Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

benefit trust or private foundation) Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

ΑI	For the 20	004 calendar year, or tax year beginning and ending			
В	Check if applicable	Please C Name of organization use IRS	D Em	ployer ide	entification number
	Address change	1 1	2	22-29	76811
	Name change	type See Number and street (or P.O. box if mail is not delivered to street address)		ephone ni	
	Initial return	Specific 4 FUNDY ROAD		207)	781-5504
	Final	tions City or town, state or country, and ZIP + 4	F Acc	ounting metho	
L	Amender	FALMOUTH, ME 04105		Other (specify)	
L	Applicati pending		are not applicable his a group return		on 527 organizations. s? Yes X No
G 1	Website:	►WWW.DAVISFOUNDATIONS.ORG	es," enter number	of affiliate	s >
J	Organizat	tion type (check only one) ▶ 🗶 501(c) (3	all affiliates includ	ed? N	/A Yes No
K	Check her		No," attach a list.) his a separate retui	rn filed by	an or-
(organizati	ion need not file a return with the IRS; but i´the organization received a Form 990 Package gan	ization covered by	a group ru	uling? Yes X No
	n the mai	ıl, it should file a return without financial data. Some states require a complete return .	up Exemption Nun	nber 📂 🛚	<u>N/A</u>
		1			on is not required to attach
			n. B (Form 990, 99	0-EZ, or 99	90-PF).
Pi	art I 📗	Revenue, Expenses, and Changes in Net Assets or Fund Balances			
	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support 1a	500,000.	<u>.</u>	
	b	Indirect public support 1b		4	
	С	Government contributions (grants)		_	
	d	Total (add lines 1a through 1c) (cash \$ 500,000. noncash \$)	1d	<u>500,000.</u>
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	
	3	Membership dues and assessments		3	
	4	Interest on savings and temporary cash investments		4	
	5	Dividends and interest from securities		5	465,199.
	6 a	Gross rents 6a]	
	b	Less: rental expenses 6b]	
	C	Net rental income or (loss) (subtract line 6b from line 6a)		6c	
a)	7	Other investment income (describe)	7	
Revenue	8 a	Gross amount from sales of assets other (A) Securities	(B) Other]	
ě		than inventory 1,018,846. 8a]	
Œ	Ь	Less: cost or other basis and sales expenses 760,976.8b]	
	C	Gain or (loss) (attach schedule) 257,870. 8c		<u> </u>	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 2		8d	<u> 257,870.</u>
	9	Special events and activities (attach schedule). If any amount is from gaming, check here			
	a	Gross revenue (not including \$ of contributions			
	1	reported on line 1a)		_	
	Ь	Less: direct expenses other than fundraising expenses		4	
	C	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	
	10 a	Gross sales of inventory, less returns and allowances		↓	
		Less: cost of goods sold		-	
	C	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line option and on the revenue (from Part VIII. line 103)		10c	
	''	Other revenue (nontrait vii, inte 100)		11	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	1,223,069.
Ø	13	Program services (from line 44, column (B))	#	13	726,020.
Expenses	14	Management and general (from line 44, column (C))	:	14	52,958.
per	15	Fundraising (from line 44, column (D))	<u>_</u>	15	·
ŭ	16	Payments to affiliates (attach schedule)		16	
	17	Total expenses (add lines 16 and 44, column (A))		17	778,978.
e e	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	444,091.
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	17,027,957.
Zű		Other changes in net assets or fund balances (attach explanation) SEE STATE	EMENT 3	20	632,752.
		Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	18,104,800.

Form 990 (2004)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part II			ations must complete column anizations and section 4947	n (A). Columns (B), (C), and		
Do not	include amounts reported on line	1	(A) Total	(B) Program	(C) Management	(D) Fundraising
	o, 8b, 9b, 10b, or 16 of Part I	+	(14) 10121	services	` and general	(5) (5.0.0.0.0
	nd allocations (attach schedule) 673088 • noncash \$	22	673,088.	673,088.		
	assistance to individuals (attach schedule)		073,000.	073,000.		
-	paid to or for members (attach schedule)	24			:	
	sation of officers, directors, etc.	25	36,970.	20,000.	16,970.	0.
=	laries and wages	26	6,316.		6,316.	· · · · · · · · · · · · · · · · · · ·
	plan contributions	27	1,630.		1,630.	
	pployee benefits	28	2,519.		2,519.	,
29 Payroll t	axes	29	1,781.		1,781.	
30 Professi	onal fundraising fees	30				
31 Account	ing fees	31	6,859.		6,859.	
32 Legal fee	es	32				
33 Supplies		33				
34 Telephor	ne	34	768.		768.	
35 Postage	and shipping	35	371.		371.	
36 Occupar	icy	36	4,461.		4,461.	
	ent rental and maintenance	37	1,695.		1,695.	
	and publications	38				
39 Travel		39	283.	283.		
40 Conferer	nces, conventions, and meetings	40	801.		801.	
41 Interest	•	41				
42 Deprecia	ition, depletion, etc. (attach schedule)	42				
	penses not covered above (itemize):					
a		43a				
		43b				
		43c				
d		43d			i	
e SEE	E STATEMENT 4 tional expenses (add lines 22 through 43), s completing columns (8)-(0), carry these totals to lines 13-1	43e	41,436.	32,649.	8,787.	
44 Organization	tional expenses (add lines 22 through 43), s completing columns (B)-(D), carry these totals to lines 13-1:	44	778,978.	726,020.	52,958.	0.
Joint Costs.	Check 🕨 🔙 if you are following SOP 9	8-2.				
Are any joint	costs from a combined educational campa	ign ar	id fundraising solicitation re	ported in (B) Program servi	ces? ▶	Yes X No
If "Yes," enter	(i) the aggregate amount of these joint co	sts \$;
(iii) the amou	unt allocated to Management and general	;	; and	(iv) the amount allocated to	Fundraising \$	
	Statement of Program Serv					
What is the o	rganization's primary exempt purpose? 🕨	<u> </u>	<u>EE STATEMENT</u>	5		
						Program Service Expenses
	s must describe their exempt purpose achieverne hat are not measurable (Section 501(c)(3) and (4) o			the number of clients served, pu		
allocations to o	thers)		itions and 4947(a)(1) nonexempt			(Required for 501(c)(3) and
	 			charitable trusts must also enter	the amount of grants and	
	ITS ALLOCATED IN SU	PPO	RT OF 501(C)	charitable trusts must also enter	the amount of grants and	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
	 	PPO	RT OF 501(C)	charitable trusts must also enter	the amount of grants and	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter	the amount of grants and	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
ATTA	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b	ITS ALLOCATED IN SU	PPO	RT OF 501(C) NTS APPROVED	charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b	ITS ALLOCATED IN SUACHED LIST OF 2004	PPO	RT OF 501(C) NTS APPROVED	Charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$ Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b c d e Other pro-	Ogram services (attach schedule)	PPOGRA	RT OF 501(C) NTS APPROVED	Charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
b c d e Other pro-	ITS ALLOCATED IN SUACHED LIST OF 2004	PPOGRA	RT OF 501(C) NTS APPROVED	Charitable trusts must also enter (3) ORGANIZA Grants and allocations \$ Grants and allocations \$	TIONS . SEE	(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)

Part IV Balance Sheets

	Where required, attached schedules and amounts wit hould be for end-of-year amounts only	hin the description column	(A) Beginning of year		(B) End of year
45	5 Cash - non-interest-bearing			45	
46	•		761,310.	46	1,108,236
47	7 a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b		47c	
48	8 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b		48c	
49	9 Grants receivable			49	
50					
_Ω	and key employees	1 . 1		50	
Assets	1 a Other notes and loans receivable	51a		_	
٠	b Less: allowance for doubtful accounts	51b		51c	 .
52			1 072	52	
53	- , ,	7 ▶ ☐ Cost X FMV	1,873. 16,268,010.	53	17,007,895
54	· · · · · · · · · · · · · · · · · · ·	7 ►	10,200,010.	54	17,007,033
58	5 a Investments - land, buildings, and STMT	1 1			
	equipment: basis	558			
	b Less; accumulated depreciation	55b		55c	
56	•	350	0.	56	0
1 -		57a	•	30	<u> </u>
34	7 a Land, buildings, and equipment: basis b Less: accumulated depreciation	57b		57c	
58		37.0		58	
"				-	
59	9 Total assets (add lines 45 through 58) (must equal lin	ne 74)	17,031,193.	59	18,116,131
60	Accounts payable and accrued expenses		3,236.	60	11,331
61	1 Grants payable			61_	
62				62	
Clabilities 64	3 Loans from officers, directors, trustees, and key empl	oyees		63	
<u> </u>	4 a Tax-exempt bond liabilities			64a	
ן ב	b Mortgages and other notes payable			64b	
68	5 Other liabilities (describe ►)		65	
66	6 Total liabilities (add lines 60 through 65)		3,236.	66	11,331
0.		and complete lines 67 through			
	69 and lines 73 and 74.				
8 67	7 Unrestricted		17,027,957.	67	18,104,800
<u> 6</u>	8 Temporarily restricted			68	
69	9 Permanently restricted			69	
Net Assets or Fund Balances 10 10 10 10 10 10 10 10 10 1	organizations that do not follow SFAS 117, check here 🕨	and complete lines			
֡֡֓֓֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֓֡֓֡	70 through 74.				
g 70	O Capital stock, trust principal, or current funds			70	·
. 71 186	1 Paid-in or capital surplus, or land, building, and equip	ment fund		71	
g 72	_			72	
5 73	3 Total net assets or fund balances (add lines 67 through	igh 69 or lines 70 through 72;			
	column (A) must equal line 19; column (E) must equa		17,027,957.	73	18,104,800
74	4 Total liabilities and net assets / fund balances (add	lines 66 and 73)	17,031,193.	74	<u> 18,116,131.</u>

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Form 990 (2004) DAVIS CONSERVATION FO			22-29768	
Part IV-A Reconciliation of Revenue per Audited		iliation of Exp		
Financial Statements with Revenue per	Financi Return	al Statements	with Expens	ses per
Return a Total revenue, gains, and other support	a Total expenses and lo	neege nor		
per audited financial statements a 1,855,821.	audited financial state b Amounts included on	ements	▶ a	<u>778,978.</u>
b Amounts included on line a but not on line 12, Form 990:	line 17, Form 990: (1) Donated services			
(1) Net unrealized gains	and use of facilities	\$		
on investments \$632,752.	(2) Prior year adjustment	ts		
(2) Donated services	reported on line 20,	_	i i	
and use of facilities \$	Form 990	\$		
(3) Recoveries of prior	(3) Losses reported on			
year grants \$	line 20, Form 990	\$		
(4) Other (specify):	(4) Other (specify):	\$		
Add amounts on lines (1) through (4) b 632,752.		s (1) through (4)	▶ b	0.
c Line a minus line b $ c 1,223,069 $.	c Line a minus line b		▶ c	<u>778,978.</u>
d Amounts included on line 12, Form 990 but not on line a:	d Amounts included on 990 but not on line a			
(1) Investment expenses	(1) Investment expenses			
not included on	not included on		i i	
line 6b, Form 990 \$	line 6b, Form 990	\$	i i	
(2) Other (specify):	(2) Other (specify):	¢		
Add amounts on lines (1) and (2)	Add amounts on lines	Ψ : (1) and(2)	d	0.
e Total revenue per line 12, Form 990	e Total expenses per lin			<u></u>
(line c plus line d)	(line c plus line d)	10 17,1 01111 000	▶ e	778,978.
Part V List of Officers, Directors, Trustees, and Key	1	e even if not compen		,,,,,,,,,,
	(B) Title and average hours	(C) Compensation	(D) Contributions to employee benefit plans & deferred	(E) Expense
(A) Name and address	per week devoted to	(If not paid, enter	plans & deferred compensation	account and other allowances
THOMAS S. DEANS	TRUSTEE	<u> </u>	Compandation	
CENTER CONWAY, NH 03813				
	1 HOUR/WEEK	2,500.	0.	0.
HORACE A. HILDRETH, JR.	TRUSTEE			
PORTLAND, ME 04102				
	1 HOUR/WEEK	2,500.	0.	0.
ALDEN H. SAWYER, JR.	TRUSTEE & CHA	IRMAN		
FALMOUTH, ME 04105				
	1 HOUR/WEEK	2,500.	0.	0.
FREDERIC A. STOTT	TRUSTEE			
ANDOVER, MA 01810				
	1 HOUR/WEEK	2,500.	0.	0.
PATRICIA B. TOZIER	TRUSTEE			
BETHLEHEM, NH 03574			_	_
	1 HOUR/WEEK	2,500.	0.	0.
REBEKAH A. BUCCI	TRUSTEE			
FALMOUTH, ME 04105			_	_
	1 HOUR/WEEK	2,500.	0.	0.
THOMAS M. ARMSTRONG, JR	TRUSTEE			
YARMOUTH, ME 04096				_
	1 HOUR/WEEK	2,500.	0.	0.
DAVID J. BUCCI	TRUSTEE			•
FALMOUTH, ME 04105	1	0.500		_
	1 HOUR/WEEK	2,500.	0.	0.
NANCY M. WINSLOW	EXECUTIVE DIR	ECTOR		
FALMOUTH, ME 04105	10 1101110 (111111111111111111111111111	16 000]] [45]	^
SEE STATEMENT 1	10 HOURS/WEEK			0.
75 Did any officer, director, trustee, or key employee receive aggregate compensat	ion of more than \$100,000 fro	iii your organization	and an related	

organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule.

Yes X No

Form		2976811		Page 5
Pa	rt VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77		77		х
				$\overline{}$
78 a		78a		х
		78b		
79		79		Х
80 a		1		
-		80a		х
b				
•		exempt		
81 a		'_ I		
b	· · · · · · · · · · · · · · · · · · ·	816		x
		10.0	 	
82 a		82a		x
		028		
D	1 1	.		
	,		 	
		83a	X	
		83b	X	-
84 a		84a	ļ	X
b		İ		
			1	—
85			ļ	<u> </u>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	<u>85b</u>		ļ
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxi	y tax		
	owed for the prior year.	1		
C	· · · · · · · · · · · · · · · · · · ·			
d	Section 162(e) lobbying and political expenditures 85d N/A	<u> </u>	Ì	
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A	<u>. </u>		
f	Taxable amount of lobbying and political expendrures (line 85d less 85e) 85f N/A	<u> </u>		
g	Does the organization elect to pay the section $6033(e)$ tax on the amount on line $85f$?	k 85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of	of dues		
	allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86		<u> </u>		
b				
87	· · · · · · · · · · · · · · · · · · ·			
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D D		07\701	EEA	2
91	Telephone no. ► 12	<u>'01)18T-</u>	· 250	4
	A minimum none instruction to		. –	
	re any changes made in the organizing or governing documents but not reported to the IRS? res, "attach a conformed copy of the changes. the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? /es, has it filed a tax return on Form 990-T for this year? /es, has it filed a tax return on Form 990-T for this year? /es, has it filed a tax return on Form 990-T for this year? /es, has it filed a tax return on Form 990-T for this year? /es, a tatch a statement /erining bodies, trustees, officers, etc., to any o her exempt or nonexempt organization? /es, enter the name of the organization /es, you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an ense in Part II. (See instructions in Part III.) // the organization comply with the public inspection requirements for returns and exemption applications? // the organization solicit any contributions or gifts that were not tax deductible? // **Es, did the organization include with every sclicitation an express statement that such contributions or gifts were not deductible? // **Es, was answered to either 85a or 85b, do not complete 85c through 85b below unless the organization received a waiver for proxy tax and of the prior year. // **Es, was answered to either 85a or 85b, do not complete 85c through 85b below unless the organization received a waiver for proxy tax and of the prior year. // **Es, was planned and political expenditures // **Es, but it is a state of the pr		15	
			, r	_
92	. 1		· ►L	
42304		<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
01-13	05	For	m 990	(2004)

Enter gross amounts unless otherwise cated. Program service revenue: Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments	-	(B) Amount	Exclusion code	(D) Amount	(E) Related or exempt function income
Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments	code	Amount		Amount	function income
Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments	-				
Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments	-				
Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments					
Medicare/Medicaid payments Fees and contracts from government agencies Membership dues and assessments					
Fees and contracts from government agencies Membership dues and assessments					
Fees and contracts from government agencies Membership dues and assessments	 			<u> </u>	
Membership dues and assessments					
				<u> </u>	
aterest on equipme and temperatures each investments		_			** = 1
Interest on savings and temporary cash investments			↓ ↓.		
Dividends and interest from securities			14	465,199.	
Net rental income or (loss) from real estate:					
debt-financed property					
not debt-financed property					<u>-</u>
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets					
other than inventory			18	257,870.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
Subtotal (add columns (B), (D), and (E))		0	•	723,069.	
Total (add line 104, columns (B), (D), and (E))					723,069
Line 105 plus line 1d, Part I, should equal the an	nount on line	12, Part I.			
t VIII Relationship of Activities to th	e Accomp	lishment of Exem	pt Puŋ	ooses (See page 34 of the in	istructions.)
No. Explain how each activity for which income is re exempt purposes (other than by providing fund	•	· ·	d importa	intly to the accomplishment of	the organization's
t IX Information Regarding Taxable			led En		
me, address, and EIN of corporation, partnership, or disregarded entity ownership into		(C) Nature of activities		(D) Total income	(E) End-of-year assets
	%				
N/A	%				
	%				
	%				
t X Information Regarding Transfe	ers Associa	ated w			
Did the organization, during the year, receive any fund					
Did the organization, during the year, pay premiums, d					

Please Muscy Signature of officer 5/1 Sign Here Preparer's Paid signature Preparer's Firm's name (or BERRY, DUNN, MCNEIL & PA **Use Only** P.O. BOX 1100

423161 01-13-05

yours if self-employed), address, and ZIP + 4

PORTLAND, ME 04104-1100

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer identification number Name of the organization DAVIS CONSERVATION FOUNDATION 22 2976811 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to d) Contributions to employee benefit plans & deferred compensation (e) Expense (a) Name and address of each employee paid (c) Compensation account and other more than \$50,000 position allowances NONE Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service Total number of others receiving over \$50,000 for professional services

3101/11-24-04 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Pa	rt IV-A	Support Schedule (C Note: You may use the	omplete o	nly if you ch	ecked a b	ox on line 10	, 11, or 12.) Use cas	h method of acc	counting	g. N/A	
Calen	dar year (o	r fiscal year				2002	(c) 2001	(d) 2000			
15	Gifts, gran	ts, and contributions	(a)	2003	(0)	2002	(6) 2001	(8) 2000		(e) Total	
	received. (grants. Se	Dó not include unusual e line 28.)									
16	Membersh	np fees received									
17	merchand performed facilities in related to	eipts from admissions, use sold or services , or furnishing of any activity that is the organization's etc., purpose									
18	dividends, payments tion 512(a unrelated t (less section businesse	ome from interest, amounts received from on securities loans (sec-)(5)), rents, royalites, and ousiness taxable income on 511 taxes) from s acquired by the on after June 30, 1975									
19	Net incom	e from unrelated business									
20	Tax revenu	ot included in line 18 ues levied for the on's benefit and either or expended on its behalf	1								
21	The value furnished governme Do not incorfacilities	of services or facilities to the organization by a ntal unit without charge. lude the value of services a generally furnished to without charge									
22	Do not inc	me. Attach a schedule. lude gain or (loss) from otal assets									
23		es 15 through 22		0.		0.	0	•	0.		0.
24		inus line 17	-								
25	Enter 1%			F-1 00/ -4			- 04		00-	N/A	
26 b	•	ions described on lines 1 list for your records to sho						ernmental	26a	N/A	
U	•	olicly supported organizati					·				
	•	this list with your return.	,	_	_			>	26ь	N/A	
C		ort for section 509(a)(1) t						•	26c	N/A	
đ		unts from column (e) for l		·		19					
			22			26b			26d	N/A	
е	Public sup	port (line 26c minus line 2	ed total)					>	26e	N/A	
<u>f</u>		port percentage (line 26							26f	N/A	<u>%</u>
27	records to such amo	ons described on line 12 show the name of, and to unts for each year:	tal amounts	received in e		om, each "disq	ualified person." Do not	file this list with yo	our returi		
	(2003)		(2002)			•	001)	(20)	•		
D	-	nount included in line 17 to									
		nt received for each year, t in lines 5 through 11, as v									
		amount described in (1) o							ion ino ai	mount received and	
	(2003)	amount described in (1) o	(2002)		636 UIII616II		001)	(20	00)		
c	. ,	unts from column (e) for l					•	•	,		
•	7,00,71110	17					21		27c	N/A	
d	Add: Line				nd line 27b t		<u> </u>	>	27d	N/A	
е	Public sup	port (line 27c total minus	line 27d tot	al)				>	27e	N/A	
f	Total supp	ort for section 509(a)(2) t	est; Enter a	nount on line	23, column	1 (e)	▶ 27f	N/A			
g		upport percentage (lin	-					.	27g	N/A	<u>%</u>
<u>h</u>	Investme	ent income percentage	e (line 18,	column (e)	(numerate	or) divided b	y line 27f (denomin	ator))	27h	N/A	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. Schedule A (Form 990 or 990-EZ) 2004

423121 12-03-04

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 29 instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 30 and other written communications with the public dealing with student admissions, programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 31 solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: 32 a Records indicating the racial composition of the student body, faculty, and administrative staff? 32b b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 32c admissions, programs, and scholarships? 32d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: 33 33a a Students' rights or privileges? Admissions policies? 33b 33c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 33f Athletic programs? 33g 33h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a 34b b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Sc	hedule A (Form 990 or 990-EZ) 2004 D2	AVIS CONSERVATION FOUNDA	TIO	N	2	2-2976811 Page 5
P		itures by Electing Public Charities (See pa	ge 9 of	the instructions.)	N/A
Ch		gs to an affiliated group. Check ▶ b	ıfy	you che	cked "a" and "limited contr	ol" provisions apply.
	Limits or	Lobbying Expenditures			(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 37 38 39 40 41	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines 3 Other exempt purpose expenditures Total exempt purpose expenditures (add	a legislative body (direct lobbying) 6 and 37) I lines 38 and 39) amount from the following table - The tobbying nontaxable amount is - 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000	}	36 37 38 39 40	N/A	
43	Subtract line 42 from line 36. Enter -0- i	f line 42 is more than line 36		43		
44	Subtract line 41 from line 38. Enter -0- i	fline 41 is more than line 38		44		
_	Caution: If there is an amount on en	ther line 43 or line 44, you must file Form 4720				

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

		Lobbying Exp	enditures During 4-Year A	veraging Period	N/A
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B | Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- Paid staff or management (Include compensation in expenses reported on lines c through h.)
- Media advertisements
- Mailings to members, legislators, or the public
- Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above.	, also attach a statement giving a	a detailed description o	f the lobbying activities.

Yes	No	Amount
	Х	
	Х	1
	Х	
	X	
	X	
	X	
	X	
	X	
		0.

423141 11-24-04

FOOTNOTES

STATEMENT

1

LINE 25 ON PART II OF THE FORM 990 LISTS \$20,000 OF PROGRAM SERVICES COMPENSATION TO OFFICER'S. THIS AMOUNT ACTUALLY REPRESENTS TRUSTEE'S FEES BUT HAS BEEN INCLUDED ON THIS LINE IN ORDER TO COMPLY WITH THE FORM 990 INSTRUCTIONS.

PART II AND V: THE DIRECTOR AND STAFF'S SALARY IS REPORTED FOR PAYROLL TAX PUFPOSES UNDER THE EMPLOYER IDENTIFICATION NUMBER OF THE DAVIS EDUCATIONAL FOUNDATION, 04-2864042. THE SALARY AMOUNTS LISTED UNDER MANAGEMENT AND GENERAL ARE FOR SALARY REIMBURSED BY DAVIS CONSERVATION FOUNDATION.

15

FORM 990 GAIN (LO	OSS) FRO	OM PUBI	LICLY T	RADEI	SE	CURIT	ES		STATEMENT	2
DESCRIPTION			OSS PRICE		OST (ER B	OR ASIS	EXPENS OF SAI		NET GAII OR (LOS	
SALE OF SECURITIES	-	1,018,846.		6. 760,9		976.		0.	257,87	
TO FORM 990, PART I, LI	NE 8 =	1,018	8,846.	7	760,	976.		0.	257,8	70.
FORM 990 OTHER CH	HANGES :	IN NET	ASSETS	OR F	FUND	BALAI	NCES		STATEMENT	3
DESCRIPTION									AMOUNT	
UNREALIZED GAINS ON INVI	ESTMENT	S						_	632,7	52.
TOTAL TO FORM 990, PART	I, LINI	E 20						_	632,7	52.
								=		
FORM 990		OTHER EXPENSES				STATEMENT	4			
	(A))		B) GRAM		((C) SEMENT		(D)	
DESCRIPTION	TOTA	AL		VICES	3		SENERAL		FUNDRAISI	NG
INVESTMENT MANAGEMENT AND CUSTODIAL MISCELLANEOUS ADMINISTRATIVE FEES CONSULTING FEES INSURANCE DUES PAYROLL FEES ALLOCATED EXPENSES		2,225. 459. 805. 2,210. 3,447. 2,353. 226. <289.		32,22 42	25. 24.		35 805 2,210 3,447 2,353 226 <289	5. 7. 3.		
TOTAL TO FM 990, LN 43	4:	1,436.		32,64	— - 19.		8,787	7.		

***************************************				'		
FORM 990	STATEMENT OF	ORGANIZATION'	S PRIMARY	EXEMPT PURPOSE	STATEMENT	5
		PART	III			

EXPLANATION

TO MAKE GRANTS TO ORGANIZATIONS DEVOTED TO THE CARE, PRESERVATION, AND PROTECTION OF THE ENVIRONMENT, WILDLIFE, OPEN SPACE, OUTDOOR RECREATION, THE SEA, MARINE LIFE AND NATURE, AT THE DISCRETION OF THE TRUSTEES.

FORM 990 NO	NON-GOVERNMENT SECURITIES				
SECURITY DESCRIPTION COST/F	CORPORATE MV STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV SECURITII	
EQUITY SECURITIES FMV DEBT INSTRUMENTS FMV	12481992.	3,230,082.		1248199 3,230,08	_
TO FORM 990, LINE 54, COL B	12481992.	3,230,082.		1571207	74.
FORM 990 G	OVERNMENT SECU	RITIES		STATEMENT	7
DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV SECURITIE	
US OBLIGATIONS	FMV	708,746.		708,74	46.
TOTAL TO FORM 990, LINE 54,	COL B	708,746.		708,74	16.
FORM 990	OTHER SECURIT	TES		STATEMENT	8
SECURITY DESCRIPTION			COST/FMV	OTHER SECURITIES	3
MUTUAL FUNDS			FMV	587,07	75.
TO FORM 990, LINE 54, COL B		-	587,07		

Davis Conservation Foundation EIN: 22-2976811 December 31, 2004

	•
Part II, Line 22 - Grants	50,000
Appalachian Mountain Club Audubon Society of New Hampshire	50,000 17,500
Bonnyvale Environment Education Center	2,000
Camp Fire Hitinowa Council	8,768
Cape Elizabeth Land Trust	10,000
Children's Museum of Maine	5,000
Cobscook Bay Resource Center, Inc College of the Atlantic	15,000 10,000
Conservation Council of New Brunswick	7,500
Conservation Education, Foundation, Inc	8,000
The Conservation Fund	15,000
Conservation Law Foundation	1.5,000
Cultivating Community	10,000
Damariscotta River Association Friends of Casco Bay	10,000 15,000
Friends of Sunkhaze Meadows National Wildlife Refuge	5,000
Great Auk Land Trust	3,200
Greater Lovell Land Trust	5,000
Green Mountain Conservation Group	15,000
Hubbard Brook Research Foundation	10,000
The Intervale Foundation	5,000
Island Institute	20,000 2,000
Keeping Track, Inc Land Trust Alliance	10,000
Loon Echo Land Trust	10,000
Manhoosue Land Trust	5,000
Maine Appalachian Trail Club, Inc	5,675
Maine Audubon Society	15,000
Maine Farmland Trust	5,000
Mainewatch Institute	15,000
Massachusetts Audubon Society The Monadnock Conservancy	5,000 5,000
National Fish and Wildlife Foundation	10,000
National Wildlife Federation	5,000
Natural Resources Council of Maine	5,000
New England Aquarium	5,000
New England Forestry Foundation	50,000
New Hampshire Lakes Association Northern Forest Center	3,250 12,500
NorthWoods Stewardship Center	10,000
Nova Scotia Nature Trust	9,000
Open Space Institute, Inc	15,000
Peaks Island Land Preserve	5,000
Penobscot East Resource Center	5,000
Phippsburg Land Trust	10,000
Plymouth State Univers.ty QLF/Atlantic Center for the Environment	10,000 5,000
Quoddy Regional Land Trust	25,000
Residents' Committee to Protect the Adirondacks	5,000
RESTORE. The North Woods (Refund)	(5,000)
Rockingham Land Trust	10,000
Scarborough Land Conservation Trust	15,000
Tanglewood Camp and Learning Center	10,000
Tin Mountain Conservation Center Town of Fryeburg	10,000 10,000
Tufts University School of Veterinary Medicine	7,095
Two Countries, One Forest	5,000
Union of Concerned Scientists	20,000
University of Maine at Orono	10,000
Upper Saco Valley Lanc Trust	10,000
Vermont Family Forests Foundation, Inc	5,000
Vermont Institute of Natural Science	6,600 5,000
Vermont Youth Conservation Corps, Inc NorwayParis Heritage Trust d/b/a Western Foothills Land Trust	5,000 10,000
Western Mountain Charitable Foundation	10,000
The Woods Hole Research Center, Inc	5,000
•	\$ 673,088
	