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DLN: 93493219000383

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 D Employer identification number B Check if applicable Davis Conservation Foundation Address change 22-2976811 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 30 Forest Falls Drive No 5 Terminated (207)846-9132 Amended return City or town, state or country, and ZIP + 4 Yarmouth, ME 04096 Application pending **G** Gross receipts \$ 2,606,401 Name and address of principal officer **H(a)** Is this a group return for Anne Vaillancourt ┌ Yes 🗸 No affiliates? 30 Forest Falls Drive No 5 Yarmouth, ME 04096 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status **H(c)** Group exemption number ▶ **Website: ►** www davisfoundations org **L** Year of formation 1989 **M** State of legal domicile ME Part I Summary Briefly describe the organization's mission or most significant activities Award Grants Activities & Governance 2 Check this box 🛏 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 0 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 6 2 Total number of volunteers (estimate if necessary) . . . 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Current Year** 0 Contributions and grants (Part VIII, line 1h) . . 250,930 0 0 Program service revenue (Part VIII, line 2g) . . 770.874 123.441 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 0 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 770,874 374,371 13 656,280 754,096 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 36,249 35,434 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 85,094 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 88,459 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 780,988 874,624 18 -500,253 19 Revenue less expenses Subtract line 18 from line 12 -10,114 t Assets or id Balances **Beginning of Current End of Year** 17,764,219 20 Total assets (Part X, line 16) . 16,340,335 28,371 21 Total liabilities (Part X, line 26) . . 26,626 22 Net assets or fund balances Subtract line 21 from line 20 16,313,709 17,735,848 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 2013-08-06 Signature of office Sign

Par	t IIII Stateme	ent of Program Service	e Accompli	ishments		rage Z
		chedule O contains a respo				
1	Briefly describe	the organization's mission				
		lization, protection and adv ife and mankind as they are			nt and the different natural forms	s of life that inhabit it,
2	the prior Form 99	cion undertake any significa 90 or 990-EZ?				┌ Yes ┌ No
_		e these new services on Sch		- la	4	
3	services?	cion cease conducting, or m e these changes on Schedul		changes in now it con	ducts, any program	┌ Yes ┌ No
4	Describe the org	anızatıon's program service	accomplishme organizations	are required to report	ee largest program services, as the amount of grants and alloca	
	(Code) (Expenses \$	772,120	including grants of \$	754,096) (Revenue \$)
	,	support of 501(c)(3) organization	· ·		, , , ,	,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d		services (Describe in Sched		.	\/Payanua.d	,
	(Expenses \$		ding grants of	→) (Revenue \$,
4e	Total program s	ervice expenses 🗠	772,120			

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)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		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</i> "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		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? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10		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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
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? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I (see instructions)	17		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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete Schedule J	23	Yes	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		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? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		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	38	Yes	

<u> </u>	Statements Regarding Other TRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 8		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
•	gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
)	If "Yes," enter the name of the foreign country •CJ			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
!	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
•	2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5c	L	L
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
•	file Form 8282?	7c		No
i	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
		1		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7-		N. a
	contract?	7e 7f		N c
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	H		No
•	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		No
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	1		
•	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
1	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
1	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
ı	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	1	

Form 990 (2012) Page 6 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. Section A. Governing Body and Management

		Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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?	2	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? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νo
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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		No
	organizations manning address 17 7007 provide the mannes and address to members 27 1 1 1 1 1 1 1 1 1	_		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	_	ıe Cod	e.)
Se		_	ıe Cod Yes	e.) No
		_		
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		No
10a b	Did the organization have local chapters, branches, or affiliates?	evenu 10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 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 Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Anne Vaillancourt 30 Forest Falls Drive No 5 Yarmouth, ME (207) 846-9132

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ♦ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot rect	not box h ar or/ti	chec c, unle n offic	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Thomas M Armstrong Jr	1 00	×						2,500	0	0
Trustee								·		
(2) David J Bucci Chairman	1 00	Х		x				0	0	0
(3) Rebekah A Buccı	1 00	 								
Trustee		X						0	0	0
(4) Andrew A Cadot	1 00	х						2,500	0	0
Trustee								2,300	0	
(5) Thomas S Deans	1 00	x						2,500	0	0
Trustee								·		
(6) Anne C J Hayden Trustee	1 00	х						2,500	0	0
(7) Horace A Hildreth Jr	1 00									
Trustee		X						2,500	0	0
(8) Alden H Sawyer Jr	1 00	Х						2,500	0	0
Trustee								_,		_
(9) Anne Vaillancourt Executive Director	8 00			x				17,877	0	2,557

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						table rsation the tion (W-	(E) Reportable compensation from related organizations (W	- -	(F) Estimated amount of othe compensation from the organization ar		
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	ed l	
												_			
												_			
												+			
												+			
1b c	Sub-Total	sto Part VIIS	 Jection /		•			*							
d	Total (add lines 1b and 1c) .			` ·	٠.	٠.		►		32,877		0		2,557	
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho receive	d more th	nan	·			
													Yes	No	
3	Did the organization list any fo on line 1a? <i>If</i> "Yes," complete S					, key •	emplo	yee, •	or highes	t compen	sated employee	3		No	
4	For any individual listed on line organization and related organ individual											_			
5	Did any person listed on line 1									anızatıon	or individual for	4		No_	
	services rendered to the organ		, compi	ete S	спеа	uie J	iorsu	сп ре	. :50N .		[5	Yes		
Se	ction B. Independent Co Complete this table for your five		ensate	d indi	eper	ideni	t contr	acto	rs that rec	eived mo	re than \$100.000	of			
	compensation from the organiz												ax year		
	N	lame and business	address							Des	scription of services		Compen		
												\blacksquare			
												丰			
	Fotal number of independent co \$100,000 of compensation fron			not	lımıt	ed t	o thos	e list	ed above)	who rece	ived more than				

Part V	117.71	Statement of Revenue Check if Schedule O contains a response to any que	stion in this Part VII	гт			Г
			(A) Total revenu		(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 2	1a	Federated campaigns 1a					
ant	b	Membership dues 1b					
- E	c	Fundraising events 1c					
ffs,	d	Related organizations 1d					
ni:3	e	Government grants (contributions) 1e					
ns,	-						
utic ler	f	All other contributions, gifts, grants, and 1f 250 similar amounts not included above	,930				
dia	g	Noncash contributions included in lines 250	,930		İ		
Contributions, Giffs, Grants and Other Similar Amounts	h		250	0,930			
O e		Business Co	P				
an.	2a	Business Co	ode				
еме	b						
or GE	c						
Y V	d						
<u>3</u>	e						
Program Serwce Revenue	f	All other program service revenue					
4	g	Total. Add lines 2a-2f	-				
	3	Investment income (including dividends, interest, and other similar amounts)	331	1,983	:		331,983
	4	Income from investment of tax-exempt bond proceeds	•				
	5	Royalties	•				
		(ı) Real (ıı) Person	al				
	6a	Gross rents					
	Ь	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
		(i) Securities (ii) Other					
	7a	Gross amount from sales of 2,023,488 assets other than inventory					
	b	Less cost or other basis and sales expenses 2,232,030					
	c	Gain or (loss) -208,542					
	d		-208	8,542			-208,542
an ne	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 a					
ţpe	b	Less direct expenses b					
•	С	Net income or (loss) from fundraising events	<u> </u>				
	9a	Gross income from gaming activities See Part IV, line 19 a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances .					
	b	Less cost of goods sold b					
		Net income or (loss) from sales of inventory	>				
		Miscellaneous Revenue Business Co	ode				
	11a						
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	•				
	12	Total revenue. See Instructions	374	4,371	0	0	123,441

Form 990 (2012) Part IX Statement of Functional Expenses

Sect	ion $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organızat	ons must comp	olete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			
	ot include amounts reported on lines 6b, 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 governments and organizations in the United States $$ See Part IV, line 21 $$	754,096	754,096		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	35,434	15,000	20,434	
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				
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	17,135		17,135	
b	Legal				
С	Accounting	9,568		9,568	
d	Lobbying		1		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	30,317		30,317	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	1,845		1,845	
14	Information technology	2,492		2,492	
15	Royalties				
16	Occupancy	7,792		7,792	
17	Travel	275	275		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	346		346	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	915		915	
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)				
а	Allocated expenses	5,704		5,704	
Ŀ	Foreign tax credit	2,749	2,749		
c	Small equipment & suppl	2,332		2,332	
d	Miscellaneous	1,586		1,586	
€	All other expenses	2,038		2,038	
25	Total functional expenses. Add lines 1 through 24e	874,624	772,120	102,504	0
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 ► □ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X	(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	923,088	2	352,024
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
Assets	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 contributin employers and sponsoring organizations of section $501(c)(9)$ voluntary employed beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	_	Nicker and Irana marriable mak		7	
द	7	Notes and loans receivable, net		-	
	8	Inventories for sale or use		8	
	9 10a	Prepaid expenses and deferred charges		9	
	Ь	Part VI of Schedule D Less accumulated depreciation		10c	
	11	Investments—publicly traded securities	13.043.346		15,011,306
	12	Investments—other securities See Part IV, line 11	2,343,195		2,382,208
	13	Investments—program-related See Part IV, line 11		13	_,,
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	30,706		18,681
	16	Total assets. Add lines 1 through 15 (must equal line 34)	16,340,335		17,764,219
	17	Accounts payable and accrued expenses	9,814		10,200
	18	Grants payable	5,511	18	.0,200
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
_	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	_
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		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	16,812	25	18,171
	26	Total liabilities. Add lines 17 through 25	26,626	26	28,371
ې		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete			
2		lines 27 through 29, and lines 33 and 34.			
<u>ਨ</u>	27	Unrestricted net assets	16,313,709		17,735,848
ņ	28	Temporarily restricted net assets		28	
Ξ	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
<u>.</u>	30	Capital stock or trust principal, or current funds		30	
Ř	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	16,313,709	33	17,735,848
_	34	Total liabilities and net assets/fund balances	16,340,335	34	17,764,219

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
	check if Schedule 8 contains a response to any question in this rare XI	· ·		<u> </u>	,
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3	374,371
2	Total expenses (must equal Part IX, column (A), line 25)	2			374,624
3	Revenue less expenses Subtract line 2 from line 1	3			500,253
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			313,709
5	Net unrealized gains (losses) on investments	5			22,392
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		17,7	35,848
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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As Filed Data -

DLN: 93493219000383

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Davis Conservation Foundation

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Public Charity Status and Public Support

Open to Public Inspection

		22-2976811										
	rt I		r Public Charity S						ınstruct	ions.		
The	organı	zation is not a p	private foundation bec	auseıtıs (F	or lines 1 th	rough 11, che	ck only one	box)				
1	Γ	A church, con	vention of churches, o	orassociatio	n of churches	s described in	section 170	(b)(1)(A)(i).				
2	Γ	A school desc	ribed in section 170(l	b)(1)(A)(ii).	(Attach Sch	edule E)						
3	Γ	A hospital or a	a cooperative hospita	l service orga	anızatıon des	cribed in sect	ion 170(b)(1)(A)(iii).				
4	Γ		earch organization op	erated in cor	njunction with	n a hospital de	escribed in s	ection 170(b)	(1)(A)(iii). Er	nter the	
5	Г		ne, city, and state on operated for the be	nefit of a coll	ege or unive	rsity owned oi	r operated by	, a governmer	ntal unit	descr	ibed in	_
)(1)(A)(iv). (Complet		_			_				
6	Г	A federal, stat	e, or local governmer	nt or governm	nental unit de	scribed in se	ction 170(b)	(1)(A)(v).				
7	\sqcap		on that normally recei			ts support fro	m a governn	nental unit or	from the	gene	ral public	
8	Г		ection 170(b)(1)(A)(trust described in sec			Complete Part	Π)					
9	, _		on that normally recei					ributions, men	nbership	fees,	and gros	s
		=	activities related to it					•	-		_	
		ıts support fro	m gross investment i	ncome and u	nrelated bus	iness taxable	ıncome (les	s section 511	tax) fro	m bus	inesses	
		acquired by th	ie organization after J	une 30, 197!	5 See sectio	n 509(a)(2).	(Complete P	art III)				
10	Γ	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	∀	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 that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated										
e f	∀	other than fou section 509 (a If the organiza check this box	ation received a writte	d other than o	one or more promeron	oublicly suppo	orted organiz	pe II, or Type	bed in se	ection	509(a)(:	1) or
g		Since August following perso	17, 2006, has the org ons?	ganızatıon ac	cepted any o	jift or contribi	ition from an	y of the				
			ho directly or indirect	tly controls,	either alone o	or together wi	th persons d	escribed in (ii	1)		Yes	No
		and (III) below	, the governing body o	of the suppor	ted organızat	ion?				11g(i)	No
		(ii) A family m	nember of a person de	scribed in (i)	above?					11g(ii)	No
		(iii) A 35% co	ontrolled entity of a pe	erson describ	oed in (i) or (i	ı) above?				11 g(i	ii)	No
h		Provide the fo	llowing information ab	out the supp	orted organiz	zatıon(s)						
(i) Name o supporteo organizatio		d i	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is to organization of (i) list your gover documer	on in ed in rning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S?			(vii) A mount of monetary support	
				Yes	No	Yes	No	Yes	No			
	itional a Table	e										
	_											
Tota	I											15,000

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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 IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

Supplemental Financial Statements

DLN: 93493219000383

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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

Open to Public Inspection

	ne of the organization s Conservation Foundation	Employer identification number					
Dav	5 Conscivation (ounidation		22-2976811				
Pa	organizations Maintaining Donor Ad organization answered "Yes" to Form 990	O, Part IV, line 6.	inds or Accounts. Complete if the				
		(a) Donor advised funds	(b) Funds and other accounts				
L	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
ŀ	Aggregate value at end of year						
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		oradvised Yes No				
5	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?						
Pal	Conservation Easements. Complete i	f the organization answered "Yes" to	Form 990, Part IV, line 7.				
L 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of an Preservation of a c	ertified historic structure				
	easement on the last day of the tax year	_					
		-	Held at the End of the Year				
а	Total number of conservation easements	-	2a				
b	Total acreage restricted by conservation easements	<u> </u>	2b				
С	Number of conservation easements on a certified hist	` ′	2c				
d	Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/17/06, and not on a	2d				
3	Number of conservation easements modified, transfer	rred, released, extinguished, or terminated	d by the organization during				
	the tax year 🛌						
ı	Number of states where property subject to conserva	tion easement is located ►					
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and Yes No				
5	Staff and volunteer hours devoted to monitoring, insper	ecting, and enforcing conservation easem	ents during the year				
	Amount of expenses incurred in monitoring, inspectin	a and enforcing conservation easements	during the year				
7	►\$	g, and emoreing conservation easements	aaring the year				
3	Does each conservation easement reported on line 20 and section $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sect	tion 170(h)(4)(B)(i)				
9	In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of the	ne footnote to the organization's financial					
	the organization's accounting for conservation easem						
<u>ar</u>	Organizations Maintaining Collection Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.					
La	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, o	or research in furtherance of public				
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	ets held for public exhibition, education, o					
	(i) Revenues included in Form 990, Part VIII, line 1		► \$				
	(ii) Assets included in Form 990, Part X		▶ \$				
2	If the organization received or held works of art, histo following amounts required to be reported under SFAS		· -				
а		Carrier and the control of the contr	▶				
	Revenues included in Form 990, Part VIII, line 1		► \$				

b Assets included in Form 990, Part X

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	<u>:, His</u>	stori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>ther</u>	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cl	heck	any of	the follo	wing that a	ire a s	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the or	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit o	or receive donations	s of ar	rt, his	torical	treasure	es or othei	rsımı	lar		
	assets to be sold to raise funds rather than t		•							│ Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions or	other ass	ets n	ot	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	table		_				
								_	Aı	mount	
с	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						F	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pro	vided in P	art X	III		Γ
Pa	tt V Endowment Funds. Complete										
4_	Degraping of week belongs	(a)Current year	(Ь)Prior	year	b (c)Two	o years back	(d)⊤	hree years back	(e) Four y	ears back
1a 	Beginning of year balance							<u> </u>			
b	Contributions							 		 	
С	Net investment earnings, gains, and losses							<u> </u>			
d	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
g g	End of year balance							 		 	
_	Provide the estimated percentage of the curr	cont year and halan	co (lur	20.10	colum	n (a)) ho	old ac	<u> </u>			
2	Board designated or guasi-endowment	ent year end baran	ce (iii	ic ry	, coluii	iii (a)) iie	iu as				
a	•										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and ad	ministered	l for t	he	Yes	No
	(i) unrelated organizations								3a	(i) res	140
	(ii) related organizations									(ii)	
b	If "Yes" to 3a(II), are the related organization								3	ВЬ	
4	Describe in Part XIII the intended uses of th	ie organization's en	dowm	nent f	unds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa				14-26	1	(-) A		Dan Incombra
	Description of property				a) Cost (asis (inve	estment)	(b) Cost or basis (oth		(c) Accumula depreciatioi		Book value
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colι	ımn (B), line	10(c).)					0

Part VII Investments—Other Securities. S	ee Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A) LLC and Limited Partnership Interests	2,382,208	F
(A) LLC and Limited Farthership Interests	2,382,208	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	P 2,382,208	
Part VIII Investments—Program Related.		
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(2) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	₽-	
Part IX Other Assets. See Form 990, Part X	, line 15.	
(a) Des	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	e 15.)	
Part X Other Liabilities. See Form 990, Par	T.	
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Due to Related Party	18,171	
2 40 10 10 10 10 10 10 10 10 10 10 10 10 10		
	 	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 18,171	
2. Fin 48 (ASC 740) Footnote In Part XIII, provide the		ion's financial statements that reports the
ALLINETO INSC. 1901 FUULIIULE III PAIL XIII. DIOVIGE THE	text of the loothole to the ordanizati	ion a imancial statements that reports the

ınformatıon

Identifier

	ei Ketuii	vitii keveilue pe	Hellts	Reconciliation of Revenue per Addited Financial State	Fell
2,266,446	1			Total revenue, gains, and other support per audited financial statements	1
				Amounts included on line 1 but not on Form 990, Part VIII, line 12	2
		1,922,392	2a	Net unrealized gains on investments	а
			2b	Donated services and use of facilities	b
			2c	Recoveries of prior year grants	c
			2d	Other (Describe in Part XIII)..................................	d
1,922,392	2e			Add lines 2a through 2d	e
344,054	3	[Subtract line 2e from line 1	3
				Amounts included on Form 990, Part VIII, line 12, but not on line 1	4
		30,317	la	Investment expenses not included on Form 990, Part VIII, line 7b .	а
			łb .	Other (Describe in Part XIII)..............	b
30,317	4c			Add lines 4a and 4b	c
374,371	5	[)	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	5
rn	per Retu	With Expenses	ments	Reconciliation of Expenses per Audited Financial Sta	Part
844,307	1			Total expenses and losses per audited financial statements	1
				Amounts included on line 1 but not on Form 990, Part IX, line 25	2
			2a	Donated services and use of facilities	а
			2b	Prior year adjustments	b
			2c	Otherlosses	C
			2d	Other (Describe in Part XIII).................	d
0	2e			Add lines 2a through 2d	e
844,307	3	[Subtract line 2e from line 1	3
				Amounts included on Form 990, Part IX, line 25, but not on line 1:	4
		30,317	4a	Investment expenses not included on Form 990, Part VIII, line 7b	а
			4b	Other (Describe in Part XIII)................	b
30,317	4c			Add lines 4a and 4b	c
874,624	5		8).	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	5

Return Reference

Explanation

DLN: 93493219000383

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization Davis Conservation Foundation **Employer identification number**

22 2076011

					22-29/0011	
Pa	rt I General Information "Yes" to Form 990, Pai			ne United States. Co	omplete if the organiza	ation answered
1	For grantmakers. Does the d	organization m	aintain records	s to substantiate the a	mount of the grants o	r
	assistance, the grantees' elig	_			_	
	the grants or assistance?					┌ Yes ┌ No
2	For grantmakers. Describe in the United States.	n Part V the on	ganızatıon's pı	rocedures for monitorii	ng the use of grant fur	nds outside
3	Activites per Region (The follow	ung Part I, line 3	table can be du	iplicated if additional spa	ice is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	Central America and the Caribbean	0	0	Investments		1,314,578
За	Sub-total	0	0			1,314,578
	Total from continuation sheets	0	0			C

c Totals (add lines 3a and 3b)

1,314,578

Part I	Grants Part IV,	and Other As line 15, for any	sistance to Organ y recipient who rece	izations or Entiti Ived more than \$5,	es Outside the Ur 000. Part II can be	nited States. Comp duplicated if addition	olete if the organizational space is needed	tion answered "Yes' l.	' to Form 990,
	Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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2 Er ta	iter total nu x-exempt b	mber of recipie y the IRS, or fo	ent organizations list or which the grantee	ed above that are in or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as 	
3 Er	nter total nu	mber of other	organizations or ent	cities					
								Schedule F	(Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
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					<u> </u>	<u> </u>	
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			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Y	'es	্য	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Y	'es	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Υ	'es	<u> -</u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part v	Supplementa	ai intormatio

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation

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Schedule I

(Form 990)

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

DLN: 93493219000383

Open to Public Department of the Treasury Attach to Form 990 Inspection Internal Revenue Service Name of the organization Employer identification number Davis Conservation Foundation 22-2976811 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (c) IRC Code (e) A mount of non-(g) Description of (h) Purpose of grant valuation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table

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

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

Schedule I (Form 990) 2012

54

Ī	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Complete this part to provide	inplete this part to provide the information required in rate 1, this 2, rate 111, column (b), and any other additional information					
Identifier	Return Reference	Explanation				
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The Organization requires a completion report after one year				

Schedule I (Form 990) 2012

Additional Data Return to Form Software ID: **Software Version: EIN:** 22-2976811 Name: Davis Conservation Foundation Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applicable cash valuation non-cash assistance or assistance grant or government (book, FMV, appraisal, assistance other) 26-1526329 30 Mile River Watershed 501(c)(3) 10,000 Funding for the AssociationPO Box 132 watershed protection Mount Vernon, ME 04352 orogram Ammonoosuc Conservation 02-6121209 501(c)(3) 20,000 Funding to purchase Trust107 Glessner Road 840 acres of forest Bethlehem, NH 03574 and in the town of Easton and create the Cooley-Jericho Community Fore: Androscoggin Land TrustPO 01-0452701 501(c)(3) 10,000 Funding to purchase and steward 1,226 Box 3145 Auburn, ME 04212 acres of land in Canton and Jay, Maine Audubon Vermont255 13-1624102 501(c)(3) 6,000 Support to provide Sherman Hollow Road NRCS-financial incentives for forest Huntington, VT 05462 andowners 10,000 Bear-Paw Regional 04-3340659 Funding to conserve 501(c)(3) GreenwaysPO Box 19 470 acres on Hinman Deerfield, NH 03037 Pond, Hooksett, MA Blue Hill Heritage TrustPO 22-2655830 To preserve 273 acres 501(c)(3) 15,000 of land that includes a Box 222 Blue Hill, ME 04614 major peatland ecosystem Boothbay Region Land Trust 01-0371869 501(c)(3) 10,000 To purchase Inc137 Townsend Avenue approximately 19 Boothbay Harbor, ME 04538 acres of the Cross River Farm that will connect Ovens Mouth west with the eastern peninsula Catamount Trail Association 22-2528441 501(c)(3) 6,600 Support to create a Mad River Valley trail 1 Mill Street Suite 350 Burlington, VT 05401 crew for summer 2012 Coastal Maine Botanical 01-0476545 501(c)(3) 10,000 Funding to purchase Gardens IncPO Box 234 computer software and Boothbay, ME 04537 internet hosting for the pılot program's fırst year Cobscook Bay Resource 01-0529806 501(c)(3) 9,000 Funding for the Center4 Favor Street personnel and legal Eastport, ME 04631 expenses needed to ncorporate a food marke<u>ting co-op</u> Conservation Law Foundation 04-6149986 Support for 501(c)(3) 15,000 - Maine Office47 Portland environmental Street Suite 4 law/regulations, Portland, ME 04101 anadromous fish, and solid waste issues Dan Hole Pond WatershedPO 02-6121751 7,500 Support to purchase 501(c)(3) Box 8 Thurley Forest, a 220 Center Ossippee, NH 03814 acre parcel of forestland Downeast Coastal 01-0430078 501(c)(3) 10,000 Funding for the ConservancyPO Box 760 acquisition and Machias, ME 04654 stewardship of two properties totaling ,000 acres Downeast Lakes Land Trust 01-0541131 Funding to acquire the 501(c)(3) 20,000 PO Box 75 22,000-acre West Grand Lake Stream, ME Grand Lake `ommunity | Five Rivers Conservation 02-0427594 501(c)(3) 10,000 Funding toward the Trust31 Warren Street purchase of four Concord, NH 03301 conservation easements 22-3055540 Francis Small Heritage Trust 501(c)(3) 8,000 Funding to hire an executive director PO Box 414 Limerick, ME 04048 Great Bay Resource 02-0222237 501(c)(3) 10,000 Support to expand and Protection Partnership54 update the conservation plan to Portsmouth Street Concord, NH 03301 include all towns in the watershed 38-1612715 Great Bay Trout UnlimitedPO 501(c)(3) 10,000 Support for phase 2 of Box 1121 the Thompson Brook Dover, NH 03821 fish passage and habitat enhancement project Gulf of Maine Lobster 01-0535494 501(c)(3) 10,000 Funding for 5 FoundationPO Box 523 community shoreline cleanup days, Kennebunk, ME 04043 outreach, and an education program and video Harris Center for 23-7085105 501(c)(3) 8,000 Funding to expand a Conservation Education83 citizen science project Kings Highway to locate and Hancock, NH 03449 document vernal pools on private and public land in Peterborough, NΗ Island Institute 386 Main 22-2786731 501(c)(3) 10,000 Funding to create Street PO Box 648 maps showing fisheries Rockland, ME 048410648 habitat and ecosystem nteractions based on local fishermen's knowledge to share with fisheries managers Kennebec Estuary Land Trust 01-0446468 501(c)(3) 15,000 Funding to purchase a PO Box 1128 146 acre parcel of Bath, ME 04530 forest land, the Krejsa Property, and manage t as a community forest Kennebunkport Conservation 23-7271573 501(c)(3) 10,000 Support to construct a TrustPO Box 7004 wetlands crossing and Cape Porpoise, ME 04014 trail on the Batson River property Kittery Land TrustPO Box 22-2858759 501(c)(3) 15,000 Funding to purchase an agrıcultural easement Kittery, ME 03904 on Rustlewood Farm in Kittery and Eliot Maine Laudholm TrustPO Box 1007 01-0380763 501(c)(3) 10,000 Support to purchase a Wells, ME 04090 35 KW photovoltaic system, prepare an alternative energy options study and develop an education program Maine Appalachian Trail Club 52-6047992 501(c)(3) 10,000 Funding for two caretakers and a IncPO Box 283 Augusta, ME 043320283 rıdgerunner on the Maine AT 01-0717546 Funding for the fee and Maine Appalachian Trail Land 501(c)(3) 25,000 TrustPO Box 761 acquisition of Crocker Portland, ME 04104 Mountain and Orbeton Stream Maine Congress of Lake 01-0322800 501(c)(3) Support to transfer the 10,000 AssociationsPO Box 426 LakeSmart Program Belgrade, ME 04917 from the Maine Department of Environmental Protection to MCOLA 501(c)(3) Maine Island Trail 01-0478709 10,000 Support for a full time Association 58 Fore St stewardshıp manager Building 30 3rd Fl Portland, ME 04101 Maine Lobstermen's 22-2786731 501(c)(3) 12,000 Funding for the Maine Community Alliance386 Main Lobstermen Street PO Box 648 Leadership Institute Rockland, ME 048410648 pilot to recruit and train the next generation of lobster conservation stewards Maine Milfoil Initiative 278 01-0212542 501(c)(3) 13,000 Support for the summer internship Whites Bridge Road Standish, ME 040845263 program Monadnock ConservancyPO 22-3030420 501(c)(3) 10,000 Support for staff and Box 337 nterns to provide Keene, NH 03431 conservation workshops Mount Vernon Community 03-0370114 501(c)(3) 7,000 Support to conduct a water quality survey on Partnership Corp1664 North Minnehonk Lake to Road Mount Vernon, ME 04352 dentify sources of polluted run off 53-0242652 501(c)(3) 10,000 Funding for training, Nature Conservancy Massachusetts Chapter99 supplies, and fishing Bedford Street 5th Floor quota leases to tag Boston, MA 02111 and release Atlantic halıbut Support for the four-Nature Conservancy Vermont 53-0242652 501(c)(3) 10,000 Chapter27 State Street state collaboration Montpelier, VT 05602 that works with towns, citizens and local organizations to reduce forest fragmentation Northern Forest Canoe Trail 03-0363813 501(c)(3) 10,000 Funding for three IncPO Box 565 seasonal interns and Waitsfield, VT 05673 to develop a program training manual Northwest Atlantic Marine 501(c)(3) 01-0516646 15,000 Support to work with AlliancePO Box 7066 healthcare institutions Gloucester, MA 01930 to map out a process to shift seafood purchasing to at least 50% local within 2 years Opportunity Center of North Support to construct a 76-0770074 501(c)(3) 5,640 Franklin CountyPO Box 454 permanent concrete dam that will annually Phillips, ME 04966 drawdown water to reduce phosphorus evels 22-2996402 501(c)(3) 15,000 Phippsburg Land TrustPO Support for the purchase and Phippsburg, ME 04562 stewardship of an 8 39 waterfront parcel on Spirit Pond in Phippsburg Presumpscot Regional Land 01-0426268 501(c)(3) 10,000 Funding to hire their TrustPO Box 33 fırst-ever executıve Gorham, ME 04038 dırector Royal River Conservation 01-0472430 501(c)(3) 7,500 Support to expand the TrustPO Box 90 Royal River Water Yarmouth, ME 04096 Trail, including land acquisition outreach, trail maps, and dam removal feasibility Scarborough Land 01-0352474 501(c)(3) 15,000 Funding for acquisition Conservation TrustPO Box and stewardship costs lfor Warren Woods, a 1237 Scarborough, ME 160-acre parcel in 040701237 Scarborough, Maine The Conservation Fund1655 52-1388917 501(c)(3) 15,000 Funding for 3-years to North Fort Myer Drive cover the costs to Arlington, VA 22209 conserve and steward 12,013 acres of land at the head of the St Croix River The York Land TrustPO Box 22-2793161 501(c)(3) 15,000 Funding to puchase a 119 acre parcel that York Harbor, ME 03911 connects to existing conservation land Town of OrlandPO Box 67 01-6000309 10,000 Support to conduct a Orland, ME 04472 feasibility study to determine the condition of the dam and fish ladder and to assess all options, from repair to removal Town of ThomastonPO Box 01-6000396 10,000 funding to purchase a 10 5 acre parcel that Thomaston, ME 04861 will connect town forest lands and expand hiking trails 23-7222333 501(c)(3) 25,000 Trust for Public Land - Maine To purchase Crocker Mountain and Obregon 30 Danforth Street Suite 106 Portland, ME 04101 Stream, conservation priorities in the High Peaks area Trust for Public Land -23-7222333 501(c)(3) 10,000 To purchase 370 acres of former quarry Vermont3 Shipman Place Montpelier, VT 056022832 and as an addition to the Barre Town Forest University of Maine101 01-6000769 501(c)(3) 9,076 Support to research College Avenue the ecophysiology of Orono, ME 04469 coastal pitch pine communities University of New Hampshire 02-0437506 501(c)(3) 15,000 Support to analyze the Foundation IncElliott Alumni historical DNA of Atlantic cod at Turner Center 9 Edgewood Road Farm in Penobscot Bay Durham, NH 03824 and use the results to ınform management strategies Upper Saco Valley Land 02-0521030 501(c)(3) 10,000 Funding to purchase a TrustPO Box 424 conservation North Conway, NH 03860 easement on 170 5 acres of productive farmland in Fryeburg, Maine Vermont Land Trust8 Bailey 03-0264836 501(c)(3) 10,000 Support to purchase and conserve the Avenue Montpelier, VT 05602 1,161-acre Bolton Valley Nordic and Backcountry property n Bolton, VT 501(c)(3) 03-0371746 White River Partnership Inc 15,000 Funding to extract PO Box 705 flood deposited gravel South Royalton, VT 05068 from streams and replace damaged culverts Funding to expand York County Soil and Water 22-2503739 501(c)(3) 6,000 Conservation DistrictsPO invasive aquatic Box 541 species educational

outreach and early detection training

Portland, ME 04112

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DLN: 93493219000383

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Davis Conservation Foundation **Employer identification number**

22-2976811

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	incentive reportable compensati	other deferred compensation			

Schedule J (Form 990) 2012

Part IIII Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
Supplemental Information		Anne Vaillancourt, executive director for the Organization, receives compensation from Davis Educational
	I .	Foundation, an unrelated organization, for services rendered to the filing organization. Anne's unrelated organization compensation was as follows. Salary \$17,877 Benefits \$2,557

Schedule J (Form 990) 2012

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization Davis Conservation Foundation

Employer identification number

					22-2976811			
Pa	It I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	((Method of c noncash contri	letermi		ts
		applicable		1g				
1	Art—Works of art			1.9				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	Х	1	250,930	Stock Market Valu	е		
LO	Securities—Closely held stock .							
L1	Securities—Partnership, LLC, or trust interests							
L2	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic							
.4	Q ualified conservation							
5	contribution—Other Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							-
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ()							
	Other ► ()							
	Other ►()							
	Other ► ()							
	Number of Forms 8283 received	by the orga	Inization during the tay yea	r for contributions				-
29	for which the organization comple		-		29			
	·		,	, L			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
ь	If "Yes," describe the arrangem					504		
31	Does the organization have a gif			review of any non-standard	contributions?	31		Νo
372	Does the organization hire or us							
JEU	contributions?	· · ·	· · · · · · · ·			32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t an amount	ın column (c) for a type of	property for which column (a) ıs checked,			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	,	The Organization sells contributions of securities through its investment broker All gifts of securities are sold as soon as administratively possible

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

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DLN: 93493219000383

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
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Name of the organization Davis Conservation Foundation	Employer identification number
Davis Conservation Foundation	
	22-2976811

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 2	Rebekah Buccı and David Buccı have a family relationship
	Form 990, Part VI, Section B, line 11	The Executive Director and the chairman of the board review Form 990 prior to the document's filing, and the executive director signs the return
	Form 990, Part VI, Section B, line 12c	Possible conflicts of interest are discussed by the trustees and staff at each regularly scheduled meeting. Where a potential conflict does exist, the trustees will disclose to the board and the disclosure will be noted in the minutes. If a real conflict exists, the trustee will abstain from voting and this action will be disclosed in the minutes.
	Form 990, Part VI, Section C, line 19	The Organization makes its governing documents, conflict of interest policy available to the public upon request. The Organization publishes its financial statements in its annual report which is available to the public on its website.
	Schedule A, Part I, Line 11	Per the declaration of the trust, a majority of the trustees shall be appointed by the representative supported organizations. The trustees determine the recipients of the Davis Conservation Foundation grants each year

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493219000383

OMB No 1545-0047

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Schedule R (Form 990) 2012

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization Davis Conservation Foundation 22-2976811

Part I Identification of Disregarded Entities (C	Complete if the organization	n answered "Yes" to	Form 990, Part	IV, line 33.)				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) d-of-year assets	C	(f) Direct controlling entity		
				- 000 F				
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du	ırıng the tax year.)		.		art IV,			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(d) (e) npt Code section Public charity (if section 50)		(f) Direct controlling entity	Sectio (13) c	(g) on 512(l controlle ntity?
(1) Falmouth Conservation Trust	Land Conservation	ME	501(c)(3)	Line 9			Yes	No No
PO Box 6172	Land Conservation	HIL.	301(0)(3)	Line 9				
Falmouth, ME 04105 01-0372429						N/A		
(2) Island Institute	Land Conservation	ME	501(c)(3)	Line 7				No
386 Main Street PO Box 648						N/A		
Rockland, ME 04841 22-2786731								
(3) Maine Audubon Society	Wildlife Conversation	ME	501(c)(3)	Line 9			+	No
20 Gilsland Farm Road						N/A		
Falmouth, ME 04105 01-0248780								
(4) Appalachian Mountain Club	Land Conservation	MA	501(c)(3)	Line 7			+	No
5 Joy Street						N/A		
Boston, MA 02108 04-6001677								
(5) Society for the Protection of New Hampshire Forests	Land Conservation	NH	501(c)(3)	Line 7				No
54 Portsmouth Street						N/A		
Concord, NH 03301 02-0222237							\bot	

Cat No 50135Y

(a) Name, address, and EIN of related organization		related organization domicile controlling income(related, total (state or entity unrelated, foreign country) tax under			(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		ownersh	
					sections 512- 514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	he organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of enti (C corp, S corp, or trust)	(f) Share of to income	total Share e of	(g) (h) Share of end- of-year assets (h) Percentage ownership		ercentage	(i) Section 512 (b)(13) controlled entity?		
		,,			,						Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Y	Yes	No
f 1 During the tax year, did the organization engage in any of the following transactions with one or m	nore related organizations l	isted in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)					Yes	
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
• Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p		No
q Reimbursement paid by related organization(s) for expenses				1q		No
 O ther transfer of cash or property to related organization(s) 				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must con	<u> </u>					
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount invo	olved	

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: Software Version:

EIN: 22-2976811

Name: Davis Conservation Foundation

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Additional Data

Software ID: Software Version:

EIN: 22-2976811

Name: Davis Conservation Foundation

Form 990, Sch A, Part I, Line 11h - Provide the following information about the supported organization(s).

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section)	Is organız (ı) lıs your go	(iv) Is the organization in (i) listed in your governing document?		Organization in I		the ation in nized in JS?	(vii) A mount of support?
			Yes	No	Yes	No	Yes No		
(A) Appalachian Mtn Club	046001677	7	Yes		Yes		Yes		0
(B) Falmouth Conserv Trust	010372429	9	Yes		Yes		Yes		0
(C) Island Institute	222786731	7	Yes		Yes		Yes		10000
(D) Maine Audubon Society	010248780	9	Yes		Yes		Yes		0
(E) Soc for Prot of NH Forests	020222237	7	Yes		Yes		Yes		5000