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# 990°PF

#### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

2014

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Fo	r cälen	dar year 2014 or tax year beginning	, 20	14, and e	ending		<del> </del>	, 20
1	lame of	foundation				A Employer	identification number	
_F	OBER	T & MARY DAVIS FOUNDATION		,		34-7207	640	
1	lumber :	and street (or PO box number if mail is not delivered to street address)		Room/s	suite	B Telephone	number (see instructions)	)
_6	234	LOCUST HILL ROAD		<u> </u>	-	(937) 25	4-6197	
C	ity or to	wn, state or province, country, and ZIP or foreign postal code			Į,	C If exempti	on application is pending,	check here
	ayto	n, OH 45459						
G	Check	all that apply Initial return Initial ret	turn of a former public	charity	ļ	D 1. Foreign	n organizations, check he	re · · · · ▶∐
		Final return Amende	d return			2 Foreign	organizations meeting th	ne 85% tast
		Address change Name cl		_		-	here and attach computat	' <b>•</b> 1
н_	Check	type of organization Section 501(c)(3) exempt			l l	E If private f	oundation status was ten	minated under
$\perp$			her taxable private fou	ndation		section 50	07(b)(1)(A), check here	▶∐
1	Fair ma	arket value of all assets at J Accounting method	d X Cash	Accru	ual	F If the four	dation is in a 60-month te	ermination
	end of	year (from Part II, col (c),	<del></del>		]		tion 507(b)(1)(B), check	£ 1 1
	line 16	<u> </u>		····				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue an	d				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	_   (t	b) Net in Inco	vestment me	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions) )	books				псоте	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	67,	248				,
	2	Check ► I If the foundation is not required to attach Sch B · ·						
_	3	Interest on savings and temporary cash investments · · ·	•					
3	4	Dividends and interest from securities	. 13,	342		13,342		
Ĵ	5a	Gross rents						
4	b	Net rental income or (loss)						
<u>ت</u> ځ	6a	Net gain or (loss) from sale of assets not on line 10 · · · ·						
Revenue	b	Gross sales price for all assets on line 6a						
, S	7	Capital gain net income (from Part IV, line 2)	•					
~~~	8	Net short-term capital gain						
'	9	Income modifications						
	10a	Gross sales less returns and allowances · · · ·						
	b	Less Cost of goods sold · · · · · ·						
	С	Gross profit or (loss) (attach schedule)	•					
	11	Other income (attach schedule)	•					
	12	Total. Add lines 1 through 11	. 80,	590		13,342		
10	13	Compensation of officers, directors, trustees, etc · · · ·	•					
penses	14	Other employee salaries and wages						
ē	15	Pension plans, employee benefits	•				· · · · · · · · · · · · · · · · · · ·	
~	100	Legal fees (attach schedule)	•					
e) EU	Ь	Accounting fees (attach schedule)	•					
and Administrative E	С	Other professional fees (attach schedule)	•					
it	17	Interest · RECEIVED · · · · · · · · · · · · · · · · · · ·	•				<del></del>	
n:	18	Taxes attach schedule) (see instructions) · · · · STM1	10	239				
Έ	19	Depreciation (attach schedule) and depletion	•					
A	20	Occupanty . AUG. 1 9 2013	•					
P	21	Travel conferences, and meetings	•	_				
Ē	22	Printing and publications N. J.T	•					
ũ	23	Other expenses (attach echedule)	·					
Operating	24	Total operating and administrative expenses.						!
<u>s</u>		Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·		239		0	····	0
O	Į — —	Contributions, gifts, grants paid						28,000
	26	Total expenses and disbursements. Add lines 24 and 25	. 28,	239		0		28,000
	27	Subtract line 26 from line 12.		1				]
	а	Excess of revenue over expenses and disbursements		351				
	Þ	Net investment income (if negative, enter -0-) · · · · ·				13,342		<u></u>
	C	Adjusted net income (if negative, enter -0-)	<u>·                                      </u>				0	<u> </u>

47

P	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of y	ear
نا.	1	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	547,498	36,802	36,802
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			<del></del>
	'	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	١	disqualified persons (attach schedule) (see instructions)			
	_				<del></del>
	7	Less allowance for doubtful accounts	•		
ι.	_			<del></del>	
ssets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
•	1	Investments - U S and state government obligations (attach schedule)			<del></del>
	1	Investments - corporate stock (attach schedule) · · · · STM137	86,434	634,480	688,574
	C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment: basis	İ		
	{	Less: accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	1	instructions Also, see page 1, item I)	633,932	671,282	725,376
	17	Accounts payable and accrued expenses	300/002		72070.0
	18	Grants payable			
တ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe			
	1	· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	0	0	
'n		Foundations that follow SFAS 117, check here · · · · · · ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
ĕ					
alances	24	Unrestricted			
	25	Temporarily restricted			
Net Assets or Fund B	26	Permanently restricted	<del></del>		
E		Foundations that do not follow SFAS 117, check here · · ▶ X			
뜨		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
eţ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	633,932	671,282	
Ā	30	Total net assets or fund balances (see instructions)	633,932	671,282	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	633,932	671,282	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balance			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30 (must agree with		
		of-year figure reported on prior year's return)	· · ·		633,932
		amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·		1	52,351
		increases not included in line 2 (itemize) STM115		3	(15,001)
		nes 1, 2, and 3			
		eases not included in line 2 (itemize)		5	671,282
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30		671 202
	iotai	not accept or rand balances at one of year time 4 minus line of - Falt II, co	idinit (D), inic 30		671,282 Form 990-PF (2014)
EEA					FUIII 990-FF (2014)

ROBERT & MARY DAVIS FOUNDATION

2-story brick warehouse, or common stock, 200 shs MLC Co ) D-Donation (mo , day, yr ) (mc )  1a  b	o, day, yr)
	-, adj, ji <i>j</i>
0	
C	
d	
<u>e</u>	- <u></u> -
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (or allowable) plus expense of sale (e) plus (f) minus (g	ı)
a	
b	
C	
d	
е	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69	
(i) Gains (Col (h) gain (col (k), but not less than over col (j), if any (l) F M V. as of 12/31/69 (l) Adjusted basis as of 12/31/69 (k) Excess of col (i) col (k), but not less than because (from col (h)).	-0-) <b>or</b>
a	
b	<del></del>
С	<del></del>
d	
e	
2 Capital gain net income or (net capital loss)   [ If gain, also enter in Part I, line 7 ]	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in  Part I, line 8	
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3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in  Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  If section 4940(d)(2) applies, leave this part blank  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part  1 Enter the appropriate amount in each column for each year; see the instructions before making any entries  (a)  Base period years  Calendar year (or tax year beginning in)  Adjusted qualifying distributions  (b)  Adjusted qualifying distributions  Net value of nonchantable-use assets  (col. (b) divided by a control of the part of the	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in	
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3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in  Part I, line 8  Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  If section 4940(d)(2) applies, leave this part blank.  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part  1 Enter the appropriate amount in each column for each year, see the instructions before making any entries  (a)  Base peniod years  Calendar year for tax year beginning in)  Adjusted qualifying distributions  (b)  Adjusted qualifying distributions  Net value of noncharitable-use assets  (col. (b) divided by 1.  2012  2011  2010  2009  2 Total of line 1, column (d)	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in 3 Part I, line 8	o col (c))
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in  Part I, line 8  Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  If section 4940(d)(2) applies, leave this part blank.  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part  1 Enter the appropriate amount in each column for each year, see the instructions before making any entries  (a)  Base peniod years  Calendar year for tax year beginning in)  Adjusted qualifying distributions  (b)  Adjusted qualifying distributions  Net value of noncharitable-use assets  (col. (b) divided by 1.  2012  2011  2010  2009  2 Total of line 1, column (d)	o col (c))
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in 3 Part I, line 8	o col (c))
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3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in	o col (c))
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in	o col (c))

Pa	Rt 91 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ruction	is)	_
,1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1	-		
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			267
`	here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
¢	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			267
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			267
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 · · 6a			
Ь	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			267
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded 11			
Pa	rt VII-A Statements Regarding Activities			
1a			Yes	No
	participate or intervene in any political campaign?	1a	<del> </del>	X_
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			1
	Instructions for the definition)?	1b	<u>.</u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	ļ,	}	
C	Did the foundation file Form 1120-POL for this year?	1c	ļ	<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	I		
	(1) On the foundation \$ (2) On foundation managers \$	-		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	ı		
_	on foundation managers  \$			١
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<b></b>	X
_	If "Yes," attach a detailed description of the activities		}	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1	İ	.,
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	├	X_
b	,,,,,,,	4b	<del></del> -	<del>  ,,</del> -
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del> </del> -	X_
_	If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		Ì	
6				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			
	· · · · · · · · · · · · · · · · · · ·		,,	1
-	conflict with the state law remain in the governing instrument?	6	X	
7	Enter the states to which the foundation reports or with which it is registered (see instructions)	7	X	<del> </del>
8a			Ì	
_	OH  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-		
b	and the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contra		v	
0	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	<u> </u>		l	
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9	<del> </del>	X
10	names and addresses	40	·	v
		10 Form 00	L	X (2014)
EEA		Form 99	ソートト(	(∠∪14)

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34-7207640

Form 990-PF (2014)

ROBERT & MARY DAVIS FOUNDATION

	n 990-PF (2014) ROBERT & MARY DAVIS FOUNDATION 34-7207	640	ı	age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
,11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
•	person had advisory privileges? If "Yes," attach statement (see instructions)	12	1	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			<del></del>
14	The books are in care of ROBERT J DAVIS  Telephone no 937-	254-6	197	
	Located at ▶ 6234 LOCUST HILL ROAD, Dayton, OH ZIP+4 ▶ 4545			
15		<u> </u>	<del></del> -	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90 22 1) If	10		<u> </u>
	"Yes," enter the name of the foreign country	1		
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		1	T
4.	•		Yes	No
1a	During the year did the foundation (either directly or indirectly)		ļ	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		1	ĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		ļ
	disqualified person? Yes X No	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			ļ
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days ) Yes X No	1		
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · · · · · · · · · ·			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	j. '		
	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		,	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			v
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?	1" !		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	- ,		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1 1		
	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	,		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014 )	34		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b	<del></del> -	<del></del>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		<u>X</u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?			v
	chanactic purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

Form 990-PF (2014)

	990-PF (2014) ROBERT & MARY DAVIS						34-7207		Page 6
Рa	rt VII-B Statements Regarding Activitie	s for	Which Form	n 472	0 May Be	Requi	red (continued	)	
5a	During the year did the foundation pay or incur any ar	nount to	)·						
	(1) Carry on propaganda, or otherwise attempt to infl	uence le	egislation (sect	on 4945	5(e))? · ·	[	Yes X No		
	(2) Influence the outcome of any specific public elect	tion (see	e section 4955)	, or to c	arry on,			1 1	
	directly or indirectly, any voter registration drive?					[	Yes X No	1 1	
	(3) Provide a grant to an individual for travel, study, of	r others	sımılar purpose	s?		[	Yes X No		
	(4) Provide a grant to an organization other than a ch	aritable	, etc , organiza	tion des	cribed in				
	section 4945(d)(4)(A)? (see instructions)					[	Yes X No	1 1	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational									
purposes, or for the prevention of cruelty to children or animals?									
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in									
	Regulations section 53 4945 or in a current notice reg	jarding d	disaster assista	ince (se	e instructions	s)?		5b	
	Organizations relying on a current notice regarding di	saster a	ssistance chec	k here			▶ 🔲		
С	If the answer is "Yes" to question 5a(4), does the four	idation d	daım exemption	n from tl	he tax	_			
	because it maintained expenditure responsibility for the	ne grant	?			[	Yes No		
	If "Yes," attach the statement required by Regulations	section	53 4945-5(d)						
6a						_	_		
	on a personal benefit contract?					[	Yes X No		
b	Did the foundation, during the year, pay premiums, di	rectly or	indirectly, on a	person	al benefit co	ntract?	<del></del>	6b	X
	If "Yes" to 6b, file Form 8870					_			
7a	At any time during the tax year, was the foundation a	party to	a prohibited ta	x shelte	r transaction	· . [	Yes X No		
b	If "Yes," did the foundation receive any proceeds or ha	ave any	net income att	ributable	e to the trans	action?	<u></u> <u></u>	7ь	
Pa	rt VIII Information About Officers, Dire	ctors,	, Trustees,	Found	dation Ma	nager	s, Highly Paid	Emplo	yees,
	and Contractors								
1 1	ist all officers, directors, trustees, foundation man			ensatio	n (see instr	ctions)	•		
	(a) Name and address		e, and average rs per week		ompensation not paid,		Contributions to oyee benefit plans		nse account,
	(a) Harris and dadress		ed to position		nter -0-)		erred compensation	othera	allowances
ROB	ERT J DAVIS	TRUST	EE						
623	4 LOCUST HILL ROAD, OH 45459		0.00		0		0_		0
				Į		ĺ		Į	
		_							
				]					
			<del></del>						
				<u> </u>					
	Compensation of five highest-paid employees (othe	r than tl	hose included	on line	1 - see inst	ructions	s). If none, enter	-	
	NONE."								
			(b) Title, and a	average			(d) Contributions to	 	
	(a) Name and address of each employee paid more than \$50,0	000	hours per w devoted to po	reek 🐪	(c) Comper	sation	employee benefit plans and deferred		nse account, Ilowances
			dovoted to po		ļ		compensation		
NON	3								
					ļ				
					ļ. <u> </u>				
					<u> </u>				
			<u> </u>		1				
Total	number of other employees paid over \$50,000	· · · ·							0
EEA								Form 99	0-PF (2014)

Part Vill Information About Officers, Directors, Trustees, Foundation	Indation Managers Highly F	7207640 Pa Paid Employees
and Contractors (continued)	autori managoro, riiginy i	aid Employees
Five highest-paid independent contractors for professional services (see in:	structions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
		<del> </del>
tal number of others receiving over \$50,000 for professional services	·····	<del> </del>
		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	istical information such as the number of	
organizations and other beneficianes served, conferences convened, research papers produced, et		Expenses
		<del> </del>
	<del></del>	
		İ
art IX-B   Summary of Program-Related Investments (see inst	ructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year of		Amount
		74modrit
		1
		_
other program-related investments. See instructions		
other program-related investments. See instructions		
other program-related investments. See instructions		

Form 990-PF (2014)

EEA

Part XII Qualifying Distributions (see instructions)

qualifies for the section 4940(e) reduction of tax in those years

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	28,000
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes · · · · · · · · · · · · · · · · · ·	2	
3	Amounts set aside for specific charitable projects that satisfy the,		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	28,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	28,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foun	

34,997

#### Part XIII Undistributed Income (see instructions) (a) Corpus (b) Years prior to 2013 (c) 2013 Distributable amount for 2014 from Part XI. 34,997 2 Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only . . . . . . . . . . Total for prior years Excess distributions carryover, if any, to 2014. 3 a From 2009 . . . . . . . . . . 55,993 From 2010 . . . . . . . . . 35,772 From 2011 . . . . . . . . . 1,084 d From 2012 . . . . . . . . . 15,824 From 2013 . . . . . . . . . . 5,075 113,748 Qualifying distributions for 2014 from Part XII, line 4 ► \$ 28,000 a Applied to 2013, but not more than line 2a Applied to undistributed income of prior years (Election required - see instructions) . . . . . . c Treated as distributions out of corpus (Election Applied to 2014 distributable amount . . . . . . 28,000 Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2014 6,997 6,997 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e. Subtract line 5 . 106,751 Prior years' undistributed income Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . . . . . Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions ........ Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . 48,996 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a ..... 57,755 10 Analysis of line 9 a Excess from 2010 35,772 Excess from 2011 . . . . . 1,084 Excess from 2012 . . . . . 15,824 5,075 Excess from 2013 . . . . . Excess from 2014 . . . . .

		ARY DAVIS FOUR		-1.700 A	34-7207640	Pa
_	XIV   Private Operating Found	<del></del>		<del></del>	')	
	If the foundation has received a ruling or			rating		
	foundation, and the ruling is effective for 2		=			
	Check box to indicate whether the founda	<del></del> -	ating foundation desc		4942(J)(3) or 494	2(j)(5)
	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	Investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	85% of line 2a				<del> </del>	
			-		<del>                                     </del>	
	Qualifying distributions from Part XII, line 4 for each year listed	<del></del>				
	Amounts included in line 2c not used directly for active conduct of exempt activities					<del></del>
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the					
	alternative test relied upon. "Assets" alternative test - enter					
	(1) Value of all assets			<u> </u>		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
	"Support" alternative test - enter  (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization			-		
	(4) Gross investment income		<del> </del>		-	
	XV   Supplementary Informati	on (Complete t	his part only if	the foundation ha	d \$5,000 or more in	assets at
	any time during the year	- see instruction	ons.)		•	
	Information Regarding Foundation Ma	•				
	List any managers of the foundation who before the close of any tax year (but only					
	ROBERT J DAVIS,					
	List any managers of the foundation who ownership of a partnership or other entity		•		e portion of the	
	NONE,					
	Information Regarding Contribution, G		· -	•		
	Check here ▶ ☐ if the foundation only unsolicited requests for funds. If the foundation only			_	•	
	other conditions, complete items 2a, b, c,				J===	
	The name, address, and telephone numb	er or e-mail address	of the person to who	m applications should b	e addressed	
	000777					
_	990APP The form in which applications should be					

Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other factors:

Form 990-PF (2014)

ROBERT & MARY DAVIS FOUNDATION

Part XV | Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the	e Year or Approve	d for Future F	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year				
KIDS IN NEW DIRECTIONS			TO HELP FURTHER	
2338 EAST FIFTH STREET		i	THEIR CHARITABLE	
Dayton, OH 45403	NONE	PC	MISSION	3,000
FAIRMONT CHURCH			TO HEKP THE	
3705 FAR HILLS AVENUE			CHURCH CARRY OUT	
Dayton, OH 45459-1506	NONE	PC	ITS MISSION	5,000
WOWER OF PRINT				
HOUSE OF BREAD				
PO BOX 60277			TO PROVIDE FOOD	
Dayton, OH 45406-0277	NONE	PC	FOR THE COMMUNITY	1,000
THINK TV				
110 SOUTH JEFFERSON STREET			TO PROVIDE FUNDS	
Dayton, OH 45402-2402	NONE	PC	FOR PUBLIC TV	1,000
- '				2,000
PLANNED PARENTHOOD OF SOUTHWEST OHI			TO PROVIDE FUNDS	
2314 AUBURN AVENUE			FOR WOMEN'S	
Cincinnati, OH 45219	NONE	PC	SERVICES	1,000
				·
SALVATION ARMY			TO PROVIDE FUNDS	
1000 NORTH KEOWEE STREET	<u> </u>		FOR COMMUNITY	
Dayton, OH 45404	NONE	PC	SERVICES	5,000
COMMON CAUSE			PROVIDE FUNDS FOR	
1133 19TH STREET NW			ITS CHARITABLE	
Washington, DC 20036	NONE	NC	MISSION	1,000
HABITAT FOR HUMANITY				
115 W. RIVERVIEW AVE			FUNDING FOR	
Dayton, OH 45405	NONE	PC	COMMUNITY	1,000
zarton, on total		10	COMMONITI	1,000
Total			≯ 3a	
b Approved for future payment				
			ļ	
	1			
Total	• • • • • • • • • • • •			

Form 990-PF (2014)

ROBERT & MARY DAVIS FOUNDATION

Part XV | Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

	<del></del>	<del></del>	, <del>-•</del>	<del></del>
Recipient	If recipient is an individual,	Foundation		
redipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Consideration	,
a Paid during the year		<del></del>		
MASONIC TEMPLE FOUNDATION	İ		to enable the	
525 Riverview Avenue			organization to	
Dayton, OH 45405	NONE	PF	meet its	5,000
				5,000
DAUGON WAGONEG TOIDEN MEON				
DAYTON MASONIC FOUNDATION	}		to enable the	
525 RIVERVIEW AVENUE		ľ	organization to	
Dayton, OH 45405	NONE	PF	meet its	5,000
		1		•
	İ			
			l i	
		,		
	<u> </u>			
			i	
		;		
Total				22.222
			Ja	28,000
b Approved for future payment			Í	
	{	ļ		
		ì		
		[		
	1			
1				
			ļ	
			i	
<u> </u>				
Total · · · · · · · · · · · · · · · · · · ·	<u>.</u>	· • • • • • • • • • • • • • • • • • • •	▶ 3b	

-	ter gross amounts unless otherwise indicated		business income	Evaluded by s	ection 512, 513, or 514	(0)
		(a) Busmess	(b)	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue	code				
	a b					·
	4					
	e					
	-					
	g Fees and contracts from government agencies · · ·					
2	Membership dues and assessments					<del></del>
	Interest on savings and temporary cash investments					
4		523000	13,342	14		
-	Net rental income or (loss) from real estate	323000	13,342			
-	a Debt-financed property					
	b Not debt-financed property				· · · · · · · · · · · · · · · · · · ·	
6	Net rental income or (loss) from personal property · · ·					
	Other investment income					
	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
	Other revenue. a					
	C					
	d					
	e					
12	Subtotal Add columns (b), (d), and (e)		13,342			
13	Total. Add line 12, columns (b), (d), and (e)				13	13,342
	e worksheet in line 13 instructions to verify calculations)				<del></del>	20,042
P	art XVI-B Relationship of Activities to the A	Accompli	shment of Exe	mpt Purpo	ses	<del></del>
	Explain below how each activity for which inco	me is report	ed in column (e) of F	Part XVI-A cont	ributed importantly to t	he
	ine No. accomplishment of the foundation's exempt pu	rposes (othe	er than by providing t	funds for such	purposes) (See instruc	ctions )
	<u> </u>					
0	4 INVESTMENT INCOME PROVIDES SOURCE	E OF REV	ZENUE FOR GRAN	NTS		
					-	
			·······			
			<del></del>			
				· · · · · · · · · · · · · · · · · · ·		
					· · · · · · · · · · · · · · · · · · ·	
					<del></del>	
	· · · · · · · · · · · · · · · · · · ·		<del></del>			

	enalities of perjury, I dec and complete Declarati	lare that I have examined ion of preparer (other than	this return, including accompanying s taxpayer) is based on all information	chedules and states of which preparer h	ments, and to the as any knowledg	best of my	y knowle	dge and b	elief, it is true	ө,	
Sign Here	oberfy ature of officer or fruste	Davis	08-13-2015 Date	TRUSTEE Title	l				IRS discuss preparer sho )?	wn bel <u>ow</u>	
Paid	Print/Type preparer's		Pleparer's signature	Servi	Date 8-13-20	15	Check self-em		PTIN P00281	362	
Prepa Use (	Firm's name	DAVID M BERN 5315 Split M Dayton OH 45	Rail		<u>/</u>	Firm's Ell	v <b>&gt;</b>	-609-			
	 ·				-				Form 00	0.05 /2	014

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Qepartment of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

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

OMB No 1545-0047

2014

**Employer identification number** 

ROBERT & MARY DAV	IS FOUNDATION 34-7207640
Organization type (check	one)
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	∑ 501(c)(3) taxable private foundation
Check if your organization	is covered by the General Rule or a Special Rule.
	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special Rules	
regulations under s 13, 16a, or 16b, ar	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, and lile purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III
contributor, during contributions totale during the year for <b>General Rule</b> appl	the year, contributions exclusively for religious, charitable, etc., purposes, but no such and more than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the lies to this organization because it received nonexclusively religious, charitable, etc., contributions nore during the year
990-EZ, or 990-PF), but it i	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, nust answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its
Form 990-PF, Part I, line 2,	to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
ROBERT & MARY DAVIS FOUNDATION

Employer identification number

34-7207640

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
_1_	ROBERT J DAVIS 6234 LOCUST HILL ROAD Dayton, OH 45459	\$67,248	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		<b>\$</b>	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		<b>\$</b>	Person Payroli Noncash Complete Part II for noncash contributions )				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		<b>s</b>	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		<b>\$</b>	Person				

	Federal Supportir	ng Statements	2014 PG 01
Name(s) as shown on return			FEIN
ROBERT & MAR	RY DAVIS FOUNDATION		34-7207640
	Form 990PF, Part Other Increases	·	Statement #115
OUTSTANDING CHE	CKS - END OF YEAR	10,000	
BG OUTSTANDING	CHECKS CLEARED	(25,000	)
ROUNDING		(1	)
Total		(15,001	)

Form 990PF, Part II, Line 10(b)
Investments: Corporate Stock Schedule

PG 01 Statement #137

Category	BOY	Book Value	EOY FMV
PUBLICALLY TRADED SECURITIES	86,434	634,480	688,574
Totals	86,434	634,480	688,574

2014 PG 01	Your Social Socurity Number 34-7207640	Statement #110									
nents		a a	Charitable purpose	0	0						
Federal Supporting Statements		Form 990PF, Part I, Line 18 - Taxes Schedule	Adjusted net income	0	0						
Federal Su		990PF, Part I, Line	Net investment	0	0						
		Form	Revenue and expenses	200	239						
	Name(s) as shown on return ROBERT & MARY DAVIS FOUNDATION		Description	FEDERAL INCOME TAX OHIO FILING FEE	Totals						•

# Federal Supporting Statements 2014 pg 01 Name(s) as shown on return ROBERT & MARY DAVIS FOUNDATION 34-7207640

# Form 990PF, Part XV, Line 2 Application Submission Information

#### Grant Program

#### Applicant Name

ROBERT J DAVIS

#### Address

6234 LOCUST HILL ROAD Dayton, OH 45429

#### Telephone

937-254-6197

#### Email Address

#### Form & Content

NO FORM REQUIRED; CONTRIBUTIONS BASED ON MERIT OF THE ORGANIZATION

#### Submission Deadline

NONE

#### Restrictions on Award

NONE

# 8868

(Rev January 2014)

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

File a separate application for each return.

OMB No 1545-1709

Information about Form 8868 and its instructions is at www.irs.gov/fo	rm8868.						
• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)							
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	ously filed Form 8868						

Do not comp	olete Part II unless you have already been g	ranted an autom	atic 3-month extension on a	previously filed Form 8868			
a corporation 8868 to reque Return for Tra	ing (e-file). You can electronically file Form required to file Form 990-T), or an additional est an extension of time to file any of the forwarsfers Associated With Certain Personal Be For more details on the electronic filing of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second	al (not automatic) ms listed in Part enefit Contracts,	3-month extension of time ' For Part II with the exception which must be sent to the IR	You can electronically file Form of Form 8870, Information S in paper format (see			
Part I	Automatic 3-Month Extension of	f Time. Only	submit original (no co	pies needed).			
Part I only	required to file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form 990-T and requesting control of the file Form	• • • • • • •			▶ 🛚		
			Ente	er filer's identifying number, s	see instructions		
Type or print	Name of exempt organization or other file ROBERT & MARY DAVIS FOUNDAT			Employer identification num			
File by the due date for filing your	Number, street, and room or suite no If a 6234 LOCUST HILL ROAD	PO box, see in	structions	Social security number (SSI	۷)		
return See instructions	City, town or post office, state, and ZIP of Dayton, OH 45459	ode For a foreig	n address, see instructions				
Enter the Ret	urn code for the return that this application is	s for (file a separ	ate application for each retu	rn)	04		
Application	1	Return	Application	on			
Is For		Code	Is For	For			
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)		07		
Form 990-E	BL.	02	Form 1041-A		08		
Form 4720	(individual)	03	Form 4720 (other than ind	09			
Form 990-F	PF	04	Form 5227	10			
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069	11			
Form 990-T	(trust other than above)	06	Form 8870	12			
Telephone If the organ If this is for	No ▶ 937-254-6197  Inization does not have an office or place of a Group Return, enter the organization's forgroup, check this box	business in the Uur digit Group Ex	emption Number (GEN)	If this is	▶ □		
	names and EINs of all members the extensi						
until	st an automatic 3-month (6 months for a con 08-17, 20 15, to file the exemprogramization's return for calendar year 20 14 or						
2 If the ta	tax year beginning  x year entered in line 1 is for less than 12 m  nge in accounting period  pplication is for Forms 990-BL, 990-PF, 990-	onths, check rea	son: Initial return	, 20 ] Final return			
24 H H H B	Philaman io ioi i onno opo-est, opo-i i i opo-	., ., 20, 01 0000	, order the tentauve tax, 1633	~···,			

nonrefundable credits. See instructions. 3a | \$ b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3с

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.