



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation DAVISON BRUCE FOUNDATION		A Employer identification number 20-6565366	
Number and street (or P O box number if mail is not delivered to street address) 40 BURTON HILLS BLVD STE 300		B Telephone number (see instructions) (615) 783-1446	
City or town, state or province, country, and ZIP or foreign postal code NASHVILLE, TN 37215		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☒ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 19,064,989		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	5,000,000			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	41,960	41,954		
	4 Dividends and interest from securities	229,756	229,756		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	-472,644			
	b Gross sales price for all assets on line 6a 20,950,108				
	7 Capital gain net income (from Part IV, line 2)		10,453		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule) 	8,969	8,969		
	12 Total. Add lines 1 through 11	4,808,041	291,132		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	10,080			10,080
	14 Other employee salaries and wages	45,252			45,252
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule). 	21,518			10,759
	b Accounting fees (attach schedule). 	4,000			
	c Other professional fees (attach schedule) 	123,132	123,132		
	17 Interest	56			
	18 Taxes (attach schedule) (see instructions) 	523	523		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	81,580			81,580
	22 Printing and publications				
	23 Other expenses (attach schedule). 	3,630	1,495		
	24 Total operating and administrative expenses. Add lines 13 through 23	289,771	125,150		147,671
	25 Contributions, gifts, grants paid	361,800			361,800
	26 Total expenses and disbursements. Add lines 24 and 25	651,571	125,150		509,471
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	4,156,470			
	b Net investment income (if negative, enter -0-)		165,982		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	620,426	34,504	34,504
	2 Savings and temporary cash investments		1,649,190	1,649,190
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	13,393,928	15,993,495	17,381,295
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ 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 instructions Also, see page 1, item I)	14,014,354	17,677,189	19,064,989
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	14,014,354	17,677,189	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	14,014,354	17,677,189	
	31 Total liabilities and net assets/fund balances (see instructions) . .	14,014,354	17,677,189	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	14,014,354
2	Enter amount from Part I, line 27a	2	4,156,470
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	18,170,824
5	Decreases not included in line 2 (itemize) ▶ _____	5	493,635
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . .	6	17,677,189

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired (b) P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	10,453
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		3	

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? ☐ Yes ☒ No
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 instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	376,848	14,639,100	0 025743
2013	355,240	10,256,652	0 034635
2012	312,599	4,221,630	0 074047
2011	283,307	4,173,061	0 067889
2010	297,556	4,196,338	0 070908

2	Total of line 1, column (d).	2	0 273222
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 054644
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	17,648,336
5	Multiply line 4 by line 3.	5	964,376
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	1,660
7	Add lines 5 and 6.	7	966,036
8	Enter qualifying distributions from Part XII, line 4.	8	509,471

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

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)	1	3,320
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	3,320
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3,320
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	5,630
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868).	6c	5,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	10,630
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	4
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	7,306
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 7,306 Refunded ▶	11	

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.DAVISONBRUCEFOUNDATION.ORG	13	Yes	
14	The books are in care of CUMBERLAND TRUST CO Telephone no (615) 783-1446 Located at 40 BURTON HILLS BLVD STE 300 NASHVILLE TN ZIP+4 37215			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ☐ and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country 	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
	(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 ☒ No		
b	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)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ☐	1b	No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? ☐	1c	
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))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☒ No If "Yes," list the years 20 , 20 , 20 , 20		
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	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015). ☐	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

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 regarding disaster assistance (see instructions)? ☐ Yes ☒ No **5b** **No**

Organizations relying on a current notice regarding disaster assistance check here. ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No **6b** **No**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CUMBERLAND TRUST CO 40 BURTON HILLS BLVD STE 300 NASHVILLE, TN 37215	TRUSTEE 10 00	10,080	0	0
ASHLEY YATES PO BOX 4655 ATLANTA, GA 30302	SECRETARY 5 00	0	0	0
CAROLYN REID PO BOX 4655 ATLANTA, GA 30302	PRESIDENT 10 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

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

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SUNTRUST BANK SUNTRUST BANK	TRUSTEE/INV MGT	114,232
PO BOX 4655 PO BOX 4655 ATLANTA, GA 30302		

Total number of others receiving over \$50,000 for professional services.

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	16,649,760
b	Average of monthly cash balances.	1b	1,267,332
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	17,917,092
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	17,917,092
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	268,756
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,648,336
6	Minimum investment return. Enter 5% of line 5.	6	882,417

Part XI Distributable Amount(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	882,417
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	3,320
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	3,320
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	879,097
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	879,097
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	879,097

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	509,471
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		
a	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	509,471
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	509,471

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				879,097
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			224,778	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ <u>509,471</u>				
a Applied to 2014, but not more than line 2a			224,778	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				284,693
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				594,404
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

--

b Check box to indicate whether the organization

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

Part XV **Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

Contributed more than 2% of the total contributions received by the foundation
 (or have contributed more than \$5,000) (See section 507(d)(2))

10% or more of the stock of a corporation (or an equally large portion of the which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Contributions to preselected charitable organizations and does not accept or make gifts, grants, etc. (see instructions) to individuals or organizations under

- mail address of the person to whom applications should be addressed

Submitted and information and materials they should include

LETTER OR ONLINE AT WWW.DAVISONBRUCEFOUNDATION.ORG, SEE ATTACHED

as by geographical areas, charitable fields, kinds of institutions, or other

Part XV **Supplementary Information**(continued)

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

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a <i>Paid during the year</i> See Additional Data Table					
Total		▶ 3a			361,800
b <i>Approved for future payment</i>					
Total		▶ 3b			

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

Part XVII

- | | | | |
|--|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | |
| (1) Cash. | 1a(1) | | No |
| (2) Other assets. | 1a(2) | | No |
| b Other transactions | | | |
| (1) Sales of assets to a noncharitable exempt organization. | 1b(1) | | No |
| (2) Purchases of assets from a noncharitable exempt organization. | 1b(2) | | No |
| (3) Rental of facilities, equipment, or other assets. | 1b(3) | | No |
| (4) Reimbursement arrangements. | 1b(4) | | No |
| (5) Loans or loan guarantees. | 1b(5) | | No |
| (6) Performance of services or membership or fundraising solicitations. | 1b(6) | | No |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | | No |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received | | | |

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes
☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

* * * * *

Title

May the IRS discuss this return with the preparer shown below

(see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use
Only**

Print/Type preparer's name DANIEL C LEE	Preparer's Signature	Date 2016-09-08	Check if self-employed ☐	PTIN P00019102
Firm's name ▶ DAN LEE & ASSOCIATES PC			Firm's EIN ▶ 74-3106418	
Firm's address ▶ 836 SYCAMORE ST DECATUR, GA 30030			Phone no (404) 371-9846	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
YOUNG LIFE EAST ALABAMA YOUNG LIFE EAST ALABAMA 154 N DONAHUE DR AUBURN,AL 36832	NONE		GENERAL CHARITABLE PURPOSES	52,500
SAFEHOUSE OUTREACH INC SAFEHOUSE OUTREACH INC 89 ELLIS ST NE ATLANTA,GA 30303		NONE	GENERAL CHARITABLE PURPOSE	30,000
SOUTHEASTERN COUNCIL OF FOUNDATIONS SOUTHEASTERN COUNCIL OF FOUNDATIONS 100 PEACHTREE ST NE 2080 ATLANTA,GA 30303	NONE		GENERAL CHARITABLE GIVING	1,200
FELLOWSHIP OF CHRISTIAN ATHLETES FELLOWSHIP OF CHRISTIAN ATHLETES PO BOX 230685 MONTGOMERY,AL 36123	NONE		GENERAL CHARITABLE GIVING	5,000
TWIN CEDARS YOUTH SERVICES TWIN CEDARS YOUTH SERVICES 1234 COMMERCE DR SUITE B AUBURN,AL 36830	NONE		GENERAL CHARITABLE GIVING	15,000
LIVING HOPE INTERNATIONAL LIVING HOPE INTERNATIONAL 12700 HILLCREST RD SUITE 254 DALLAS,TX 75230	NONE		GENERAL CHARITABLE GIVING	14,000
ALABAMA CASA NETWORK ALABAMA CASA NETWORK 1919 OXMOOR RD 381 BIRMINGHAM,AL 35209	NONE		GENERAL CHARITABLE GIVING	10,000
LUTHERAN SOCIAL SERVICES LUTHERAN SOCIAL SERVICES 100 EDGEWOOD AVE NE 1800 ATLANTA,GA 30303	NONE		GENERAL CHARITABLE PURPOSES	2,500
410 BRIDGE INC 410 BRIDGE INC 35 OLD CANTON ST ALPHARETTA,GA 30009	NONE		GENERAL CHARITABLE PURPOSES	5,000
BOYS & GIRLS CLUBS OF GREATER LEE C BOYS & GIRLS CLUBS OF GREATER LEE 1610 TOOMER ST OPELIKA,AL 36801	NONE		GENERAL CHARITABLE PURPOSES	35,000
BIGHOUSE INC BIGHOUSE INC 637 S MCCLINTOCK DR TEMPE,AZ 85281	NONE		GENERAL CHARITABLE PURPOSES	5,000
STORYBROOK FARM STORYBROOK FARM 300 CUSSETA RD OPELIKA,AL 36801	NONE		GENERAL CHARITABLE PURPOSE	4,500
STRONG FOUNDATION STRONG FOUNDATION DANNON VIEW ATLANTA,GA 30331	NONE		GENERAL CHARITABLE PURPOSE	10,000
HADDIES HOME HADDIES HOME PO BOX 1525 OPELIKA,AL 36803	NONE		GENERAL CHARITABLE PURPOSES	5,500
HARMONY HOUSE DOMESTIC VIOLENCE SHE HARMONY HOUSE DOMESTIC VIOLENCE SHELTER POX BOX 2925 LAGRANGE,GA 30241	NONE		GENERAL CHARITABLE PURPOSE	5,600
Total.  3a				361,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
KERUSSO FOUNDATION KERUSSO FOUNDATION PO BOX 6871 MCKINNEY,TX 75071	NONE		GENERAL CHARITABLE PURPOSES	7,500
LIFELINE CHILDRENS SERVICES LIFELINE CHILDRENS SERVICES 1922 GA-74 TYRONE,GA 30290	NONE		GENERAL CHARITABLE PURPOSES	5,000
RAPE COUNSELORS OF EAST ALABAMA RAPE COUNSELORS OF EAST ATLANTA 334-741-0707 AUBURN,AL 36830	NONE		GENERAL CHARITABLE PURPOSES	7,500
STEGALL SEMINARY SCHOLARSHIP ENDOWM STEGALL SEMINARY SCHOLARHSIP PO BOX 241661 MONTGOMERY,AL 36124	NONE		GENERAL CHARITABLE PURPOSES	15,000
TRUTH IN NATURE TRUTH IN NATURE PO BOX 1340 DOUGLASVILLE,GA 30133	NONE		GENERAL CHARITABLE PURPOSES	2,500
HOMES OF HOPE FOR CHILDREN HOMES OF HOPE FOR CHILDREN 344 HAROLD TUCKER RD PURVIS,MS 39475	NONE		GENERAL CHARITABLE GIVING	24,000
THE WAY MINISTRIES THE WAY MINISTRIES PO BOX 328 NEW KNOXVILLE,OH 45871	NONE		CHARITABLE PURPOSES	5,000
HILLSIDE FELLOWSHIP CHURCH HILLSIDE FELLOWSHIP CHURCH 7055 HIGHWAY 281N SPRING BRANCH,TX 78070	NONE		GENERAL CHARITABLE PURPOSES	5,000
BELOVED ATLANTA BELOVED ATLANTA 1270 CAROLINE STREET ATLANTA,GA 30307	NONE		GENERAL CHARITABLE PURPOSES	5,000
IMMANUEL CHURCH IMMANUEL CHURCH 1115 11TH ST BIRMINGHAM,AL 35205			VENUE OBTAINEMENT AND RENOVATION	36,000
KIDS HUB CHILD ADVOCACY CENTER KIDS HUB CHILD ADVOCACY CENTER 2052 OAK GROVE RD HATTIESBURG,MS 39402	NONE		GENERAL CHARITABLE PURPOSE	25,000
AUBURN ASK COMMUNITY BIBLE STUDY AUBURN ASK COMMUNITY BIBLE STUDY 790 STOUT ROAD COLORADO SPRINGS,CO 80921	NONE		GENERAL CHARITABLE PURPOSE	1,000
IMMERSION OUTFITTERS IMMERSION OUTFITTERS 2510 WAMMANN BULVERDE,TX 78163	NONE		GENERAL CHARITABLE PURPOSE	10,000
TROUP CARES INC TROUP CARES INC 301 MEDICAL DR SUITE 501 LAGRANGE,GA 30240	NONE		GENERAL CHARITABLE PURPOSE	7,500
EMMAUS HOUSE EMMAUS HOUSE 321 B GREENVILLE ST LAGRANGE,GA 30241	NONE		GENERAL CHARITABLE PURPOSE	5,000
Total ▶ 3a				361,800

TY 2015 Accounting Fees Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX CONSULTING PLANNING	4,000			

TY 2015 Contractor Compensation Explanation

Name: DAVISON BRUCE FOUNDATION

EIN: 20-6565366

Contractor	Explanation
SUNTRUST BANK SUNTRUST BANK	TRUSTEE & INVESTMENT MGT

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: DAVISON BRUCE FOUNDATION

EIN: 20-6565366

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
PERENNIAL REAL ESTATE FUND LP	2011-01	PURCHASE	2015-12		12,408				12,408	
MORGAN STANLEY - 767 SEE ATTACHED	2015-01	PURCHASE	2015-12		2,693,947	2,936,380			-242,433	
MORGAN STANLEY - 767 SEE ATTACHED	2011-01	PURCHASE	2015-12		1,275,498	1,205,705			69,793	
MORGAN STANLEY - 037	2011-01	PURCHASE	2015-12		390,005	572,793			-182,788	
UBS - 604 ST SEE ATTACHED	2015-01	PURCHASE	2015-12		4,176,184	4,472,324			-296,140	
UBS - 604 LT SEE ATTACHED	2015-01	PURCHASE	2015-12		3,891,267	3,637,069			254,198	
SUNTRUST BANK - SEE ATTACHED	2011-01	PURCHASE	2015-12		8,478,856	8,585,087			-106,231	
ACL ALTERNATIVE FD SAC	2011-01	PURCHASE	2015-12			13,394			-13,394	
PERENNIAL REAL ESTATE FD LP	2011-01	PURCHASE	2015-12		17,747				17,747	
SHORT-TERM GAIN/LOSS FROM PASS-THROUGH ENTITY					3,743				3,743	

TY 2015 Investments Corporate Stock Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UBS FINANCIAL SERVICES 85604	6,417,579	6,043,223
UBS FINANCIAL SERVICES 85889		360,108
UBS FINANCIAL SERVICES 85888	2,181,668	2,670,439
MORGAN STANLEY 767	6,617,062	7,982,599
PERENIAL REAL ESTATE FUND	117,926	114,926
MORGAN STANLEY	659,260	210,000
SUNTRUST STOCK AND SECURITIES		

TY 2015 Legal Fees Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL AND CONSULTING	21,518			10,759

TY 2015 Other Decreases Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Description	Amount
PARTNERSHIP COST BASIS ADJUSTMENTS	484,651
NON DEDUCTIBLE FEDERAL EXCISE TAX	8,984

TY 2015 Other Expenses Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
COMPUTER EXPENSES	2,133			
MISC EXPENSES	2			
PERENNIAL REAL ESTATE FD LP P	90	90		
PERENNIAL REAL ESTATE FD LP P	1,022	1,022		
PERENNIAL REAL ESTATE FD LP P	383	383		

TY 2015 Other Income Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PERENNIAL REAL ESTATE FD LP	74	74	
PERENNIAL REAL ESTATE FD LP	2	2	
PERENNIAL REAL ESTATE FD LP	80	80	
ACL ALTERNATIVE FD SAC LTD	4,188	4,188	
MORGAN STANLEY - 767	4,491	4,491	
SUNTRUST BANK	134	134	

TY 2015 Other Professional Fees Schedule**Name:** DAVISON BRUCE FOUNDATION**EIN:** 20-6565366

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGMENT FEES	123,132	123,132		

TY 2015 Taxes Schedule

Name: DAVISON BRUCE FOUNDATION

EIN: 20-6565366

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	459	459		
SUNTRUST BANK - FOR TAXES	64	64		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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 2015
---	--	---

Name of the organization DAVISON BRUCE FOUNDATION	Employer identification number 20-6565366
---	---

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization
Form 990-PF	☒ 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**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 20-6565366

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	ESTATE OF ELIZABETH D BRUCE PO BOX 4655 MC GA ATL 0213 ATLANTA, GA 303024655	\$ 5,000,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	

Name of organization DAVISON BRUCE FOUNDATION	Employer identification number 20-6565366
---	---

Part II

Noncash Property

(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization DAVISON BRUCE FOUNDATION	Employer identification number 20-6565366
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
--		_____	
_____		_____	