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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

	G UR	20 to Calandar year, or tax year beginning and	entany.					
В	heck if pplicabl	C Name of organization		D Employer identifi	cation number			
	Addre							
L]Name chang	Doing business as		43-6	<u>075073</u>			
]initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r			
	Final	433 S. RIDGE RD.		847-	234-7576			
	termin	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	138,025.			
]Amen	I am a second a secon						
는		TARE PUREST, IL 00045		H(a) is this a group n				
Ц.	Application pendir				17 Yes X No			
		433 S. RIDGE RD., LAKE FOREST, IL 600			ncluded7 Yes No			
11	ax-ex	empt status: X 501(c)(3)	or 527	if "No," attach a	list. (see instructions)			
J	Vebel	>> WWW.FAWCOFOUNDATION.ORG		H(c) Group exemptio	n number			
K F	orm of	organization; X Corporation Trust Association Other	L Year	of formation: 1967	A State of legal domicile: MO			
		Summary						
		Briefly describe the organization's mission or most significant activities: THE	PAMCO	POINTATION!	C COLE			
8								
& Governance		PURPOSE IS TO PUT INTO ACTION FAWCO'S ST						
\$		Check this box 🕨 🔲 if the organization discontinued its operations or dispos			ssets.			
ğ	3	Number of voting members of the governing body (Part VI, line 1a)	************	3				
9	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	6			
		Total number of individuals employed in calendar year 2016 (Part V, line 2a)			0			
ğ	8	Total number of volunteers (estimate if necessary)	**************	8	100			
Activities	7.	Total unrelated business revenue from Part VIII, column (C), line 12	***************	7a	0.			
II.								
		Net unrelated business taxable income from Form 990-T, line 34			0.			
ري			<u> </u>	Prior Year	Current Year			
N. P. Howenda	8	Contributions and grants (Part VIII, line 1) CFIVED		197,180.	86,071.			
	9	Program service revenue (Part VIII, line 2g). U - I V - I)	L_	0.	24,102.			
1	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8,335.	670.			
7	11	Other revenue (Part VIII, column (A), line 5/60, 8c, 9c, 10c, and 11e)		57.188.	26,064.			
Z	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	*******	262,703.	136,907.			
Ĉ		And the second s		146,931.	172,989.			
ď.			·····					
6,		Benefits paid to or for members (Part IX Column A), line 4)		0.	0.			
8		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.			
Ē	16e	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	Ъ	Total fundralsing expenses (Part IX, column (D), line 25)	0.	これ の 一般の	45.75			
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		24,812.	39,396.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		171.743.	212,385.			
		Revenue less expenses. Subtract line 18 from line 12		90,960.	-75,478.			
古祭	-	TOTALLE ROS EXPORTOS COLUMN TO HOLD IN THE IT		ciacing of Current Year				
85			1 200					
Net Assats	20	Total assets (Part X, line 16)	······	512,763.	437,285.			
뚫	21	Total liabilities (Part X, line 26)	······- —		0.			
		Net assets or fund balances. Subtract line 21 from line 20	<u></u>	512,763.	437,285.			
Pi	rt II	Signature Block						
Und	er pena	ities of perjury. I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	y knowledge and belief, it is			
true.	COTTEC	t, and complete. Declaration of preparer (ottyer than officer) is based on all information of wi	hich preparer	has any knowledge.	/			
		XMA QALLAND	•	157	101/2017			
6 1~	_	Signature of bifficer		Date	V Contract			
Sig		P 11						
Her	•	JODI GENTILOZZI, TREASURER Type or print name and title						
			1.	Nata I	T PTIN			
		Print/Type preparer's name Preparer's skinature	j L	Date Chick [PTIN			
Pale)	CHERYL K. ROHLFS, CPA COULAND LAND		MAY Set compton	₩ P01387972			
Pre	arer	Firm's name CHERYL ROHLFS & ASSOCIATES, LTD	•	Firm's EIN	36-3998689			
Use	Only	Firm's address 401 HUEHL ROAD, SUITE 2D						
NORTHBROOK, IL 60062 Phone no.847-753-9200								
Mar	the I	RS discuss this return with the preparer shown above? (see instructions)	<u></u>	1	Yes No			
		··· ··· ··· · · · · · · · · · · · · ·			Form 990 (2016)			
6320	01 11-1 C				4			
	2	BE SCHEDULE O FOR ORGANIZATION MISSION S'	TWITPER	MI CONTINON	TION 4 CAO			

	990 (2016) THE FAWCO FOUNDATION 43-6075073 Pa	ge 2
Pai	t'III' Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	THE FAWCO FOUNDATION WAS ESTABLISHED BY THE FEDERATION OF AMERICAN	
	WOMEN'S CLUBS OVERSEAS (FAWCO) IN 1967 AS AN INDEPENDENT	
	NOT-FOR-PROFIT THAT IMPLEMENTS PHILANTHROPIC PROGRAMS OF SPECIAL	
	INTERESTS TO FAWCO AND FAWCO MEMBER CLUBS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported	
la	(Code) (Expenses \$ 54,000 • Including grants of \$ 54,000 •) (Revenue \$	
	EDUCATIONAL AWARDS:	
	THE FAWCO FOUNDATION PRESENTS EDUCATIONAL AWARDS TO MEMBERS OF CHILDRI	ΞN
	OF INTERNATIONAL AND AMERICAN WOMEN'S CLUBS OVERSEAS WHO ARE, IN TURN	,
	MEMBERS OF THE UMBRELLA ORGANIZATION: FAWCO. RECEIPIENTS ARE CHOSEN	
	AFTER COMPLETING A THOROUGH APPLICATION PROCESS AND SELECTED BY A	_
	COMMITTEE BASED ON ACHIEVEMENTS DEPENDING ON THE REQUIREMENTS OF THE	
	AWARD IN QUESTION.	
b	(Code) (Expenses \$ 36,000 • including grants of \$ 36,000 •) (Revenue \$	
	DEVELOPMENT GRANTS:	
	THE FAWCO FOUNDATION AWARDS DEVELOPMENT GRANTS TO PROJECTS BY FAWCO	
	MEMBER CLUBS. RECIPIENTS ARE CHOSEN AFTER COMPLETING A THOROUGH	
	APPLICATION PROCESS AND ALL NOMINATED PROJECTS UNDERGO A VIGOROUS	
	REVIEW. THE RECIPIENTS ARE SELECTED BASED ON A VOTE BY THE FAWCO	
	MEMBER CLUBS AS OUTLINED IN THE FAWCO FOUNDATION ADMINISTRATIVE	
	GUIDELINES.	
		
c	(Code) (Expenses \$ 53,178. Including grants of \$ 53,178.) (Revenue \$	
	TARGET PROJECT:	
	FAWCO, THE FAWCO FOUNDATION AND ITS MEMBER CLUBS RAISE MONEY FOR A	
	SPECIFIC TARGET PROJECT SUPPORTING ONE OF THE FOUR AREAS OF INTEREST	_
	HUMAN RIGHTS, ENVIRONMENT, HEALTH AND EDUCATION.	
		-
	Other program services (Describe in Schedule O.)	
-		
—— 4е	212 205	
	Other program services (Describe in Schedule O) (Expenses \$ 69, 207 · including grants of \$ 29,811 ·) (Revenue \$ 25,487 ·) Total program service expenses > 212,385 · Form 990 (

Form	990 (2016) THE FAWCO FOUNDATION 4 It IV Checklist of Required Schedules	<u>3-6075073</u>	P	age 3
		-	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	├ ^	├
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candida public office? If "Yes," complete Schedule C, Part I	ates for 3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election during the tax year? If "Yes," complete Schedule C, Part II	on in effect 4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessm similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	ents, or		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the r	<u> </u>	├	 -
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedul	- (ł	х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	e D, Fait 1	\vdash	
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	l	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," compared to the organization maintain collections of works of art, historical treasures, or other similar assets?			x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial		$\vdash \!$	 -
J	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation servi	ices?	l	.
	If "Yes," complete Schedule D, Part IV	_9_	 	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, p endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	ermanent 10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, as applicable	IX, or X		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Sche	edule D,		x
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its to		 	
	assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VII	11b	<u> </u>	х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its to assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	otal 11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported	ed in		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that address the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	1		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	128	\vdash	
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, but		\vdash	
Ī	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$ or more? If "Yes," complete Schedule F, Parts I and IV	1	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for an		 	
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	,		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance	to 15	<u> </u>	-
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	L
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part 13	〈 ,		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VII 1c and 8a? If "Yes," complete Schedule G, Part II	II, lines	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>	1 -	<u> </u>
	complete Schedule G. Part III	19		х

Form **990** (2016)

Form 990 (2016) THE FAWCO FOUNDATION
Part IV | Checklist of Required Schedules (continued)

			Yes	No_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		_X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	L	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990	(2016)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V						
			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c					
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			•			
	filed for the calendar year ending with or within the year covered by this return 2a 0			ļ_ <u> </u>			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			 - <u></u> -			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X			
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b					
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
D	If "Yes," enter the name of the foreign country	İ					
Eo	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	<u> </u>		X			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c					
Va	any contributions that were not tax deductible as charitable contributions?	6a		х			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- 00					
_	were not tax deductible?	6ь					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		Х			
. d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X			
f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ļ					
_	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a						
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:	l					
	Gross income from members or shareholders						
	Gross income from other sources (Do not net amounts due or paid to other sources against	1					
	amounts due or received from them)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note. See the instructions for additional information the organization must report on Schedule O						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans						
С	Enter the amount of reserves on hand	L					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	LI	Х			
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	لِـــا				
		Form	990	(2016)			

Form 990 (2016) THE FAWCO FOUNDATION 43-6075073 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Chack if Schedule O contains a response or note to any line in this Bort VI			X				
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			لها				
000	tion A. doverning body and management		Vac	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 7		Yes	140				
	If there are material differences in voting rights among members of the governing body, or if the governing	İ						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
h	<u>.</u>							
_								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			$\overline{\mathbf{x}}$				
_	officer, director, trustee, or key employee?	2	_					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		v				
_	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X				
5	,							
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	ın Schedule O how this was done	12c	х					
13	Did the organization have a written whistleblower policy?	13	Х					
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1				
а	The organization's CEO, Executive Director, or top management official	15a		X				
	Other officers or key employees of the organization	15b		<u>X</u>				
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	IJU		 -				
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1				
·va	taxable entity during the year?	16a		\mathbf{x}^{-1}				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	10a						
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
		401						
Sac	exempt status with respect to such arrangements? tion C. Disclosure	16b						
17								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le					
	for public inspection Indicate how you made these available Check all that apply.							
46	Own website Another's website X Upon request Other (explain in Schedule O)	_	_					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial					
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records							
	JODI GENTILOZZI - 847-234-7576							
	433 S. RIDGE RD., LAKE FOREST, IL 60045							
632006	3 11-11-16	Form	990 ((2016)				

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any See instructions for definition of "key employee "
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)			(C Pos	C) ition	1		(D)	(E)	(F)		
Name and Title	Average hours per	(do	(do not check more box, unless person			nore than one		Reportable compensation	Reportable compensation	Estimated amount of other		
	week	officer and a director/trustee			or/trus	tee)	from	from related				
	(list any	ctor]		the	organizations	compensation		
	hours for	or dire				ated		organization	(W-2/1099-MISC)	from the		
	related	ıstee	truste		يو ا	bens		(W-2/1099-MISC)		organization		
	organizations below	ual tro	ional		ploye	t com	١.			and related organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) PATTI MEEK	25.00											
PRESIDENT		Х		X		<u> </u>	L	0.	0.			
(2) JANET DAVIS	2.00	_		l								
VP COMMUNICATIONS	20.00	Х		Х	_	<u> </u>	<u> </u>	0.	0.			
(3) JODI GENTILOZZI	30.00				ł	1	1			1		
TREASURER	4 00	X		X	<u> </u>			0.	0.	(
(4) LIZ JANSON	4.00	,,		ν,		1			0.	C		
SECRETARY ,	40.00	X	<u> </u>	Х	\vdash	├	<u> </u>	, 0.	U •			
(5) MARY ADAMS VP FUNDRAISING	40.00	х		x				0.	0.	(
(6) TRACY MOEDE	3.00	^		<u> </u>		-	┝	0.				
VP PROGRAMS	3.00	x		x		ļ	ļ	0.	0.	(
(7) SUZANNE WHEELER	8.00	^	<u> </u>	^	┝	├	┢		0.			
PARLIAMENTARIAN	8.00	X	ŀ	X				0.	0.	(
THUS ATTENIANCIAN		1	_	/ `	 	╁	\vdash					
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			1								-		
тb	Sub-total	1			L				0.	0.			0.
	Total from continuation sheets to Part V	II. Section A						•	0.	0.			0.
	Total (add lines 1b and 1c)	-						•	0.	-0.			0.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed al	bove	e) wh	no re	eceived more than \$100,000 of repor	table			
	compensation from the organization						•		<u>-</u>				C
												Yes	No
3	Did the organization list any former officer,	, director, or tr	uste	e, ke	y er	nplo	yee	, or l	highest compensated employee on				
	line 1a? If "Yes," complete Schedule J for s	such individual			•						3		X
4	For any individual listed on line 1a, is the si	um of reportab	le c	omp	ensa	atior	n and	d oth	her compensation from the organizati	ion			
	and related organizations greater than \$15	0,000? If "Yes	, " cc	mple	ete S	Sche	edul	e J f	for such ındıvıdual		4		X
5	Did any person listed on line 1a receive or									ces			
	rendered to the organization? If "Yes," con	nplete Schedu	le J i	for s	uch	pers	son				5	<u> </u>	Х
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors t	that received more than \$100,000 of	compens	ation	from	
	the organization Report compensation for	the calendar y	ear/	endı	ng v	vith	or w	ıthır	the organization's tax year.				
	(A)								(B)			C)	
	Name and business	address	N	ONI	<u> </u>			_	Description of services	<u> </u>	ompe	nsatio	on
								1		1			
								_					
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_				4		41.			d all and Victorian and an and the second	+-		_	
2	Total number of independent contractors (-	101	ırnıte	d to		se II O	stec	above) who received more than				
_	\$100,000 of compensation from the organ	ization 🚩					-		-		Form	990	(2016

THE FAWCO FOUNDATION

(B)

Average

hours per

week

(list any

hours for

related

organizations

below

line)

(C)

Institutional trustee

632008 11-11-16

Form 990 (2016)

(A)

Name and title

Pai	rt VII	Statement of Rever	nue					
_		Check if Schedule O cont	tains a response	or note to any lin				
,					Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	_	Federated campaigns Membership dues	1a 1b					:
اع ق	b		1c					
a #		Related organizations	1d					
S.E		0	tions) 1e					
tion S	f	All other contributions, gifts, gran	its, and					
휼흵		similar amounts not included abo	ve 1f	86,071.				
<u> </u>	9		s 1a-1f \$		0.6 071			'
<u>0 8</u>	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	86,071.			
_	0 -	SYMPOSIUM INCOM	ATE:	Business Code 611710	17,894.	17,894.		'
, vic	2 a	BOOK AND OTHER		611710	6,208.	6,208.		
Ser	C	Doon IIID OIIIDI		1 0 1 2 7 2 0	0,2001	0,200		<u> </u>
eve	d					=		<u> </u>
Program Service Revenue	е							
<u>-</u>	f	All other program service reve	enue					
_	g	Total. Add lines 2a-2f		>	24,102.			<u> </u>
	3	Investment income (including	dividends, intere	est, and	670	670		
		other similar amounts)		. 🟲	670.	670.		
	4	Income from investment of ta	x-exempt bond p	proceeds				<u> </u>
	5	Royalties	(i) Pool	(ii) Personal				
	6 2	Gross rents	(i) Real	(ii) Fersonai				;
		Less rental expenses						
		D1-1 (1)						
	d	Net rental income or (loss)	-	•			-	
ı	7 a	Gross amount from sales of	(i) Securities	(ii) Other	•			
- 1		assets other than inventory	ļ					
	b	Less cost or other basis						
		and sales expenses						
		Gain or (loss) Net gain or (loss)		<u> </u>	-			
		Gross income from fundraisin	a events (not					
une	• •	including \$	of					
eke		contributions reported on line	1c) See					
P.		Part IV, line 18	а					,
Other Reve		Less: direct expenses	b	1,118.	05 040			05 240
		Net income or (loss) from fund	-	> _	25,349.			25,349.
	9 a	Gross income from gaming ad						
1		Part IV, line 19	a b					1
		Less direct expenses Net income or (loss) from garr			-	-		
		Gross sales of inventory, less						
		and allowances	а					
ļ	b	Less cost of goods sold	b					
		Net income or (loss) from sale	es of inventory	•				<u> </u>
		Miscellaneous Revenu		Business Code	<u> </u>			
	11 a	MISCELLANEOUS		611710	715.	715.		↓
	b							
	C							-
	d	All other revenue Total. Add lines 11a-11d			715.	 		1
	12	Total revenue. See instructions.			136,907.		0	25,349.

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	ner organizations must co	omplete column (A)	
	Check if Schedule O contains a respor	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	87,122.	87,122.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	26,000.	26,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	<u>59,867.</u>	59,867.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		1		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			<u> </u>	
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management		<u> </u>		
b	Legal	2,280.	2,280.		
		2,200.	2,200.		
	Lobbying Professional fundraising services. See Part IV, line 17				
	Investment management fees		<u> </u>		
f	Other (If line 11g amount exceeds-10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0.)	2,926.	. 2,926.		
12	Advertising and promotion		2/3200		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	9,016.	9,016.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	!			•
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				L
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
9	SYMPOSIUM EXPENSES	18,777.	18,777.		
b	BOOKS	3,492.	3,492.		
	TECHNOLOGY EXPENSES	1,563.	1,563.		
d	BANK FEES	1,076.	1,076.		
_	All other expenses	266.	266.		
25	Total functional expenses. Add lines 1 through 24e	212,385.	212,385.	0.	0.
26	Joint costs. Complete this line only if the organization	·			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)			<u> </u>	<u> </u>

43-6075073 Page 11 THE FAWCO FOUNDATION Form 990 (2016) Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 49,836. 165,956. Cash - non-interest-bearing 1 387,449. 346,807. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b Less accumulated depreciation 10c b 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 437,285. 512,763. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 O. 0. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 257,489. 276,628. 27 27 Unrestricted net assets 245,483. 150,866. Temporarily restricted net assets 28 9,791. 9,791. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.

> 437,285. Form 990 (2016)

437,285.

30

31

32

33

34

512,763.

512,763.

31

32

33

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total net assets or fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Forn	1 990 (2016) THE FAWCO FOUNDATION	43-607	5073	Pag	e 12	_
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	,,			<u>Ш</u>	
		1	1 2	c 0	0 77	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,9		
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,3		
3	Revenue less expenses. Subtract line 2 from line 1	3 4	- / :	5,4	78.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	51	2,7	<u> </u>		
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	,
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		4.0		<u> </u>	
	column (B))	10	43	7,2	85.	
Ра	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>	
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			Yes	No	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				i
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х		:
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		Į		1
	separate basis, consolidated basis, or both		1 1		ĺ	1
	Separate basis Consolidated basis Both consolidated and separate basis					1
b	Were the organization's financial statements audited by an independent accountant?		2b		X	i
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,		1	1	
	consolidated basis, or both			ļ		
	Separate basis Consolidated basis Both consolidated and separate basis		_	ĺ		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audīt,]	I
	review, or compilation of its financial statements and selection of an independent accountant?	-	2c		X	į
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			ļ	l	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			l	ı
	Act and OMB Circular A-133?		3a		X	. *4
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit] _]	}		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990 (2016)	

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** 43-6075073 THE FAWCO FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (v) Amount of monetary (vi) Amount of other (iii) Type of organization (i) Name of supported (ii) EIN in your governing document (described on lines 1-10) organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990 EZ) 2016 THE FAWCO FOUNDATION 43-6075073 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 (f) Total (b) 2013 (c) 2014 (d) 2015 (e) 2016 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2015 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2016

17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization

b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2016 THE FAWCO FOUNDATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	ction A. Public Support	ciow, piease comp	nete Fart II.)				
_	endar year (or fiscal year beginning in)	(a) 2012	(b) 2012	(a) 2014	(d) 2015	(0) 2016	(f) Total
	Gifts, grants, contributions, and	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
'	membership fees received. (Do not	l					
	include any "unusual grants ")	174,035.	173,995.	181.859	197,180.	86,071.	813,140.
9	Gross receipts from admissions,	<u> </u>	,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101,009.	101,100.	00,071.	010,140.
~	merchandise sold or services per-	j	1				
	formed, or facilities furnished in	Í					
	any activity that is related to the	2,897.	3,838.	33,205.	81,251.	50,569.	171,760.
2	organization's tax-exempt purpose	2,091.	3,030.	33,203.	01,231.	30,303.	111,700.
3	Gross receipts from activities that are not an unrelated trade or bus-	ĺ	i l			[
	iness under section 513	ĺ					
A	· · · · · · · · · · · · · · · · · · ·						
4	Tax revenues levied for the organ-	Ì				}	
	ization's benefit and either paid to or expended on its behalf					}	
E	` <u>}</u>		·				
Э	The value of services or facilities		: 				
	furnished by a governmental unit to the organization without charge		' <u></u>	į		[
e	, , , , , , , , , , , , , , , , , , ,	176,932.	177,833.	215,064.	278,431.	136,640.	984,900.
	Total. Add lines 1 through 5	110,932.	111,000.	213,004.	210,431.	130,040.	304,300.
78	Amounts included on lines 1, 2, and]		Ì			0.
,	3 received from disqualified persons Amounts included on lines 2 and 3 received				<u> </u>		
	from other than disqualified persons that	j					
	exceed the greater of \$5,000 or 1% of the	}		ļ	1		n
	amount on line 13 for the year						0.
	Add lines 7a and 7b		·				984,900.
8	Public support. (Subtract line 7c from line 6) ction B. Total Support					L	304,300.
	endar year (or fiscal year beginning in)	(a) 0010	(b) 0010	(=) 004 ((4) 0045	(=) 0040	(6) T-1-1
	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	(a) 2012 176, 932.	(b) 2013 177,833.	(c) 2014 215, 064.	(d) 2015 278, 431.	(e) 2016 136,640.	(f) Total 984, 900.
-	Amounts from line 6 Gross income from interest,	110,332.	±11,000.	213,004.	410,431.	130,040.	704,700.
ıva	dividends, payments received on			1		·	
	securities loans, rents, royalties	815.	884.	221.	1,799.	670.	4,389.
	and income from similar sources	017.	004.	221.	1,133.	670.	4,303.
C	Unrelated business taxable income (less section 511 taxes) from businesses		'	Į		ļ J	ı
	acquired after June 30, 1975			ľ			
	· ' /	815.	884.	221.	1,799.	670.	4,389.
	Add lines 10a and 10b Net income from unrelated business	013.	004.	<u> </u>	1,133.	6/0.	4,303.
• •	activities not included in line 10b,			Ì			
	whether or not the business is		·	1	'	<u> </u>	
12	regularly carried on Other income Do not include gain						
12	or loss from the sale of capital	525.	925	060	1 700	715	1 021
40	assets (Explain in Part VI)		825.	960.	$\frac{1,799}{393,039}$	715.	4,824.
	Total support. (Add lines 9, 10c, 11, and 12)	178,272.	179,542.	216,245.	282,029.	138,025.	994,113.
14	First five years. If the Form 990 is for	tne organization's	s tirst, second, thin	d, tourth, or fifth ta	ix year as a sectio	n 501(c)(3) organız	,
86	check this box and stop here	o Cuppert Ca					
	ction C. Computation of Publi						99 07
	Public support percentage for 2016 (li		•	olumn (f))		15	99.07 %
	Public support percentage from 2015					16	99.05 %
	ction D. Computation of Inves					r. 	
	Investment income percentage for 20	*		ie 13, column (f))		17	.44 %
	Investment income percentage from 2	•	*		i i	18	.47 %
198	a 33 1/3% support tests - 2016. If the	•		•		•	
	more than 33 1/3%, check this box ar	•	•				► [X]
t	33 1/3% support tests - 2015. If the						and
	line 18 is not more than 33 1/3%, che			•		-	▶ -
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th			<u>▶</u>
6320	23 09-21-16				Scho	edule A (Form 990	or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Se	ction	A. A	II Sup	porting	Org	anizations
----	-------	------	--------	---------	-----	------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			'
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	- 55		
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	00		<u> </u>
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	70		<u> </u>
-	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	40		
٠	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	· · · · · · · · · · · · · · · · · · ·			
5 0	purposes.	<u>4c</u>		
Ja	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	-		
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	<u> </u>		
	was accomplished (such as by amendment to the organizing document)	5a		—
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	<u>-</u> -		
_	designated in the organization's organizing document?	5b		├
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
_	Part VI.	- 6		<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	l		
_	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
_	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		<u> </u>
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		<u> </u>
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		ļ
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		- —-	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
_	supporting organizations)? If "Yes," answer 10b below	10a	$\vdash \vdash$	<u> </u>
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		_	
	determine whether the organization had excess business holdings)	10b	ı l	1

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Schedule A (Form 990 or 990-EZ) 2016

instructions)

Schedule A (Form 990 or 990-EZ) 2016

a Applied to underdistributions of prior years
 b Applied to 2016 distributable amount
 c Remainder Subtract lines 4a and 4b from 4

than zero, explain in Part VI. See instructions

Part VI See instructions

Breakdown of line 7

b Excess from 2013c Excess from 2014d Excess from 2015e Excess from 2016

and 4c

a l

Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater

Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in

Excess distributions carryover to 2017. Add lines 3j

<u>Schedule A</u>	(Form 990 or 990-EZ) 2016	THE FAWCO FO	UNDAT TON_		43-6075073 Page
Part VI	Supplemental Inform	nation. Provide the exp	planations required by Part	II, line 10, Part II, line 17a or Ic, Part IV, Section B, lines 1 and 3b, Part V, line 1, Part V blete this part for any addition	17h: Part III. line 12
	(See instructions)	,			
					
					
				·	
					
					. <u>-</u>
		 			
	·			<u> </u>	
					
					
	-				-
					
				0.1.1.	e A (Form 990 or 990-EZ) 20
32028 09-21-	U			Scriedur	- A (1 01111 330 01 330-LL) 20

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 6 Open to Public Inspection

Name of the organization

Employer identification number

	THE FAWCO FOUNDATI		43-6075073
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, IIr	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	· · · · · · ·	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		-
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised f	funds
3	are the organization's property, subject to the organization's	•	Yes No
6		-	
0	Did the organization inform all grantees, donors, and donor a for chantable purposes and not for the benefit of the donor of		
	• •	or donor advisor, or for any other purpose con	Yes No
Da	rt II Conservation Easements. Complete if the or	contration annuared "Ves" on Form 000. But	
_			iv, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or o	r—	•
	Protection of natural habitat	Preservation of a certified	I historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements	-	2b
-	Number of conservation easements on a certified historic st	- · · · · · · · · · · · · · · · · · · ·	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	ganization during the tax
	year ▶	•	
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	nt holds?	└ Yes └ No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conserv	ration easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4	4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		
Pa	rt III Organizations Maintaining Collections of	of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	•	
	the text of the footnote to its financial statements that descri		
h	If the organization elected, as permitted under SFAS 116 (A		d balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items	dadation, or recourse in randianes of passe	(a)
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
			\$
^	(ii) Assets included in Form 990, Part X	angurae, or other similar assets for financial as	
2	If the organization received or held works of art, historical tre		iii, piovide
	the following amounts required to be reported under SFAS	i io (ASC 938) relating to these items	• •
	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		Schedule D (Form 990) 2016

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Sche	edule D (Form 990) 2016 THE FAW	CO FOUNDAT	ION			43-60	7507	3 Pag	e 2
Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, or Oth	ner Sim	ilar Asse	ts(contin	ued)	_
3	Using the organization's acquisition, access	ion, and other record	is, check any of the	following that are a	significar	nt use of its	collection	n items	
	(check all that apply)								
а	Public exhibition	d	I ∭ Loan or exc	hange programs					
b	Scholarly research	е	Other						
c	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how they further t	he organizatıon's ex	empt pur	pose in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	sures, or other simil	ar assets		_		
	to be sold to raise funds rather than to be m						Yes		No_
Pa	rt IV Escrow and Custodial Arran	- ,	ete if the organization	on answered "Yes" o	n Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Pa								
	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	ns or other assets no	ot include	d	_		
	on Form 990, Part X?						J Yes	Ш	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	illowing table.		Γ				
					<u> </u>		Amount		
	Beginning balance				_1c	†			
	Additions during the year				<u>1d</u>	<u> </u>			
е	Distributions during the year				<u>1e</u>	 			
f	Ending balance				1f			-1-1-	
	Did the organization include an amount on F				-	L	」Yes	님	No
_	If "Yes," explain the arrangement in Part XIII								
Fa	rt V Endowment Funds. Complete				,				
4	D	(a) Current year 9,791.	(b) Prior year 133,178.	(c) Two years back 125,678	(a) Thre	years back 125,645.	(e) Four		
	Beginning of year balance	9,731.	133,170,		 	33.	 -	125,4	75.
	Contributions			7,500.	 			<u>.</u>	73.
	Net investment earnings, gains, and losses		122 207		ļ <u>.</u>				
	Grants or scholarships		123,387.		 				
е	Other expenditures for facilities		. •						
	and programs		<u> </u>		 				
T	Administrative expenses	9,791.	9,791.	133,178,	 	125,678.	<u> </u>	125 6	45
g	End of year balance				·L	123,070.	<u></u>	125,6	45.
2	Provide the estimated percentage of the cur	rent year end balanc		a)) neid as					•
	Board designated or quasi-endowment		%						
	Permanent endowment	%							
С	Temporarily restricted endowment	%							
0	The percentages on lines 2a, 2b, and 2c sho	·			Al				
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are neid a	ina administered for	trie orga	nization	Γ	V N	
	by:						$\overline{}$	Yes I	X
	(i) unrelated organizations						3a(i)		$\frac{x}{x}$
_	(ii) related organizations						3a(iı)		<u>^</u>
D	If "Yes" on line 3a(ii), are the related organiza						3b	L	
Pa	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipn		ownient lunus						
	Complete if the organization answere		D Part IV line 11a S	See Form 990 Part 1	X line 10				
	Description of property	(a) Cost or o			Accumula	ted	(d) Bool	c value	
	Description of property	basis (investr			epreciation		(4) 500	, raide	
	Land		, ,	· · · ·	<u> </u>				
	Buildings	<u> </u>							
2	Leasehold improvements								
ų	Equipment		+						
	Other		+						
	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990. Part	X, column (B). line:	10c)					0.
		,	,			Schedule	D (Forn	1 990) 2	016

Schedule D (Form 990) 2016 THE FAWCO FO			43-6075073	Pa
Part XI Reconciliation of Revenue per Audi			enue per Return.	
Complete if the organization answered "Yes" or		2a		
1 Total revenue, gains, and other support per audited fir			1	
2 Amounts included on line 1 but not on Form 990, Part	VIII, line 12	اموا		
a Net unrealized gains (losses) on investments b Donated services and use of facilities		2a 2b		
		2c		
		2d	·	
		20]		
e Add lines 2a through 2d 3 Subtract line 2e from line 1			2e 3	
4 Amounts included on Form 990, Part VIII, line 12, but r	not on line 1			
		4a		
a Investment expenses not included on Form 990, Part vb Other (Describe in Part XIII)	viii, iiiie 70	4b		
c Add lines 4a and 4b		[_ 40]	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Fo	orm 000 Part I line 12)		5	
Part XII Reconciliation of Expenses per Aud	lited Financial State	ments With Ex		
Complete if the organization answered "Yes" or			periodo per rietarri.	
Total expenses and losses per audited financial staten			1	
2 Amounts included on line 1 but not on Form 990, Part				
a Donated services and use of facilities		2a		
b Prior year adjustments		2b		
c Other losses		2c		
d Other (Describe in Part XIII)		2d		
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1			3	
4 Amounts included on Form 990, Part IX, line 25, but no	ot on line 1:			
a Investment expenses not included on Form 990, Part		4a		
b Other (Describe in Part XIII)	<u>, ,</u>	4b		
c Add lines 4a and 4b	- ·.		4c	
5 Total expenses Add lines 3 and 4c. (This must equal F	Form 990 Part I line 18)		5	
Part XIII Supplemental Information.			<u> </u>	
nes 2d and 4b, and Part XII, lines 2d and 4b Also complete	this part to provide any a			
	·			
		_		
·				
				
				
32054 08-29-16	20		Schedule D (Form 9	 -
	28 16.05000 THE	ENWCO EOIN		990)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047 6

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization					Employer identi	rication number
THE FAWCO FOUND	ATION				43-60750	73
		ctivities Ou	tside the United States. Comple	te if the organ		
Form 990, Part IV						
	•		ds to substantiate the amount of its gra		· —	Yes No
the grantees eligibility to	or the grants or a	assistance, and	the selection criteria used to award the	grants or assi	istance? LA	resNo
2 For grantmakers, Desc	nbe in Part V the	e organization's	procedures for monitoring the use of its	s grants and of	ther assistance out	tside the
United States		· g	F	3		
3 Activities per Region (Tr	ne following Part	I, line 3 table ca	an be duplicated if additional space is r	eeded.)		
(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region	• •	vity listed in (d)	(f) Total
	offices in the region	agents and	(by type) (such as, fundraising, program services, investments, grants to		gram service, specific type	expenditures for and
	in the region	contractors	recipients located in the region)		(s) in the region	investments in the region
		in the region	ļ · · ·		., .	In the region
			EDUCATION			
EUROPE	o	0	AWARDS-INDIVIDUALS			16,000.
			DEVELOPMENT GRANTS,			10.400
SUB-SAHARAN AFRICA	0	0	SYMPOSIUM CONTRIBUTION			10,108.
EAST ASIA & THE			-			
PACIFIC EUROPE	o	0	DEVELOPMENT GRANTS			9,000.
		:			į.	
CALDODE	0	0	DEVIET ODMENT OF ANIMA			12 500
EUROPE			DEVELOPMENT GRANTS			13,500.
EUROPE	0	0	SYMPOSIUM CONTRIBUTIONS			7,759.
EUROPE	,	0	ADMINISTERED GRANTS			3,500.
BOKOF E						3,300.
3 a Sub-total	0	0				59,867.
b Total from continuation					 	
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0	<u> </u>			59,867
LHA For Paperwork Reduct	ion Act Notice,	see the Instruc	ctions for Form 990.		Schedule F	(Form 990) 2016

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THE FAWCO FOUNDATION Schedule F (Form 990) 2016

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

ook, FMV, ook, FMV, , other)					1		0	990) 2016
(i) Method of valuation (book, FMV, appraisal, other)		 						Schedule F (Form 990) 2016
(h) Description of noncash assistance								Sched
(g) Amount of noncash assistance							empt by	
(f) Manner of cash disbursement							recognized as tax-ex	
(e) Amount of cash grant	-						foreign country,	
(d) Purpose of grant				-			Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	
(c) Region						-	Enter total number of recipient organizations listed above that are re the IRS, or for which the grantee or counsel has provided a section Enter total number of other organizations or entities	
(b) IRS code section and EIN (if applicable)							recipient organization he grantee or counsel other organizations or	
1 (a) Name of organization							 Enter total number of recipient organizations listed a the IRS, or for which the grantee or counsel has pro Enter total number of other organizations or entities 	

30

43-6075073

THE FAWCO FOUNDATION

Schedule F (Form 990) 2016 THE

Part-III.] Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other) BOOK (g) Description of noncash assistance (f) Amount of noncash assistance 。 (e) Manner of cash disbursement 16,000,CHECK (c) Number of recipients cash grant (b) Region EUROPE (a) Type of grant or assistance EDUCATION AWARDS Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

Part V | Supplemental Information

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

PART I, LINE 2

DEVELOPMENT GRANTEES (INCLUDING NEED AND THE CONFERENCE CHARITY) ARE

VETTED AND MUST HAVE HAD A WORKING RELATIONSHIP FOR A MINIMUM OF ONE

YEAR WITH A FAWCO MEMBER CLUB BEFORE BEING INCLUDED FOR CONSIDERATION.

EACH NOMINATED ORGANIZATION IS VETTED TO ENSURE THAT CERTAIN

ELIGIBILITY REQUIREMENTS ARE MET AND THE FINAL GRANT RECIPIENT IS

DECIDED BY VOTE BY THE FAWCO'S MEMBER CLUBS.

A FORMAL CONTRACT IS SIGNED BETWEEN THE FOUNDATION AND THE GRANT

RECIPIENT.

THE GRANT RECIPIENT IS REQUIRED TO FILE TWO REPORTS DOCUMENTING THE USE

EDUCATION AWARD RECIPIENTS ARE FAWCO MEMBERS AND CHILDREN AND GRANDCHILDREN OF FAWCO MEMBERS.

THE INDIVIDUAL APPLICATIONS MUST BE APPROVED BY THE MEMBER CLUB BEFORE BEING SUBMITTED TO THE FAWCO FOUNDATION.

OF THE GRANT MONEY IN THE YEAR FOLLOWING THE GRANT MONEY DISBURSEMENT.

A FORMAL CONTRACT IS SIGNED BETWEEN THE AWARD RECIPIENT AND THE FOUNDATION.

RECIPIENTS MUST SHOW PROOF OF ENROLLMENT IN THEIR PROGRAM FROM THE

INSITITUTION TO BEFORE AWARD MONEY IS DISBURSED.

REQUIREMENTS ARE MET AND THE FINAL AWARD RECIPIENT IS DECIDED BY

EACH APPLICATION IS VETTED TO ENSURE THAT CERTAIN ELIGIBILITY

VOLUNTEER SELECTION COMMITTEES MADE UP OF NEUTRAL FAWCO MEMBERS.

ONE SPECIFIC MEMBER CLUB'S ACADEMIC AWARD IS ADMINISTERED BY THE

FOUNDATION. THE FINANCIAL SUPPORT IS PROVIDED SOLELY BY THIS SPECIFIC

MEMBER CLUB.

632075 09-21-16

Schedule F (Form 990) 2016

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047 Open to Public

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization

Employer identification number

Inspection

THE FAW	CO FOUNDATION			- <u> </u>	<u> 43-6075</u>	073
Part I Fundraising Activities. required to complete this part	Complete if the organization answer.	ered "Y	es" or	n Form 990, Part IV,	line 17. Form 990-E2	filers are not
Indicate whether the organization rais a	e Solicita f Solicita g Special r oral agreement with any individual art VII) or entity in connection with p iduals or entities (fundraisers) pursi	tion of tion of fundra (includerofess	non-govern govern using o ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribu	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			_			
	 -	ļ.—-		-		
						-
						L
			_			
:						
Total			>			
List all states in which the organizatio or licensing	n is registered or licensed to solicit	contrib	oution	s or has been notifie	d it is exempt from re	egistration
	····					
						<u> </u>
					<u>.</u>	
LUA E. D. L. L. D. L. L. L. A.	ine and the Instructions for Form	000	. 000		Schodule G (Form 9	200 or 990-E7) 2016

Schedule G (Form 990 or 990-EZ) 2016

632082 09-12-16

Schedule G (Form 990 or 990-EZ) 2016 THE FAWCO FOUNDATION	43-6075073 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and recor	
The first factor and addition of the potential time properties the digatile garding openial events to be the analysis	
Name ▶	
Name	
Address ►	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes ☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amo	unt
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name	
Address >	
16 Gaming manager information:	
Name	
Gaming manager compensation ▶ \$	
Description of services provided	
	
Director/officer Employee Independent contractor	
·	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the
organization's own exempt activities during the tax year > \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Part III lines 9 9h 10h 15h
	art III, III les 9, 30, 100, 100,
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	
	
	<u> </u>

3030 3 7 3111 300 31 300 22	43-60/50/3 Pag
art IV Supplemental Information (continued)	
	
	
	
	
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No 1545-0047 Inspection

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

Employer identification number

2 □ 43-6075073 INFRASTRUCTURE SUPPORT (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any EDUCATION Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö . (d) Amount of | (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 53,178 20 944 cash grant (c) IRC section (if applicable) THE FAWCO FOUNDATION 27-2454072 52-2070442 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization FAMILY OFFICE - 191 UNIVERSITY FREE THE GIRLS C/O CONFLUENCE or government CO 80206 FRIENDS OF BURKINA FASO Name of the organization CA 96020 BLVD - DENVER. P.O.BOX 345 CHESTER, Part I Part 11

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

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

Schedule I (Form 990) (2016)

43-6075073

Page 2

THE FAWCO FOUNDATION

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2016)

Part III | Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					i
SCIENCE AWARD	1	4,000.	0	CHECK PAYMENT	
			-		
DUAL CULTURAL AWARD	ਜ	4,000.	-	0.CHECK PAYMENT	
MEMBERS DEGREE AWARDS		. 000 's		0. CHECK PAYMENT	
		_			
WOMEN IN TECHNOLOGY AWARD	T	4,000.	0.0	0.CHECK PAYMENT	
			-		
ARTS AWARD Bart IV Sunniamental Information Provide the information required		4 ,000.	(b), and any othe	0 CHECK PAYMENT	
דיד התגת					
FAKI IV					

EDUCATION AWARD APPLICANTS ARE FIRST APPROVED BY THEIR MEMBER CLUBS.

THE APPLICATIONS ARE THEN VETTED BY COMMITTEE AND THE AWARDEES MUST

COMPLETE A LETTER OF AGREEMENT WHICH INCLUDES PROOF OF ENROLLMENT IN

THEIR PROGRAM AS INDICATED ON THEIR APPLICATION. AT THE END OF THE

FISCAL YEAR OF THE AWARD, THEY MUST SUBMIT A REPORT OF HOW THE AWARD

STUDIES HAS HELPED THEM WITH THEIR

632102 11-01-16

43-6075073 Page 2		(f) Description of non-cash assistance								Schedule ! (Form 990)
43-60		(f) Desc]			
Schedule I (Form 990) THE FAWCO FOUNDATION	luals in the United States (Schedule I (Form 990), Part III)	(e) Method of valuation (book, FMV, appraisal, other)	0. CHECK PAYMENT							
		(d) Amount of non- cash assistance	0							
		(c) Amount of cash grant	3,500.	-	-	,	·		-	
		(b) Number of recipients	1.							
	Part III Continuation of Grants and Other Assistance to Individ	(a) Type of grant or assistance	HALLOCK AWARDS							

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

b Open to Public

Internal Revenue Service Name of the organization Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number THE FAWCO FOUNDATION 43-6075073 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMUNITY BY SPECIFICALLY AIDING CHARITABLE, SCIENTIFIC AND EDUCATIONAL PROGRAMS AND SUPPORTING THE RIGHTS OF WOMEN AND CHILDREN THROUGHOUT THE WORLD. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: FOUNDATION GRANTS EXPENSES \$ 69,207. INCLUDING GRANTS OF \$ 29,811. REVENUE \$ 25,487. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF FAWCO ELECT THE BOARD OF DIRECTORS OF THE FAWCO FOUNDATION. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 AND ITS SCHEDULES ARE OFFERED FOR REVIEW TO ALL ITS BOARD MEMBERS. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY IS IN THE BY-LAWS AND ADMINISTRATIVE GUIDELINES THAT ARE REIEWED EACH YEAR. FOR GRANTEES, A CHECK IS MADE TO ENSURE THAT THERE ARE NO CONFLICTS OF INTEREST. FORM 990, PART VI, SECTION C, LINE 19: FAWCO MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATES AVAILABLE TO THE PUBLIC THROUGH REQUEST TO THE BOARD OF DIRECTORS.

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

Schedule O (Form 990 or 990-EZ) (2016)

43-6075073

Page 3

THE FAWCO FOUNDATION

[Partill] Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Schedule F (Form 990) 2016

Schedule F (Form 990) 2016 (h) Method of valuation (book, FMV, appraisal, other) BOOK (g) Description of noncash assistance (f) Amount of noncash assistance 0 (e) Manner of cash disbursement 16,000,CHECK (c) Number of cal Amount of recipients cash grant Part III can be duplicated if additional space is needed (b) Region EUROPE (a) Type of grant or assistance EDUCATION AWARDS