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Form 990-PF

Extended to November 15, 2 Return of Private Foundation 2017

Return of Private Fouritation

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

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

▶ The section of the security instructions is at www.lrs.gov/form990pf.

	R 17, 2016	, and ending	DEC 31, 2016	Open to Public Inspection
Name of foundation	X 17, 2010	, and enumy	A Employer identification	
Name of foundation	A Employer Identification	i illuiibei		
Oral Reconstruction Found	ation		81-1947258	•
Number and street (or P O box number if mail is not delivered to stre		Room/suite	B Telephone number	<u> </u>
2300 Riverchase Center		THOUSE SERVICE	205-986-78	0.4
City or town, state or province, country, and ZIP or foreign	nostal anda			
Birmingham, AL 35244	i postal code		C if exemption application is p	ending, check here
G Check all that apply: X Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	shook bara
Final return	Amended return	officer public criarity	i. Foreign organizations	s, crieck field
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
	exempt private foundation		1	
Section 4947(a)(1) nonexempt charitable trust	-	ation	E If private foundation sta under section 507(b)(1)	
I Fair market value of all assets at end of year J Account		X Accrual		
	Other (specify)	A Proof day	If the foundation is in a under section 507(b)(1)	_
▶\$ 564,089. (Part I, co		basis.)	dide: 300001 301 (b)(1)	(D), CHOCK HOLD
		(b) Net investment	(c) Adjusted net	(d) Disbursements
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).)	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	1,009,950.			, , , , , , , , , , , , , , , , , , , ,
2 Check If the foundation is not required to attach Sch B	7.00775000		<u> </u>	,
Interest on savings and temporary cash investments				
4 Dividends and interest from securities			<u> </u>	, , , , , , , , , , , , , , , , , , , ,
5a Gross rents			 	
b Net rental income or (loss)				
62 Net gain or (loss) from sale of assets not as line 10				
b Gross sales price for all assets not of line to assets on line 6a 7 Capital gain net income (from Part IV, line 2)				,
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain			0.	
9 Income modifications				
Gross sales less returns 10a and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	34,738.	0.	34,738.	Statement 1
12 Total. Add lines 1 through 11	1,044,688.	0.	34,738.	
13 Compensation of officers, directors, trustees, etc	218,398.	0.	5,853.	166,544.
14 Other employee salaries and wages	30,872.	0.	1,048.	29,824.
15 Pension plans, employee benefits	30,661.	0.	1,041.	29,620.
16a Legal fees		· · · · · · · · · · · · · · · · · · ·		
b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion. 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid				
c Other professional fèes Stmt 2	45,945.	0.	1,560.	44,385.
NOV % SEME 3				
18 Taxes State 35	9,062.	0.	308.	8,755.
19 Depreciation and depletion.	<u> </u>			
E 20 Occupancy OCTOTION 1	<u> </u>			
4 21 Travel, conferences, and meetings	549,427.	0.	16,499.	469,472.
22 Printing and publications			<u> </u>	
23 Other expenses Stmt 4	272,299.	0.	8,429.	239,835.
ਲੀ 24 Total operating and administrative	1,156,664.	_		
expenses. Add lines 13 through 23	0.	34,738.	988,435.	
	0.	<u> </u>	 	0.
26 Total expenses and disbursements.		 -		
Add lines 24 and 25	1,156,664.	0.	34,738.	988,435.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements			{	
•	<111,976.			
b Net investment income (if negative, enter -0-)		<u> </u>		<u> </u>
C Adjusted net income (if negative, enter -0-)			0.	L

\equiv		Attracted considering and arrounts in the description	Beginning of year		1941236 Fayez
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	End of y (b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	(a) Dook value	<4,053.>	
	1	Savings and temporary cash investments	·	<u> </u>	<u> </u>
	1	Accounts receivable ►			
	"	Less; allowance for doubtful accounts		534,950.	534,950.
	4	Pledges receivable		334,330.	334/3301
	"	Less; allowance for doubtful accounts		1	
	5	Grants receivable			
	1 -	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts ▶		į	
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		33,192.	33,192.
ğ	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	1	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	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)	0.	564,089.	564,089.
	17	Accounts payable and accrued expenses		166,681.	
	18	Grants payable			
es	19	Deferred revenue .		83,803.	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ë	21	Mortgages and other notes payable			
_	22	Other liabilities (describe Statement 5)	0.	425,581.	
]				
	23	Total liabilities (add lines 17 through 22)	0.	676,065.	
		Foundations that follow SFAS 117, check here			
y)		and complete lines 24 through 26 and lines 30 and 31.		444 056	
Net Assets or Fund Balances	24	Unrestricted		<u><111,976.</u> >	
alaı	25	Temporarily restricted			
d B	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here		<u> </u>	
<u>م</u>		and complete lines 27 through 31.			
şţs	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
¥ ¥	29	Retained earnings, accumulated income, endowment, or other funds		111 076	
ž	30	Total net assets or fund balances	0.	<111,976.	
	31	Total liabilities and net assets/fund balances	0.	564,089.	
P	art			304,003.	
		net assets or fund balances at beginning of year - Part II, column (a), line 3			
1		thet assets of fund balances at beginning of year - Part if, column (a), line s at agree with end-of-year figure reported on prior year's return)	iu		n
2		amount from Part I, line 27a	•	2	<111,976.>
		r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	<111,976.>
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	<111,976.>
					Form 990-PE (2016)

Form 990-PF (2016) Ora	1 Recons	truction	1 Found	lation			8	1-194	7258	Page 3
Part IV Capital Gains				t Income	UNI	How acquired				
(a) List and desc 2-story brick w	cribe the kind(s) of arehouse; or comm	property sola (e.(ion stock, 200 sh	g., real estate, is. MLC Co.)		l ob	How acquired - Purchase - Donation	(c) Date (mo., c	acquired lay, yr.)	(d) Dat (mo., d	
1a					-	Donation				
b NC	NE									
_c					<u> </u>		ļ			
d					┼					
<u>e</u>	(f) Depreciat	ion allowed	(a) Co	oot or other besis	╌		(1)			
(e) Gross sales price	(r) Deprecial			expense of sale				iain or (loss) s (f) minus (i	3)	
a	t — — — —		1							
b										
C			<u> </u>		_	·				
<u>d</u>						<u> </u>				
Complete only for accets shown	na agus us gotums (h) and award hy	the foundation	n en 10/01/00		•				
Complete only for assets shown	T		T				ol. (k). but	Col. (h) gain i not less than	-0-) or	
(i) F.M.V. as of 12/31/69	(j) Adjust as of 12			xcess of col. (1) r col. (j), if any		-	Losses	(from col. (f))	
a										
b										
d			<u> </u>							
<u>e</u>	L		L							
Constal care not income as (not as	anutat Jaco)	If gain, also ente			1					
2 Capital gain net income or (net ca		If (loss), enter -0		e /	7	2				
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		ctions 1222(5) ai	nd (6):		٦١	ŀ				
If (loss), enter -0- in Part I, line 8					_}	3				
Part V Qualification L		1 4940(e) foi	r Reduce	d Tax on Net	Inv	estment Ir	come			
(For optional use by domestic private	e foundations subje	ct to the section	4940(a) tax o	n net investment ir	icome	e.)			N/A	
If section 4940(d)(2) applies, leave t	his part blank.									
		a diam'h idah la air		!- Aba b-aa				ı	Yes	C No
Was the foundation liable for the sec If "Yes," the foundation does not qua				•	1007			1	Yes	NO
Enter the appropriate amount in					ntries					
(a) Base period years		(b)		T	(c)			Dictrib	d) ition ratio	
Calendar year (or tax year beginni	ing ın) Adjus	ted qualifying dis	tributions	Net value of no	nchar	itable-use asse	ts	(col. (b) divid	ded by col.	(c))
2015										
2014						····				
2013				 						
2012 2011										
2011			· . · ·	<u> </u>						
2 Total of line 1, column (d)							2			
3 Average distribution ratio for the	5-year base period	- divide the total	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	nce if less than 5 ye	ears				•	_ 3			
							- {			
4 Enter the net value of noncharitat	ole-use assets for 2	016 from Part X,	line 5				4			
E. Multiply log 4 by log 2										
5 Multiply line 4 by line 3							5			
6 Enter 1% of net investment incon	ne (1% of Part I lin	e 27h)					6_	ļ		
	(1,70 011 2111,3 1111	02/0/	•	•		•				
7 Add lines 5 and 6							7_	l 		
				•						
8 Enter qualifying distributions from	n Part XII, line 4						_8_			
If line 8 is equal to or greater than	n line 7, check the b	ox in Part VI, line	1b, and com	plete that part usin	g a 19	% tax rate.				
See the Part VI instructions.		 							- 000	DE (00) :

_	n 990-PF (20:16) Oral Reconstruction Foundation 8 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		19472 see ins			Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.		,		7.	
	Date of ruling or determination letter: 11/10/16 (attach copy of letter if necessary-see instructions)	1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1	1	N/2	1	
	of Part I, line 27b	1				
	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	l				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3				<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:	}				
	2016 estimated tax payments and 2015 overpayment credited to 2016	1				
	Exempt foreign organizations - tax withheld at source	1				
	Tax paid with application for extension of time to file (Form 8868)	[
	Backup withholding erroneously withheld	_				^
_	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	, · · · · · · · · · · · · · · · · · · ·	10				
	Enter the amount of line 10 to be; Credited to 2017 estimated tax ► Refunded Refu	11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes	No
10	any political campaign?			a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		_	b		X
·	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	dor		-		
	distributed by the foundation in connection with the activities.	. 0,		- {	- {	
c	Did the foundation file Form 1120-POL for this year?		١,	c	- 1	X
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			<u> </u>		
٠	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			- 1		!
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				ł	
•	managers. ▶ \$0 .		1	1	ì	
2	Has the foundation engaged in any activities that have not previously been reported to the iRS?		1 :	2	1	X
	If "Yes," attach a detailed description of the activities.	•				
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? If "Yes," attach a conformed copy of the changes		} ;	3	[X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4	a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	/A 4	b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5]	X
	If "Yes," attach the statement required by General Instruction T.			1	- 1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				- }	
	By language in the governing instrument, or				ł	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	N	l	ļ	- 1	
	remain in the governing instrument?			3		<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		<u> </u>	<u>'</u>	X	
					1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			j	ļ	
	AL				}	
D	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 General Instruction G? If "No," attach explanation		-8	<u> </u>	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary 2016 or the targetic very 2016 or the	ar		\backslash		
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		-	1	X	- - -
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		Form	0	DE /	X (2016)
			LOLIN \$, 5 U-	·rr((ZU 10)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		,		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	. L Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			
any voter registration drive?		Y	es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		1	-
4945(d)(4)(A)? (see instructions)			BS X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or 1	•		
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni-	ter the excentions described i			<u> </u>
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	iii riogaiations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		inod .		
expenditure responsibility for the grant?		I/A L Ye	es L No	,
If "Yes," attach the statement required by Regulations section 53.494	• •		ł	.]
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	_		1,
a personal benefit contract?	•	L Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	•	<u> </u> _	6b X
If "Yes" to 6b, file Form 8870.				1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	. L Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	<u>itable to the transaction?</u>	<u> </u>	N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.			
C. Marra, and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
Greg Bryant	President			
2300 Riverchase Center	i			
Birmingham, AL 35244	50.00	167,692.	4,705.	0.
Alison Davis	Vice Presiden			
2300 Riverchase Center	1100 1100100			
Birmingham, AL 35244	50.00	50,706.	581.	0.
	Director	30//00.	301.	
8335 Walnut Hill Ln #210	DITECTOI			
Dallas, TX 75231	0.10	o.	0.	0.
Marias, IA /3231	0.10			<u> </u>
Myron Nevins DDS	Director			
90 Humphrey St	0 10			^
Swampscott, MA 01907	0.10	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter NONE."	(d) Contributions to	(a) Eyponea
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
NONE		1		
· · · · · · · · · · · · · · · · · · ·				
	- · <u> </u>			
	! 		<u></u>	
Total number of other employees paid over \$50,000		<u> </u>		0
		······································	Form	990-PF (2016)
			_,,	

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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) Compen	sation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
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 Evollution Series Courses are educational courses sponsored by the Foundation in which participants can receive continuing education credit. 2 The Global Symposium is a tradeshow / continuing education	399,0	94.
event sponsored by the Foundation.	}	
Couthern Designal Westings on and and study along	116,4	01.
Southeast Regional Meetings are regional study clubs sponsored by the Foundation at which participants can	1	
receive continuing education credit.	113,8	22
4 Cummings Grafting Courses are educational courses sponsored	123/0	<u> </u>
by the Foundation in which participants can receive	1	
continuing education credit.	64,8	90.
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.		
	!	

Form **990-PF** (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	174,347.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	174,347.
е	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	174,347.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,615.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	171,732.
6	Minimum investment return. Enter 5% of line 5 Adjusted for Short Tax Period	6	6,822.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	d certain	
1	Mınımum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	_2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art 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	988,435.
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	988,435.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	988,435.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies for	the section

Form **990-PF** (2016)

Part XIII Undistributed In	come (see instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from F	Part XI,			
line 7				
2 Undistributed income, if any, as of the end	of 2016			
a Enter amount for 2015 only			 	
b Total for prior years:				
	\			
3 Excess distributions carryover, if any	, to 2016:			
a From 2011		}		
b From 2012				
c From 2013			ı	
d From 2014				
e From 2015]
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part XII, line 4: ► \$	'			j
a Applied to 2015, but not more than h	ne 22			}
b Applied to undistributed income of pi				
years (Election required - see instruc	1			
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount			 	
e Remaining amount distributed out of				
5 Excess distributions carryover applied to 20 (if an amount appears in column (d), the same	018			
(If an amount appears in column (d), the san must be shown in column (a))	ne amount			
6 Enter the net total of each column a	s			
indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract in				
b Prior years' undistributed income. Su	btract			
line 4b from line 2b				
c Enter the amount of prior years'	on of			
undistributed income for which a not deficiency has been issued, or on whi				
the section 4942(a) tax has been prev				
assessed		+		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	and line	 		
e Undistributed income for 2015. Subtr 4a from line 2a. Taxable amount - see				
f Undistributed income for 2016. Subtr	·····	- 		
lines 4d and 5 from line 1. This amou				
be distributed in 2017	}			
7 Amounts treated as distributions out	of	 		
corpus to satisfy requirements impos				
section 170(b)(1)(F) or 4942(g)(3) (E	, I			1
may be required - see instructions)				
8 Excess distributions carryover from 2	011			· · · · · · · · · · · · · · · · · · ·
not applied on line 5 or line 7				
9 Excess distributions carryover to 20	17.			
Subtract lines 7 and 8 from line 6a				·
10 Analysis of line 9:	Ì			
a Excess from 2012		1		
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016		_L 1		1

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Form 990-PF (2016)

Form **990-PF** (2016)

Total

Part XVI-A	Analysis of Income-Producing	Activities

Enter pros	s amounts unless otherwise indicated.	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(e)
·	m service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	ition Revenue	1 - 5000				34,738.
b						
c						
f						
g Fee	s and contracts from government agencies					
	ership dues and assessments					
3 Interes	t on savings and temporary cash					
investr		}		} }		
4 Dividei	nds and interest from securities					
5 Net rer	ital income or (loss) from real estate:					
a Det	ot-financed property					
	debt-financed property					
6 Net rer	ital income or (loss) from personal					
proper	ty			_		
7 Other i	nvestment income					
8 Gain oi	(loss) from sales of assets other					
than in	ventory					
9 Net inc	ome or (loss) from special events					
10 Gross	profit or (loss) from sales of inventory					
11 Other r	evenue:					
a						
b						
_						· · · · · · · · · · · · · · · · · · ·
e						
	al. Add columns (b), (d), and (e)		0.		0.	34,738.
	Add line 12, columns (b), (d), and (e)				13	34,738.
(See work:	sheet in line 13 instructions to verify calculations.)		 			
Part X	VI-B Relationship of Activities to	o the Accor	mplishment of Ex	empt	Purposes	
Line No.	Explain below how each activity for which incortine foundation's exempt purposes (other than			contrib	uted importantly to the accon	phishment of
1a	Tuition revenue is gene			ion	dagge and	gymnogiumg
1a	put on by the Foundation					
1a	support these classes a	and cont	inuing educ	atio	on in the are	a of implant
1 <u>a</u>	dentistry.		Inding cauc	<u> </u>	on in one are	a or impraire
						
						
						
						
						

FORM 99U-PF		<u> </u>	uction	<u>roundation</u>	<u>n</u>		81-19	<u> 17258</u>	3 Pa	age 18
Part XVI	Information R Exempt Organ		nsfers To	and Transactio	ns ar	nd Relation	ships With Nonch	aritabl	е	
1 Did the	organization directly or ind	irectly engage in an	y of the follow	ing with any other organ	nızation	described in s	action 501(c) of		Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										·
a Transfer	rs from the reporting found	lation to a nonchari	table exempt o	organization of:					1 :	ĺ
(1) Cash										X
(2) Other assets										X
b Other tra	ansactions:							1 - 1		\$ 15 m
(1) Sale	es of assets to a noncharita	able exempt organiz	ation					1b(1)		X
(2) Pun	chases of assets from a no	oncharitable exempt	torganization .		<i></i> .			1b(2)		X
(3) Ren	ital of facilities, equipment,	or other assets						1b(3)		Х
(4) Reir	mbursement arrangements	3 <i></i>		********** **** ** *** *****				. 1b(4)	\Box	X
(5) Loa	ns or loan guarantees				·			1b(5)		X
(6) Peri	formance of services or ma	embership or fundr	aising solicitati	ions	,			. 1b(6)		X
										X
							market value of the goods		sets,	
	es given by the reporting it (d) the value of the goods,				et value	in any transacti	on or sharing arrangement,	snow in		
(a) Line no.	(b) Amount involved	(c) Name	of noncharitable	le exempt organization		(d) Descript	on of transfers, transactions, an	d sharing ar	rangeme	nte
			N/A							
		 								
		 								
										
						 				
							·			
										
				··						
		<u></u>								
	·					L				
	indation directly or indirect	•		•	-		Г	—,	X	l
	501(c) of the Code (other		(3)) or in seci	uon 52/7			L	Yes	لها	NO
b ir yes, c	omplete the following sche (a) Name of orga			(b) Type of organizati	lon I		(c) Description of relations	hin		
	N/A	201220001		(b) Type of Organizati	1011		(c) Description of relations	ush.		
	14/22				+					
		·····			_					
	penalties of persury, I declare to elief, Itis true, correct, and com						w has any knowledge	y the IRS d		
oldu ('		piere. Denis addition pa	abaret (onto cua	ii taxpayer) is based (iii ali li	- Incompanie		sh	urn with the <u>own</u> below (bee prepare	'n
Here	10 1/10	7			<u></u>	Presi	dent	X Yes		No
Sign	nature of officer of trustee	<u> </u>	T=	Date'		Title	han			
	Print/Type preparer's na	me	Preparer's si	ignature /		ate	Check if PTIN			
Paid	m	O	Comme:	9 /	ار:	11.14.17	self- employed	A 4 Pr F 1	7.00	
Preparer	Tommie G. (cummings	DO	S. William	MA		P0 Firm's EIN ► 63-0	0175		
Use Only	rumsname - Kabi	SOUL & CC	, PC	_			rum sein > 03-0	3700	, 0	
· · · · · · · · ·	Firm's address ► 21	01 Highla	nd Ave	S Suite 3	00		 			
		rmingham,			J J		Phone no. 205-4	43-24	500	
	<u></u>							orm 990		2016)
							· · · · · · · · · · · · · · · · · · ·			/

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2016

Employer identification number

Oral Reconstruction Foundation 81-1947258 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Oral	Reconstruct.	ion I	Founda	tion
Orar	Veccous cr acc	TOII I	. ounua	LLULL

<u>Oral</u>	Reconstruction Foundation	81	<u>-1947258</u>	
Part i	Contributors (See instructions). Use duplicate copies of Part I if add	ditional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	BioHorizons Implant Systems, Inc. 2300 Riverchase Ctr. Birmingham, AL 35244	\$1,009,950.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Oncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions)	
623452 10-	18-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016	

Employer identification number

81-1947258

a) lo. Om Description of noncash properant i a) lo. (b) Description of noncash properant i a) lo. Om Description of noncash properant i	erty given	(c) FMV (or estimate) (See instructions) \$	(d) Date received (d) Date received
(a) No. Description of noncash properant i (a) (b) Description of noncash properant i (b) Description of noncash properant i	erty given	\$(c) FMV (or estimate) (See instructions)	(d)
Description of noncash properart I (a) No. (b)		(c) FMV (or estimate) (See instructions)	
(a) No. (b) Description of noncash proper (a) Description of noncash proper (b) Description of noncash proper		FMV (or estimate) (See instructions)	
No. (b) rom Description of noncash prope	rty given		
lo. (b) om Description of noncash prope	rty given	(c)	
		FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. (b) rom Description of noncash prope art I	erty given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. (b) rom Description of noncash properart I	arty given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. (b) rom Description of noncash prope art I	erty given	(c) FMV (or estimate) (See instructions)	(d) Date received

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Form 990-PF	Other I	ncome	S	tatement 1
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Tuition Revenue		34,738.	0.	34,738.
Total to Form 990-PF, Part I,	line 11	34,738.	0.	34,738.
Form 990-PF C	ther Profes	sional Fees	S	tatement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Shared Services	45,945.	0 .	1,560.	44,385.
To Form 990-PF, Pg 1, ln 16c =	45,945.	0	1,560.	44,385.
Form 990-PF	Tax	es	S	tatement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Payroll Tax	9,062.	0.	308.	8,755.
To Form 990-PF, Pg 1, ln 18 =	9,062.	0.	308.	8,755.
Form 990-PF	Other E	xpenses	S	tatement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Marketing Technology Miscellaneous Licenses Credit Card Fees Postage and Shipping Supplies	219,867. 18,233. 24,268. 3,605. 38. 4,125. 2,163.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	608. 830. 122. 1. 140. 74.	17,316. 23,606. 3,480. 37. 3,985. 2,089.
To Form 990-PF, Pg 1, ln 23	272,299.	0.	8,429.	239,835

Form 990-PF (Other Liabilities		Statement	5
Description		BOY Amount	EOY Amount	
Due to BioHorizons Inc.	-	0.	425,581	<u>.</u>
Total to Form 990-PF, Part II,	line 22	0.	425,581	<u>.</u>