

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

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final
 Return/terminated
 Amended return
 Application pending

C Name of organization
ORAL CANCER FOUNDATION

Doing business as
ORAL CANCER FOUNDATION

Number and street (or P O box if mail is not delivered to street address) Room/suite
3419 VIA LIDO 205

City or town, state or province, country, and ZIP or foreign postal code
NEWPORT BEACH, CA 926633908

D Employer identification number
33-0969026

E Telephone number
(949) 646-8000

G Gross receipts \$ 826,633

F Name and address of principal officer
BRIAN HILL
3419 VIA LIDO 205
NEWPORT BEACH, CA 92663

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW ORALCANCER COM

K Form of organization Corporation Trust Association Other ▶

L Year of formation 2001

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE ORAL CANCER FOUNDATION IS A NATIONAL PUBLIC SERVICE, NON-PROFIT ENTITY DESIGNED TO REDUCE SUFFERING AND SAVE LIVES THROUGH PREVENTION, EDUCATION, RESEARCH, ADVOCACY, AND SUPPORT ACTIVITIES

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3
4 Number of independent voting members of the governing body (Part VI, line 1b)	2
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	8
6 Total number of volunteers (estimate if necessary)	
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	910,929	824,394
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,013	2,239
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	911,942	826,633
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	103,000	58,000
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	203,398	216,159
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 34,187		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	687,515	638,569
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	993,913	912,728
19 Revenue less expenses Subtract line 18 from line 12	-81,971	-86,095

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	566,481	464,453
21 Total liabilities (Part X, line 26)		0
22 Net assets or fund balances Subtract line 21 from line 20	566,481	464,453

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: *****
Date: 2017-09-20

BRIAN HILL PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name JOHN W DIEHL CPA	Preparer's signature JOHN W DIEHL CPA	Date 2017-09-20	Check <input type="checkbox"/> if self-employed	PTIN P00272842
Firm's name ▶ DIEHL & COMPANY INC			Firm's EIN ▶ 01-0552823	
Firm's address ▶ 2151 MICHELSON DR STE 160 IRVINE, CA 926121377			Phone no (949) 250-1400	

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission

THE ORAL CANCER FOUNDATION IS A NATIONAL PUBLIC SERVICE, NON-PROFIT ENTITY DESIGNED TO REDUCE SUFFERING AND SAVE LIVES THROUGH PREVENTION, EDUCATION, RESEARCH, ADVOCACY, AND SUPPORT ACTIVITIES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 774,821 including grants of \$ 58,000) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

(Code) (Expenses \$ 2,260 including grants of \$) (Revenue \$)
RESEARCH

4d Other program services (Describe in Schedule O)
(Expenses \$ 2,260 including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 777,081

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		No
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with columns for question ID, question text, sub-questions (1a-13b), Yes, and No. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (3); 1b Enter the number of voting members included in line 1a, above, who are independent (2); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (No); 13 Did the organization have a written whistleblower policy? (No); 14 Did the organization have a written document retention and destruction policy? (No); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (No); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (CA); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [] Own website, [X] Another's website, [X] Upon request, [] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records (BRIAN HILL 3419 VIA LIDO 205 NEWPORT BEACH, CA 92663 (949) 646-8000).

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	824,394				
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f		824,394				
Program Service Revenue	2a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		194	194			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		2,045		
		b Less cost or other basis and sales expenses					
		c Gain or (loss)			2,045		
		d Net gain or (loss)		2,045	2,045		
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses	b				
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
11a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See Instructions		826,633	2,239				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	58,000	58,000		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	187,434	183,516		3,918
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.	12,839		12,839	
10 Payroll taxes.	15,886	11,933	3,621	332
11 Fees for services (non-employees)				
a Management.				
b Legal.	4,142	170	3,953	19
c Accounting.	4,338		4,338	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	158,205	148,378	5,909	3,918
12 Advertising and promotion.	35,652	35,229	35	388
13 Office expenses.	157,798	110,766	35,941	11,091
14 Information technology.	75,374	74,705		669
15 Royalties.				
16 Occupancy.	30,006		30,006	
17 Travel.	26,974	23,109	3,636	229
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	1,076	1,076		
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	2,377	2,377		
23 Insurance.	6,918	5,177	1,166	575
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a AWARENESS/EDUCATION EVENT	116,598	103,534	16	13,048
b PUBLIC SELF DISCOVERY C	15,059	15,059		
c PUBLIC SCREENING EVENTS	4,052	4,052		
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	912,728	777,081	101,460	34,187
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest-bearing	363,533	1	374,937	
	2 Savings and temporary cash investments	101,029	2	87,335	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net	100,000	7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	60	9		
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	61,909			
	b Less accumulated depreciation	59,728	1,859	10c	2,181
	11 Investments—publicly traded securities		11		
	12 Investments—other securities See Part IV, line 11		12		
	13 Investments—program-related See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	566,481	16	464,453		
Liabilities	17 Accounts payable and accrued expenses		17		
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25			
26 Total liabilities. Add lines 17 through 25	0	26	0		
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	566,481	27	464,453	
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	566,481	33	464,453	
	34 Total liabilities and net assets/fund balances	566,481	34	464,453	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	826,633
2	Total expenses (must equal Part IX, column (A), line 25)	2	912,728
3	Revenue less expenses Subtract line 2 from line 1	3	-86,095
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	566,481
5	Net unrealized gains (losses) on investments	5	-15,933
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	464,453

Part XII Financial Statements and Reporting

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

	Yes	No
<p>1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>		
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a	No
<p>b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	No
<p>c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	2c	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>	3a	
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>	3b	

Software ID:**Software Version:****EIN:** 33-0969026**Name:** ORAL CANCER FOUNDATION

Form 990 (2016)

Form 990, Part III, Line 4a:

OCF 2016 990 NARRATIVE 2016 WAS ANOTHER YEAR OF SUCCESSFUL MISSION ACCOMPLISHMENTS, PARTICULARLY IN THE FOUNDATIONS' PUBLIC OUTREACH AND DISSEMINATING ACTIONABLE INFORMATION MISSIONS THIS WAS FACILITATED BY INCREASED VISIBILITY OF THE FOUNDATION THROUGH A COMPLETE REBUILD OF OUR INTERNET PRESENCE TO BE MOBILE FRIENDLY NO MATTER THE SIZE AND TYPE OF DEVICE ACCESSING THE VARIOUS OCF WEB SITES WHICH WAS IMPLEMENTED IN THE LAST QUARTER OF 2014 THIS MOBILE FRIENDLY MOVE HELPED GENERATE MANY NEW PUBLIC INDIVIDUAL DONORS DONATIONS WERE UP ALTHOUGH OCF CONTINUES TO HAVE FEW CORPORATE SPONSORS, AND THAT THE US ECONOMY OVERALL IS STILL VERY FLAT PARTICULARLY FOR THE MIDDLE CLASS, OUR PRIMARY DONOR BASE ANOTHER DRIVING FORCE IN DONATIONS HAS BEEN THE ADDITION OF NEW OCF WALK/RUN EVENTS AROUND THE COUNTRY PUT ON BY OUR VOLUNTEERS THE FOUNDATION'S PUBLIC OUTREACH EFFORTS CONTINUED IN 2016, AND FOCUSED HEAVILY ON THE ROLE OF THE HPV VIRUS AS AN ORAL CANCER CAUSE, AND HOW COMMON INFECTION WITH IT IS IN THE US OCF STAFF MEMBERS AND KEY OPINION/SCIENCE LEADERS SPOKE AT NUMEROUS PUBLIC EVENTS WE HAVE CONTINUED LAST YEAR'S EFFORT TO INCREASE SPEAKING ENGAGEMENTS IN THE DENTAL COMMUNITY, AS THEY ARE BECOMING AN IMPORTANT PART OF THE EARLY DISCOVERY PARADIGM THERE IS A GREAT DEAL OF MISINFORMATION ABOUT THE HPV VIRUS AND THE RELATIVE RISK THIS POSES TO AMERICANS OCF HAS PARTNERED WITH THE CDC AND THE 65 TOP CANCER TREATMENT CENTERS IN AMERICA TO PUT OUT A UNIFIED MESSAGE ABOUT HPV VACCINATION, AND HAVE DONE NUMEROUS WEB BLASTS RELATED TO CORRECT INFORMATION REGARDING MEANS OF TRANSMISSION OF THE VIRUS, AND THE VERY LOW CONVERSION RATE (1%) OF ORAL HPV INFECTIONS TO ACTUAL CANCERS LATER IN LIFE METRICS OUTSIDE OF HITS ON THE WEB INFORMATION ARE HARD TO QUANTIFY, BUT WE BELIEVE THAT AN EFFORT MUST BE MADE TO COUNTER THE ANTI- VACCINE MOVEMENT AND TO BELAY THE UNNECESSARY FEAR THAT EXISTS IN PEOPLE WHO ARE GETTING INCORRECT INFORMATION IN 2014 WE BEGAN SPONSORSHIP OF TWO RODEO COMPETITORS WHO RIDE AND COMPETE IN CLOTHING BEARING OCF'S MESSAGING/BRAND, WHICH ACCELERATED TO MORE RODEOS IN 2016 WHILE THEY ARE NOT TASKED WITH CHANGING ADULT BEHAVIOR, THEIR ANTI-TOBACCO MESSAGE IS GEARED TOWARD KIDS AT RODEOS WITH A MESSAGE OF "BE SMART DON'T START " THEIR CONVERSATIONS WITH YOUNG PEOPLE AT THE RODEOS THEY ATTEND AFTER THEIR COMPETITIVE TIME IN THE ARENA, HAVE BEEN WELL RECEIVED AND THEY CONTINUE TO GET ATTENTION FOR THEIR EFFORTS IN LOCAL AREA MEDIA HTTP://WWW.ORALCANCERFOUNDATION.ORG/SUPPORT-OCF/RODEO-TOBACCO-OUTREACH.PHP THE STORY OF A SMALL NON-PROFIT LIKE OCF BEING THE FIRST CHARITY TO EVER SPONSOR A RODEO COMPETITOR, AND THE MESSAGING FROM THESE TWO OCF ANTI- TOBACCO SPOKESPEOPLE CONTINUES TO BE PICKED UP BY MEDIA OUTLETS ACROSS THE US BOTH CODY AND CARLY HAVE GIVEN NUMEROUS INTERVIEWS BOTH TO NEWSPAPERS AND ON PUBLIC TV SHOWS, SUCH AS GOOD MORNING UTAH, AND GOOD MORNING RENO IN 2015 OCF PARTNERED OUR SUPPORTERS IN THE RDH COMMUNITY WITH OUR RODEO EFFORTS TO ENGAGE IN FREE PUBLIC SCREENINGS OF ATTENDEES AT RODEOS WHERE OUR RIDERS ARE APPEARING FOR EARLY SIGNS OF ORAL CANCERS THAT EFFORT HAS CONTINUED IN 2016 WITH ADDITIONAL RODEOS BEING ADDED TO THE SCREENING SITES RECEPTION BY RODEO PROMOTERS, AND THE PROFESSIONAL RODEO COWBOYS ASSOCIATION THAT RUNS MOST EVENTS AROUND THE COUNTRY HAS BEEN VERY POSITIVE WE ARE BEING ASKED TO ATTEND NEW EVENTS RATHER THAN HAVING TO ASK FOR PERMISSION TO ATTEND OCF VOLUNTEER RANKS GREW SIGNIFICANTLY IN 2016, AND WE ADDED MANY NEW AWARENESS EVENTS AROUND THE COUNTRY AS A RESULT IN 2016 THE FOUNDATION CONDUCTED A TOTAL OF 53 EVENTS IN MAJOR CITIES AS A RESULT OF THESE NEW RELATIONSHIPS, MANY OF WHICH COME FROM THE RANKS OF THE RDH COMMUNITY EACH EVENT HAD NUMEROUS LARGE STRATEGIC PARTNERS, SUCH AS DENTAL SCHOOLS, FORTUNE 500 CORPORATIONS, AND CANCER TREATMENT CENTERS AS CO-SPONSORS WITH THESE NEW PARTNERS ASSISTING IN THE FUNDING OF THESE EVENTS, THE COSTS TO OCF CONTINUES TO BE SIGNIFICANTLY REDUCED OVER PREVIOUS YEARS WHEN THE FOUNDATION FUNDED EVENTS ON ITS OWN THE COMMUNITY OUTREACH THROUGH THESE EVENTS IS SIGNIFICANT, WITH MANY EVENTS REACHING HUNDREDS OF PARTICIPANTS AND WITH EVEN MORE INDIVIDUALS PARTICIPATING AS NON-ATTENDING FINANCIAL SUPPORTERS OF AN INDIVIDUAL AT THE EVENT REALIZING THE SIGNIFICANCE OF THESE LARGER EVENTS MAKING NEWS IN THE LOCAL COMMUNITY, WHICH IN TURN RAISES PUBLIC AWARENESS OF THE DISEASE, THE RISK FACTORS FOR GETTING IT, AND THE EARLY SIGNS AND SYMPTOMS THAT A LAY PERSON MIGHT NOTICE AND SEEK HELP FOR, THE FOUNDATION CONTINUED TO INVEST IN OUR WEB BASED SOFTWARE THAT FACILITATES AN INDIVIDUAL'S EFFORT TO BUILD A SUPPORT TEAM AND REACH A LARGER COMMUNITY OF PEOPLE VIA THEIR EMAIL, FACEBOOK, AND TWITTER FRIENDS AND FOLLOWERS THE NEW SOFTWARE ALLOWS AUTO GENERATED EMAIL MESSAGES TO THOSE WHO ARE PARTICIPATING AND SUPPORTING TO ENGAGE THEM FURTHER WE ANTICIPATE THAT THE CONTINUED IMPACT OF THIS IN 2017 TO ALLOW US TO MAKE A SIGNIFICANT JUMP IN THE NUMBER OF INDIVIDUALS THAT WE CAN REACH WITH GOOD SCIENCE BASED INFORMATION THAT THEY CAN APPLY IN THEIR LIVES IN 2016 OUR CONTRIBUTIONS TO HPV/ORAL-OROPHARYNGEAL CANCER RESEARCH CONTINUED, ADVANCING WHAT WE KNOW ABOUT THIS FAST-GROWING ORAL CANCER ETIOLOGY WE ALSO SAW PUBLISHED THE OUTCOMES FROM PREVIOUS YEARS' RESEARCH FUNDING, IN PRESTIGIOUS PEER REVIEWED JOURNALS SUCH AS THE NEW ENGLAND JOURNAL OF MEDICINE AND THE JOURNAL OF THE NATIONAL CANCER INSTITUTE OCF SPONSORED RESEARCHERS ALSO SPOKE AT SEVERAL LARGE HEAD AND NECK CANCER CONFERENCES TO THEIR PEERS AND MEMBERS OF THE TREATMENT COMMUNITY, AND OCF CONTINUED TO WORK BEHIND THE SCENES TO SEE THEM GET THESE SPEAKING OPPORTUNITIES 2016 ALSO SAW A LONG-TERM COMMITMENT WE HAVE HAD TO DR MAURA GILLISON'S WORK IN THE IMMUNE CHECK POINT INHIBITOR RESEARCH EFFORT RESULT IN DELIVERY OF THE CLINICAL TRIALS RESULTS AT THE ASCO CONFERENCE PDL-1 DRUGS LOOKED AT IN THIS WORK ARE PROVING TO BE THE MOST IMPORTANT ADVANCEMENT IN CANCER TREATMENT ACROSS A WIDE VARIETY OF TUMOR TYPES IN MORE THAN 50 YEARS, AS THEY INVOLVE REMOVING CHECKPOINTS FROM THE PATIENT'S OWN IMMUNE SYSTEM ALLOWING IT TO BECOME MORE ENGAGED IN THE DESTRUCTION OF THE CANCER. THE ACTUAL PAPERS WERE PUBLISHED IN 2016 IN THE NEW ENGLAND JOURNAL OF MEDICINE, AND WE HAVE SEEN ALREADY A PRESS RELEASE RELATED TO THIS EFFORT FROM THE AMERICAN ACADEMY OF CLINICAL RESEARCH WHERE OCF WAS MENTIONED AS A DONOR TO THE WORK IN THE ANNUAL APRIL, ORAL CANCER AWARENESS MONTH NATIONAL ACTIVITIES, OCF AGAIN BROKE RECORDS IN THE NUMBER OF SCREENING SITES, AND FREE SCREENINGS TO THE AMERICAN PUBLIC CONDUCTED WITH OUR PARTNERS WITH OVER 2,850 SCREENING EVENTS NATIONALLY IN APRIL, THE FOUNDATION'S PRIVATE PRACTICE DENTAL AND OTOLARYNGOLOGY PARTNERS CONDUCTED OVER 72,000 FREE ORAL CANCER SCREENINGS IN COMMUNITIES ACROSS THE COUNTRY WE HAD STRONG STRATEGIC PARTNERS FOR THESE EVENTS, INCLUDING BRISTOL-MYERS SQUIBB, HENRY SCHEIN DENTAL, LILLY ONCOLOGY, AND LED DIAGNOSTICS WE ALSO WERE PARTNERED WITH PROFESSIONAL SOCIETIES INCLUDING, THE ACADEMY OF GENERAL DENTISTRY, THE AMERICAN ACADEMY OF ORAL AND MAXILLOFACIAL SURGERY, THE ACADEMY OF ORAL MEDICINE, THE ACADEMY OF PERIODONTOLOGY, THE NATIONAL DENTAL HYGIENE SOCIETY, THE ACADEMY OF ORAL PATHOLOGY AND NUMEROUS STATE DENTAL HYGIENE ASSOCIATIONS THIS WAS THE 17TH YEAR THAT OCF HAS CONDUCTED THESE FREE SCREENING EVENTS, AFTER PIONEERING THE IDEA IN 1999 WHILE THIS IS AN EXPENSIVE PART OF OUR EFFORTS, AS WE PROVIDE SCREENING MATERIALS TO ALL OF OUR PARTNERS NATIONALLY, WE INTEND TO CONTINUE THIS ANNUALLY TO KEEP THESE PRIVATE DENTAL AND MEDICAL PRACTITIONERS ENGAGED IN THE ORAL CANCER ISSUE WE THINK THIS IS A GOOD LONG-TERM INVESTMENT IN A MARKET SEGMENT THAT WILL PROVE TO BE INSTRUMENTAL IN EARLY DISCOVERY OF THE DISEASE WHEN OUTCOMES ARE BETTER ONE OF ITS GREATEST OUTCOMES IS THE NUMBER OF PRIVATE CITIZENS THAT BECOME EDUCATED ABOUT ORAL CANCER DURING THE PROCESS THROUGH THE DIRECT CONTACT WITH THESE PROFESSIONALS AND THE PRINTED LITERATURE FROM THE FOUNDATION WHICH IS HANDED OUT OCF'S ONLINE SUPPORT GROUP, NOW IN ITS 16TH YEAR OF EXISTENCE, CONTINUES TO GROW AND DESPITE CONSTANT ATTRITION THROUGH PATIENT DEATHS, STILL MAINTAINS OVER 11,500 MEMBERS PARTNERSHIPS WITH MAJOR TREATMENT FACILITIES AROUND THE COUNTRY CONTINUE TO FILL THE RANKS OF PATIENTS AND FAMILY MEMBERS WHO COME HERE FOR SCIENCE BASED ANSWERS TO THEIR QUESTIONS, AND EMOTIONAL SUPPORT WHILE OTHER ORGANIZATIONS HAVE FOLLOWED OUR MODEL NOW, INCLUDING UNCONTROLLED DISCUSSION GROUPS ON FACEBOOK, NO OTHERS HOST IT WITHIN THEIR OWN DEDICATED SERVERS WHERE POSTINGS AND CONTENT CAN BE CONTROLLED TO ASSURE APPROPRIATE INFORMATION IS DISSEMINATED, AND INACCURATE OR COMMERCIAL INFORMATION DESIGNED TO SELL SOMETHING TO PATIENTS IS CULLED DAILY WE HAVE DOCUMENTED THE HUGE AMOUNT OF MISINFORMATION, SOME IF IT DANGEROUS TO CANCER PATIENTS, THAT CAN BE DISSEMINATED, PARTICULARLY IN THE FACEBOOK ENVIRONMENT LETTERS TO FB HAVE GON

SCHEDULE A
(Form 990 or
990EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ORAL CANCER FOUNDATION

Employer identification number

33-0969026

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Do not include gain or loss from the sale of capital assets (Explain in Part VI))						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2015 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	893,905	707,171	1,260,206	910,929	824,394	4,596,605
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			6		194	200
3 Gross receipts from activities that are not an unrelated trade or business under section 513			5,000			5,000
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	893,905	707,171	1,265,212	910,929	824,588	4,601,805
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						4,601,805

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 Amounts from line 6	893,905	707,171	1,265,212	910,929	824,588	4,601,805
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				13		13
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			5,000			5,000
13 Total support. (Add lines 9, 10c, 11, and 12.)	893,905	707,171	1,270,212	910,942	824,588	4,606,818

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	99.890 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	99.880 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	0 %
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	0 %

19a 33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI)		
2 Acquisition indebtedness applicable to non-exempt use assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by .035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART III, LINE 12	LEGAL SETTLEMENT 5,000

Schedule A Form 990 or 990-E 2016

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ORAL CANCER FOUNDATION

Employer identification number
33-0969026

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | | |
|--|---------------|-----|----|
| (i) unrelated organizations | 3a(i) | Yes | No |
| (ii) related organizations | 3a(ii) | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		61,909	59,728	2,181
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				2,181

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation	
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Part XIII **Supplemental Information (continued)**

Return Reference	Explanation
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**Schedule I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ORAL CANCER FOUNDATION

Employer identification number
33-0969026

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) OSUGILLISON-HPV 154 W 12TH AVE COLUMBUS, OH 43210	31-6402113		25,000				RESEARCH
(2) JOHN HOPKINS - RESEARCH 615 N WOLFE ST BALTIMORE, MD 21205	52-0595110		25,000				RESEARCH

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

3 Enter total number of other organizations listed in the line 1 table ▶ _____

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference

Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ORAL CANCER FOUNDATION

Employer identification number

33-0969026

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 1, ITEM B	THE RETURN IS BEING AMENDED CORRECT OFFICERS, COMPENSATION AND HOURS WORKED

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>OUR PRIMARY DONOR BASE ANOTHER DRIVING FORCE IN DONATIONS HAS BEEN THE ADDITION OF NEW OC F WALK/RUN EVENTS AROUND THE COUNTRY PUT ON BY OUR VOLUNTEERS THE FOUNDATION'S PUBLIC OUT REACH EFFORTS CONTINUED IN 2016, AND FOCUSED HEAVILY ON THE ROLE OF THE HPV VIRUS AS AN OR AL CANCER CAUSE, AND HOW COMMON INFECTION WITH IT IS IN THE US OCF STAFF MEMBERS AND KEY OPINION/SCIENCE LEADERS SPOKE AT NUMEROUS PUBLIC EVENTS WE HAVE CONTINUED LAST YEAR'S EFF ORT TO INCREASE SPEAKING ENGAGEMENTS IN THE DENTAL COMMUNITY, AS THEY ARE BECOMING AN IMPO RTANT PART OF THE EARLY DISCOVERY PARADIGM THERE IS A GREAT DEAL OF MISINFORMATION ABOUT THE HPV VIRUS AND THE RELATIVE RISK THIS POSES TO AMERICANS OCF HAS PARTNERED WITH THE CD C AND THE 65 TOP CANCER TREATMENT CENTERS IN AMERICA TO PUT OUT A UNIFIED MESSAGE ABOUT HP V VACCINATION, AND HAVE DONE NUMEROUS WEB BLASTS RELATED TO CORRECT INFORMATION REGARDING MEANS OF TRANSMISSION OF THE VIRUS, AND THE VERY LOW CONVERSION RATE (1%) OF ORAL HPV INFE CTIONS TO ACTUAL CANCERS LATER IN LIFE METRICS OUTSIDE OF HITS ON THE WEB INFORMATION ARE HARD TO QUANTIFY, BUT WE BELIEVE THAT AN EFFORT MUST BE MADE TO COUNTER THE ANTI- VACCINE MOVEMENT AND TO BELAY THE UNNECESSARY FEAR THAT EXISTS IN PEOPLE WHO ARE GETTING INCORREC T INFORMATION IN 2014 WE BEGAN SPONSORSHIP OF TWO RODEO COMPETITORS WHO RIDE AND COMPETE IN CLOTHING BEARING OCF'S MESSAGING/BRAND, WHICH ACCELERATED TO MORE RODEOS IN 2016 WHILE THEY ARE NOT TASKED WITH CHANGING ADULT BEHAVIOR, THEIR ANTI-TOBACCO MESSAGE IS GEARED TO WARD KIDS AT RODEOS WITH A MESSAGE OF "BE SMART DON'T START " THEIR CONVERSATIONS WITH YO UNG PEOPLE AT THE RODEOS THEY ATTEND AFTER THEIR COMPETITIVE TIME IN THE ARENA, HAVE BEEN WELL RECEIVED AND THEY CONTINUE TO GET ATTENTION FOR THEIR EFFORTS IN LOCAL AREA MEDIA HT TP //WWW ORALCANCERFOUNDATION ORG/SUPPORT-OCF/RODEO-TOBACCO-OUTREACH PHP THE STORY OF A SM ALL NON-PROFIT LIKE OCF BEING THE FIRST CHARITY TO EVER SPONSOR A RODEO COMPETITOR, AND TH E MESSAGING FROM THESE TWO OCF ANTI- TOBACCO SPOKESPEOPLE CONTINUES TO BE PICKED UP BY MED IA OUTLETS ACROSS THE US BOTH CODY AND CARLY HAVE GIVEN NUMEROUS INTERVIEWS BOTH TO NEWSP APERS AND ON PUBLIC TV SHOWS, SUCH AS GOOD MORNING UTAH, AND GOOD MORNING RENO IN 2015 OC F PARTNERED OUR SUPPORTERS IN THE RDH COMMUNITY WITH OUR RODEO EFFORTS TO ENGAGE IN FREE P UBLIC SCREENINGS OF ATTENDEES AT RODEOS WHERE OUR RIDERS ARE APPEARING FOR EARLY SIGNS OF ORAL CANCERS THAT EFFORT HAS CONTINUED IN 2016 WITH ADDITIONAL RODEOS BEING ADDED TO THE SCREENING SITES RECEPTION BY RODEO PROMOTERS, AND THE PROFESSIONAL RODEO COWBOYS ASSOCIAT ION THAT RUNS MOST EVENTS AROUND THE COUNTRY HAS BEEN VERY POSITIVE WE ARE BEING ASKED TO ATTEND NEW EVENTS RATHER THAN HAVING TO ASK FOR PERMISSION TO ATTEND OCF VOLUNTEER RANKS GREW SIGNIFICANTLY IN 2016, AND WE ADDED MANY NEW AWARENESS EVENTS AROUND THE COUNTRY AS A RESULT IN 2016 THE FOUNDATION CONDUCTED A TOTAL OF 53 EVENTS IN MAJOR CITIES AS A RESUL T OF THESE NEW RELATIONSHIPS,</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>MANY OF WHICH COME FROM THE RANKS OF THE RDH COMMUNITY EACH EVENT HAD NUMEROUS LARGE STRATEGIC PARTNERS, SUCH AS DENTAL SCHOOLS, FORTUNE 500 CORPORATIONS, AND CANCER TREATMENT CENTERS AS CO-SPONSORS WITH THESE NEW PARTNERS ASSISTING IN THE FUNDING OF THESE EVENTS, THE COSTS TO OCF CONTINUES TO BE SIGNIFICANTLY REDUCED OVER PREVIOUS YEARS WHEN THE FOUNDATION FUNDED EVENTS ON ITS OWN THE COMMUNITY OUTREACH THROUGH THESE EVENTS IS SIGNIFICANT, WITH MANY EVENTS REACHING HUNDREDS OF PARTICIPANTS AND WITH EVEN MORE INDIVIDUALS PARTICIPATING AS NON-ATTENDING FINANCIAL SUPPORTERS OF AN INDIVIDUAL AT THE EVENT REALIZING THE SIGNIFICANCE OF THESE LARGER EVENTS MAKING NEWS IN THE LOCAL COMMUNITY, WHICH IN TURN RAISES PUBLIC AWARENESS OF THE DISEASE, THE RISK FACTORS FOR GETTING IT, AND THE EARLY SIGNS AND SYMPTOMS THAT A LAY PERSON MIGHT NOTICE AND SEEK HELP FOR, THE FOUNDATION CONTINUED TO INVEST IN OUR WEB BASED SOFTWARE THAT FACILITATES AN INDIVIDUAL'S EFFORT TO BUILD A SUPPORT TEAM AND REACH A LARGER COMMUNITY OF PEOPLE VIA THEIR EMAIL, FACEBOOK, AND TWITTER FRIENDS AND FOLLOWERS THE NEW SOFTWARE ALLOWS AUTO GENERATED EMAIL MESSAGES TO THOSE WHO ARE PARTICIPATING AND SUPPORTING TO ENGAGE THEM FURTHER WE ANTICIPATE THAT THE CONTINUED IMPACT OF THIS IN 2017 TO ALLOW US TO MAKE A SIGNIFICANT JUMP IN THE NUMBER OF INDIVIDUALS THAT WE CAN REACH WITH GOOD SCIENCE BASED INFORMATION THAT THEY CAN APPLY IN THEIR LIVES IN 2016 OUR CONTRIBUTIONS TO HPV/ORAL-OROPHARYNGEAL CANCER RESEARCH CONTINUED, ADVANCING WHAT WE KNOW ABOUT THIS FAST-GROWING ORAL CANCER ETIOLOGY WE ALSO SAW PUBLISHED THE OUTCOMES FROM PREVIOUS YEARS' RESEARCH FUNDING, IN PRESTIGIOUS PEER REVIEWED JOURNALS SUCH AS THE NEW ENGLAND JOURNAL OF MEDICINE AND THE JOURNAL OF THE NATIONAL CANCER INSTITUTE OCF SPONSORED RESEARCHERS ALSO SPOKE AT SEVERAL LARGE HEAD AND NECK CANCER CONFERENCES TO THEIR PEERS AND MEMBERS OF THE TREATMENT COMMUNITY, AND OCF CONTINUED TO WORK BEHIND THE SCENES TO SEE THEM GET THESE SPEAKING OPPORTUNITIES 2016 ALSO SAW A LONG-TERM COMMITMENT WE HAVE HAD TO DR MAURA GILLISON'S WORK IN THE IMMUNE CHECK POINT INHIBITOR RESEARCH EFFORT RESULT IN DELIVERY OF THE CLINICAL TRIALS RESULTS AT THE ASCO CONFERENCE PDL-1 DRUGS LOOKED AT IN THIS WORK ARE PROVING TO BE THE MOST IMPORTANT ADVANCEMENT IN CANCER TREATMENT ACROSS A WIDE VARIETY OF TUMOR TYPES IN MORE THAN 50 YEARS, AS THEY INVOLVE REMOVING CHECKPOINTS FROM THE PATIENT'S OWN IMMUNE SYSTEM ALLOWING IT TO BECOME MORE ENGAGED IN THE DESTRUCTION OF THE CANCER THE ACTUAL PAPERS WERE PUBLISHED IN 2016 IN THE NEW ENGLAND JOURNAL OF MEDICINE, AND WE HAVE SEEN ALREADY A PRESS RELEASE RELATED TO THIS EFFORT FROM THE AMERICAN ACADEMY OF CLINICAL RESEARCH WHERE OCF WAS MENTIONED AS A DONOR TO THE WORK IN THE ANNUAL APRIL, ORAL CANCER AWARENESS MONTH NATIONAL ACTIVITIES, OCF AGAIN BROKE RECORDS IN THE NUMBER OF SCREENING SITES, AND FREE SCREENINGS TO THE AMERICAN PUBLIC CONDUCTED WITH OUR PARTNERS WITH OVER 2,850 SCREENING EVEN</p>

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<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>TS NATIONALLY IN APRIL, THE FOUNDATION'S PRIVATE PRACTICE DENTAL AND OTOLARYNGOLOGY PARTNE RS CONDUCTED OVER 72,000 FREE ORAL CANCER SCREENINGS IN COMMUNITIES ACROSS THE COUNTRY WE HAD STRONG STRATEGIC PARTNERS FOR THESE EVENTS, INCLUDING BRISTOL-MYERS SQUIBB, HENRY SCH EIN DENTAL, LILLY ONCOLOGY, AND LED DIAGNOSTICS WE ALSO WERE PARTNERED WITH PROFESSIONAL SOCIETIES INCLUDING, THE ACADEMY OF GENERAL DENTISTRY, THE AMERICAN ACADEMY OF ORAL AND MA XILLOFACIAL SURGERY, THE ACADEMY OF ORAL MEDICINE, THE ACADEMY OF PERIODONTOLOGY, THE NATI ONAL DENTAL HYGIENE SOCIETY, THE ACADEMY OF ORAL PATHOLOGY AND NUMEROUS STATE DENTAL HYGIE NE ASSOCIATIONS THIS WAS THE 17TH YEAR THAT OCF HAS CONDUCTED THESE FREE SCREENING EVENTS , AFTER PIONEERING THE IDEA IN 1999 WHILE THIS IS AN EXPENSIVE PART OF OUR EFFORTS, AS WE PROVIDE SCREENING MATERIALS TO ALL OF OUR PARTNERS NATIONALLY, WE INTEND TO CONTINUE THIS ANNUALLY TO KEEP THESE PRIVATE DENTAL AND MEDICAL PRACTITIONERS ENGAGED IN THE ORAL CANCE R ISSUE WE THINK THIS IS A GOOD LONG-TERM INVESTMENT IN A MARKET SEGMENT THAT WILL PROVE TO BE INSTRUMENTAL IN EARLY DISCOVERY OF THE DISEASE WHEN OUTCOMES ARE BETTER ONE OF ITS GREATEST OUTCOMES IS THE NUMBER OF PRIVATE CITIZENS THAT BECOME EDUCATED ABOUT ORAL CANCER DURING THE PROCESS THROUGH THE DIRECT CONTACT WITH THESE PROFESSIONALS AND THE PRINTED LI TERATURE FROM THE FOUNDATION WHICH IS HANDED OUT OCF'S ONLINE SUPPORT GROUP, NOW IN ITS 1 6TH YEAR OF EXISTENCE, CONTINUES TO GROW AND DESPITE CONSTANT ATTRITION THROUGH PATIENT DE ATHS, STILL MAINTAINS OVER 11,500 MEMBERS PARTNERSHIPS WITH MAJOR TREATMENT FACILITIES AR OUND THE COUNTRY CONTINUE TO FILL THE RANKS OF PATIENTS AND FAMILY MEMBERS WHO COME HERE F OR SCIENCE BASED ANSWERS TO THEIR QUESTIONS, AND EMOTIONAL SUPPORT WHILE OTHER ORGANIZATI ONS HAVE FOLLOWED OUR MODEL NOW, INCLUDING UNCONTROLLED DISCUSSION GROUPS ON FACEBOOK, NO OTHERS HOST IT WITHIN THEIR OWN DEDICATED SERVERS WHERE POSTINGS AND CONTENT CAN BE CONTRO LLED TO ASSURE APPROPRIATE INFORMATION IS DISSEMINATED, AND INACCURATE OR COMMERCIAL INFOR MATION DESIGNED TO SELL SOMETHING TO PATIENTS IS CULLED DAILY WE HAVE DOCUMENTED THE HUGE AMOUNT OF MISINFORMATION, SOME IF IT DANGEROUS TO CANCER PATIENTS, THAT CAN BE DISSEMINAT ED, PARTICULARLY IN THE FACEBOOK ENVIRONMENT LETTERS TO FB HAVE GONE UNANSWERED, AND IT R EMAINS AN UNREGULATED FLOW OF A HIGH DEGREE OF MISINFORMATION TO PATIENTS WHO NEED SCIENCE BASED ANSWERS TO THEIR QUESTIONS THE EFFORT TO CONTROL AN ANONYMOUS AND FREE TO USER, OP EN WEB BASED ENVIRONMENT, TAKES SIGNIFICANT EFFORT DAILY AND IS ACCOMPLISHED PRIMARILY BY BOTH OCF STAFF AND TRAINED VOLUNTEERS, FROM DOCTORS AND NURSING PROFESSIONALS TO LONG-TERM SURVIVORS SPEAKING FROM PERSONAL EXPERIENCES THE SUPPORT GROUP CONTINUES TO BE THE WORLD 'S LARGEST, AND RECEIVES ACCOLADES FROM NUMEROUS PATIENT ADVOCACY GROUPS FOR ITS EFFECTIVE NESS THOSE THAT HAVE COPIED THE OCF MODEL HAVE SHOWN A POOR RECORD OF PROTECTING PATIENT' S PRIVACY, AND ALLOW OUTSIDE A</p>

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FORM 990, PAGE 2, PART III, LINE 4D	RESEARCH

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FORM 990, PAGE 6, PART VI, LINE 2	BRIAN HILL INGRID HILL PRESIDENT CFO WIFE

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FORM 990, PAGE 6, PART VI, LINE 7A	THIS CORPORATION HAS THREE CLASSES OF MEMBERS, DESIGNATED AS HONORARY, PROFESSIONAL AND REGULAR ANY PERSON DEDICATED TO THE PURPOSES OF THE CORPORATION IS ELIGIBLE FOR MEMBERSHIP ON APPROVAL OF THE MEMBERSHIP APPLICATION BY THE COMMITTEE AND WITH A TIMELY PAYEMENT OF SUCH DUES AND FEES AS THE BOARD MAY FIX FROM TIME TO TIME

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FORM 990, PAGE 6, PART VI, LINE 7B	THE CALIFORNIA NON-PROFIT PUBLIC BENEFIT CORPORATION IS ORGANIZED WITH MEMBERS WHO HAVE THE RIGHT TO VOTE, AS SET FORTH IN THE BYLAWS, ON THE ELECTION OF DIRECTORS, ON THE DISPOSITION OF ALL OR SUBSTANTIALLY OF THE CORPORATION'S ASSETS, ON ANY MERGER AND ITS PRINCIPAL TERMS AND ANY AMENDMENT OF THOSE TERMS, AND ON THE ELECTION TO DISOLVE THE CORPORATION. IN ADDITION, THOSE MEMBERS SHALL HAVE ALL THE RIGHTS AFFORDED MEMBERS UNDER THE CALIFORNIA NON-PROFIT PUBLIC BENEFIT CORPORATION LAW.

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FORM 990, PAGE 6, PART VI, LINE 11B	REVIEW AND APPROVAL OF THE 990 IS PREFORMED BY THE PRESIDENT

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FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION OF CEO IS SUBJECT TO THE APPROVAL OF INDEPENDENT BOARD MEMBERS

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FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST

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FORM 990, PART IX, LINE 11G	TEMP LABOR 2,019 1,223 0 WEB CONTENT 25,250 0 0 PR MARKETING 33,280 0 3,520 PROFESSIONAL RELATIONS 14,000 0 0 CONSULTING SPECIAL PROJECTS 45,875 0 0 CONSULTING 27,954 4,686 398 TOTAL 148,378 5,909 3,918