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SCANNED JUN 1 9 2013

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

OMB No 1545-0047

► The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For the	2012 calendar year, or tax year beginning	and ending	3		<u></u>
В	Check if applicable	C Name of organization		- [D Employer identific	eation number
Г	Addres	DAVENPORT FOUNDATION, INC.				
Ē	Name change	D. D			43-19	936402
	Initial return	Number and street (or P 0, box if mail is not delivered to street address	Room/s	suite	E Telephone number	
	Termin				573-8	382 <i>-</i> 7474
	Amend return	City, town, or post office, state, and ZIP code		L	G Gross receipts \$	258,961.
	Application	COHOMBIA, NO OSZII			H(a) Is this a group re	
	pendin	F Name and address of principal officer: JEFF VOGEL		1	for affiliates?	Yes X No
			5211		H(b) Are all affiliates incl	
			4947(a)(1) or	527		list. (see instructions)
		e: N/A organization X Corporation Trust Association Other			H(c) Group exemption	State of legal domicile MO
		organization X Corporation Trust Association Other Summary	15	tear or	i ionnation 2001 ivi	State of legal dufficile 110
		Briefly describe the organization's mission or most significant activities:	FUNDRATS	STNC	& SUPPORT	
Activities & Governance	'	ORGANIZATION FORMED SOLELY FOR THE	BENEFIT C	OF T	THE UNIVERS	ITY OF
E L		Check this box If the organization discontinued its operations				
ove		Number of voting members of the governing body (Part VI, line 1a)			3	<u>5</u>
Ğ		Number of independent voting members of the governing body (Part VI	l, line 1b)		4	5
es &	1	Total number of individuals employed in calendar year 2012 (Part V, line			5	0
<u>V</u>	6	Total number of volunteers (estimate if necessary)			6	5
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34				0.
					Prior Year	Current Year 177,704.
ě	8	Contributions and grants (Part VIII, line 1h)	RECEI\	ÆF	79,769.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		-	7820,019.	51,034.
æ	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	MAY 21	2013	Q = 0.	0.
	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	1 ' "	2013	99,788.	228,738.
	- 1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	OGDEN	117	10.4 4.0.0	31,181.
		Benefits paid to or for members (Part IX, column (A), line 4)	OUNCIA	1	0.	0.
ç	1	Salaries, other compensation, employee benefits (Part IX, column (A), li	ınes 5·10)		4,298.	4,298.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	•		0.	0.
X	ь	Fotal fundraising expenses (Part IX, column (D), line 25)	25,459.	<u> </u>		
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<u> </u>	6,998.	36,499.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25	5)		42,396.	71,978.
_	19	Revenue less expenses. Subtract line 18 from line 12		+_	57,392.	156,760.
500	2			Beg	inning of Current Year 954,093.	End of Year 1,165,278.
\sse	20	Total assets (Part X, line 16)			0.	57,600.
Net Assets or	21 22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 ≴ rom line 20		\vdash	954,093.	1,107,678.
	art II	Signature Block		. L	20170200	2/20:/0:00
		Ities of perjury, I declare that I have examined this return, including accompanying	ng schedules and s	tateme	ents, and to the best of m	y knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all inform				1/2
_				_	<u> </u>	<u> </u>
Si	gn	Signature of Officer			Date ?	•
He	ere	JEFF VOGEL, SECRETARY/TREASURER				
_		Type or print name and title	 -	l n	ate Check	PTIN
D.	1.4	Print/Type preparer's name Preparer's signature NERDA K MATHES A 14	Yn		, it '' -	
Pa		***************************************	mathes_		/30/20 to self-employ Firm's EIN ▶	43-1126847
	eparer e Only	Firm's name WILLIAMS - KEEPERS LLC Firm's address 3220 W EDGEWOOD SUITE E			THILLS EIN	13 1120017
Uå	y	JEFFERSON CITY, MO 65109			Phone no	
M	av the II	RS discuss this return with the preparer shown above? (see instruction	ns) .			X Yes No
1411		LUA For Panamuerk Baduction Act Nation and the congrete				Form 990 (2012)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2012)

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)?		v	
^	If "Yes," complete Schedule A	_1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		Х
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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	9		X
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	10	, , , , , ,	X
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	<u>X</u>	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445	X	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			١,,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		,	v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		х
4-7	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		X
18	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 ''	 	 ^
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	- ``	 	† <u></u> -
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			200	

Part IV Checklist of Required Schedules (continued) DAVENPORT FOUNDATION, INC.

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), the '17 P''es,' complete Schedule (Parts and II) and the United States on Part IX, column (A), the '27 II "'es,' complete Schedule (Parts and III) and the United States on Part IX, column (A), the '27 II "'es,' complete Schedule (Parts and III) and the Organization of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "'es,' complete Schedule IS, Part II and III and			_	Yes	No
United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II 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 27 if "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, director, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II in the organization in west any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of uning the year? If "Yes," complete Schedule I., Part I Was a loan to or by a current or former offices, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organizations in a trust 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 I., Part II Was a loan to or by a current or former office, director, trustee, key employee, highest compensated employee, or disqualified person of any of these	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		163	110
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column (A), line 27 II "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VIII, 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 I, Part II III and 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 III III in the 25 to both the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? Did the organization axer 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 engage 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 tay are any to propriet schedule in the propriet schedule in the propriet schedule in the organization and that the transaction with a disqualified person outstanding as of the end of the organization's tay are art. If "es," complete Schedule I, Part IV III was the organization appart to a business transa	22				
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disqualified person during the year? If "Yes," complete Schedule L, Part I 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-E27 If "Yes," complete Schedule L, Part I 256	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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-E27 If "Yes," complete Schedule L, Part II 25b X 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 27D IDI 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 27D IDI the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 4 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II 28c X 29c X	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25 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 X 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 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or fever employee (or a family member thereof) was an officer, director, trustee, or chiect or indirect owner? If "Yes," complete Schedule L, Part IV 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization will pludate, terminate, or dissolve and cease operations? If "Yes," complete Schedule R, Part I 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301.77012 and 301.77013 If "Yes," complete Schedule R, Part I, line I 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulation? If "Yes," complete Schedule R, P		disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X_
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35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 Y 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	-		34		X
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 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 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	35a				
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?					
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 X 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 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_		35b		
If "Yes," complete Schedule R, Part V, line 2 36	36				
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			36		X
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37				
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			37		X
V	38				
			38	<u> </u>	

	ago (2012) BAVENTONI FOOTBALLON, INC.		43-1330	402	P:	age ວ
Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portat	ole gaming			
	(gambling) winnings to prize winners?			1c		
2a	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	2a	0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	กร?		2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	it)?	4a		X
b	if "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accoun	its.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ie orga	nızation solıcıt			
	any contributions that were not tax deductible as charitable contributions?			6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	gifts			
_	were not tax deductible?			6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			_		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was the flag flags.	as requ	Jirea	7.		x
	to file Form 8282?	7d	!	7c		A
d	If "Yes," indicate the number of Forms 8282 filed during the year		•••	7e	1	1
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution.		· r	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di			· · · · · · · · · · · · · · · · · · ·		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		• •	8	ĺ	1
9	Sponsoring organizations maintaining donor advised funds.	,				
а	Did the organization make any taxable distributions under section 4966?			9a		1
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	,,,,	1 1	•	12a	ļ	ļ
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	ļ	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	·	ایما				
	organization is licensed to issue qualified health plans	13b		1		
C	Enter the amount of reserves on hand	[13c]		44-	 	X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	·~ ^	•	14a	 	 ^
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	2 U		14b		

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion 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 5			
	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	1		
	officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b		X
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	ļ	<u>X</u>
b	Other officers or key employees of the organization	15b		Χ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	taxable entity during the year?	16a	ļ	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	nd fina	ncıal	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:	-	
	DOUG TARWATER - 573-882-7474			
	UNIVERSITY OF MISSOURI, COLUMBIA, MO 65211			

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DAVENPORT FOUNDATION, INC.

43-1936402

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

Check if Schedule O contains a response to any question in this Part VII

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, and 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.

(A)	(B)	1		((>)			(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one			than		Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson is both an lirector/trustee)		h an teel	compensation	compensation	amount of
	Week (list any		1			T		from the	from related organizations	other
	hours for	Individual trustee or director				_		organization	(W-2/1099-MISC)	compensation from the
	related	8	鬟			123		(W·2/1099-MISC)	(11/2/1033/11/00)	organization
	organizations	Tass	ā		異	5		(** 25 1000 111100)		and related
	below	120	Institutional trustoe	,	ologu	osto See	_E			organizations
	line)	ᅙ	histi	Officer	Кеу епріоуее	Highest compensated employee	Former			• •
(1) WILLIAM G. LITTLE	1.00									
DIRECTOR		X						0.	0.	0.
(2) JEFF VOGEL	2.00									
SECRETARY/TREASURER		X		X				Ŏ.	0.	0,
(3) DALE WRIGHT	1.00									
DIRECTOR		X						0.	0.	0.
(4) SAM HAMACHER	1.00									
VICE PRESIDENT		X		X				0.	0.	0.
(5) STUART BASCOMBE	1.00									
PRESIDENT		X		X				0.	0.	0.
						Г	Γ			
					1		1			
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	(A) Name and title	(B) Average hours per week	(do box offic	not c	(C Posi heck ss pe	tion more		one h an	(D) Reportable compensation from	(E) Reportable compensatior from related		Est am	(F) mated ount o other	f
		(list any hours for related organizations below line)	individual trustae or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fro orga and	ensati m the nizatio relate nizatio	on d
							-							
					_		<u> </u>						_	
			_				ļ	_						
					-									
1 b	Sub-total Sub-total	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	>		0.		0.			0.
С	Total from continuation sheets to Part V	II, Section A					>		0.		0.			0.
2	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to th	nose	e liste	ed a	bov	e) w	ho r	 	0,000 of reportabl				
	compensation from the organization												Yes	No.
3	Did the organization list any former officer			e, ke	еу е	mple	oyee	, or	highest compensated e	employee on		3		X
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s	um of reportab	le c							the organization		1		
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									ridual for services		4		X
	rendered to the organization? If "Yes," contion B. Independent Contractors											5		X
1	Complete this table for your five highest of										pens	ation f	rom	
	the organization. Report compensation for (A)	the calendar	/ear	end	ing '	with	or v	<u>/ithii</u>	n the organization's tax (B)	year.		(C	;)	
	Name and busines	s address	N	ON	<u>E</u>				Description of	services		Compe	nsation	<u> </u>
										_ - +				
										_				
			-											
														-
	Total number of independent contractors	Go alluda a tara		lame A		-		104-	d above) who received	more then				

1.6			Check if Schedule O con	tains a response	to any question	in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
Sa		b	Membership dues	1b					
Is, (c	Fundraising events	1c					
ig ja		d	Related organizations	1d					
S.E		е	Government grants (contribut	tions) 1e					
er S		f	All other contributions, gifts, gran	its, and					
혈			similar amounts not included abo	ve 1f	177,704. 30,223.				
ğğ		g	Noncash contributions included in lines	s 1a-1f \$	30,223.				
<u>8 0</u>		h	Total. Add lines 1a-1f		<u> </u>	177,704.			
					Business Code				
<u>8</u>	2	а							
Program Service Revenue		b							
n S		C							
e S		d							
5		е				"			
<u>-</u>	l	f	All other program service reve	enue					
	_	g	Total. Add lines 2a-2f		<u> </u>				
	3		Investment income (including	dividends, inter	est, and	10 500			10 500
			other similar amounts)			18,583.			18,583.
	1	4 Income from investment of tax-exempt bond proceeds							
	5		Royalties						
-			<u>-</u>	(i) Real	(II) Personal				
-	6	а	Gross rents .						
	ļ		Less: rental expenses						
			Rental income or (loss)		L				
	_		Net rental income or (loss)						
	7	а	Gross amount from sales of	(i) Securities	(II) Other				
			assets other than inventory	62,674.					
		Þ	Less: cost or other basis	20 222					
			and sales expenses	30,223.					
			Gain or (loss)	32,431.	/	22 451	22 451		
ē	8		Net gain or (loss) Gross income from fundraising	ig events (not	•	32,451.	32,451.		
Other Revent			including \$	of					
æ			contributions reported on line	1c). See					
ē			Part IV, line 18	. а					
₹			Less: direct expenses	b					
-	1		Net income or (loss) from fun-						ļ
	9	а	Gross income from gaming a	ctivities. See					
			Part IV, line 19	а					
			Less: direct expenses	b					,
			Net income or (loss) from gar	-	>				
	10	а	Gross sales of inventory, less	returns					
			and allowances	а					
			Less: cost of goods sold	b	L				
	_	C	Net income or (loss) from sale		<u> </u>				
	<u> </u>		Miscellaneous Revenu	Je	Business Code				
	11						. — -		
	1	b							
		C							
	1	d	All other revenue		L		<u> </u>		
			Total. Add lines 11a-11d			220 220	22 451		10 503
	12		Total revenue. See instructions		▶	228,738.	32,451.	0.	18,583.

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp			трівів соштіт (лу.	
	Check if Schedule O contains a respons	se to any question in this	B Part IX (B)	(Ĉ)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	22,081.	22,081.		
2	Grants and other assistance to individuals in		2 122		
	the United States. See Part IV, line 22	9,100.	9,100.		
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				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	4,000.		4,000.	
7	Other salaries and wages	4,000.		4,000.	
8	Pension plan accruals and contributions (include				
^	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	298.		298.	
10	Payroll taxes	250.		2300	
11	Fees for services (non-employees):				
a	Management				····
b	Legal	2,100.		2,100.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17		· · · · · · · · · · · · · · · · · · ·		
f	Investment management fees				
Я	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion				·
13	Office expenses	409.		409.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	25,459.			25,459.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<u> </u>
20	Interest				
21	Payments to affiliates .	6 005			
22	Depreciation, depletion, and amortization	6,095.			
23	Insurance				
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	HOCH EVERNOES	1,123.	1,123.		
b	INSURANCE	917.		917.	
С	BANK SERVICE CHARGES	296.		296.	
d	FOREIGN TAXES	85.		85.	
е	All other expenses	15.		15.	
25	Total functional expenses. Add lines 1 through 24e	71,978.	32,304.	8,120.	25,459
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)			<u> </u>	000

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 296,526. 1 171,930. Cash · non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 64,000. basis. Complete Part VI of Schedule D 10a 6,095. 0. 57,905. 10b 10c b Less: accumulated depreciation 11 Investments - publicly traded securities 11 657,567. 935,443. 12 12 Investments - other securities. See Part IV, fine 11 13 Investments · program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 1,165,278. 954,093. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 57,600. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 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 25 Schedule D 57,600. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 296,526. 407,081. Unrestricted net assets 27 657,567. 700,597. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 954,093. 1,107,678. 33 Total net assets or fund balances 33 1,165,278. 954,093. 34 34 Total liabilities and net assets/fund balances

orm	1990 (2012) DAVENPORT FOUNDATION, INC.	43-19	30402	Pag	ge 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,9	
3	Revenue less expenses. Subtract line 2 from line 1	3		6, 7	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,0	
5	Net unrealized gains (losses) on investments	5	<	3,1	75.
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	1,10	7,6	<u>78.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ļ., .,	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	ļ. ,	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	ļ	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a	<u> </u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		

Form **990** (2012)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

DAVENPORT FOUNDATION, INC.

Employer identification number 43-1936402

Pai	t i	Reason f		ty Status (All organiza			this part.) See ınstr	uctions.				
he c	organ	zation is not a	private foundation t	pecause it is: (For lines 1	through 1	1, check c	only one bo	ox.)					
1		A church, con	vention of churches	, or association of churc	hes descr	ibed in se e	ction 170(b)(1)(A)(i).					
2				0(b)(1)(A)(ii). (Attach Sch									
3				al service organization d									
4		A medical res	earch organization c	perated in conjunction v	with a hosp	ortal descri	ibed in se d	ction 170(b)(1)(A)(iii)). Enter t	he hospital's	name,	
		city, and state											
5	X	An organization	on operated for the t	penefit of a college or un	iversity ow	ned or op	erated by	a governn	nental unit	describ	ed in		
		-	b)(1)(A)(iv). (Comple										
6	\square			ent or governmental unit									
7	Ш			eives a substantial part o	of its suppo	ort from a	governme	ntal unit oi	r from the	general	public describ	ed in	
		•	o)(1)(A)(vi). (Complet	•									
8	\square			ection 170(b)(1)(A)(vi). (
9	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from												
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment												
	Income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)												
	$\overline{}$						·	- E00/a\/A					
10	片			erated exclusively to tes						out the	nurnoses of	one or	
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												
				organization and comple). Occ 300	1000000	.,(.). O.	ook the box ti	141	
		a Type I			pe III - Fur			d	Туре	e III - No	n-functionally	integrated	
e	\Box			t the organization is not	•						-	-	
Ŭ				han one or more publicly									
f				ten determination from t						,			
·			ganization, check th			•							
g				rganization accepted an	y gift or co	ontribution	from any	of the folk	wing pers	ions?	_		
Ī				irectly controls, either al							,	Yes No	
				upported organization?							11g(i)		
		(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
		(iii) A 35% c	controlled entity of a	person described in (i) of	or (II) above	∍?					11g(iii)		
h		Provide the fo	ollowing information	about the supported org	ganızatıon((s).							
				·	T								
(i)	Name	of supported	(il) EIN	(iii) Type of organization	(iv) Is the o				(vi) ls organizatio	the on in col	(vii) Amount o	f monetary	
	org	anization		(described on lines 1-9 above or IRC section	in col (i) lis governing ((i) organiz	ed in the	supp	ort	
		·		(see instructions))	Yes	No	Yes	No	Yes	No			
					163	140	163	110	103				
						:			1				
						-							
										-	_		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	203,750.	228,149.	250,011.	79,769.	177,704.	939,383.
2	Tax revenues levied for the organ-						
	ization'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	203,750.	228,149.	250,011.	79,769.	177,704.	939,383.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						411,968.
6	Public support. Subtract line 5 from line 4		111111111111111111111111111111111111111				411,968. 527,415.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	203,750.	228,149.	250,011.	79,769.	177,704.	939,383.
8	Gross income from interest,	·		-			
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	32,909.	20,177.	20,118.	20,596.	18,583.	112,383.
9	Net income from unrelated business				•		-
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10					, , , , , , , , , , , , , , , , , , , ,	1051766.
12		etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for		-	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					▶□
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2012 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	50.15 %
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	<u>49.95 %</u>
16a	33 1/3% support test - 2012. If the c	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright X$
b	33 1/3% support test - 2011. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶ □
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	3, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶ □
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	heck this box and	stop here. Explair	n in Part IV how the	•
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anızation	▶□
18					-		<u>s</u> ▶□

Schedule A (Form 990 or 990-EZ) 2012 Part III | 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

Sec	ction A. Public Support	now, please comp	nete Fart II.)			- -	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	197 		(5) 20.10	100	10/	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
•	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ŧ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organi	zation,
	check this box and stop here			<u> </u>			▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (I			column (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	t III, line 15			16	<u>%</u>
	ction D. Computation of Inves						
17	Investment income percentage for 20	112 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2012. If the						17 is not
	more than 33 1/3%, check this box a						
	b 33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see i	nstructions	P

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

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.

2012 Open to Public Inspection

Name of the organization

DAVENPORT FOUNDATION, INC.

Employer identification number 43-1936402

Par	Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	I funds
-	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	_	sed only
_	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or		rically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conserva-		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes th	e organization's accounting for
Day	conservation easements. rt III Organizations Maintaining Collections of	of Art Historical Treasures or Oth	ner Similar Assets
Fal	Complete if the organization answered 'Yes' to Forn		iei olilliai Assots.
	If the organization elected, as permitted under SFAS 116 (A	·	ent and balance sheet works of art
ıa	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		, , , , , , , , , , , , , , , , , , , ,
ь	If the organization elected, as permitted under SFAS 116 (A		and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition,		
	relating to these items:	bootation, or resourch in termination of pass.	
	(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, historical tr	reasures, or other similar assets for financial	
~	the following amounts required to be reported under SFAS		g, p
а		The Area and Louisian to those trainer	> \$
	Assets included in Form 990, Part X		▶ \$
J	Andrea in total and		•

[C			-1936402 Page 2
Part III Organizations Maintaining Collections of Art, Historical Treasures,	or Other	Similar A	Assets(continued)
3 Using the organization's acquisition, accession, and other records, check any of the following the	- nat are a sigi	nificant use	of its collection items
(check all that apply):			
a Public exhibition d Loan or exchange prog	grams		
b Scholarly research e Other			
c Preservation for future generations			
4 Provide a description of the organization's collections and explain how they further the organization	ition's exem	pt purpose i	ın Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or ot	ther similar a	ssets	
to be sold to raise funds rather than to be maintained as part of the organization's collection?			Yes No
Part IV Escrow and Custodial Arrangements. Complete if the organization answered reported an amount on Form 990, Part X, line 21.	d "Yes" to Fo	orm 990, Pa 	art IV, line 9, or
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other a	assets not in	cluded	
on Form 990, Part X?			└─ Yes
b If "Yes," explain the arrangement in Part XIII and complete the following table:			
			Amount
c Beginning balance		1c	
d Additions during the year		1d	
e Distributions during the year		1e	
f Ending balance		1f	
2a Did the organization include an amount on Form 990, Part X, line 21?			└─ Yes └─ No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part V			
(a) Current year (b) Prior year (c) Two year	ears back (d) Three years	s back (e) Four years back
1a Beginning of year balance			
b Contributions			
c Net investment earnings, gains, and losses			
d Grants or scholarships			
e Other expenditures for facilities			
and programs			
f Administrative expenses			
g End of year balance			
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:			
a Board designated or quasi-endowment %			
b Permanent endowment ►%			
c Temporarily restricted endowment ▶%			
The percentages in lines 2a, 2b, and 2c should equal 100%.			
3a Are there endowment funds not in the possession of the organization that are held and adminis	stered for the	e organizatio	
by:			Yes No
(i) unrelated organizations			3a(i)
(ii) related organizations			3a(ii) 3b
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?			30
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.			
Description of property (a) Cost or other (b) Cost or other	(c) Acc	cumulated	(d) Book value
basis (investment) basis (other)	1 .	reciation	(a) Dook value
1a Land			
b Buildings			
c Leasehold Improvements	+		
d Equipment	 		
e Other 64,000		6,095	57,905.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))		>	57,905.

Schedule D (Form 990) 2012

43-1936402 Page 3

≀ Sche	dule D (Form 990) 2012 DAVENPORT FOUNDATION, INC	•	43-193640	2 Page 4
	t XI Reconciliation of Revenue per Audited Financial Staten			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ments With Expenses	s per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	i i		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 -	
	rt XIII Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pai e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			line 4; Part
				-
_				

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

► Attach to Form 990.

OMB No 1545-0047 Open to Public

'. ?

2 Employer identification number Schedule I (Form 990) (2012) 43-1936402 SCHOLARSHIPS & STUDENT (h) Purpose of grant COLLEGE OF BUSINESS or assistance X Yes 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 CASE STUDY 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 22,081 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable INC Enter total number of other organizations listed in the line 1 table DAVENPORT FOUNDATION, Part 1 General Information on Grants and Assistance (P) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government UNIVERSITY OF MISSOURI Name of the organization COLUMBIA, MO 65211 408 CORNELL HALL Partil

232101 12-18-12

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

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43-1936402

Schedule I (Form 990) (2012) DAVENPORT FOUNDATION, INC.

Part III 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) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	•		c		
RECENT ALUMNI AWARD	N 4	000 5			
PRILAGER CONSILITING ASSOCATION MBA COMPETITION	118	3 100.	o		
Part IV Supplemental Information. Complete this part to provide the I	de the information	required in Part I,	line 2, Part III, colum	nformation required in Part I, line 2, Part III, column (b), and any other additional information.	ormation.
SCHEDULE I, PART I, LINE 2: BASED ON		TION CRITE	SELECTION CRITERIA THE AWARDS	ARDS ARE	
DETERMINED, DISTRIBUTED, RECORDED, AND	AND ACCO	ACCOUNTED FOR IN	THE	FINANCIAL	
SYSTEM.					

SCHEDULE M (Form 990)

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

2012

Open to Public Inspection

Department of the Treasury internal Revenue Service

Name of the organization

DAVENPORT FOUNDATION, INC

Employer identification number

		UNDATI	ON, INC.		43-1	7304	U Z	
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or tems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	-	-	;
1	Art · Works of art							
2	Art · Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods					_		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property					,		
9	Securities - Publicly traded	Х	1	30,223.	MARKET VALU	E		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution ·							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate · Commercial			-			-	
17	Real estate · Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other ()						-	
27	Other (
28	Other ()							
29	Number of Forms 8283 received by the organi	zation durin	o the tax vear for o	contributions				
	for which the organization completed Form 82		-	.				
		, ,,		g		<u> </u>	es	No
30a	During the year, did the organization receive b	v contributi	on any property re	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial						1	
	the entire holding period?		.,			30a	1	Х
ь	If "Yes," describe the arrangement in Part II.		•					
31	Does the organization have a gift acceptance	policy that i	requires the review	of any non-standard contrib	utions?	31	1	Х
32a								
J-8	contributions?	or related 0	rganizations to so	ion, process, or sen noncasi		32a		Х
h	If "Yes," describe in Part II.					 -		
33	If the organization did not report an amount in	column (c)	for a type of prope	erty for which column (a) is of	necked.			
-	describe in Part II.	COMMITTED	io. a type of prope	, ioi minori oolulliii (a) io ol	,			
	GOOGLOO III I GILLII.						1	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

DAVENPORT FOUNDATION, INC.

Employer identification number 43-1936402

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MISSOURI-COLUMIBA COLLEGE OF BUSINESS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
HOSTING OF VARIOUS COLLEGE OF BUSINESS AND ALUMNI EVENTS INCLUDING THE
ANNUAL STRATEGIC DEVELOPMENT BOARD EVENT FOR THE UNIVERSITY OF MISSOURI
COLLEGE OF BUSINESS AND OTHER RECOGNITION EVENTS.
EXPENSES \$ 4,423. INCLUDING GRANTS OF \$ 3,300. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES IN THIS
ORGANIZATION, THIS QUESTION DOES NOT APPLY TO THE DAVENPORT FOUNDATION.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PROVIDED IN
ELECTRONIC FORMAT FOR ALL DIRECTORS TO REVIEW BEFORE FILING.
FORM 990, PART VI, SECTION C, LINE 19: LIMITED INFORMATION IS AVAILABLE ON THE MISSOURI SECRETARY OF STATE WEBSITE, ALL OTHER INFORMATION CAN BE
OBTAINED BY REQUESTING FROM THE ORGANIZATION.