

Form **990-PF****Return of Private Foundation**

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

OMB No. 1545-0047

2019Department of the Treasury
Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.
► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year 2019 or tax year beginning , and ending

Name of foundation
**ORAL HEALTH FOUNDATION OF THE
PIERRE FAUCHARD ACADEMY**

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite
11654 PLAZA AMERICA DRIVE 901

City or town, state or province, country, and ZIP or foreign postal code
RESTON, VA 20190

A Employer identification number
77-0120371

B Telephone number
703-217-1480

C If exemption application is pending check here ☐ **4**

D 1 Foreign organizations, check here ☐

2 Foreign organizations meeting the 85% test check here and attach compilation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity
☐ Final return ☐ Amended return
☐ Address change ☐ Name change

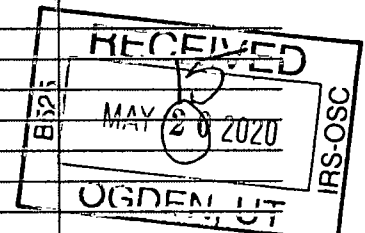
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation **04**
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 8,946,087.**

J Accounting method. ☐ Cash ☒ Accrual
☐ Other (specify) _____

(Part I, column (d), must be on cash basis.)

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)
1	Contributions, gifts, grants, etc., received	75,250.			
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	137,001.	137,001.		
4	Dividends and interest from securities	128,910.	128,910.		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	484,434.			
b	Gross sales price for all assets on line 6a	1,941,212.			
7	Capital gain net income (from Part IV, line 2)		484,434.		
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	5,000.	0.	5,000.	
12	Total. Add lines 1 through 11	830,595.	750,345.	5,000.	
13	Compensation of officers, directors, trustees, etc.	93,800.	4,690.	0.	89,110.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees				
b	Accounting fees	9,071.	4,536.	0.	4,536.
c	Other professional fees	57,546.	57,546.	0.	0.
17	Interest				
18	Taxes	19,459.	5,391.	0.	7,175.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	19,366.	0.	0.	19,366.
22	Printing and publications	524.	0.	0.	524.
23	Other expenses	29,121.	0.	0.	29,121.
24	Total operating and administrative expenses. Add lines 13 through 23	228,887.	72,163.	0.	149,832.
25	Contributions, gifts, grants paid	296,250.			296,250.
26	Total expenses and disbursements. Add lines 24 and 25	525,137.	72,163.	0.	446,082.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	305,458.			
b	Net investment income (if negative, enter -0-)		678,182.		
c	Adjusted net income (if negative, enter -0-)			5,000.	



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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	60,041.	53,350.	53,350.	
	2 Savings and temporary cash investments	183,707.	206,007.	206,007.	
	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 6	2,034,200.	2,073,985.	2,073,985.	
	b Investments - corporate stock STMT 7	4,998,086.	6,065,570.	6,065,570.	
	c Investments - corporate bonds STMT 8	442,467.	495,575.	495,575.	
Liabilities	11 Investments - land, buildings, and equipment basis ▶				
	Less: accumulated depreciation ▶				
	12 Investments - mortgage loans				
	13 Investments - other STMT 9	51,603.	51,600.	51,600.	
	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)	7,770,104.	8,946,087.	8,946,087.	
	17 Accounts payable and accrued expenses	42.	42.		
	18 Grants payable				
Net Assets or Fund Balances	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ▶)				
	23 Total liabilities (add lines 17 through 22)	42.	42.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> X				
	and complete lines 24, 25, 29, and 30				
	24 Net assets without donor restrictions	7,770,062.	8,946,045.		
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/>				
	and complete lines 26 through 30.				
	26 Capital stock, trust principal, or current funds				
Net Assets or Fund Balances	27 Paid-in or capital surplus, or land, bldg, and equipment fund				
	28 Retained earnings, accumulated income, endowment, or other funds				
	29 Total net assets or fund balances	7,770,062.	8,946,045.		
	30 Total liabilities and net assets/fund balances	7,770,104.	8,946,087.		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	7,770,062.
2 Enter amount from Part I, line 27a	2	305,458.
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN ON INVESTMENTS	3	870,525.
4 Add lines 1, 2, and 3	4	8,946,045.
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 29	6	8,946,045.

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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 (for example, 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		P		
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 1,941,212.		1,456,778.	484,434.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			484,434.	
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	484,434.	
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 doesn't 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))
2018	404,486.	8,241,050.	.049082
2017	479,358.	7,927,519.	.060468
2016	362,703.	7,335,174.	.049447
2015	328,131.	7,265,840.	.045161
2014	332,683.	7,175,724.	.046362

2 Total of line 1, column (d)	2	.250520
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.050104
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	8,362,989.
5 Multiply line 4 by line 3	5	419,019.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	6,782.
7 Add lines 5 and 6	7	425,801.
8 Enter qualifying distributions from Part XII, line 4	8	446,082.

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	6,782.
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	6,782.
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	6,782.
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	6,452.
b	Exempt foreign organizations - tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	0.
7	Total credits and payments. Add lines 6a through 6d	7	6,452.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> If Form 2220 is attached	8	6.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	336.
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 2020 estimated tax <input 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 the instructions for the definition. 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.		X
1c 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. \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		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? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. CA		
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 General Instruction G? If "No," attach explanation	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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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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 2019, 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 fall 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 ► <input type="checkbox"/>	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 2019?	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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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	N/A
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 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	X

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

		Yes	No
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		5b	X
Organizations relying on a current notice regarding disaster assistance, check here 	<input type="checkbox"/>		
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 <input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
If "Yes" to 6b, file Form 8870			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and 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 10		93,800.	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."

[illegible]

Total number of others receiving over \$50,000 for professional services	0
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Total number of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities

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

1	N/A	
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.

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		
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	8,553,726.
b Average of monthly cash balances	1b	-63,382.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	8,490,344.
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	8,490,344.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	127,355.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,362,989.
6 Minimum investment return. Enter 5% of line 5	6	418,149.

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	418,149.
2a Tax on investment income for 2019 from Part VI, line 5	2a	6,782.
b Income tax for 2019 (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	6,782.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	411,367.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	411,367.
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	411,367.

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	446,082.
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	446,082.
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	6,782.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	439,300.

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				411,367.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016	2,976.			
d From 2017	89,928.			
e From 2018	5,829.			
f Total of lines 3a through e	98,733.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$	446,082.			
a Applied to 2018, 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 2019 distributable amount				411,367.
e Remaining amount distributed out of corpus	34,715.			
5 Excess distributions carryover applied to 2019 (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	133,448.			
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 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				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 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	133,448.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016	2,976.			
c Excess from 2017	89,928.			
d Excess from 2018	5,829.			
e Excess from 2019	34,715.			

Part XIV Private Operating Foundations (see instructions and Part VII A, question 9) **N/A**

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

NONE

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

NONE

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

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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				
IBAN - INSTITUTE OF HEALTHCARE MANAGEMENT MAI MAHIU ROAD LANGATA-WILSON, NAIRBOI, KENYA	NONE	PC	DENTAL SERVICES	5,000.
ASOCIACION HANDS FOR HEALTH SAN VITO COTO BRUS, PUNTARENAS, COSTA RICA 60801	NONE	PC	DENTAL SERVICES	5,000.
THE OAR FOUNDATION 110 ASHBÖURNE LAKE COURT CLEMMONS, NC 27012	NONE	PC	DENTAL SERVICES	5,000.
MARYLAND FOUNDATION OF DENISTRY FOR THE HANDICAPPED 8901 HERRMANN DRIVE COLUMBIA, MD 21045	NONE	PC	DENTAL SERVICES	5,000.
THE GOOD SAMARITAN MINISTRY 910 CROSS GATES BLVD SLIDELL, LA 70461	NONE	PC	DENTAL SERVICES	7,500.
Total SEE CONTINUATION SHEET(S) ▶ 3a				296,250.
b Approved for future payment				
NONE				
Total ▶ 3b				0.

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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 666 GRAND AVE, SUITE 901 DES MOINES, IA 50309	NONE	PC	DENTAL SERVICES	5,000.
SAND DIEGO COUNTY DENTAL FOUNDATION 1275 WEST MORENA BLVD, STE B SAN DIEGO, CA 92110	NONE	PC	DENTAL SERVICES	5,000.
SACRAMENTO DISTRICT DENTAL FOUNDATION 2035 HURLEY WAY, STE 200 SACRAMENTO, CA 95825	NONE	PC	DENTAL SERVICES	12,500.
GRACE CHURCH/GLOBAL OUTREACH 3626 WI 31 RACINE, WI 53405	NONE	PC	DENTAL SERVICES	5,000.
CALIFORNIA DENTAL ASSOCIATION FOUNDATION 1201 K STREET, 14 FLOOR SACRAMENTO, CA 95814	NONE	PC	DENTAL SERVICES	5,000.
MISSION LEXINGTON 230 S MARTIN LUTHER KING BLVD LEXINGTON, KY 40508	NONE	PC	DENTAL SERVICES	5,000.
THE KELLERMAN FOUNDATION PO BOX 832809 RICHARDSON, TX 75083	NONE	PC	DENTAL SERVICES	5,060.
SNAKE RIVER COMMUNITY CLINIC PO BOX 6 LEWISTON, ID 83501	NONE	PC	DENTAL SERVICES	5,000.
COLORADO MISSION OF MERCY 7615 WINDING OAKS DRIVE COLORADO SPRINGS, CO 80919	NONE	PC	DENTAL SERVICES	5,000.
ADVENT HEALTH FOUNDATION CENTRAL 550 E. ROLLINS STREET, 6TH FLOOR ORLANDO, FL 32803	NONE	PC	DENTAL SERVICES	5,000.
Total from continuation sheets				268,750.

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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
FONDATION DE L'ORDE DES DENTISTES DU QUEBEC 800 RENE LEVESQUE WES BLVD, STE 1640 MONTREAL, QUEBEC, CANADA H3B1X9	NONE	PC	DENTAL SERVICES	7,500.
OKLAHOMA DENTAL FOUNDATION 37 NE 3TH STREET OKLAHOMA CITY, OK 73104	NONE	PC	DENTAL SERVICES	7,500.
HOPE CLINIC PO BOX 980311 YPSILANTI, MI 48198	NONE	PC	DENTAL SERVICES	5,000.
LONDON COMMUNITY DENTAL ALLIANCE 476 REGAL DRIVE LONDON, ONTARIO, CANADA N5Y1J9	NONE	PC	DENTAL SERVICES	8,190.
FOOTBRIDGE PO BOX 1716 WELCOME, NC	NONE	PC	DENTAL SERVICES	5,000.
CMMB 100 WALL STREET, 9TH FLOOR NEW YORK, NY	NONE	PC	DENTAL SERVICES	7,500.
EQUAL HEALTH 28 GEORGE STREET NORTH BEACH, WESTERN AUSTRALIA, AUSTRALIA 60515	NONE	PC	DENTAL SERVICES	5,000.
HOPE DENTAL CLINIC 800 MINNENABA AVENUE E, STE 465 ST PAUL, MN	NONE	PC	DENTAL SERVICES	7,500.
PUNDEVI DE LA FUENTE DE LA HISPANIDAD EN SAN PEDRO DE SAN PEDRO DE, COSTA RICA	NONE	PC	DENTAL SERVICES	15,000.
OASIS FREE CLINICS 66 BARIBEAU DRIVE, BOX 1 BRUNSWICK, ME 04011	NONE	PC	DENTAL SERVICES	5,000.
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
VIRGINIA DENTAL ASSOCIATION FOUNDATION 3460 MAYLAND COURT, STE 00 RICHMOND, VA 23233	NONE	PC	DENTAL SERVICES	5,000.
VOLUNTEER MINISTRY CENTER 1154 KINGSTON PIKE, STE B KNOXVILLE, TN 37917	NONE	PC	DENTAL SERVICES	7,500.
DENTAL LIFELINE NETWORK- RHODE ISLAND 1800 15TH STREET DENVER, CO 80202	NONE	PC	DENTAL SERVICES	5,000.
WISCONSIN DENTAL ASSN. FOUNDATION 3737 W WASHINGTON STREET, STE 2360 WEST ALLIS, WI 53224	NONE	PC	DENTAL SERVICES	5,000.
CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903	NONE	PC	DENTAL SERVICES	5,000.
GEORGIA DENTAL ASSOCIATION FOUNDATION FOR ORAL HEALTH 7000 PEACHTREE DUNWOODY RD, NE STE 200, BLG 117 ATLANTA, GA 30328	NONE	PC	DENTAL SERVICES	5,000.
CONEJE FREE CLINIC 80 EAST HILLCREST DRIVE, STE 102 THOUSAND OAKS, CA 91360	NONE	PC	DENTAL SERVICES	7,500.
THOUSAND SMILES FOUNDATION 526 CENTRAL AVE BONITA, CA 99002	NONE	PC	DENTAL SERVICES	7,500.
CENTRO ESCOLAR UNIVERSITY, MANILA 1001 SAN RAFAEL ST SAN MIGUEL, MANILA, PHILIPPINES 1008	NONE	PC	STUDENT SCHOLARSHIP	500.
UNIVERSITY OF PERPETUAL HELP SYSTEM ALABANG-ZAPOTE ROAD, ALMANZA UNO LAS PINAS, MANILA, PHILIPPINES 1740	NONE	PC	STUDENT SCHOLARSHIP	500.
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
PIERRE FAUCHARD ACADEMY (AUSTRALIA) PO BOX 950 MOSS VALE, AUSTRALIA NSW 2577	NONE	PC	STUDENT SCHOLARSHIP	9,000.
PIERRE FAUCHARD ACADEMY (CANADA) 304-5885 COTE DES NEIGES MONTREAL, QUEBEC, CANADA H3S 2T2	NONE	PC	STUDENT SCHOLARSHIP	10,000.
MEDICAL UNIVERSITY OF WARSAW ZWIRKI I WIGURY 61 WARSAWA, POLAND 02 091	NONE	PC	STUDENT SCHOLARSHIP	500.
UNIVERSITY OF PERPETUAL HELP SYSTEM LAGUNA, BINAN LAGUNA, PHILIPPINES 4024	NONE	PC	STUDENT SCHOLARSHIP	1,000.
THE NIPPON DENTAL UNIVERSITY SCHOOL OF LIFE DENTISTRY AT TOKYO 1 CHOME 9 20 FUJIMI CHIYODA CITY, TOKYO, JAPAN 102-0071	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF ALABAMA 1530 3RD AVENUE S., SDB 406 BIRMINGHAM, AL 35294-0007	NONE	PC	STUDENT SCHOLARSHIP	1,000.
MIDWESTERN UNIVERSITY 19555 N. 59TH AVE. GLENDALE, AZ 85308	NONE	PC	STUDENT SCHOLARSHIP	1,000.
ARIZONA SCHOOL OF DENTISTRY 5850 EAST STILL CIRCLE MESA, AZ 85206	NONE	PC	STUDENT SCHOLARSHIP	1,000.
LOMA LINDA UNIVERSITY 11092 ANDERSON ST. LOMA LINDA, CA 92350	NONE	PC	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	PC	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

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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 SOUTHERN CALIFORNIA 925 W. 34TH STREET LOS ANGELES, CA 90089	NONE	PC	STUDENT SCHOLARSHIP	1,000.
WESTERN UNIVERSITY OF HEALTH SCIENCES 309 E. SECOND STREET POMONA, CA 91766-185	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF THE PACIFIC 155 5TH STREET SAN FRANCISCO, CA 94103	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF COLORADO 13065 E. 17TH AVENUE, MAIL STOP F831 AURORA, CO 80045	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF CONNECTICUT 263 FARMINGTON AVENUE FARMINGTON, CT 06030-3915	NONE	PC	STUDENT SCHOLARSHIP	1,000.
LECOM COLLEGE OF DENTAL MEDICINE 4800 LAKEWOOD RANCH BLVD. BRADENTON, FL 34211	NONE	PC	STUDENT SCHOLARSHIP	1,000.
NOVA SOUTHEASTERN UNIVERSITY 3200 S. UNIVERSITY DRIVE FORT LAUDERDALE, FL 33328	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF FLORIDA 1600 SW ARCHER RD., RM D4-6, P.O. BOX 100405 GAINESVILLE, FL 32610-0405	NONE	PC	STUDENT SCHOLARSHIP	1,000.
THE DENTAL COLLEGE OF GEORGIA AT AUGUSTA UNIVERSITY 1120 15TH STREET, RM AD 1119 AUGUSTA, GA 30912-0200	NONE	PC	STUDENT SCHOLARSHIP	1,000.
SOUTHERN ILLINOIS UNIVERSITY 2800 COLLEGE AVENUE, BLDG 273/2300 ALTON, IL 62002	NONE	PC	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

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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 ILLINOIS AT CHICAGO COLLEGE OF DENTISTRY 801 SOUTH PAULINA STREET, SUITE 102 CHICAGO, IL 60612	NONE	PC	STUDENT SCHOLARSHIP	1,000.
MIDWESTERN UNIVERSITY - ILLINOIS 555 31ST STREET DOWNERS GROVE, IL 60515	NONE	PC	STUDENT SCHOLARSHIP	1,000.
INDIANA UNIVERSITY 1121 WEST MICHIGAN STREET INDIANAPOLIS, IN 46202	NONE	PC	STUDENT SCHOLARSHIP	1,000.
THE UNIVERSITY OF IOWA 100 DENTAL SCIENCE BLDG. IOWA CITY, IA 52242	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF KENTUCKY 800 ROSE STREET, D 136 UKMC LEXINGTON, KY 40536-0297	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF LOUISVILLE 501 S. PRESTON STREET LOUISVILLE, KY 40292	NONE	PC	STUDENT SCHOLARSHIP	1,000.
LOUISIANA STATE UNIVERSITY 1100 FLORIDA AVENUE NEW ORLEANS, LA 70119-2799	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEW ENGLAND 716 STEVENS AVE. PORTLAND, ME 4103	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MARYLAND 650 W. BALTIMORE STREET, BALTIMORE, MD 21201	NONE	PC	STUDENT SCHOLARSHIP	1,000.
TUFTS UNIVERSITY ONE KNEELAND STREET BOSTON, MA 02111	NONE	PC	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
BOSTON UNIVERSITY 100 EAST NEWTON STREET BOSTON, MA 02118	NONE	PC	STUDENT SCHOLARSHIP	1,000.
HARVARD UNIVERSITY 188 LONGWOOD AVENUE BOSTON, MA 02115	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF DETROIT MERCY 2700 MARTIN LUTHER KING JR. BLVD, (MB 98) DETROIT, MI 48208-2576	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MINNESOTA ROOM 15 209 MOOS TOWER, 515 S.E. DELAWARE STREET MINNEAPOLIS, MN 55455	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MISSISSIPPI 2500 NORTH STATE STREET JACKSON, MS 39216-4505	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF MISSOURI 650 EAST 25TH STREET KANSAS CITY, MO 64108	NONE	PC	STUDENT SCHOLARSHIP	1,000.
AT STILL UNIVERSITY 5850 EAST STILL CIRCLE MESA, AZ 85206	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEBRASKA 40TH & HOLDREGE STREETS LINCOLN, NE 68583-0740	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NEVADA 40TH & HOLDREGE STREETS LINCOLN, NE 68583 0740	NONE	PC	STUDENT SCHOLARSHIP	1,000.
RUTGERS SCHOOL OF DENTAL MEDICINE 110 BERGEN STREET NEWARK, NJ 07103	NONE	PC	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
TOURO COLLEGE DENTAL MEDICINE AT NEW YORK MEDICAL COLLEGE (NYMC) 19 SRYLINE DRIVE HAWTHORNE, NY 10532	NONE	PC	STUDENT SCHOLARSHIP	1,000.
NEW YORK UNIVERSITY 345 EAST 24TH STREET NEW YORK, NY 10010	NONE	PC	STUDENT SCHOLARSHIP	1,000.
COLUMBIA UNIVERSITY 630 WEST 168TH STREET NEW YORK, NY 10032	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF NORTH CAROLINA 3/8 COLUMBIA STREET, CAMPUS BOX 7450 CHAPEL HILL, NC 27599	NONE	PC	STUDENT SCHOLARSHIP	1,000.
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND, OH 41406-4905	NONE	PC	STUDENT SCHOLARSHIP	1,000.
THE OHIO STATE UNIVERSITY 305 WEST 12TH AVENUE COLUMBUS, OH 43210-1267	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF OKLAHOMA 1201 N. STONEWALL AVENUE OKLAHOMA CITY, OK 73117	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF PITTSBURGH 1201 N. STONEWALL AVENUE OKLAHOMA CITY, OK 73117	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF PENNSYLVANIA 240 SOUTH 40TH STREET; ROBERT SHATTNER CENTER PHILADELPHIA, PA 19104-6030	NONE	PC	STUDENT SCHOLARSHIP	1,000.
MEDICAL UNIVERSITY OF SOUTH CAROLINA 173 ASHLEY AVE. MSC 507, PO BOX 250507 CHARLESTON, SC 29425 5070	NONE	PC	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
MEHARRY SCHOOL OF DENTISTRY 1005 D.B. TODD BLVD. NASHVILLE, TN 37208	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF TEXAS AT SAN ANTONIO 7703 FLOYD CURL DRIVE, MAIL CODE 7914 SAN ANTONIO, TX 78284 7914	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF TEXAS SCHOOL OF DENTISTRY AT HOUSTON 7500 CAMBRIDGE STREET HOUSTON, TX 77054	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF UTAH 530 S WAKARA WAY SALT LAKE CITY, UT 84108	NONE	PC	STUDENT SCHOLARSHIP	1,000.
ROSEMAN UNIVERSITY 10920 S. RIVERFRONT PARK SOUTH JORDAN, UT 84095	NONE	PC	STUDENT SCHOLARSHIP	1,000.
UNIVERSITY OF WASHINGTON D322 HEALTH SCIENCES BLDG., 1959 NE PACIFIC ST., BOX 356365 SEATTLE, WA 98195	NONE	PC	STUDENT SCHOLARSHIP	1,000.
WEST VIRGINIA UNIVERSITY 1150 HSC NORTH/MEDICAL CENTER DRIVE; PO BOX 9400 MORGANTOWN, WV 26506-9400	NONE	PC	STUDENT SCHOLARSHIP	1,000.
TEXAS A&M UNIVERSITY 3302 GASTON AVENUE DALLAS, TX 75246	NONE	PC	STUDENT SCHOLARSHIP	1,000.
HOWARD UNIVERSITY 600 "W" STREET, N.W. WASHINGTON, DC 20059	NONE	PC	STUDENT SCHOLARSHIP	1,000.
CREIGHTON UNIVERSITY 1011 N. UNIVERSITY AVE. ANN ARBOR, MI 48109-1078	NONE	PC	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
UNIVERSITY OF BUFFALO 325 SQUIRE HALL; 3435 MAIN STREET BUFFALO, NY 14214-3008	NONE	PC	STUDENT SCHOLARSHIP	1,000.
TEMPLE UNIVERSITY THE MAURICE H. KORNBERG SCHOOL OF DENTISTRY 3223 NORTH BROAD STREET PHILADELPHIA, PA 19140	NONE	PC	STUDENT SCHOLARSHIP	1,000.
OREGON HEALTH AND SCIENCE UNIVERSITY 611 SW CAMPUS DRIVE PORTLAND, OR 97239	NONE	PC	STUDENT SCHOLARSHIP	1,000.
STONY BROOK SCHOOL OF DENTAL MEDICINE HEALTH SCIENCES CENTER; 154 ROCKLAND HALL STONY BROOK, NY 11794-8700	NONE	PC	STUDENT SCHOLARSHIP	1,000.
EAST CAROLINA UNIVERSITY 1851 MACGREGOR DOWNS ROAD, MAIL STOP 701 GREENVILLE, NC 27832-4354	NONE	PC	STUDENT SCHOLARSHIP	1,000.
GOVERNMENT COLLEGE OF DENTISTRY M G ROAD, OPPOSITE M Y H, M G MARG INDORE, MADHYA PRADESH, INDIA 452001	NONE	PC	STUDENT SCHOLARSHIP	500.
EMILIO AGUINALDO COLLEGE PACO MANILA METRO MANILA, PHILIPPINES	NONE	PC	STUDENT SCHOLARSHIP	500.
DE OCAMPO MEMORIAL COLLEGE 3222 MAGSAYSAY BLVD SANTA MESA, METRO MANILA, PHILIPPINES 1016	NONE	PC	STUDENT SCHOLARSHIP	500.
UNICIANO COLLEGES AND GENERAL HOSPITAL V.MAPA-GAUDALCANAL STREET SANTA MESA, MANILA, PHILIPPINES	NONE	PC	STUDENT SCHOLARSHIP	500.
UNIVERSITY OF MICHIGAN 1011 N. UNIVERSITY AVE. ANN ARBOR, MI 48109-1078	NONE	PC	STUDENT SCHOLARSHIP	1,000.
Total from continuation sheets				

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3 Grants and Contributions Paid During the Year (Continuation)**Total from continuation sheets**

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512 513 or 514		(e)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		Related or exempt function income
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	137,001.		
4 Dividends and interest from securities			14	128,910.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	484,434.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a RECOVERIES OF GRANTS						
b AWARDED						5,000.
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e)		0.		750,345.		5,000.
13 Total. Add line 12, columns (b), (d), and (e)						755,345.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

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) (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) (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.				May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Signature of officer or trustee <i>Jennifer Teale</i>		Date 5/15/20		Title EXECUTIVE DIRECTOR		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date	Check <input type="checkbox"/> if self-employed	PTIN
	MICHAELA CROMAR		MICHAELA CROMAR		05/06/20		P00895728
	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	OTHER INCOME		STATEMENT	1
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
RECOVERIES OF GRANTS AWARDED	5,000.	0.	5,000.	
TOTAL TO FORM 990-PF, PART I, LINE 11	5,000.	0.	5,000.	

FORM 990-PF	ACCOUNTING FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	9,071.	4,536.	0.	4,536.
TO FORM 990-PF, PG 1, LN 16B	9,071.	4,536.	0.	4,536.

FORM 990-PF	OTHER PROFESSIONAL FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	57,546.	57,546.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	57,546.	57,546.	0.	0.

FORM 990-PF	TAXES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL	7,175.	0.	0.	7,175.
TAXES & LICENSES	6,893.	0.	0.	0.
FOREIGN TAXES	5,391.	5,391.	0.	0.
TO FORM 990-PF, PG 1, LN 18	19,459.	5,391.	0.	7,175.

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE	2,901.	0.	0.	2,901.	
PAYROLL SERVICE FEES	1,044.	0.	0.	1,044.	
POSTAGE	2,316.	0.	0.	2,316.	
BANK FEES	2,145.	0.	0.	2,145.	
INSURANCE - DIRECTORS & OFFICERS	1,715.	0.	0.	1,715.	
ADMINISTRATIVE FEE	19,000.	0.	0.	19,000.	
TO FORM 990-PF, PG 1, LN 23	29,121.	0.	0.	29,121.	

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS			STATEMENT	6
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	
GOVERNMENT SECURITIES	X		4,842.	4,842.	
MUNICIPAL BONDS		X	2,069,143.	2,069,143.	
TOTAL U.S. GOVERNMENT OBLIGATIONS			4,842.	4,842.	
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			2,069,143.	2,069,143.	
TOTAL TO FORM 990-PF, PART II, LINE 10A			2,073,985.	2,073,985.	

FORM 990-PF		CORPORATE STOCK		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
CORPORATE STOCK		6,065,570.	6,065,570.		
TOTAL TO FORM 990-PF, PART II, LINE 10B		6,065,570.	6,065,570.		

FORM 990-PF	CORPORATE BONDS	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS	495,575.	495,575.
TOTAL TO FORM 990-PF, PART II, LINE 10C	495,575.	495,575.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	9
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ACCRUED INTEREST	FMV	51,600.	51,600.
TOTAL TO FORM 990-PF, PART II, LINE 13		51,600.	51,600.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	10
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK.	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
HOWARD MARK, DMD 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	PRESIDENT 10.00	0.	0.	0.
MICHAEL PERPICH, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	VICE-PRESIDENT/TREASURER 1.00	0.	0.	0.
STEVEN HEDLUND, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	GRANTS CHAIRMAN 1.00	0.	0.	0.
CHARLES G. ELLER, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 1.00	0.	0.	0.
JOSEPH HARRIS, DDS 11654 PLAZA AMERICA DR. # 901 RESTON, VA 20190	TRUSTEE 1.00	0.	0.	0.

ORAL HEALTH FOUNDATION OF THE PIERRE FAU

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JAMES E. LONG, DDS	TRUSTEE			
11654 PLAZA AMERICA DR. # 901	1.00	0.	0.	0.
RESTON, VA 20190				
GARY W. LOWDER, DDS	TRUSTEE			
11654 PLAZA AMERICA DR. # 901	1.00	0.	0.	0.
RESTON, VA 20190				
KEVIN L. ROACH, DDS	TRUSTEE			
11654 PLAZA AMERICA DR. # 901	1.00	0.	0.	0.
RESTON, VA 20190				
MICHAEL SCHAFHAUSER, DDS	TRUSTEE			
11654 PLAZA AMERICA DR. # 901	1.00	0.	0.	0.
RESTON, VA 20190				
JENNIFER TEALE	EXECUTIVE DIRECTOR			
11654 PLAZA AMERICA DR. # 901	40.00	93,800.	0.	0.
RESTON, VA 20190				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

93,800.

0.

0.