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

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

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

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning

, and ending

Name of foundation FOUNDATION OF THE PIERRE FAUCHARD ACADEMY		A Employer identification number 77-0120371
Number and street (or P.O. box number if mail is not delivered to street address) 11654 PLAZA AMERICA DRIVE	Room/suite 901	B Telephone number 703-217-1480
City or town, state or province, country, and ZIP or foreign postal code RESTON, VA 20190		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 7,452,584.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	46,977.			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	113,700.	113,700.		
	4 Dividends and interest from securities	136,106.	136,106.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	172,096.			
	b Gross sales price for all assets on line 6a	832,705.			
	7 Capital gain net income (from Part IV, line 2)		172,096.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	468,879.	421,902.	0.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	86,250.	4,313.	0.	81,938.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	9,265.	4,632.	0.	4,632.
	c Other professional fees	52,772.	52,772.	0.	0.
	17 Interest				
	18 Taxes	18,572.	4,116.	0.	6,613.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	19,021.	4,492.	0.	14,529.
	22 Printing and publications	837.	0.	0.	837.
	23 Other expenses	121,880.	0.	0.	10,170.
	24 Total operating and administrative expenses. Add lines 13 through 23	308,597.	70,325.	0.	118,719.
	25 Contributions, gifts, grants paid	247,500.			247,500.
26 Total expenses and disbursements. Add lines 24 and 25	556,097.	70,325.	0.	366,219.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-87,218.				
b Net investment income (if negative, enter -0-)		351,577.			
c Adjusted net income (if negative, enter -0-)			0.		

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Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	43,141.	20,380.	20,380.
	2 Savings and temporary cash investments	268,608.	112,155.	112,155.
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶ Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations STMT 5	0.	2,069,288.	2,069,288.
	b Investments - corporate stock STMT 6	4,561,650.	4,693,192.	4,693,192.
	c Investments - corporate bonds STMT 7	2,546,868.	506,335.	506,335.
	11 Investments - land, buildings, and equipment basis ▶ Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 8	0.	51,234.	51,234.
	14 Land, buildings, and equipment: basis ▶ Less accumulated depreciation ▶			
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	7,420,267.	7,452,584.	7,452,584.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ BANK OVERDRAFT)	0.	15,920.	
	23 Total liabilities (add lines 17 through 22)	0.	15,920.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	7,420,267.	7,436,664.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances	7,420,267.	7,436,664.	
31 Total liabilities and net assets/fund balances	7,420,267.	7,452,584.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	7,420,267.
2 Enter amount from Part I, line 27a	2	-87,218.
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN ON INVESTMENTS	3	103,615.
4 Add lines 1, 2, and 3	4	7,436,664.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,436,664.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES		VARIOUS	VARIOUS
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 832,705.		660,609.	172,096.
b			
c			
d			
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			172,096.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	172,096.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

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

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

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

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

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	328,131.	7,265,840.	.045161
2014	332,683.	7,175,724.	.046362
2013	292,336.	6,665,114.	.043861
2012	294,794.	6,145,491.	.047969
2011	360,228.	5,871,685.	.061350

2 Total of line 1, column (d)	2	.244703
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.048941
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	7,335,174.
5 Multiply line 4 by line 3	5	358,991.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,516.
7 Add lines 5 and 6	7	362,507.
8 Enter qualifying distributions from Part XII, line 4	8	366,219.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	3,516.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	3,516.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	3,516.
6 Credits/Payments:			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		105.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		3,621.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ <u>0.</u> (2) On foundation managers. <input checked="" type="checkbox"/> \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> <u>CA</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	X

N/A

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.FOUNDATIONPFA.ORG</u>	13	X
14 The books are in care of ► <u>THE FOUNDATION, JENNIFER TEALE, ED</u> Telephone no. ► <u>703-217-1480</u> Located at ► <u>11654 PLAZA AMERICA DRIVE, NO. 901, RESTON, VA</u> ZIP+4 ► <u>20190</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

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

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

	Yes	No
1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► _____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____	2b	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2016 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 2016.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2016?	4a	X
	4b	X

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

5a During the year did the foundation pay or incur any amount to:

- | | |
|---|---|
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

5b X

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A ☐ Yes ☐ No

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

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		86,250.	0.	0.

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

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

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

▶ 0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. 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 services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
	0.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	7,423,593.
b	Average of monthly cash balances	1b	23,284.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,446,877.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,446,877.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	111,703.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,335,174.
6	Minimum investment return. Enter 5% of line 5	6	366,759.

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

1	Minimum investment return from Part X, line 6	1	366,759.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	3,516.
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	3,516.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	363,243.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	363,243.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	363,243.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	366,219.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	366,219.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	3,516.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	362,703.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				363,243.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011	81,462.			
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e	81,462.			
4 Qualifying distributions for 2016 from Part XII, line 4: ► \$	366,219.			
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2016 distributable amount				363,243.
e Remaining amount distributed out of corpus	2,976.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	84,438.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
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)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	81,462.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	2,976.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016	2,976.			

**FOUNDATION OF THE PIERRE FAUCHARD
ACADEMY**

Part XV Supplementary Information (continued)

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ACADEMIE PIERRE FAUCHARD 304-5885 COTE DES NEIGES MONTREAL, QUEBEC, CANADA H3S 2T2	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	10,000.
ADOPT A VET DENTAL PROGRAM (AAVD) 680 S. ROCK BLVD. RENO, NV 89502	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
ARIZONA SCHOOL OF DENTISTRY 5850 EAST STILL CIRCLE MESA, AZ 85206	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
PFA JAPAN SECTION PFA JAPAN SECTION RYOGAE-MACHI FUSHIMI-KU, KYOTO, JAPAN 2-348-302	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
BETTER ORAL HEALTH FOR MASSACHUSETTS COALITION 40 COURT STREET BOSTON, MA 02108	NONE	PUBLIC CHARITY	DENTAL SERVICES	15,000.
Total	SEE CONTINUATION SHEET(S)			247,500.
b Approved for future payment				
NONE				
Total				0.

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | Yes | No |
|----------|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	Signature of officer or trustee <i>Dennis Teale</i>		Date <i>10/3/17</i>		Title EXECUTIVE DIRECTOR		May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Print/Type preparer's name DAVID TRIMNER		Preparer's signature <i>DT</i>		Date <i>9-28-2018</i>		
Paid Preparer Use Only	Firm's name ▶ CLIFTONLARSONALLEN LLP					Firm's EIN ▶ 41-0746749	
	Firm's address ▶ 901 N. GLEBE ROAD, SUITE 200 ARLINGTON, VA 22203					Phone no. 571-227-9500	

Form **990-PF** (2016)

FOUNDATION OF THE PIERRE FAUCHARD
ACADEMY

77-0120371

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOSTON UNIVERSITY 100 EAST NEWTON STREET BOSTON, MA 02118	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
CALIFORNIA DENTAL ASSOCIATION FOUNDATION 1201 K STREET SACRAMENTO, CA 95814	NONE	PUBLIC CHARITY	DENTAL SERVICES	10,000.
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND, OH 41406-4905	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
CHICAGO DENTAL SOCIETY FOUNDATION 401 N. MICHIGAN AVE, SUITE 200 CHICAGO, IL 60611	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
COLUMBIA UNIVERSITY 630 WEST 168TH STREET NEW YORK, NY 10032	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
CREIGHTON UNIVERSITY 2500 CALIFORNIA PLAZA OMAHA, NE 68178-0240	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
DENTAL LIFELINE NETWORK - RHODE ISLAND 67 JEFFERSON BLVD. WARWICK, RI 02888	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
DENTAL LIFELINE NETWORK - LA 1100 FLORIDA AVE. NEW ORLEANS, LA 70119-2799	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
DENTAL LIFELINE NETWORK - NC 1123 S. MAIN STREET REIDSVILLE, NC 27320	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
Total from continuation sheets				215,500.

**FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
EAST CAROLINA UNIVERSITY SCHOOL OF DENTAL MEDICINE LAKESIDE ANNEX 7, MAIL STOP 701 GREENVILLE, NC 27832-4354	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
FUNDEVI PO BOX 025292 MIAMI, FL 33102	NONE	PUBLIC CHARITY	DENTAL SERVICES	7,500.
GRACE CHURCH/GLOBAL OUTREACH 3626 HIGHWAY 31 RACINE, WI 53405	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
HARVARD UNIVERSITY 188 LONGWOOD AVENUE BOSTON, MA 02115	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
HEALTH OUTREACH INTERNATIONAL 117 QUEEN ST SOUTH, UNIT 2 MISSISSAUGA, ONTARIO, CANADA L5M 6B5	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
HOLLAND FREE HEALTH CLINIC 99 WEST 26TH STREET HOLLAND, MI 49423	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
HOWARD UNIVERSITY 600 "W" STREET, N.W. WASHINGTON, DC 20059	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
HUNTRIDGE TEEN CLINIC 2100 SOUTH MARYLAND PKWY, NO 1 LAS VEGAS, NV 89104	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
INDIANA UNIVERSITY SCHOOL OF DENTISTRY 1121 WEST MICHIGAN STREET INDIANAPOLIS, IN 46202	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
INTERAMERICAN CENTER FOR GLOBAL HEALTH SAN VITO COTO BRUS PUNTARENAS, PUNTARENAS, COSTA RICA	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
Total from continuation sheets				

**FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
IOWA DENTAL FOUNDATION 8797 NW 54TH AVENUE, SUITE 100 JOHNSTON, IA 05031	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
LOMA LINDA UNIVERSITY 11092 ANDERSON ST. LOMA LINDA, CA 92350	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
LOUISIANA DENTAL ASSOCIATION FOUNDATION 7833 OFFICE PARK BLVD. BATON ROUGE, LA 70809	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
LOUISIANA STATE UNIVERSITY 1100 FLORIDA AVENUE NEW ORLEANS, LA 70119-2799	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
MARQUETTE UNIVERSITY 1801 W. WISCONSIN AVENUE MILWAUKEE, WI 53233	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
MARYLAND FOUNDATION OF DENTISTRY FOR THE HANDICAPPED 8901 HERRMANN DRIVE COLUMBIA, MD 21075	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
MEDICAL UNIVERSITY OF SOUTH CAROLINA 173 ASHLEY AVE. MSC 507, PO BOX 250507 CHARLESTON, SC 29425-5070	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
MEET EACH NEED WITH DIGNITY 10641 N. SAN FERNANDO ROAD PACOIMA, CA 91331	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
MEHARRY SCHOOL OF DENTISTRY 1005 D.B. TODD BLVD. NASHVILLE, TN 37208	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
MIDWESTERN UNIVERSITY 19555 N. 59TH AVE. GLENDALE, AZ 85308	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

FOUNDATION OF THE PIERRE FAUCHARD
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Part XV **Supplementary Information**

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MIDWESTERN UNIVERSITY - ILLINOIS 555 31ST STREET DOWNERS GROVE, IL 60515	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
MISSION LEXINGTON INC. 230 SOUTH MARTIN LUTHER KING BLVD. LEXINGTON, KY 40508	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
MISSOURI DENTAL ASSOCIATION FOUNDATION 3340 AMERICAN AVE. JEFFERSON CITY, MO 65109	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
MISSOURI SCHOOL OF DENTISTRY AND ORAL HEALTH 800 W. JEFFERSON ST. KIRKSVILLE, MO 63501	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
NEW YORK UNIVERSITY 345 EAST 24TH STREET NEW YORK, NY 10010	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
PFA JAPAN SECTION PFA JAPAN SECTION RYOGAE-MACHI FUSHIMI-KU, KYOTO, JAPAN 2-348-302	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
NOVA SOUTHEASTERN UNIVERSITY 3200 S. UNIVERSITY DRIVE FORT LAUDERDALE, FL 33328	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
OREGON HEALTH AND SCIENCE UNIVERSITY 611 SW CAMPUS DRIVE PORTLAND, OR 97239	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
PIERRE FAUCHARD ACADEMY (AUSTRALIA) PO BOX 950 MOSS VALE, AUSTRALIA NSW 2577	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	9,000.
ROSEMAN UNIVERSITY 10920 S. RIVERFRONT PARK SOUTH JORDAN, UT 84095	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
RUTGERS SCHOOL OF DENTAL MEDICINE 110 BERGEN ST.; ROOM B815 NEWARK, NJ 07103-2425	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	2,000.
SALT LAKE DONATED DENTAL SERVICES 1383 SOUTH 900 WEST, SUITE 128 SALT LAKE CITY, UT 84104	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
SAN DIEGO DENTAL HEALTH FOUNDATION 1275 B WEST MORENA BLVD. SAN DIEGO, CA 92110	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
SOUTHERN ILLINOIS UNIVERSITY 2800 COLLEGE AVENUE, BLDG 273/2300 ALTON, IL 62002	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
ST. ANN CENTER FOR INTERGENERATIONAL CARE 2801 E. MORGAN AVENUE MILWAUKEE, WI 53207	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
STONY BROOK SCHOOL OF DENTAL MEDICINE HEALTH SCIENCES CENTER; 154 ROCKLAND HALL STONY BROOK, NY 11794-8700	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
SUSAN DEW HOFF MEMORIAL CLINIC 925 LIBERTY AVENUE WEST MILFORD, WV 26451	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
TEMPLE UNIVERSITY KORNBERG SCHOOL OF DENTISTRY 3223 NORTH BROAD STREET PHILADELPHIA, PA 19140	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
TEXAS A&M UNIVERSITY 3302 GASTON AVENUE DALLAS, TX 75246	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
THE DENTAL COLLEGE OF GEORGIA AT AUGUSTA UNIVERSITY 1120 15TH STREET, RM AD 1119 AUGUSTA, GA 30912-0200	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE OAR FOUNDATION 110 ASHBOURNE LAKE COURT CLEMMONS, NC 27012	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
THE OHIO STATE UNIVERSITY 305 WEST 12TH AVENUE COLUMBUS, OH 43210-1267	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
THE UNIVERSITY OF IOWA 100 DENTAL SCIENCE BLDG. IOWA CITY, IA 52242	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
TUFTS UNIVERSITY ONE KNEELAND STREET BOSTON, MA 02111	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UCLA SCHOOL OF DENTISTRY CENTER FOR HEALTH SCIENCE, RM 53-038, 10833 LE CONTE AVE LOS ANGELES, CA 90095-1668	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UMMC SCHOOL OF DENTISTRY MEDICAL CENTER 2500 NORTH STATE STREET JACKSON, MS 39216-4505	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF ADELAIDE RM 512A OLIPHANT BUILDING SCHOOL OF DENTISTRY UNIVERSITY OF ADELAIDE, ADELAIDE, AUSTRALIA SA 5005	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
UNIVERSITY OF ALABAMA 1530 3RD AVENUE S., SDB 406 BIRMINGHAM, AL 35294-0007	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF BUFFALO 325 SQUIRE HALL; 3435 MAIN STREET BUFFALO, NY 14214-3008	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO 513 PARNASSUS AVE, S-630 SAN FRANCISCO, CA 94143	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

**FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF COLORADO 13065 E. 17TH AVENUE, MAIL STOP F831 AURORA, CO 80045	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF CONNECTICUT 263 FARMINGTON AVENUE FARMINGTON, CT 06030-3915	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF DETROIT MERCY 2700 MARTIN LUTHER KING JR. BLVD, (MB 98) DETROIT, MI 48208-2576	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEW ENGLAND 716 STEVENS AVE. PORTLAND, ME 04103	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF FLORIDA 1600 SW ARCHER RD., RM D4-6, P.O. BOX 100405 GAINESVILLE, FL 32610-0405	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF ILLINOIS AT CHICAGO COLLEGE OF DENTISTRY 801 SOUTH PAULINA STREET, SUITE 102 CHICAGO, IL 60612	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF KENTUCKY 800 ROSE STREET, D 136 UKMC LEXINGTON, KY 40536-0297	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF LOUISVILLE 501 S. PRESTON STREET LOUISVILLE, KY 40292	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MARYLAND 650 W. BALTIMORE STREET, BALTIMORE, MD 21201	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MICHIGAN 1011 N. UNIVERSITY AVE. ANN ARBOR, MI 48109-1078	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF MINNESOTA ROOM 15-209 MOOS TOWER, 515 S.E. DELAWARE STREET MINNEAPOLIS, MN 55455	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MISSOURI 650 EAST 25TH STREET KANSAS CITY, MO 64108	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEBRASKA 40TH & HOLDREGE STREETS LINCOLN, NE 68583-0740	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEVADA SHADOW LANE CAMPUS, 1001 SHADOW LANE, MS 7410 LAS VEGAS, NV 89106-4124	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NORTH CAROLINA 385 S. COLUMBIA ST. CHAPEL HILL, NC 27599	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF OKLAHOMA 1201 N. STONEWALL AVENUE OKLAHOMA CITY, OK 73117	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF PENNSYLVANIA 240 SOUTH 40TH STREET; ROBERT SHATTNER CENTER PHILADELPHIA, PA 19104-6030	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF PITTSBURGH 3501 TERRACE STREET PITTSBURGH, PA 15261	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF SOUTHERN CALIFORNIA CENTER FOR HEALTH SCIENCE, RM 53-038, 10833 LE CONTE AVE LOS ANGELES, CA 90095-1668	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF TENNESSEE 875 UNION AVE., S102 MEMPHIS, TN 38163	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

**FOUNDATION OF THE PIERRE FAUCHARD
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO 7703 FLOYD CURL DRIVE, MAIL CODE 7914 SAN ANTONIO, TX 78284-7914	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF TEXAS SCHOOL OF DENTISTRY AT HOUSTON 7500 CAMBRIDGE STREET HOUSTON, TX 77054	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF THE PACIFIC ARTHUR A. DUGONI SCHOOL OF DENTISTRY 155 5TH STREET SAN FRANCISCO, CA 94103	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF UTAH 530 S WAKARA WAY SALT LAKE CITY, UT 84108	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF WASHINGTON D322 HEALTH SCIENCES BLDG., 1959 NE PACIFIC ST.; BOX 356365 SEATTLE, WA 98195	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
VENICE FAMILY CLINIC 604 ROSE AVENUE VENICE, CA 90291	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
VOLUNTEER MINISTRY CENTER 511 N. BROADWAY KNOXVILLE, TN 037917	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
VIRGINIA COMMONWEALTH UNIVERSITY P.O. BOX 980566, 520 NORTH 12TH STREET, 450 LYONS BUILDING RICHMOND, VA 23298-0566	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
WEST VIRGINIA HEALTH RIGHT 1520 WASHINGTON STREET EAST CHARLESTON, WV 25311	NONE	PUBLIC CHARITY	DENTAL SERVICES	5,000.
WEST VIRGINIA UNIVERSITY 1150 HSC NORTH/MEDICAL CENTER DRIVE; PO BOX 9400 MORGANTOWN, WV 26506-9400	NONE	PUBLIC CHARITY	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

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3 Grants and Contributions Paid During the Year (Continuation)

623631
04-01-16

FORM 990-PF	ACCOUNTING FEES			STATEMENT	1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	9,265.	4,632.	0.	4,632.	
TO FORM 990-PF, PG 1, LN 16B	9,265.	4,632.	0.	4,632.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES	52,772.	52,772.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	52,772.	52,772.	0.	0.	

FORM 990-PF	TAXES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL	6,598.	330.	0.	6,268.	
TAXES & LICENSES	8,188.	0.	0.	345.	
FOREIGN TAXES	3,786.	3,786.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	18,572.	4,116.	0.	6,613.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE	2,668.	0.	0.	2,668.	
PAYROLL SERVICE FEES	901.	0.	0.	901.	
POSTAGE	2,501.	0.	0.	2,501.	
FUNDRAISING SERVICE	11,710.	0.	0.	0.	
BANK FEES	2,378.	0.	0.	2,378.	

INSURANCE - DIRECTORS & OFFICERS	1,722.	0.	0.	1,722.
WRITE-OFF OF NON-EXISTENT BOND ON BOOKS	100,000.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 23	121,880.	0.	0.	10,170.

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 5

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT SECURITIES	X		6,877.	6,877.
MUNICIPAL BONDS		X	2,062,411.	2,062,411.
TOTAL U.S. GOVERNMENT OBLIGATIONS			6,877.	6,877.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			2,062,411.	2,062,411.
TOTAL TO FORM 990-PF, PART II, LINE 10A			2,069,288.	2,069,288.

FORM 990-PF CORPORATE STOCK STATEMENT 6

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	4,693,192.	4,693,192.
TOTAL TO FORM 990-PF, PART II, LINE 10B	4,693,192.	4,693,192.

FORM 990-PF CORPORATE BONDS STATEMENT 7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS	506,335.	506,335.
BONDS	0.	0.
TOTAL TO FORM 990-PF, PART II, LINE 10C	506,335.	506,335.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER	FMV	51,234.	51,234.
TOTAL TO FORM 990-PF, PART II, LINE 13		51,234.	51,234.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	9
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GARY W. LOWDER, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	PRESIDENT 10.00	0.	0.	0.
HOWARD MARK, DMD 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	VICE-PRESIDENT 10.00	0.	0.	0.
MICHAEL PERPICH, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TREASURER 10.00	0.	0.	0.
STEVEN HEDLUND, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	GRANTS CHAIRMAN 10.00	0.	0.	0.
KEVIN L. ROACH, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 10.00	0.	0.	0.
CHARLES G. ELLER, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 10.00	0.	0.	0.
JOSEPH HARRIS, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 10.00	0.	0.	0.
WILLIAM B. KORT, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 10.00	0.	0.	0.

• FOUNDATION OF THE PIERRE FAUCHARD ACADEM

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JAMES E. LONG, DDS	TRUSTEE			
11654 PLAZA AMERICA DR. # 901	10.00	0.	0.	0.
RESTON, VA 20190				

JENNIFER TEALE	EXECUTIVE DIRECTOR			
11654 PLAZA AMERICA DR. # 901	40.00	86,250.	0.	0.
RESTON, VA 20190				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		86,250.	0.	0.
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