Extended to November 16, 2020 2949116301310 1

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

Return of Private Foundation

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

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

▶ Go to www.irs.gov/Form990PF for instructions and the latest information

OMB No 1545-0047 **2019** Open to Public Inspection

1912

For calendar year 2019 or tax year beginning DEC 30, 2018 , and ending DEC 28, 2019

Name of foundation: Oral Reconstruction Foundation

A Employer identification number: 81-1947258

Number and street (or P O box number if mail is not delivered to street address): 2300 Riverchase Center

Room/suite:

B Telephone number: 205-986-7894

City or town, state or province, country, and ZIP or foreign postal code: Birmingham, AL 35244

C If exemption application is pending, check here ▶ ☐

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

D 1 Foreign organizations, check here ▶ ☐

2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

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

03

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

I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶$ 306,061.

J Accounting method ☐ Cash [X] Accrual ☐ Other (specify) (Part I, column (d), must be on cash basis)

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

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))

	Line	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc, received	1,833,000.			
	2 Check ▶ ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	141,026.	0.	141,026.	Statement 1
	12 Total Add lines 1 through 11	1,974,026.	0.	141,026.	
Operating and Administrative Expenses	13 Compensation of officers, directors trustees, etc	336,447.	0.	30,787.	312,444.
	14 Other employee salaries and wages	59,224.	0.	5,146.	52,229.
	15 Pension plans, employee benefits	41,541.	0.	3,726.	37,815.
	16a Legal fees				
	b Accounting fees				
	c Other professional fees Stmt 2	63,104.	0.	5,660.	57,444.
	17 Interest				
	18 Taxes Stmt 3	23,470.	0.	2,139.	21,709.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	453,301.	0.	41,500.	421,164.
	22 Printing and publications				
	23 Other expenses Stmt 4	486,952.	0.	52,068.	528,403.
	24 Total operating and administrative expenses Add lines 13 through 23	1,464,039.	0.	141,026.	1,431,208.
	25 Contributions, gifts, grants paid	335,373.			335,373.
	26 Total expenses and disbursements Add lines 24 and 25	1,799,412.	0.	141,026.	1,766,581.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	174,614.			
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative enter -0-)			0.	

Received US Bank - USB 918 NOV 23 2020 Ogden, UT

SCANNED FEB 23 2022

927

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	24,050.	88,362.	88,362.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ 94,684. Less allowance for doubtful accounts ▶	45,863.	94,684.	94,684.
	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	26,495.	123,015.	123,015.
	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock			
	c	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)	96,408.	306,061.	306,061.
Liabilities	17	Accounts payable and accrued expenses	57,922.	46,245.	
	18	Grants payable			
	19	Deferred revenue	29,624.	65,672.	
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable			
	22	Other liabilities (describe ▶ Statement 5)	8,862.	19,530.	
	23	Total liabilities (add lines 17 through 22)	96,408.	131,447.	
Net Assets or Fund Balances		Foundations that follow FASB ASC 958, check here ▶ [X] and complete lines 24, 25, 29, and 30			
	24	Net assets without donor restrictions	0.	174,614.	
	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here ▶ [ ] and complete lines 26 through 30			
	26	Capital stock, trust principal, or current funds			
	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	0.	174,614.	
	30	Total liabilities and net assets/fund balances	96,408.	306,061.	

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	0.
2	Enter amount from Part I, line 27a	2	174,614.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	174,614.
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	174,614.

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				
b	NONE			
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				
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				
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

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

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	1,720,323.	40,472.	42.506498
2017	1,953,678.	182,078.	10.729896
2016	0.	0.	.000000
2015			
2014			

2 Total of line 1, column (d)	2	53.236394
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	17.745465
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	97,251.
5 Multiply line 4 by line 3	5	1,725,764.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	1,725,764.
8 Enter qualifying distributions from Part XII, line 4	8	1,766,581.

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

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 ▶ ☐ 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 ▶ ☒ and enter 1% of Part I, line 27b		1	0.
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	0.
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	0.
6	Credits/Payments			
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a 0.		
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	0.
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	0.
9	**Tax due** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	0.
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** ▶	Refunded ▶	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?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	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			
c	Did the foundation file **Form 1120-POL** for this year?	1c		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	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? 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?	4a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by *General Instruction T*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least $5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered See instructions ▶ AL			
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	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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?	13	X	
	Website address ▶ N/A			
14	The books are in care of ▶ Greg Bryant Telephone no ▶ 205-986-7894			
	Located at ▶ 2300 Riverchase Center, Birmingham, AL ZIP+4 ▶ 35244			
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			
			Yes	**No**
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?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶			

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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☒ Yes ☐ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☒ Yes ☐ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ 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)? ☐ Yes ☒ 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) ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here ▶ ☐			
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? ☐ Yes ☒ No			
	If "Yes," list the years ▶ ______, ______, ______, ______			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ______, ______, ______, ______			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ 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) N/A	3b		
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

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))?	☐ Yes ☒ No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☒ 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?	☐ Yes ☒ 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	N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check here	▶ ☐			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A	☐ Yes ☐ No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
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?	☐ Yes ☒ 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?	☐ Yes ☒ 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
Greg Bryant 2300 Riverchase Center Birmingham, AL 35244	President 50.00	251,452.	6,369.	0.
Alison Davis 2300 Riverchase Center Birmingham, AL 35244	Vice President 50.00	84,995.	4,250.	0.
Edward P. Allen DDS, PhD 8335 Walnut Hill Ln #210 Dallas, TX 75231	Director 0.10	0.	0.	0.
Myron Nevins DDS 90 Humphrey St Swampscott, MA 01907	Director 0.10	0.	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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 Key Opinion Leader specialty events presented by the foundation that provide continuing education credits to the attendees.	551,683.
2 Central Regional Meetings are regional study clubs sponsored by the Foundation at which participants can receive continuing education credit.	110,800.
3 Northeast Regional Meetings are regional study clubs sponsored by the Foundation at which participants can receive continuing education credit.	73,889.
4 Southeast Regional Meetings are regional study clubs sponsored by the Foundation at which participants can receive continuing education credit.	98,230.

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 ▶	0.

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	0.
b	Average of monthly cash balances	1b	98,732.
c	Fair market value of all other assets	1c	
d	**Total** (add lines 1a, b, and c)	1d	98,732.
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	98,732.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,481.
5	**Net value of noncharitable-use assets** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	97,251.
6	**Minimum investment return** Enter 5% of line 5	6	4,863.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ▶ [X] and do not complete this part)

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5 2a		
b	Income tax for 2019 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	

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	1,766,581.
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	1,766,581.
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	1,766,581.

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

Part XIII **Undistributed Income** (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only				
b Total for prior years ______ , ______ , ______				
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f **Total** of lines 3a through e				
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ $				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instr.				
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7				
9 **Excess distributions carryover to 2020** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9)

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 ▶ 11/10/16

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

	Tax year	Prior 3 years			
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
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	1X 0.	0.	0.	0.	1X 0.
b 85% of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XII, line 4, for each year listed	1,766,581.	1,720,323.	1,953,678.	988,435.	6,429,017.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	1,766,581.	1,720,323.	1,953,678.	988,435.	6,429,017.
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets	306,061.	96,408.	96,969.	564,089.	1,063,527.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	306,061.	96,408.	96,969.	564,089.	1,063,527.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					0.
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

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

See Statement 6

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

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				
Advance Implants Dental Lab Inc. 112 Treemonte Dr. Orange City, FL 32763	N/A	NC	Sponsorship fee for the AID Guided Solutions Seminar program.	1,000.
Amy Saward 74744 Yucca Tree Palm Desert, CA 92260	N/A	I	Sponsorship fee for the Dr. Love Study Club program.	238.
Andrew Gould DMD LLC 1902 Bridge St. New Cumberland, PA 17070	N/A	I	Sponsorship fee for the Dental Implants: The Basics and Beyond program.	750.
Ansley Golf Club 196 Montgomery Ferry Dr. Atlanta, GA 30309	N/A	NC	Sponsorship fee for the Peachtree OMS Study Club program.	5,948.
Apollonian Study Club 3950 Dewey Ave. Rochester, NY 14616	N/A	NC	Sponsorship fee for the Apollonian Study Club program.	320.
Total See continuation sheet(s)			▶ 3a	335,373.
b Approved for future payment None				
Total			▶ 3b	0.

923611 12-17-19 ** See Purpose of Grant continuations

14081028 784827 22372250 2019.04030 Oral Reconstruction Foundat 22372251

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
Athens Oral & Maxillo-Facial Surgery, PC 2000 Prince Ave. Athens, GA 30606	N/A	NC	Sponsorship fee for the The Latest MicroTecturing and Digital Technology program.	1,954.
Auburn Periodontics and Implant Dentistry 670 N. College St., Ste. D Auburn, AL 36830	N/A	NC	Sponsorship fee for the Auburn Periodontics & Implants Study Club program.	2,180.
Aziz Bohra DDS PLC 17731 N. Reems Rd., Ste. 620 Surprise, AZ 85374	N/A	I	Sponsorship fee for the All Team Event program.	7,500.
Capital of Texas Study Club 1921 Lohmans Crossing, Ste. 208 Lakeway, TX 78734	N/A	NC	Sponsorship fee for the Capital of Texas Study Club program.	1,995.
Ceramic Implant Institute 26800 Crown Valley Pkwy., #425 Mission Viejo, CA 92691	N/A	NC	Sponsorship fee for the Al Manesh Study Club program.	500.
Coastal Oral Surgery Associates 110 Office Park Ln. Saint Simons Island, GA 31522	N/A	NC	Sponsorship fee for the Coastal Oral Surgery Annual Dental Implant Meeting program.	5,000.
Dental Impant Aesthetic Center 795 Ridge Lake Blvd., Ste. 101 Memphis, TN 38120	N/A	NC	Sponsorship fee for the DIAC Study Club program and Full Arch Implant Restorations for the General	8,000.
Dr. Bach Le 16157 E. Whittier Blvd. Whittier, CA 90603	N/A	I	Sponsorship fee for the Whittier Esthetic Continuum program.	3,492.
Dr. Bruce Smoler 820 N. Wayne Rd. Westland, MI 48185	N/A	I	Sponsorship fee for the Smoler Smiles CE Extractions & Bone Grafting using L-PRF program.	500.
Dr. Daniel R. Cullum 1859 N. Lakewood Dr., Ste. 201 Coeur d'Alene, ID 83814	N/A	I	Sponsorship fee for the Dr. Dan Cullum Study Club program.	5,000.
Total from continuation sheets				327,117.

923631
04-01-19

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
Dr. James Woodyard 4886 Rosebud Ln. Newburgh, IN 47630	N/A	I	Sponsorship fee for the Select Study Club program.	3,000.
Dr. John Taylor 691 Lanier Park Dr. Gainesville, GA 30501	N/A	I	Sponsorship fee for the 10th Annual Hunt and Learn program.	4,500.
Dr. Kenneth J. Cavallari 505 Independence Pkwy., Ste. 108 Chesapeake, VA 23320	N/A	I	Sponsorship fee for the Seattle Study Club program.	2,500.
Dr. Melanie Towe 6550 Mercantile Dr. E, Ste. 201 Frederick, MD 21703	N/A	I	Sponsorship fee for the Esthetic Implant Dentistry program.	4,000.
Dr. Stephen C. Wallace 2525 Delaney Rd. Wilmington, NC 28403	N/A	I	Sponsorship fee for the Treating Peri-Implantitis / Graft Placement & Flap Design program.	12,000.
Dr. Steven Krakora 2112 N. Franklin Dr., Ste. 2 Washington, PA 15301	N/A	I	Sponsorship fee for the Krakora Unrestricted Grant program.	6,000.
Dr. Tom Manos 1960 N. Lincoln Park West Chicago, IL 60614	N/A	I	Sponsorship fee for the Young Guns Study Club program and Chicagoland Smile Group Smoler Course.	14,734.
Impact Austin 7200 N. Mopac, Ste. 210 Austin, TX 78731	N/A	NC	Sponsorship fee for the Impact Study Club program.	500.
Indiana Dental Prosthetics, Inc. 7947 Southeastern Ave. Indianapolis, IN 46239	N/A	NC	Sponsorship fee for the BioHorizons Implants Single and Full Arch Dinner program.	2,080.
Jacksonville Dental Specialists 11512 Lake Mead Ave., Ste. 532 Jacksonville, FL 32256	N/A	NC	Sponsorship fee for the TeethXpress Jacksonville Study Club program.	1,000.
Total from continuation sheets				

923631
04-01-19

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
John Russo 1704 Bay Rd. Sarasota, FL 34239	N/A	I	Sponsorship fee for the Russo Silver King Study Club program.	1,000.
Jordan Ledger, DDS 1229 W. Washington Blvd., #200 Chicago, IL 60607	N/A	I	Sponsorship fee for the Dr. Jordan Ledger Study club program.	3,000.
Lee N. Sheldon, DMD, PA 2223 Sarno Rd., Melbourne, FL 32935	N/A	I	Sponsorship fee for the The Seamless Integration of Aesthetics, Form & Function program.	1,500.
Lillie M. Pitman DMD PC 609 Jefferson Davis Hwy., Ste. 101 Fredericksburg, VA 22401	N/A	I	Sponsorship fee for the Spear Study Club program.	2,000.
Michael Ramos 1202 Walton Blvd., Ste. 208 Rochester Hills, MI 28307	N/A	I	Sponsorship fee for the Ramos Anterior Esthetics CE program.	2,500.
Michael Seda, DMD, MS, INC 711 D. St., Ste. 107 San Rafael, CA 94901	N/A	I	Sponsorship fee for the Dr. Seda Study Club program.	1,000.
New Horizon Institute, Inc. 705 Columbis St. Rapid City, SD 57701	N/A	NC	Sponsorship fee for the Implant Pathway program.	185,000.
Northwest Oral Surgery 911 Country Club Rd., Ste. 100 Eugene, OR 97401	N/A	NC	Sponsorship fee for the Exploring Excellence Study Club program.	3,700.
Northwest Periodontics & Implants 553 N. North Court, Ste. 200 Palatine, IL 60067	N/A	NC	Sponsorship fee for the NW Perio Hygiene Lecture program.	1,500.
NOVA Institute 1430 Spring Hill Rd., #101 McLean, VA 22120	N/A	NC	Sponsorship fee for the 2019-2020 Seattle Study Club program.	3,000.
Total from continuation sheets				

923631
04-01-19

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
Pediatric Dental Care Fund 3501 Terrace St., Salk Hall, Ste. 440 Pittsburgh, PA 15261	N/A	NC	Sponsorship fee for the Krakora Mega Course program.	1,500.
Route 66 Dental Implants & Periodontics 4545 S. Harvard Ave. Tulsa, OK 74135	N/A	NC	Sponsorship fee for the Route 66 Study Club program.	4,000.
Saint Lawrence Study Club PO Box 374 Gouverneur, NY 13642	N/A	NC	Sponsorship fee for the St. Lawrence Study Club program.	400.
Santa Monica Center for Oral Surgery and Dental Implants 2020 Santa Monica Blvd., Ste. 530 Santa Monica, CA 90404	N/A	NC	Sponsorship fee for the Santa Monica Center for Oral Surgery and Dental Implants program.	1,439.
Seattle Study Group of Central New England 48 Elm St. Worcester, MA 01609	N/A	NC	Sponsorship fee for the Seattle Study Club program.	1,000.
Seventh District Dental Society 255 Woodcliff Dr. Fairport, NY 14450	N/A	NC	Sponsorship fee for the Rochester Dental Study Club program.	750.
Shark Tooth Study Club 1040 E. Venice Ave. Venice, FL 34285	N/A	NC	Sponsorship fee for the Sharktooth Study Club program.	1,000.
Southwest Oral Surgery 6677 W. Thunderbird Rd., #H120 Glendale, AZ 85306	N/A	NC	Sponsorship fee for the 2019 Study Club program.	7,500.
The Chasolen Education & Research Center, INC 2033 Wood St., Ste. 125 Sarasota, FL 34237	N/A	NC	Sponsorship fee for the Chasolen Study Club program and The Masters Study Club program.	5,000.
Vincent Vella 455 Empire Blvd. Rochester, NY 14609	N/A	I	Sponsorship fee for the Vincent Vella Dinner program.	1,500.
Total from continuation sheets				

923631
04-01-19

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 Oral and Facial Surgery 11545A Nuckois Rd. Glen Allen, VA 23059	N/A	NC	Sponsorship fee for the Implant Reality program.	1,200.
William J. Carter 5651 Frist Blvd. Hermitage, TN 37076	N/A	I	Sponsorship fee for the Dr. Carter Study Club program.	2,000.
Wilmington Country Club 4825 Kennett Pike Wilmington, DE 19807	N/A	NC	Sponsorship fee for the Predictable, Profitable, Quality Restorative Implant Dentistry program.	693.
XSurge, LLC 5022 B U Bowman Dr., Ste. 700 Buford, GA 30518	N/A	NC	Sponsorship fee for the Full-Arch Restorative Process to the Final Restoration program and Implant	8,500.
Total from continuation sheets				

923631
04-01-19

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Dental Impant Aesthetic Center

Sponsorship fee for the DIAC Study Club program and Full Arch Implant Restorations for the General Dentist program.

Name of Recipient - XSurge, LLC

Sponsorship fee for the Full-Arch Restorative Process to the Final Restoration program and Implant Compare Program.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue.					
a Tuition Revenue					141,026.
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					
4 Dividends and interest from securities					
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		0.	141,026.
13 Total Add line 12, columns (b), (d), and (e)				13	141,026.

(See worksheet in line 13 instructions to verify calculations)

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

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
1a	Tuition revenue is generated from the various classes and symposiums
1a	put on by the Foundation. The Foundation's exempt purpose is to
1a	support these classes and continuing education in the area of implant
1a	dentistry.

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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 [X] No

b If "Yes," complete the following schedule.

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

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Signature of officer or trustee: [signature] Date: 11/12/2020 Title: President

May the IRS discuss this return with the preparer shown below? See instr [X] Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Tommie G. Cummings	Tommie G. Cummings, CPA Tommie G. Cumming	10/28/20		P00175768

Firm's name ▶ Kassouf & Co., PC — Firm's EIN ▶ 63-0590670

Firm's address ▶ 2101 Highland Ave S Suite 300
Birmingham, AL 35205-4009 — Phone no. 205-443-2500

Form **990-PF** (2019)

923622 12-17-19

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	**Schedule of Contributors** ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No 1545-0047 **2019**

Name of the organization	Employer identification number
Oral Reconstruction Foundation	81-1947258

Organization type (check one)

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 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)

Name of organization	Employer identification number
Oral Reconstruction Foundation	81-1947258

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional 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	$ 1,833,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions)

Name of organization	Employer identification number
Oral Reconstruction Foundation	81-1947258

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization: Oral Reconstruction Foundation

Employer identification number: 81-1947258

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Form 990-PF	Other Income		Statement 1
Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Tuition Revenue	141,026.	0.	141,026.
Total to Form 990-PF, Part I, line 11	141,026.	0.	141,026.

Form 990-PF		Other Professional Fees		Statement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Shared Services	63,104.	0.	5,660.	57,444.
To Form 990-PF, Pg 1, ln 16c	63,104.	0.	5,660.	57,444.

Form 990-PF		Taxes		Statement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Payroll Tax	23,365.	0.	2,130.	21,613.
Licenses	105.	0.	9.	96.
To Form 990-PF, Pg 1, ln 18	23,470.	0.	2,139.	21,709.

Form 990-PF		Other Expenses		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Marketing	266,220.	0.	23,520.	238,692.
Miscellaneous	219,266.	0.	28,416.	288,377.
Supplies	1,357.	0.	122.	1,235.
Bank Fees	109.	0.	10.	99.
To Form 990-PF, Pg 1, ln 23	486,952.	0.	52,068.	528,403.

Form 990-PF	Other Liabilities	Statement 5

Description	BOY Amount	EOY Amount
Due to BioHorizons Inc.	8,862.	19,530.
Total to Form 990-PF, Part II, line 22	8,862.	19,530.

Form 990-PF Grant Application Submission Information Statement 6
Part XV, Lines 2a through 2d

Name and Address of Person to Whom Applications Should be Submitted

Alison Davis, Director of Education
2300 Riverchase Center
Birmingham, AL 35244

Telephone Number

205-986-1225

Email Address

alison.davis@orfoundation.org

Form and Content of Applications

Individuals seeking Continuing Education, financial or training material support should submit the information as required on online meeting request form found at https://orfoundation.org/.

Any Submission Deadlines

60 days in advance of program; 90 days for requests to identify speakers.

Restrictions and Limitations on Awards

Requests for oral reconstructive training materials for hands-on exercises are subject to material availability. Requests for financial support for education meetings are subject to budget limitations.