION	1,400
SAMMY ELMORU OF GEORGIA 240A RIVERBEND RD ATHENS,GA 30602	NONE	I	TUITION	1,400
Total			▶ 3a	76,550

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ADIL KIRATZAYTUNA COLLEGE 2401 LE CONTE AVE BERKELEY,CA 94709	NONE	I	TUITION	4,000
SCOTT DOOLINZAYTUNA COLLEGE 2401 LE CONTE AVE BERKELEY,CA 94709	NONE	I	TUITION	4,000
ROHBAN ZAHIDZAYTUNA COLLEGE 2401 LE CONTE AVE BERKELEY,CA 94709	NONE	I	TUTION	4,000
SHAHRANE KARIMZAYTUNA COLLEGE 2401 LE CONTE AVE BERKELEY,CA 94709	NONE	I	TUITION	4,000
NIRAV BHARDWAJZAYTUNA COLLEGE 2401 LE CONTE AVE BERKELEY,CA 94709	NONE	I	TUITION	4,000
AALMUHAMMED JEFRIU OF MARYLAND COLL 7999 REGENTS DR COLLEGE PARK,MD 20742	NONE	I	TUITION	1,400
SHAHID ABDUL JABBARHARTFORD SEMINAR 77 SHERMAN ST HARTFORD,CT 06105	NONE	I	TUITION	3,332
ZAKIR AHMEDHARTFORD SEMINARY 77 SHERMAN ST HARTFORD,CT 06105	NONE	I	TUITION	3,332
Total			▶ 3a	76,550

### **TY 2015 Accounting Fees Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,397	1,397	0	0

### **TY 2015 Other Assets Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MASS MUTUAL CSV HOSSAM FADEL	227,532	239,904	
MASS MUTUAL CSV SKINA FADEL	501,543	534,663	

### **TY 2015 Other Expenses Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	45	45		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491270001016
	<i></i>	

### **TY 2015 Other Liabilities Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Description	Beginning of Year - Book Value	End of Year - Book Value
Negative balance - Wells Fargo		151
Rounding		1

### **TY 2015 Other Professional Fees Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGER	5,558	5,558	0	0

# **TY 2015 Substantial Contributors Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Name	Address
HOSSAM AND SKINA FADEL	3503 LOST TREE COURT AUGUSTA,GA 30907

### **TY 2015 Taxes Schedule**

Name: The Fadel Educational Foundation Inc

**EIN:** 58-2330050

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID - INVESTMENT	67	67		
TAX AND LICENSES	1,607	1,607		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491270001016

EN. 33431270001010

OMB No 1545-0047

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

The Fa	idel Educational Four	ndation Inc	
			58-2330050
Organ	ization type (check	one)	
Filers	of:	Section:	
Form 9	90 or 990-EZ	☐ 501(c)( ) (enter number) organization	
		☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	1
		□ 527 political organization	
Form 9	90-PF	<b>▽</b> 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation	
		□ 501(c)(3) taxable private foundation	
		s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
Gener	al Rule		
V		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions om any one contributor. Complete Parts I and II. See instructions for determining a	
Specia	al Rules		
Γ	under sections 509( received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% suppa)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part ne contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or ii) Form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that
Γ	during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive I contributions of more than \$1,000 exclusively for religious, charitable, scientific foruelty to children or animals. Complete Parts I, II, and III	-
Γ	during the year, con this box is checked, purpose Do not con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive tributions exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclunplete any of the parts unless the <b>General Rule</b> applies to this organization becaute, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of 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

Name of organization

The Fadel Educational Foundation Inc

Employer identification number 58-2330050

Part I	Contributors (see instructions) Use duplicate copies of Part I i	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🔽
	HOSSAM AND SKINA FADEL 3503 LOST TREE COURT	\$ 17,000	Payroll
	AUGUSTA, GA 30907		Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2			Person $\Gamma$
	HOSSAM AND SKINA FADEL 3503 LOST TREE COURT	\$ 13,514	Payroll
	AUGUSTA, GA 30907		Noncash 🔽
	Medderm, andeser		(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3			Person $\Gamma$
	HOSSAM AND SKINA FADEL 3503 LOST TREE COURT	\$ 15,739	Payroll
	AUGUSTA CA 20007	Ψ 13,739	Noncash 🔽
	AUGUSTA, GA 30907		(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person _
	HOSSAM AND SKINA FAEDL 3503 LOST TREE COURT	\$ 6,710	Payroll
	AUGUSTA, GA 30907	<del></del>	Noncash 🔽
	A00031A, GA30307		(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person $\Gamma$
		\$	Payroll
		<del>*</del>	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	_		Person
		\$	Payroll
			Noncash
			(Complete Part II for noncash contributions)

Name of organization The Fadel Educational Foundation Inc			Employer identification number	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	58-2330050		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
2	200 SHARES OF SELECT SECTOR SPDR TR HEALTH CARE	\$ 13,514	2016-03-03	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
3	226 SHARES OF SELECT SECTOR SPDR TR HEALTH CARE	\$ 15,739	2016-05-18	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
4	120 SHARES OF SPECTOR SPDR TR SHS BEN INT INDUSTRIAL	\$ 6,710	2016-05-31	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		

Schedule B (Form 990,	990-EZ, or 990-PF) (2015)
-----------------------	---------------------------

Page 4

	58-2	330050
<ul> <li>For organizations completing Part or less for the year. (Enter this infor</li> </ul>	one contributor. Complete columns III, enter the total of exclusively relimation once. See instructions.) <b>&gt;</b>	s (a) through (e) and the following igious, charitable, etc., contributions
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	(e) Transfer of gift d ZIP4 Rela	tionship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	(e) Transfer of gift d ZIP 4 Rela	tionship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	(e) Transfer of gift	tionship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	(e) Transfer of gift d ZIP4 Rela	tionship of transferor to transferee
	e than \$1,000 for the year from any of For organizations completing Part or less for the year. (Enter this informate copies of Part III if additional space is  (b) Purpose of gift  Transferee's name, address, and  Transferee's name, address, and	e than \$1,000 for the year from any one contributor. Complete columns. For organizations completing Part III, enter the total of exclusively release for the year. (Enter this information once. See instructions.) at ecopies of Part III if additional space is needed  (b) Purpose of gift  (c) Use of gift  Transferee's name, address, and ZIP4  (e) Transfer of gift  Transferee's name, address, and ZIP4  (e) Transfer of gift  Rela  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  (d) Transfer of gift  Transferee's name, address, and ZIP4  (e) Transfer of gift  Rela  (e) Transfer of gift  Transferee's name, address, and ZIP4  (e) Transfer of gift  (e) Transfer of gift  (e) Transfer of gift  (e) Transfer of gift  (e) Transfer of gift