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2009

FEDERAL STATEMENTS

PAGE 2

MARY T. & CURTIS LOVILL TRUST

01-6102905

STATEMENT 4 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
6	6,200.		7,820.	-1,620.				\$ -1,620.
7	73.		0.	73.				73.
8	14.		0.	14.				14.
							TOTAL	\$ -6,077.

STATEMENT 5
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM: ROBERT B. DAVIS

NAME: ROBERT B. DAVIS

CARE OF:

STREET ADDRESS: 21 STEVENS AVENUE

CITY, STATE, ZIP CODE: RANDOLPH, ME 04346

TELEPHONE: 207-582-3884

FORM AND CONTENT: THERE IS NO PARTICULAR FORM OR FORMAT FOR AN APPLICATION, GENERALLY INTERVIEWS WILL BE CONDUCTED; IN GENERAL, INFORMATION REGARDING THE HISTORY OF THE AGENCY, ORGANIZATION, OR INDIVIDUAL WILL BE REQUIRED AS PART OF REQUEST FOR FUNDS; A PREREQUISITE FOR CONSIDERATION WILL BE INFORMATION RELATING TO THE SERVING THE BLIND OR VISUALLY IMPAIRED AND TO A LESSER EXTENT PROVIDING HEARING AID OR ASSISTANCE TO INDIVIDUALS.

SUBMISSION DEADLINES: NONE

RESTRICTIONS ON AWARDS: RESTRICTIONS OR LIMITATIONS: GEOGRAPHICAL AREAS - GENERALLY RESTRICTED TO ACTIVITIES WITHIN THE STATE OF MAINE. CHARITABLE FIELDS - DIRECT AND INDIRECT SUPPORT IN THE FIELDS OF EYE CARE AND HEARING. KINDS OF INSTITUTIONS - NONE. OTHER FACTORS - NONE.