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990-PF

Return of Private Foundation

OMB No 1545-0052

	Form 🖜	7	or se	ction 4947(a)(1) None	xempt Chari	table ITust		_ ~െ.4
POSTMARK	Departm Internal	nent of the Treasury Revenue Service	Note The foundation may	Treated as a Priva	ate Foundation	on satisfy state rep	oorting requirements	
3	Force	alendar vear 2011	or tax year beginning		/01 , 2011			04/30, 2012
₹:	Nam	e of foundation	or tun your gogming				A Employer identifi	
>	СНА	ARLES A. & MA	RNA DAVIS FOUNDAT:	ION			13-343792	
			D box number if mail is not delive			Room/suite	B Telephone numb	er (see instructions)
130	•	BCRS ASSOCI		,			*	2) 440-0800
T-		WATER STREET	,			9TH FL	,	_,
)H		or town, state, and Z	'IP code					
\mathcal{C}	Oity	or town, state, and z	0000				C If exemption applica	ition is
N.	NEG	YORK, NY 10	005				pending, check here	
ဆ		 		Instal rature	-6 - 6	uhla abarit	\dashv	. □
7013	G Ch	eck all that apply	Initial return	Initial return	•	iublic charity	= 1 Torongir organizat	
<u> </u>			Final return	Amended ref			2 Foreign organiza 85% test, check h	
			Address change	Name change			computation .	▶ 🗀
		eck type of organi		c)(3) exempt private f			E if private foundation	status was terminated
			nonexempt charitable trust	Other taxable pr			under section 507(b)(1)(A), check here
		r market value of a	1 —	unting method X Ca		rual	•	in a 60-month termination
		year (from Part II, c	or (c), line	ther (specify)			under section 507(b)	i(1)(B), check here . P
		<u> </u>	<u></u>	column (d) must be on	casn pasis)	i	1	(4) Db
	Part		venue and Expenses (The columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessar	aly equal the amounts in	expenses per books	incom	1	income	purposes
		column (a) (see in:	structions))				N/A	(cash basis only)
	1	Contributions, gifts, grant	ts, etc., received (attach schedule) . e foundation is not required to	530,000.				
	2		sh Sch B			530		
	3	Interest on savings ar	nd temporary cash investments	538.	12	538.		ATCH 1
	4	Dividends and inte	rest from securities	132,761.	13	2,761.		ATCH 2
	5 a	Gross rents						
	b	Net rental income or ((loss)					
	<u>ლ</u> 6 გ		m sale of assets not on line 10	55.	-			<u></u>
	Kevenue 6 a 7	Gross sales price for a assets on line 6a						
	7 (چ	Capital gain net inc	come (from Part IV, line 2) .			55.		
•	8	Net short-term cap	oital gain					
	9	Income modification Gross sales less return and allowances	Das C C I / C C					
	10 a	and allowances	"LCIVED					
	b	Less Cost of goods so	old .					
	C		s) (attach schedule)					
	11	Other income (atta	nch schedule)	660 054	10	2.5.4		
	12	Total. Add lines-1-		663,354.	13	3,354.	0	
	13	Compensation of office	cers, directors, trustees, etc	<u> </u>				
	n 14	Other employee-se	alaries and wages					
	15 6 7 8 9 0 1 2 3 4 15 6 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6		ployee benefits					
	ē 16a	Legal fees (attach s	schedule)		 	1 750		, ===
L	ŭ þ		attach schedule)ATCH 3	3,500.		1,750.	· · · · · · · · · · · · · · · · · · ·	1,750
	S c	Other professional	fees (attach schedule)					
,	17	Interest		1 200			- 	
	<u>r</u> 418	Taxes (attach schedul	le) (see instructions)	1,200.			- 	
•	19	Depreciation (attac	ch schedule) and depletion.					
1	20	Occupancy						
+	21	Travel, conference	s, and meetings		<u> </u>			
	22		cations			155		
	23	Other expenses (at	ttach schedule) ATCH 5	2,413.		177.		2,236
	<u>1</u> 24	Total operating ar	nd administrative expenses.					
3		Add lines 13 throu	gh 23	7,113.		1,927.		3,986
(至5	Contributions, gifts	s, grants paid	666,684.				666,684
	2.6	Total expenses and disb	oursements Add lines 24 and 25	673,797.		1,927.	0	670,670
	121	Subtract line 26 from	om line 12					
	a	Excess of revenue over	expenses and disbursements	-10,443.				
	b	Net investment in	come (if negative, enter -0-)		13	1,427.		

c Adjusted net income (if negative, enter -0-). .

JSA ** ATCH 4

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В	art II	Balanca Shoots	Attached schedules and amounts in the ance Sheets Attached schedules and amounts in the description column should be for end-of-year		of year	
	ert II		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing		250.	250
	2	Savings and temporary	cash investments	584,075.	573,504.	573,504.
	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4					
	-	Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			<u> </u>
	٠		tach schedule) (see instructions)			
	7	, , ,	eceivable (attach schedule)			
	•		btful accounts			
ध्र	8		se			
Assets	9	·	eferred charges		· 	**
۷			e government obligations (attach schedule)	902,176.	902,176.	3,187,523.
		•	stock (attach schedule) ATCH 6	902,170.	302,170.	3,107,323.
	11 C	Investments - corporate Investments - land, building:	e bonds (attach schedule)			
	• •			;	v	* ·
		(attach schedule)	ation			
	12	Investments - mortgage	loans			
	13	Investments - other (atta	ach schedule)			
	14	equipment basis	, -			-
		(attach schedule)	ation ATCH 7			
	15	Other assets (describe	 /	9,462.	9,340.	187.
	16	Total assets (to be	completed by all filers - see the			
		instructions Also, see p	age 1, item I)	1,495,713.	1,485,270.	3,761,464.
	17	Accounts payable and a	accrued expenses			
	18	Grants payable				
Š	19					
≝	20		ors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other no	otes payable (attach schedule)		•	
اڭ	22		∍ ▶) [
		,				
	23	Total liabilities (add line	es 17 through 22)	0	0	
٦			low SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
S	24					
Balances	25					
ala	26					
		•	met follow SEAS 447	····	····	
un	27 28 29 30 31		not follow SFAS 117, plete lines 27 through 31. ▶ 🗓			
ī	27		cipal, or current funds	1,495,713.	1,485,270.	
SO	21	•				
set	28	•	r land, bldg , and equipment fund	 		
As	29		ulated income, endowment, or other funds	1,495,713.	1,485,270.	
et	30		d balances (see instructions)	1,130,1101	27.0072.01	
Z	31		net assets/fund balances (see	1,495,713.	1,485,270.	
			ngos in Not Assats or Fund		1,405,270.	
			anges in Net Assets or Fund I		must seems with I	
1			alances at beginning of year - Part			1 405 712
			d on prior year's return)			1,495,713.
2	Ente	r amount from Part I,	line 27a			-10,443.
			ed in line 2 (itemize) ▶			1 405 030
					ľ	1,485,270.
5	Decr	eases not included in	line 2 (itemize)		5	1 405 070
<u>6</u>	Tota	I net assets or fund ba	alances at end of year (line 4 minus l	ine 5) - Part II, column (b)), line 30 6	1,485,270.
						Form 990-PF (2011)

_		
Dan	^	С

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	e g , real estate, shs MLC Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1a SEE PART IV SCHEI	DULE				
b					
С					
e		(a) Cook as albachasia			<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
<u>b</u>					
C					
d			l		
Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col. (b) a	ain minus
(i) Adjusted basis (k) Excess of col (i)				Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	ol (h))
a					
b					
С					
d					
<u>e</u>	<u> </u>				
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		55.
	n or (loss) as defined in sections 12			•	
If gain, also enter in Par	t I, line 8, column (c) (see insti	ructions) If (loss), enter -0- in			
Part I, line 8		<u></u>	3		0
	Under Section 4940(e) for Recommendations subject to the				
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	J?	Yes X No
	ount in each column for each year		any entri	es	_
(a)	(b)	(c)		(d) Distribution ra	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	
2010	397,336.	3,406,396.			0.116644
2009	460,742.	2,841,008.			0.162176
2008	326,270.	2,601,726.	<u> </u>		0.125405
2007	356,606.	2,920,970.			0.122085
2006	337,519.	3,181,946.	ļ	<u> </u>	0.106073
2 Total of line 1, column (d)			2		0.632383
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if less	s than 5 years	3		0.126477
4 Enter the net value of nor	ncharitable-use assets for 2011 fro	m Part X, line 5	4	3,	737,108.
5 Multiply line 4 by line 3			5		472,658.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		1,314.
			7 473,972.		
8 Enter qualifying distribution If line 8 is equal to or great to the second se	ons from Part XII, line 4		8 hat part	using a 1% ta	670,670. x rate See the
Part VI instructions	<u> </u>				

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	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	5)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,3	314.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		1,3	314.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,3	314.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 739.			
b	Exempt foreign organizations - tax withheld at source6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 1,000.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1,7	739.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			<u>9.</u>
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4	116.
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 416. Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			١
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_		N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		-
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions) NY,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	L
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or]
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			l .
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	امدا	l	l X

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Pai	rt VII-A Statements Regarding Activities (continued)	_		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12_		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ BCRS ASSOCIATES, LLC Telephone no ▶ 212-440	-080	0	
	Located at ▶77 WATER STREET - 9TH FLOOR NEW YORK, NY ZIP+4 ▶ 10005			
15			▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	ŀ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		N/A
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2011?	1 c		N/A
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		N/A
С	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2011)	3 b		N/A
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			.,
	charitable purpose that had not been removed from leopardy before the first day of the tax year beginning in 2011?	4b		X

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Total number of other employees paid over \$50,000 . .

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Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	agers, Highly Paid Employ	rees,
3 Five highest-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE	n .
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		(
750,000		
Total number of others receiving over \$50,000 for professional services	<u></u>	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficianes served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT	1	
CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT,	BY	
CONTRIBUTIONS, OTHER ORGANIZATIONS EXEMPT UNDER INTERNAL	*	0
2 REVENUE CODE SECTION 501(C)(3).		_
		0
3 N/A		
		_
4 N/A		0
4 N/M		
		0
Part IX-B Summary of Program-Related Investments (see instructions)	<u></u> !	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1 N/A		
		0
2 N/A		
		0
All other program-related investments See instructions		
3 N/A		
		•
Takel Add book 1 through 2		0

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	3,241,545.
b	Average of monthly cash balances	1 b	552,279.
С		1 c	194.
d		1 d	3,794,018.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,794,018.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	4	56,910.
5		5	3,737,108.
6	Minimum investment return. Enter 5% of line 5	6	186,855.
P	The property of the property		
1	Minimum investment return from Part X, line 6	1	186,855.
2a			
þ	Income tax for 2011 (This does not include the tax from Part VI) 2b	7	
С		7 2c	1,314.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	185,541.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	1 - 1	185,541.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1		185,541.
_	art XII Qualifying Distributions (see instructions)	····	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	_	670,670.
a			
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	0
2			
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the	_	
a			0
b	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3 b	670, 670
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	670,670.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		1 21 4
•	Enter 1% of Part I, line 27b (see instructions)	5	1,314. 669,356.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	uculating wh	emer the foundation

Form **990-PF** (2011)

Form 990-PF (2011) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) Corpus Years prior to 2010 2010 2011 Distributable amount for 2011 from Part XI, 185,541. Undistributed income, if any, as of the end of 2011 0 a Enter amount for 2010 only 0 b Total for pnor years 20_____,20_____,20____ Excess distributions carryover, if any, to 2011 182,064. a From 2006 213,327. **b** From 2007 198,846. c From 2008 321,324. d From 2009 229,668. e From 2010 1,145,229. f Total of lines 3a through e Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ ___ 670,670. a Applied to 2010, but not more than line 2a . . . b Applied to undistributed income of prior years 0 (Election required - see instructions) c Treated as distributions out of corpus (Election 0 required - see instructions) 185,541. d Applied to 2011 distributable amount 485,129. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a) Enter the net total of each column as indicated below: 1,630,358. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract 0 line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has 0 been previously assessed d Subtract line 6c from line 6b Taxable 0 4a from line 2a Taxable amount - see 0 f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 0 distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 0 Excess distributions carryover from 2006 not 182,064. applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2012. 1,448,294. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 213,327. a Excess from 2007 . . . 198,846. b Excess from 2008 . . . 321,324. c Excess from 2009 . . . 229,668. d Excess from 2010 . . .

Form 990-PF (2011)

e Excess from 2011 . . .

485,129.

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

JSA 1E1490 1 000

factors

c Any submission deadlines

Form 990-PF (2011)

Page 11

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager	recipient	contribution	Amount
a Paid during the year				
SEE LIST ATTACHED		1		666,684.
		i		
		ĺ		
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		1		
]		
			1	
				1
				•
		i		
Total	<u>, , , , , , , , , , , , , , , , , , , </u>		<u>▶</u> 3a	666,684.
b Approved for future payment				
		}		
		i		
		1		
			1	
	L <u></u>	<u> </u>	<u> </u>	
Total	<u> </u>	 <u></u>	▶ 3b	<u> </u>

Page 12

Part XVI	-A Analysis of Income-Produ	icing Acti	vities	- -		_	
Enter gross amounts unless otherwise indicated			ated business income	Excluded by	section 512, 513, or 514	(e)	
-		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income	
	n service revenue					(See instructions)	
	77 //- 18			1			
					-		
				1			
e f							
	and contracts from government agencies						
_	ship dues and assessments	.				+	
	on savings and temporary cash investments			14	538.		
	ds and interest from securities			14	132,761.		
	tal income or (loss) from real estate	-					
	-financed property						
	debt-financed property						
	il income or (loss) from personal property						
	ivestment income						
	loss) from sales of assets other than inventory			18	55.		
•	ome or (loss) from special events						
	rofit or (loss) from sales of inventory.					·	
•	evenue a						
_							
d							
е						<u>-</u>	
12 Subtotal	Add columns (b), (d), and (e)				133,354.	133,354.	
Part XVI- Line No. ▼	Explain below how each activities accomplishment of the foundation	y for whic	h income is reported	ın column (e	e) of Part XVI-A contribu		
	N/A						
	,						
					-		
			<u>,, , , , , , , , , , , , , , , , , , ,</u>				
					·		
							
			······				

CHARLES A. & MARNA DAVIS FOUNDATION 13-3437924 Form 990-PF (2011) Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of Χ Χ 1a(2) (2) Other assets **b** Other transactions X Χ (2) Purchases of assets from a noncharitable exempt organization Х X Χ Х d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (c) Description of relationship (a) Name of organization (b) Type of organization N/A have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, (other than taxpayer) is based on all information of which preparer has any knowledge i declare that Sign the IRS discuss this return TRUSTEE Here with the preparer Title (see instructions)? X Yes Print/Type greparer's name Preparer's signature II PTIN Check Paid

Form 990-PF (2011)

DO W Self-employed P01450182

Firm's EIN ▶ 13-4078147

Phone no 212-440-0800

Preparer

Use Only

Firm's address ▶ 77 WATER STREET, 9TH FLOOR

JOHN D. COOK

Firm's name ▶ BCRS ASSOCIATES,

NEW YORK,

10005

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

CHARLES A. & MARNA	Employer Identification number	
CHARLES A. & PIARNA	13-3437924	
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated	as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a	private foundation
	501(c)(3) taxable private foundation	
General Rule	o(7), (8), or (10) organization can check boxes for both the Gene	
ror an organization	y one contributor Complete Parts I and II	y year, 40,000 or more (iii morely or
Special Rules		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 of 19(a)(1) and 170(b)(1)(A)(vi) and received from any one contribution of (a) 2% of the amount on (i) Form 990, Part VIII, line and II	outor, during the year, a contribution of
during the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that otal contributions of more than \$1,000 for use <i>exclusively</i> for reposes, or the prevention of cruelty to children or animals. Com	ligious, charitable, scientific, literary,
during the year, c not total to more t year for an exclusi	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that ontributions for use exclusively for religious, charitable, etc., puthan \$1,000. If this box is checked, enter here the total contributely religious, charitable, etc., purpose. Do not complete any capanization because it received nonexclusively religious, charitativear.	rposes, but these contributions did utions that were received during the f the parts unless the General Rule ble, etc., contributions of \$5,000 or
	at is not covered by the General Rule and/or the Special Rules	•
	ust answer "No" on Part IV, line 2, of its Form 990, or check t 0-PF, to certify that it does not meet the filing requirements of	
For Paperwork Reduction Act Not	tice, see the Instructions for Form 990, 990-EZ, or 990-PF	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization CHARLES A. & MARNA DAVIS FOUNDATION

Employer identification number 13-3437924

			
Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	CHARLES A. DAVIS CHARITABLE LEAD ANNUITY TRUST; C/O BCRS, 77 WATER STREET-9TH FL NEW YORK, NY 10005	\$530,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization CHARLES A. & MARNA DAVIS FOUNDATION

Employer identification number

13-3437924

Part II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is ne	eded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
	. 		

Employer identification number 13-3437924

Part III E	xclusively religious, charitable, etc., at total more than \$1,000 for the ye	individual contribu	tions to section 5	601(c)(7), (8), or (10) organizations a) and the following line entry			
F	or organizations completing Part III, e	nter the total of excl	usively religious, o	charitable, etc ,			
	se duplicate copies of Part III if addition						
(a) No from Part I	(b) Purpose of gift	(c) Use	•	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	To the second TID of			ionship of transferor to transferee			
	Transferee's name, address, ar	iu zir + 4		niship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
-	(e) Transfer of gift						
	Tourstone le mone address au			onship of transferor to transferee			
-	Transferee's name, address, ar	10 ZIP + 4	Kelatic	niship of transferor to transferee			
(a) No. from Part i	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
raiti							
-		(e) Transf	er of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee			
I							

SCHEDULE D (Form 1041)

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Employer identification number Name of estate or trust 13-3437924 CHARLES A. & MARNA DAVIS FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co.) (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (mo , day, yr) (mo , day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (see instructions) (mo_day, yr) (mo, day, yr) 6a 55. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back. For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2011

Schedule D (Form 1041) 2011				Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) Total
Caution: Read the instructions before completing this p	art	(see instr)	or trust's	(3) Total
3 Net short-term gain or (loss)	13			
4 Net long-term gain or (loss):				
a Total for year	14a			55.
b Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
c 28% rate gain	14c			
5 Total net gain or (loss). Combine lines 13 and 14a ▶	15			55.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (
gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	mplete	Part IV and the Capital	Loss Carryover V	Vorksheet, as necessary
Part IV Capital Loss Limitation				
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Page 1041).				
a The loss on line 15, column (3) or b \$3,000			16	1(
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page Canyover Worksheet in the instructions to figure your capital loss canyover	1, line	e 22 (or Form 990-1, lii	ne 34), is a loss, i	complete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rates				
form 1041 filers. Complete this part only if both lines 14a and 15 in colum) are gains or an am	ount is entered	d in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	•			
Caution: Skip this part and complete the Schedule D Tax Worksheet in the ii				
Either line 14b, col (2) or line 14c, col (2) is more than zero, or				
▶ Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form 990-T trusts. Complete this part only if both lines 14a and 15 are				
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part at	nd coi	mplete the Schedule	D Tax Works	neet in the instructions
f either line 14b, col (2) or line 14c, col (2) is more than zero				
Form 1041, line 22 (or Form 990-T, line 34)	4)	17		
8 Enter the smaller of line 14a or 15 in column (2)				
but not less than zero				
9 Enter the estate's or trust's qualified dividends			l	
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T) 19		_		
20 Add lines 18 and 19		_		
21 If the estate or trust is filing Form 4952, enter the			1	
amount from line 4g, otherwise, enter -0 ▶ 21		_		
Subtract line 21 from line 20 If zero or less, enter -0		22		
Subtract line 22 from line 17 If zero or less, enter -0		23		
Enter the smaller of the amount on line 17 or \$2,300		24		
Is the amount on line 23 equal to or more than the amount on line 24				
Yes Skip lines 25 and 26, go to line 27 and check the "No" box				
No. Enter the amount from line 23		25		
Subtract line 25 from line 24		26		
Are the amounts on lines 22 and 26 the same?				
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	e 22	27		
			İ	
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Subtract line 28 from line 27				
30 Multiply line 29 by 15% (15)		<u></u>	30	
31 Figure the tax on the amount on line 23 Use the 2011 Tax Rate				
(see the Schedule Ginstructions in the instructions for Form 1041)			31	
32 Add lines 30 and 31			32	
Figure the tax on the amount on line 17. Use the 2011 Tax Rate				
(see the Schedule Ginstructions in the instructions for Form 1041)				
Tax on all taxable income. Enter the smaller of line 32 or line 33 h			1	
G, line 1a (or Form 990-T, line 36)		· · · · · · · · · · · · · · · · · · ·		-dula D (5 4040) 0011
			Sch	edule D (Form 1041) 2011

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Page 2

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number 13-3437924 CHARLES A. & MARNA DAVIS FOUNDATION Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (e) Cost or other basis (see instructions) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales pnce acquired (mo , day, yr) (mo, day, yr) 6a LTCG(L) THRU MMC CAP TECH PRO II FD 55. 55.

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b

55.

THE CHARLES A. AND MARNA DAVIS FOUNDATION

EIN: 13-3437924

SUPPLEMENTARY STATEMENT

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE. THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	538.	538.
REVENUE AND EXPENSES PER BOOKS	538.	538.
		TOTAL
DESCRIPTION	INTEREST - MORGAN STANLEY	

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	132,761.	132,761.
REVENUE AND EXPENSES PER BOOKS	132,761.	132,761.
		TOTAL
DESCRIPTION	DIVIDENDS THRU MORGAN STANLEY	

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,750.	1,750.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,750.	1,750.
REVENUE AND EXPENSES PER BOOKS	3,500.	3,500.
		TOTALS
DESCRIPTION	BCRS ASSOCIATES, LLC	

ATTACHMENT 4

ATTACHMENT 4 PAGE 22

TAXES
1
Н
PART
990PF,
FORM

	ADJUSTED	Ū	INCOME			
	NET	INVESTMENT	INCOME			
REVENUE	AND	EXPENSES	PER BOOKS	1,200.	1,200.	
			DESCRIPTION	FED'L TAX-EXT PMT FYE 4/30/11	TOTALS	

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ATTACHMENT 5

FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE	PURPOSES 250.	125.			21.	1,840.	2,236.
ADJUSTED NET	INCOME						
NET INVESTMENT	INCOME		82.	. 36			177.
REVENUE AND EXPENSES	PER BOOKS 250.	125.	82.	. 95.	21.	1,840.	2,413.
	DESCRIPTION NEW YORK STATE FILING FEE	PUBLICATION NOTICE FEE PORT DED'S THRU:	-MMC CAP C&I PROFESSIONAL FD	-MMC CAP TECH PROF FUND II	BANK CHARGE	CHARITABLE EXPENSE	TOTALS

ENDING <u>FMV</u>	3,187,523.	3,187,523.
ENDING BOOK VALUE	902,176.	902,176.
BEGINNING BOOK VALUE	902,176.	902,176.
DESCRIPTION	SEE LONG POSITION ATTACHED	TOTALS

ATTACHMENT

ASSETS	
OTHER	
1	l
II	İ
PART	
990PF,	
FORM	

ENDING FMV	147. 40. 187.
ENDING BOOK VALUE	9,211. 129. 9,340.
BEGINNING BOOK VALUE	9,293. 169. 9,462.
DESCRIPTION	MMC CAP C&I PROFESSIONAL FD LP MMC CAP TECH PROFESSIONALS FD TOTALS

ATTACHMENT 8

77 WATER STREET - 9TH FLOOR NEW YORK, NY 10005

C/O BCRS ASSOCIATES, LLC

MARNA DAVIS

77 WATER STREET - 9TH FLOOR

NEW YORK, NY 10005

C/O BCRS ASSOCIATES, LLC

CHARLES A. DAVIS

NAME AND ADDRESS

CHARLES A. & MARNA DAVIS FOUNDATION

13-3437924

ATTACHMENT 9

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

CHARLES A. DAVIS; C/O BCRS ASSOCIATES, LLC 77 WATER STREET, 9TH FL., NEW YORK, NY 10005

FEDERAL FOOTNOTES

CHARLES A. & MARNA DAVIS FOUNDATION

EIN: 13-3437924

SUPPLEMENTARY STATEMENTS

PART: XV LINE:2

SUPPLEMENTARY STATEMENTS

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATION'S ACTIVITIES. NO CONTRIBUTIONS, GRANTS, GIFTS LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS. THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES.

CHARLES A AND MARNA DAVIS FOUNDATION CHARITABLE CONTRIBUTIONS FYE 4/30/2012

EIN. 13-3437924

DATE	CONTRIBUTION	CITY, STATE	AMOUNT
6/13/2011	CT CHALLENGE	SOUTHPORT, CT	1,000 00
7/7/2011	MEMORIAL SLOAN-KETTERING CANCER CENTER	NEW YORK, NY	250 00
8/18/2011	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	65 00
9/30/2011	MAKE A WISH FOUNDATION OF PHILADELPHIA	PHILADELPHIA, PA	500 00
12/30/2011	ST BALDRICK'S FOUNDATION	MONROVIA, CA	1,000 00
5/10/2011	THE GOVERNORS ACADEMY	BYFIELD, MA	5,000 00
5/13/2011	ST LAWRENCE UNIVERSITY	CANTON, NY	1,500 00
5/19/2011	GREENWICH POLICE DEPARTMENT SCHOLARSHIP FUND	GREENWICH, CT	100 00
6/16/2011	OCEAN REEF MEDICAL CENTER FOUNDATION	KEY LARGO, FL	5,000 00
6/27/2011	COLORADO COLLEGE	COLORADO SPRINGS, CO	10,000 00
7/7/2011	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	40,000 00
7/25/2011	SHELBURNE MUSEUM	SHELBURNE, VT	20,000 00
8/3/2011	TUESDAY'S CHILDREN	MANHASSET, NY	10,000 00
8/9/2011	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	100,000 00
9/21/2011	GREENWICH ADULT DAY CARE	GREENWICH, CT	2,500 00
9/26/2011	CHINA CARE FOUNDATION	WESTPORT, CT	16,750 00
10/3/2011	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	25,000 00
10/5/2011	AMOGERONE VOLUNTEER FIRE COMPANY	GREENWICH, CT	50 00
10/6/2011	SEARCH AND CARE	NEW YORK, NY	900 00
10/17/2011		BELLPORT, NY	25 00
	SILVER SHIELD ASSOCIATION INC	GREENWICH, CT	25 00
11/16/2011		GREENWICH, CT	100 00
		CANTON, NY	1,500 00
11/17/2011	FRIENDS OF ALTA	ALTA, UT	1,000 00
12/6/2011	ROBERT HULL FLEMING MUSEUM	BURLINGTON, VT	1,000 00
12/7/2011	WATERSIDE SCHOOL	STAMFORD, CT	100 00
	UNIVERSITY OF VERMONT	BURLINGTON, VT	248,344 00
	SAIL TO PREVAIL	NEWPORT, RI	17,300 00
	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	5,000 00
	HILL HOUSE SENIOR RESIDENCE	RIVERSIDE, CT	50 00
	SHELBURNE MUSEUM	SHELBURNE, VT	10,000 00
12/30/2011 1/3/2012	NEW YORK POLICE & FIRE WIDOW'S & CHILDREN'S BENEFIT FUN		20,000 00
	_		25,000 00
1/4/2012	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	-
1/18/2012	INDIAN RIVER SHORES PUBLIC SAFETY ST LAWRENCE UNIVERSITY ALUMNI FUND	INDIAN RIVER SHORES, FL	100 00
1/19/2012		CANTON, NY	100 00 25 00
1/20/2012	GREENWICH POLICE DEPARTMENT SCHOLARSHIP FUND	GREENWICH, CT	
1/23/2012 2/9/2012	THE KEYS CHILDREN'S FOUNDATION BOYS & GIRLS CLUB OF GREENWICH	HOMESTEAD, FL GREENWICH, CT	1,000 00 1,000 00
2/17/2012		PATCHOGUE, NY	4,700 00
2/11/2012		DALLAS, TX	20,000 00
		· · · · · · · · · · · · · · · · · · ·	•
2/22/2012 3/5/2012	OCEAN REEF COMMUNITY FOUNDATION GREENWICH FIREFIGHTERS ASSOCIATION	KEY LARGO, FL GREENWICH, CT	600 00 100 00
	OCEAN REEF COMMUNITY FOUNDATION	KEY LARGO, FL	25,000 00
3/7/2012 4/2/2012	FIBROLAMELLAR CANCER FOUNDATION	GREENWICH, CT	25,000 00
4/2/2012	CHORDOMA FOUNDATION	DURHAM, NC	10,000 00
4/10/2012	UC REGENTS	OAKLAND, CA	10,000 00
,, .o, eoie			15,000 00
	тс	OTAL CONTRIBUTIONS PAID *	\$666,684 00

^{*} All contributions were made to the general purpose fund of Public charitable organizations that were classified under Section 501 (c) (3) of the Internal Revenue Code

THE CHARLES A. AND MARNA DAVIS FOUNDATION SECURITIES LONG POSITION AS OF APRIL 30, 2012

DESCRIPTION	DATE ACQUIRED	QTV	UNIT COST	COST OR OTHER BASIS	FAIR MARKET VALUE	UNREALIZED GAIN/LOSS
LIFEPOINT HOSPITALS INC. COM	1/3/2000	32	0.6660	21 00	1,248 64	1,227 64
MERCHANTS BANCSHARES INC	1/3/2000	83,471 14,466 97,937	7 6100	635,214 00 110,086.00 745,300.00	2,243,700 48 388,846 08 2,632,546.56	1,608,486 48 278,760 08
	LONG POSITION TOTAL	ON TOTAL		\$745,321.00	\$2,633,795.20	

THE CHARLES A. AND MARNA DAVIS FOUNDATION SECURITIES LONG POSITION AS OF APRIL 30, 2012

	DATE			COST OR	FAIR MARKET	UNREALIZED
DESCRIPTION	ACQUIRED	QTY	UNIT COST	OTHER BASIS	VALUE	6AIN/LOSS
MERCHANTS BANCSHARES INC.	1/3/2000	15,787	7.6156	120,227 00	424,354 56	304,127 56
	1/3/2000	4,813	7.6100	36,62693	129,373 44	92,746 51
		20,600		156,853.93	553,728.00	
	LON <i>G</i> POSITI	POSITION TOTAL		\$156,853.93	\$553,728.00	

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F		AND LO		ription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
55.		LTCG(L) THRU	MMC CAP TE			Р	VAR	VAR
TOTAL GAIN(LC	oss)				••••		55.	
JSA								

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 1-2012)

• If yo	u are fi	iling for an Automatic 3-Month Extension, o	complete	only Part I and check th	is box			▶ 🗵
• If yo	u are fi	iling for an <mark>Additional (Not Automatic) 3-Mo</mark>	onth Exter	sion, complete only P	art II (on page 2 o	f this	form).	•
Do no	t com	plete Part II unless you have already been g	ranted an	automatic 3-month exte	ension on a previo	usly 1	iled Fo	orm 8868.
a corp 8868 1 Return	oration to requ n for T	iling (e-file). You can electronically file Form required to file Form 990-T), or an additional est an extension of time to file any of the fransfers Associated With Certain Personal For more details on the electronic filing of the	al (not auto forms lister l Benefit (omatic) 3-month extens d in Part I or Part II wit Contracts, which must	ion of time. You on the exception of the sent to the I	an ele of For RS in	ectron m 887 n pape	iically file Form 70, Information er format (see
Part		Automatic 3-Month Extension of Time	. Only sul	bmit original (no copie	es needed).			Maria
Part I	only .							> 🖂
	-	porations (including 1120-C filers), partnersh e tax retums.	ips, REMIC	Cs, and trusts must use	Form 7004 to req	iuest	an ext	ension of time
				En	ter filer's identifylr			
Type	or	Name of exempt organization or other filer, see in	structions.		Employer identi		n numl	ber (EIN) or
print	- {	CHARLES A. & MARNA DAVIS FOUN			☑13-3437924			
File by t		Number, street, and room or suite no. If a P.O. bo	x, see instr	uctions.	Social security	numbe	ər (SSN	1)
	due date for filling your c/o BCRS ASSOCIATES, LLC; 77 WATER STREET - 9TH FLOOR							
return. S Instructi	See	City, town or post office, state, and ZIP code. For NEW YORK, NY 10005	a foreign a	ddress, see instructions.				
Enter t	the Ret	turn code for the return that this application is	s for (file a	separate application for	each return) .			. 04
Appli	cation		Return	Application				Return
Is Fo	r		Code	is For				Code
Form	990		01	Form 990-T (corporati	on)			07
Form	990-B	L	02	Form 1041-A				08
Form	990-E	Z	01	Form 4720				09
Form	990-P	F	04	Form 5227				10
Form	990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-T	(trust other than above)	06	Form 8870				12
Telep If the If this for the	phone e organ s is for whole	are in the care of ► BCRS ASSOCIATES No. ► 212-440-0811 ization does not have an office or place of but a Group Return, enter the organization's four group, check this box ►	FA usiness in t r digit Grot t is for par	up Exemption Number (GEN)		If	this is
		est an automatic 3-month (6 months for a co		on irod to file Form 000	T outopping of ti			
1	until for the	DECEMBER 17 , 20 12 , to file the exent organization's return for: calendar year 20 or					The e	extension is
2	If the	tax year beginning MAY 1 tax year entered in line 1 is for less than 12 mange in accounting period	, 20 nonths, che	11 , and ending eck reason: Initial ref	APRIL 30 turn ☐ Final ret	urn	, 2	0 12 .
3a	If this	application is for Form 990-BL, 990-PF, 990 fundable credits. See instructions.	-T, 4720, o	or 6069, enter the tental	tive tax, less any	3a	\$	1,739.00
b		application is for Form 990-PF, 990-T, 4 ated tax payments made. Include any prior ye				3b	\$	739.00
С		ce due. Subtract line 3b from line 3a. Include 6 (Electronic Federal Tax Payment System). S			quired, by using	3с		1,000.00
Caution		are going to make an electronic fund withdrawal			O and Form 8879-E			

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

	HeV 1-2012)					Page Z
• If you ar	e filing for an Additional (Not Automatic) 3	-Month Exter	sion, complete only P	art II and check thi	s box	► 🛛
Note. Onl	ly complete Part II if you have already been	granted an aut	omatic 3-month extens	ion on a previously	filed Form	8868.
• If you ar	e filing for an Automatic 3-Month Extension	on, complete o	only Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Mont	h Extension	of Time. Only file the	original (no copie	es needed).
	<u></u>			nter filer's identifying		
	Name of exempt organization or other filer, s	ee instructions		Employer identifi		
Type or print	CHARLES A. & MARNA DAVIS FO		1	☑13-3437924		(= ,
·	Number, street, and room or suite no. If a P.O.			Social security n		
File by the due date for	1			l —	ulliper (9914)	
filing your	10/0 BURD ADDUULATED, CLU, 77			<u> </u>		
return See	City, town or post office, state, and ZIP code	. For a foreign a	doress, see instructions.			
instructions.	NEW YORK, NY 10005					
Enter the	Return code for the return that this applicati	ion is for (file a	separate application fo	r each return)		. 04
Applicat	ion	Return	Application			Return
Is For		Code	Is For			Code
Form 990)	01	8,00 mg 23 mg 2	3. 27 8 05 11 6 15 28 15	. ta. 872773	X 445 7862;
Form 990		02	Form 1041-A		<u>:×</u>	08
Form 990		01	Form 4720			09
Form 990		04	Form 5227	·····		10
		05	Form 6069			11
	0-T (sec. 401(a) or 408(a) trust)	06	Form 8870			12
STOP! Do	not complete Part II if you were not already	y granted an aι	utomatic 3-month exten	sion on a previousi	ly filed Forn	n 8868.
4 re 5 For 6 If the 7 Sta	equest an additional 3-month extension of ti r calendar year , or other tax year beginned in accounting period change in accounting period ate in detail why you need the extension ACCURATE TAX RETURN IS NOT YET	me until	MARCH 15 NAY 1 , 20 11 , eck reason ☐ Initial	, 20 13 and ending A return Final	PRIL 30 return	, 20 12 .
	his application is for Form 990-BL, 990-PF,	990-T, 4720,	or 6069, enter the tenta	tive tax, less any		
nor	nrefundable credits. See instructions.				8a \$	1,739.00
b If t	this application is for Form 990-PF, 990-	T. 4720, or 6	069, enter any refunda	able credits and		
	imated tax payments made include any				5	
	ount paid previously with Form 8868.	. , ,	, ,	· 1	8b \$	1,739.00
	lance due. Subtract line 8b from line 8a. Includ	le vour navmen	with this form of required			-,, 05.00
	ectronic Federal Tax Payment System). See ins				8c \$	0,00
	Signature and Verif	ication must	t be completed for P	art II only.		
Under pena knowledge	alties of perjury, I declare that I have examined and belief, it is true, correct, and complete, and t	d this form, Incl hat I am authoriz	uding accompanying scho zed to prepare this form	edules and statemen	ts, and to th	ne best of my
Signature ▶	\bigcirc 1	Title ▶	CPA	Date	e ► 12/17/	2012
						8 (Rev 1-2012)