




For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation THE JOHN R AND M MARGRITE DAVIS FOUNDATION		A Employer identification number 38-6058593	
Number and street (or P O box number if mail is not delivered to street address) 41000 WOODWARD AVENUE		Room/suite	B Telephone number (see instructions) (248) 594-5770
City or town, state or province, country, and ZIP or foreign postal code BLOOMFIELD HILLS, MI 48304		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 12,980,565		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	233,722	233,722		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10 	228,954			
	b Gross sales price for all assets on line 6a 2,078,211				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	462,676	233,722		
	13 Compensation of officers, directors, trustees, etc	25,000			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	1,288	1,288		
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	 6,324	6,324		
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings	725			
	22 Printing and publications	750	620		
	23 Other expenses (attach schedule) 	1,129			
	24 Total operating and administrative expenses. Add lines 13 through 23	35,216	8,232		0
	25 Contributions, gifts, grants paid	600,000			600,000
	26 Total expenses and disbursements. Add lines 24 and 25	635,216	8,232		600,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-172,540			
	b Net investment income (if negative, enter -0-)		225,490		
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	25,348	60,142	60,142
	2 Savings and temporary cash investments	1,136,084	1,228,564	1,228,564
	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)	4,744,635	4,044,603	10,339,064
	c Investments—corporate bonds (attach schedule)	349,755	800,000	799,997
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	450,730	400,730	552,798
	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)	6,706,552	6,534,039	12,980,565	
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 ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	6,706,552	6,534,039	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	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)	6,706,552	6,534,039	
31 Total liabilities and net assets/fund balances (see instructions) .	6,706,552	6,534,039		

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	6,706,552
2 Enter amount from Part I, line 27a	2	-172,540
3 Other increases not included in line 2 (itemize) ▶ _____	3	27
4 Add lines 1, 2, and 3	4	6,534,039
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	6,534,039

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (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			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
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	
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))
2016	516,500	11,152,437	0 046313
2015	545,345	10,462,497	0 052124
2014	563,116	11,478,191	0 049060
2013	533,650	11,469,542	0 046528
2012	499,650	10,580,073	0 047226
2 Total of line 1, column (d)			2 0 241251
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 048250
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 12,222,510
5 Multiply line 4 by line 3			5 589,736
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 2,255
7 Add lines 5 and 6			7 591,991
8 Enter qualifying distributions from Part XII, line 4			8 600,000

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 instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	2,255
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	0
3	Add lines 1 and 2.	3	2,255
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	2,255
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	4,240
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	4,240
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
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	1,985
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> 1,985 Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
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?	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 <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
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	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
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) <input type="checkbox"/> MI _____		
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 2017 or the taxable year beginning in 2017 (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 N/A	13	Yes	
14	The books are in care of RAYMOND C CUNNINGHAM JR Telephone no (864) 908-7062			

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15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2017, 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> 1b			
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 2017? <input type="checkbox"/> 1c			No
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/> 2b			No
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2017 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 2017). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 2017? 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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here. 	<input type="checkbox"/>		
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			

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
See Additional Data Table				

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	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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

0

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
NONE		

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

0

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	
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	12,301,373
b	Average of monthly cash balances.	1b	107,267
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	12,408,640
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	12,408,640
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	186,130
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,222,510
6	Minimum investment return. Enter 5% of line 5.	6	611,126

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	611,126
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	2,255
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	2,255
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	608,871
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	608,871
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	608,871

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	600,000
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		
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	600,000
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	2,255
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	597,745

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 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				608,871
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			10,347	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 600,000				
a Applied to 2016, but not more than line 2a				
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 2017 distributable amount.				600,000
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017 (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 2016 Subtract line 4a from line 2a Taxable amount—see instructions			10,347	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				8,871
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 2012 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				
e Excess from 2017.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "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					

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:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
See Additional Data Table	
b The form in which applications should be submitted and information and materials they should include	
See Additional Data Table	
c Any submission deadlines	
See Additional Data Table	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	
See Additional Data Table	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	600,000
b <i>Approved for future payment</i> GREENVILLE MEMORIAL HOSPITAL FOUNDATION 255 ENTERPRISE BOULEVARD GREENVILLE, SC 29601		501(c)(3)	MEDICAL	25,000
Total			▶ 3b	25,000

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2017)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

Sign Here	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.		
	***** Signature of officer or trustee	2018-04-29 Date	***** 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	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	MARY M LYNEIS				P01207065
	Firm's name ▶ LoPrete & Lyneis PC				Firm's EIN ▶
Firm's address ▶ 41000 Woodward Ave Ste 310 Bloomfield Hills, MI 48304					Phone no (248) 594-5770

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
RAYMOND C CUNNINGHAM JR	PRESIDENT 5 00	0	0	0
132 CREEKRIDGE ROAD GREENVILLE, SC 29607				
LESLIE R MOORE	TRUSTEE 0	0	0	0
245 E BROAD STREET GREENVILLE, SC 29601				
DEBORAH SUE CUNNINGHAM	SEC/TREAS/TRUTEE 10 00	25,000	0	0
318 E FARIS ROAD GREENVILLE, SC 29605				
JAMES H LOPRETE	TRUSTEE 1 00	0	0	0
41000 WOODWARD AVENUE SUITE 310 EAS BLOOMFIELD HILLS, MI 48304				
MARY M LYNEIS	TRUSTEE 1 00	0	0	0
41000 WOODWARD AVENUE SUITE 310 EAS BLOOMFIELD HILLS, MI 48304				

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

RAYMOND C CUNNINGHAM JR
132 CREEKRIDGE ROAD
GREENVILLE, SC 29607
(864) 908-7062

- b** The form in which applications should be submitted and information and materials they should include
LETTER FOR WITH COPY OF IRS 501(C)(3) EXEMPTION LETTER

- c** Any submission deadlines
NONE - AVAILABILITY OF FUNDS

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

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

RAYMOND C CUNNINGHAM JR
126 BABBS HOLLOW ROAD
GREENVILLE, SC 29607
(843) 671-1108

- b** The form in which applications should be submitted and information and materials they should include

LETTER FORM WITH COPY OF IRS 501(C)(3)EXEMPTION LETTER

- c** Any submission deadlines

NONE

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

NONE

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

RAYMOND C CUNNINGHAM JR
126 BABBS HOLLOW ROAD
GREENVILLE, SC 29606
(843) 671-1108

- b** The form in which applications should be submitted and information and materials they should include

LETTER FORM WITH COPY OF IRS 501(C)(3)EXEMPTION LETTER


- c** Any submission deadlines

NONE - AVAILABILITY OF FUNDS

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

NONE

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 <i>Paid during the year</i>				
ADRIAN DOMINICAN SISTERS 1257 E SIENA HEIGHTS DRIVE ADRIAN, MI 49221		501(c)(3)	RELIGIOUS	5,000
EOD WARRIER FOUNDATION 701 EAST JOHN SIMS PARKWAY NICEVILLE, FL 32578		501(c)(3)	CHARITABLE	24,000
GREEN BERET FOUNDATION 14402 BLANCO ROAD SUITE 101 GREENVILLE, SC 29601		501(c)(3)	CHARITABLE	9,000
ARTHRITIS FOUNDATION 1330 W PEACHTREE SUITE 100 ATLANTA, GA 30309		501(c)(3)	MEDICAL	2,500
CATO INSTITUTE 1000 MASSACHUSETTS AVE WASHINGTON, DC 20077		501(c)(3)	GENERAL CHARITABLE	500
Total 				600,000
3a				

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 <i>Paid during the year</i>				
BOY SCOUTS BLUE RIDGE COUNCIL 1 PARK PLAZA GREENVILLE, SC 29607		501(c)(3)	GENERAL CHARITABLE	2,500
HERITAGE FOUNDATION 214 MASSACHUSETTS AVENUE NE WASHINGTON, DC 20002		501(c)(3)	GENERAL CHARITABLE	5,000
ACCESS FUNDP O BOX 17010 BOULDER, CO 80308		501(c)(3)	GENERAL CHARITABLE	25,000
CANCER SURVIVORS PARK 24 CLEVELAND STREET GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	3,000
COMMUNITY FOUNDATION OF GREENVILLE 27 CLEVELAND ST SUITE 101 GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	50,000
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
DETROIT ATHLETIC CLUB FOUNDATION 241 MADISON AVENUE DETROIT, MI 48226		501(c)(3)	GENERAL CHARITABLE	15,000
CATHOLIC RELIEF SERVICES 209 W FAYETTE STREET BALTIMORE, MD 21201		501(c)(3)	RELIGIOUS	15,000
COMBAT CONTROL ASSNP O BOX 432 MARY ESTHER, FL 32569		501(c)(3)	GENERAL CHARITABLE	9,000
GREENVILLE COUNTY CANCER SOCIETY 113 MILLS AVENUE GREENVILLE, SC 29605		501(c)(3)	MEDICAL	2,500
GREENVILLE COUNTY SHERIFF'S FOUNDATION 4 MC GEE STREET GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	16,000
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
GREENVILLE FREE CLINIC P O BOX 8993 GREENVILLE, SC 29604		501(c)(3)	MEDICAL	25,000
GREENVILLE HUMANE SOCIETY 328 FURMAN HALL RD GREENVILLE, SC 29609		501(c)(3)	GENERAL CHARITABLE	50,000
GREENVILLE MEMORIAL HOSP FOUNDATION 255 ENTERPRISE BLVD GREENVILLE, SC 29615		501(c)(3)	MEDICAL	80,000
GREENVILLE WOMEN GIVING 27 CLEVELAND ST SUITE 101 GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	50,000
D & S LOVING ANIMALS FOUNDATION 18723 VIA PRINCESSA SANTA CLARITA, CA 91387		501(c)(3)	GENERAL CHARITABLE	1,000
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
HARVEST HOPE FOOD BANK 2818 WILD HORSE RD GREENVILLE, SC 29611		501(c)(3)	GENERAL CHARITABLE	2,500
MERRILL PALMER SKILLMAN INST 71 E FERRY DETROIT, MI 48202		501(c)(3)	EDUCATION	2,500
WAYNE STATE INSTITUTE FOR GERONTOLOGY 87 E FERRY DETROIT, MI 48202		501(c)(3)	MEDICAL	7,500
GIRLS SCOUTS MOUNTAINS TO MIDLANDS 5 INDEPENDENCE POINTE GREENVILLE, SC 29615		501(c)(3)	GENERAL CHARITABLE	2,500
JUDICIAL WATCH 525 THIRD STREET SUITE 800 WASHINGTON, DC 20024		501(c)(3)	GENERAL CHARITABLE	1,000
Total ► 3a				600,000

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 <i>Paid during the year</i>				
SCVETS CARE FOUNDATION 1215 ANTHONY AVENUE COLUMBIA, SC 29601		501(c)(3)	GENERAL CHARITABLE	30,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 50 MEMPHIS, TN 38101		501(c)(3)	MEDICAL	2,000
MARINE CORP LAW ENFORCEMENT FOUND P O BOX 37 MOUNTAIN LAKES, NJ 07046		501(c)(3)	GENERAL CHARITABLE	50,000
MARTIN MEMORIAL HOSPITAL 2127 SE OCEAN BLVD STEWART, FL 34966		501(c)(3)	MEDICAL	5,000
MEALS ON WHEELS15 OREGON ST GREENVILLE, SC 29605		501(c)(3)	GENERAL CHARITABLE	2,500
Total ► 3a				600,000

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 <i>Paid during the year</i>				
MI ALZHEIMER'S CHAPTER 20300 CIVIC CENTER DR SOUTHFIELD, MI 48076		501(c)(3)	MEDICAL	1,000
MICHIGAN HUMANE SOCIEITY 3600 W AUBURN RD ROCHESTER HILLS, MI 48309		501(c)(3)	GENERAL CHARITABLE	2,500
MIRACLE HILL MINISTRIES P O BOX 2546 GREENVILLE, SC 29602		501(c)(3)	GENERAL CHARITABLE	2,500
NAVY SEALS FOUNDATION 1619 D ST BLDG 5326 VIRGINIA BECH, VA 23459		501(c)(3)	GENERAL CHARITABLE	10,000
OUR LADY OF THE ROSARY CHURCH 3710 AUGUSTA RD GREENVILLE, SC 29604		501(c)(3)	RELIGIOUS	5,000
Total ▶ 3a				600,000


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 <i>Paid during the year</i>				
PEACE CENTER PEACEKEEPERS PROGRAM 101 W BROAD ST GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	2,500
PINK FUND3580 W MAPLE BLOOMFIELD HILLS, MI 48301		501(c)(3)	GENERAL CHARITABLE	5,000
PROJECT HOPEAUTISM 2131 WOODRUFF RD GREENVILLE, SC 29607		501(c)(3)	MEDICAL	10,000
RIGHT TO WORK LEGAL FOUND 8001 BRADDOCK RD SPRINGFIELD, VA 22160		501(c)(3)	GENERAL CHARITABLE	2,500
SALVATION ARMY615 SLATERS LANE ALEXANDRA, VA 22313		501(c)(3)	GENERAL CHARITABLE	15,000
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
ST VINCENT D'PAUL -OLR 3710 AUGUSTA ROAD GREENVILLE, SC 29604		501(c)(3)	GENERAL CHARITABLE	2,500
SALVATION ARMY GREENVILLE 417 RUTHERFORD ST GREENVILLE, SC 29609		501(c)(3)	GENERAL CHARITABLE	5,000
SHRINERS HOSP FOR CHILDREN 950 W ARIS RD GREENILLE, SC 29605		501(c)(3)	MEDICAL	5,000
SIENNA HEIGHTS UNIVERSITY 1247 E SIENNA HEIGHTS DR ADRIAN, MI 49221		501(c)(3)	EDUCATION	10,000
SIGMA CHI FOUNDATION 1714 HINMAN AVENUE EVANSTON, IL 60201		501(c)(3)	GENERAL CHARITABLE	1,000
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
TEAM RUBICON1509 16TH STREET NW WASHINGTON, DC 20036		501(c)(3)	GENERAL CHARITABLE	15,000
QUILTS OF VALOR FOUNDATION 3050 FIVE FORKS TRICKUM PMB 430 LILBURN, GA 30047		501(c)(3)	GENERAL CHARITABLE	500
				0
THOMAS MORE LAW CENTER 25 FRANK LLOYD WRIGHT DR ANN ARBOR, MI 48106		501(c)(3)	EDUCATION	5,000
				0
Total ▶ 3a				600,000

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 <i>Paid during the year</i>				
USOP O BOX 96860 WASHINGTON, DC 20077		501(c)(3)	GENERAL CHARITABLE	2,500
				0
YMCA OF GREENVILLE 601 E MCBEE AVE SUITE 212 GREENVILLE, SC 29601		501(c)(3)	GENERAL CHARITABLE	2,000
				0
				0
Total 				600,000
3a				

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

TY 2017 Gain/Loss from Sale of Other Assets Schedule

Name: THE JOHN R AND M MARGRITE DAVIS FOUNDATION

EIN: 38-6058593

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
250,000 ALLY BANK CD	2017-06	Purchased	2017-12		250,000	250,000				
250,000 BANC OF CALIFORNIA CD	2017-01	Purchased	2017-06		250,000	250,000				
250,000 BANK OF CHINA CD	2017-06	Purchased	2017-10		250,000	250,000				
250,000 COMPASS BANK CD	2017-04	Purchased	2017-08		250,000	250,000				
2,350 SHS FORD MOTOR CO	2011-02	Purchased	2017-05		25,755	32,089			-6,334	
500 SHS ISHARES JP MORGAN ETF	2012-07	Purchased	2017-07		56,266	58,310			-2,044	
800 SHS ISHARES ETF	2012-03	Purchased	2017-06		81,652	54,393			27,259	
400 SHS POWERSHARES DWA ETF	2011-04	Purchased	2017-06		23,853	15,405			8,448	
1,500 SHS SPDR S & P RETAIL ETF	2011-05	Purchased	2017-05		60,239	39,323			20,916	
2,000 SHS CHARLES SCHWAB	2012-05	Purchased	2017-12		50,000	50,000				
500 SHS VERIZON COMMUNICATIONS	2012-07	Purchased	2017-06		22,467	22,108			359	
5,800 SHS GENERAL ELECTRIC	2000-01	Purchased	2017-07		148,206	82,019			66,187	
1,000 SHS IBM	2006-03	Purchased	2017-07		144,224	97,108			47,116	
1,266 SHS ISHARES ETF	2010-11	Purchased	2017-11		37,246	28,165			9,081	
200 SHS ISHARES ETF	2010-08	Purchased	2017-06		20,413	11,088			9,325	
1,000 SHS ISHARES ETF	2009-06	Purchased	2017-06		53,666	59,512			-5,846	
100 SHS MORGAN STANLEY MED TERM NOTES	2012-03	Purchased	2017-03		100,000	99,755			245	
100 SHS POWERSHARES DWA ETF	2010-06	Purchased	2017-06		5,963	2,777			3,186	
500 SHS QUALCOMM	2010-04	Purchased	2017-04		27,466	19,329			8,137	
500 SHS SPDR S & P RETAIL ETF	2010-08	Purchased	2017-05		20,483	9,008			11,475	
1,000 SHS SOUTHERN CO	2009-06	Purchased	2017-06		49,716	30,428			19,288	
1,000 SHS UNILEVER	2008-05	Purchased	2017-10		55,656	31,656			24,000	
1,000 SHS VANGUARD ENERGY ETF	2011-05	Purchased	2017-04		94,940	106,784			-11,844	

TY 2017 Other Expenses Schedule**Name:** THE JOHN R AND M MARGRITE DAVIS FOUNDATION**EIN:** 38-6058593**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE/SUPPLIES	258			
INSURANCE	744			
POSTAGE/SHIPPING	107			
MICHIGAN ANNUAL REPORT	20			

TY 2017 Other Increases Schedule

Name: THE JOHN R AND M MARGRITE DAVIS FOUNDATION

EIN: 38-6058593

Description	Amount
Basis adjustment	27

TY 2017 Taxes Schedule**Name:** THE JOHN R AND M MARGRITE DAVIS FOUNDATION**EIN:** 38-6058593

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	6,324	6,324		