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Form 990-RF Department of the Treasury

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For calendar year 2012 or tax year beginning , and ending A Employer identification number Name of foundation CONWAY FOUNDATION 26-3006797 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 586-752-4496 3539 THIRTY THREE MILE ROAD City or town, state, and ZIP code C If exemption application is pending, check here ROMEO, MI 48065 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation . . . Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 151, 202. (Part I, column (d) must be on cash basis.) ▶\$ Part # Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purpos (cash basis only) expenses per books income ıncome 10,000. N/A Contributions, grits, grants, etc , received 2 Check Image if the foundation is not required to attach Sch. B 2,588. 3 Interest on savings and temporary cash investments . . . 2,588. STATEMENT 2,447. 2,447. STATEMENT Dividends and interest from securities 5a Gross rents ... Net rental income or (loss) 38,119 6a Net gain or (loss) from sale of assets not on line 10 110,161. 38,119. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit or (loss) -192.-192STATEMENT 11 Other income 52,962. 42,962. 12 Total. Add lines 1 through 11 0. 0 -Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages 15 Pension plans, employee benefits Expenses 16a Legal fees **b** Accounting fees 1,800. 1,800 0. c Other professional fees STMT 4 Operating and Administrative 17 Interest STMT 5 21. 21 0. 18 Taxes 19 Depreciation and depletion Оссиралсу 21 Travel, conferences, and meetings 22 Printing and publications STMT 6 1. 0. 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 1,822. 1,822. 9,900. 9,900. Contributions, gifts, grants paid 26 Total expenses and disbursements. 11,722. 1,822 9,900. Add lines 24 and 25 27 Subtract line 26 from line 12 41,240 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 41,140. N/A C Adjusted net income (if negative, enter_-0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2012)

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	art	Ralance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
	arı	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	511.	14,965.	14,965.		
	2	Savings and temporary cash investments					
	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					
	7	Other notes and loans recenable					
		Less allowance for doubtful accounts ▶					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock STMT .8	84,081.	66,479.	76,523.		
	C	Investments - corporate bonds STMT9	14,013.	58,530.	59,714.		
	11	Investments - land, buildings, and equipment basis	-				
		Less: accumulated depreciation					
	12	Investments - mortgage loans		· · · · · -			
	13	Investments - other					
	14	Land, buildings, and equipment: basis					
		Less: accumulated depreciation					
	15	Other assets (describe ►					
		· · · · · · · · · · · · · · · · · · ·					
	16	Total assets (to be completed by all filers)	98,605.	139,974.	151,202.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable		:			
	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here]		
		and complete lines 24 through 26 and lines 30 and 31.					
Ces	24	Unrestricted					
ě	25	Temporarily restricted]		
æ	26	Permanently restricted]		
Ind		Foundations that do not follow SFAS 117, check here					
F		and complete lines 27 through 31.					
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds	0.	0.	ļ		
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.			
As	29	Retained earnings, accumulated income, endowment, or other funds	98,605.	139,974.			
Š	30	Total net assets or fund balances	98,605.	139,974.			
	31	Total liabilities and net assets/fund balances	98,605.	139,974.			
Ö	es est	Analysis of Changes in Net Assets or Fund B	alances				
	CIFE	the interest of the light of the later of th					
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30				
	•	st agree with end-of-year figure reported on prior year's return)		. 1	98,605.		
		r amount from Part I, line 27a	•	. 2	41,240.		
		r increases not included in line 2 (itemize)	SEE ST.	ATEMENT 7 3	129.		
		lines 1, 2, and 3		. 4	139,974.		
		eases not included in line 2 (itemize)		5	0.		
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	139,974.		
					Form 990-PF (2012)		

Page 3

Part IV Capital Gains	and Loss	es for Tax on In	<u>ivestmen</u>	Income						
(a) List and desc 2-story brick w	enbe the kind(s arehouse; or c	s) of property sold (e.g ommon stock, 200 shs	, real estate, s MLC Co)		P-	ow acquire Purchase Donation	1 17	Date acqui (mo , day, yı		(d) Date sold (mo., day, yr)
1a										
b SEE ATTACHED	STATE	MENTS								
C										
d										
е	1				┸					•
(e) Gross sales price		eciation allowed rallowable)	, , , , ,	st or other basis expense of sale				(h) Gain oi (e) plus (f) n	. ,)
<u>a</u>										
<u>b</u>									_	<u> </u>
<u>d</u>										· ·
e 110,161.				72,03	38.				_	38,119.
Complete only for assets show	ng gain in colu	mn (h) and owned by t	the foundation	on 12/31/69				Gains (Col. (h		
(I) F M V. as of 12/31/69		djusted basis of 12/31/69		cess of col (i) col (j), if any				k), but not le: Losses (from		
<u>a</u>										
<u>b</u>										
<u>c</u>					-+		•			
<u>d</u>						•		-		38,119.
<u>e</u>		C 14	D. A.I. II		\neg	T		-		30,113.
2 Capital gain net income or (net c	•	If gain, also enter If (loss), enter -0-		7	}	2				38,119.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	, column (c)	ın sections 1222(5) an	id (6):		}			,	N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification L		tion 4940(e) for	Reduced	Tax on Net	l Inve	stmen	t Inco		N/A	
If section 4940(d)(2) applies, leave to was the foundation liable for the sectif "Yes," the foundation does not quate. 1. Enter the appropriate amount in	ction 4942 tax	ion 4940(e). Do not co	mplete this pa	rt					[Yes X No
1 Enter the appropriate amount in	each column	*	istructions be	iore making any e				ī	- (d)
Base period years Calendar year (or tax year beginn	ına ın)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) onchant	table-use a	ssets		Distribu	tión ratio led by col. (c))
2011	,		9,965.			123,	446.		. ,	.080724
2010			4,975.				460.			.051576
2009			0.				0.			.000000
2008			0.				0.			.000000
2007										
2 Total of line 1, column (d)	· .							2		.132300
3 Average distribution ratio for the the foundation has been in existe	-		on line 2 by 5,	or by the number	roryea 	rs		3		.033075
4 Enter the net value of nonchanta	ble-use assets	for 2012 from Part X,	line 5 .					4		146,525.
5 Multiply line 4 by line 3								5		4,846.
6 Enter 1% of net investment inco	me (1% of Par	t I, line 27b)						6		411.
7 Add lines 5 and 6								7		5,257.
8 Enter qualifying distributions from							-	8		9,900.
If line 8 is equal to or greater tha	n iine 7, check	the box in Part VI, line	io, and comp	nete that part usir	nga 1%	tax rate				
	,									

	26 200			
	990-PF (2012) CONWAY FOUNDATION 26-300 (rt.\forall Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	IIISIIU	CLIO	15)
13	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
_	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		4	11.
U	of Part I, line 27b		····	
_	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		4	11.
4	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		_	0.
-	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-	4	11.
	Credits/Payments			***************************************
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 625.			
	Backup withholding erroneously withheld 6d			
	Total credits and payments Add lines 6a through 6d		6	25.
	Enter any penalty for underpayment of estimated tax. Check here rf Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	14.
11	214 p		-	0.
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		Х
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ 0 . (2) On foundation managers ▶ \$			
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$0.			1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		L
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
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		v	1
	remain in the governing instrument?	6	<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
_	If "Yes," complete Part II, col. (c), and Part XV.	1		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MI If the appropriate line 7, has the foundation furnished a copy of Form 000. BE to the Atternay Copyril (or decignate)			
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	ph.	X	1
C	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	8b	4	
9	vear 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes." complete Part XIV	9		Х

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

orm	990-PF (2012) CONWAY FOUNDATION 26-300	<u> 5797</u>		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)		-	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	T		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	_11	i	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DANIEL J. CONWAY Telephone no ▶586-7	52-4	496	
	Located at ► 3539 THIRTY THREE MILE ROAD, ROMEO, MI ZIP+4 ►4	3065		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	_		\Box
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country	<u> </u>		
PE	ert 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	-		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	•		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	•		
	(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)?	-		
	(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.)			
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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 2012?	10		X
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))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	+		
	before 2012? Yes X No			
	If "Yes," list the years ▶			
D	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) N/A	2b		
G	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38	· · · · · · · <u> </u>			
_	during the year? Yes X No			
0	If "Yes," did it have excess business holdings in 2012 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 2012.) N/A	[
A-	- · · · · · · · · · · · · · · · · · · ·	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1960) that could incoording the charitable purpose that	4a	<u> </u>	<u> </u>
U	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 2012?	4.		Х
	nad not been removed from Jeopardy before the met day of the tax year beginning in 2012/	4b		Λ

Total Humber of Other employees paid over \$50,000		_	Form	990-PF (2012)
Total number of other employees paid over \$50,000	· · - ·		<u> </u>	0
	<u> </u>			
HOME				
NONE	υενοιεα το ροςπιοπ		compensation	allowances
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
2 Compensation of five highest-paid employees (other than those inc	·	enter "NONE."	(d) Contributions to	(a) Evnance
ROMEO, MI 48065	0.10	O.	0.	0.
3539 THIRTY THREE MILE ROAD	0.10			^
	DIRECTOR	1		
ROMEO, MI 48065	0.10	0.	0.	0.
3539 THIRTY THREE MILE ROAD		_		_
	DIRECTOR			
ROMEO, MI 48065	0.10	0.	0.	0.
3539 THIRTY THREE MILE ROAD	_	1		
	SECRETARY/DIR	ECTOR		
ROMEO, MI 48065	0.00	0.	0.	0.
3539 THIRTY THREE MILE ROAD		1		
DANIEL J. CONWAY	PRESIDENT/TRE	ASURER/DI	RECT	
(a) Name and address	to position	(If not paid, enter -0-)	compensation	account, other allowances
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
List all officers, directors, trustees, foundation managers and their	compensation.			
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roungation Ma	inagers, Highly	1	
b If 'Yes,' did the foundation receive any proceeds or have any net income attribu				7b
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Ye	es X No	
If "Yes" to 6b, file Form 8870.			 ∤	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		. []	ib X
·		L Ye	es X No	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[[] [
If "Yes," attach the statement required by Regulations section 53.4945			Į	
expenditure responsibility for the grant?	• •	I/A L YE	es L No	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
Organizations relying on a current notice regarding disaster assistance check h			▶∟⊥	
section 53 4945 or in a current notice regarding disaster assistance (see instru	•			b
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the exceptions described i	n Regulations	/-	
· · · · · · · · · · · · · · · · · · ·			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🛣 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		-	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	
any voter registration drive?	• •		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	1 1
5a During the year did the foundation pay or incur any amount to	OIII 4720 IIIay Do I	ioquii ou (comm	["	
Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F			9 / Page 6
Form 990-PF (2012) CONWAY FOUNDATION			26-30067	97 8

Form 990-PF (2012) CONWAY FOUNDATION	26-	<u>-3006797 Page 7</u>
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "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	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statenumber of organizations and other beneficiaries served, conferences convened, research papers pro-		Expenses
1 N/A		
]
2		-
		1
3		
		_
4		
		-
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 N/A	II IIII ES I ANU Z	Amount
		1
2		<u></u>
		-
All other program-related investments. See instructions		
U		
Total Add lines 1 through 2		

Form **990-PF** (2012)

26-3006797 Form 990-PF (2012) Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1 136,087. Average monthly fair market value of securities 1a 12,669. Average of monthly cash balances 1b 16 c Fair market value of all other assets 148,756. 1d d Total (add lines 1a, b, and c) ... Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) ... Acquisition indebtedness applicable to line 1 assets 148,756. 3 Subtract line 2 from line 1d 2,231. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 146,525. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 7,326. Minimum investment return. Enter 5% of line 5 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) 7,326. Minimum investment return from Part X, line 6 411 Tax on investment income for 2012 from Part VI, line 5 2a 2b Income tax for 2012. (This does not include the tax from Part VI) 411 2c Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 6,915. Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) 6,915. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 9,900. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a а Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 9,900. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

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5

6

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

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	FOUNDATION				006797 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · ·			
foundation, and the ruling is effective for		=	. ▶ ∟		
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(a) Total
income from Part I or the minimum	(a) 2012	(0) 2011	(6) 2010	(u) 2005	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	<u> </u>				-
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					
 Qualifying distributions made directly for active conduct of exempt activities. 					
Cultiment line Od from line On					
3 Complete 3a, b, or c for the					-
afternative test relied upon:					
a "Assets" alternative test - enter (1) Value of all assets					ļ
(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					<u> </u>
Part XV Supplementary Info			it the foundation	had \$5,000 or n	nore in assets
1 Information Regarding Foundation	· · · · · · · · · · · · · · · · · · ·				
a List any managers of the foundation wh	-	than 2% of the total contr	nbutions received by the	foundation before the c	lose of any tax
year (but only if they have contributed i			•		•
SEE STATEMENT 10			_		
b List any managers of the foundation whether entity) of which the foundation has			or an equally large portion	on of the ownership of a	partnership or
NONE	-				
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
Check here ► X If the foundation (ot accept unsolicited re	quests for funds. If
the foundation makes gifts, grants, etc	(see instructions) to indiv	viduals or organizations u	nder other conditions, co	omplete items 2a, b, c, a	nd d.
a The name, address, and telephone num	nber or e-mail of the perso	on to whom applications s	hould be addressed	<u> </u>	
b The form in which applications should	be submitted and informa	tion and materials they sh	ould include		<u>.</u>
c Any submission deadlines		<u> </u>			
A A succession of the second o	la anala as b				
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields,	KINGS OT INSTITUTIONS, OF C	other factors	

Part XVI-A	Analysis o	f Income-	Producing	Activities
	Allai Joio o			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Enter gross amounts unless otherwise indicated	Unrelated	business income		t by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	Code		1000		
a		_ _	+ +		
b	 		+ +		
			+ + + -		
<u> </u>			+		
e			 		
g Fees and contracts from government agencies		<u> </u>	+		
2 Membership duce and acceptements			+ +		
3 Interest on savings and temporary cash	· · · -		+ +		
investments			14	2.588	
A Dividende and interest from securities			14	2,588. 2,447.	
5 Net rental income or (loss) from real estate:			1		
- · · · · · · · · · · · · · · · · · · ·			† 		
1 At 4 1 1 4 5	 				
6 Net rental income or (loss) from personal		····	 - -		
property	 		14	-192.	
7 Other investment income 8 Gain or (loss) from sales of assets other		 	+	1,20	
than inventory			18	38,119.	
9 Net income or (loss) from special events			+	30/1136	
10 Gross profit or (loss) from sales of inventory	h			-	
I1 Other revenue.			+ - +		
	1 1				
a b	· · · · ·		 		
			 -		· · · · · · · · · · · · · · · · · · ·
<u> </u>	l		1 1		
d	1		+		
12 Subtotal Add columns (b), (d), and (e)		0.		42,962.	0.
13 Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	42,962.
(See worksheet in line 13 instructions to verify calculations)	•	•		<u>. </u>	
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incore the foundation's exempt purposes (other than left).	ne is reported in	column (e) of Part XVI-A			lishment of
			-		
					<u>.</u>
				·	
	- .				. <u> </u>
		<u> </u>			··· · · · · · · · · · · · · · · · · ·
		-			
					
		 		-	
					
•					

Firm's address ► 305 WEST BIG BEAVER ROAD TROY, MI 48084

<u>orm 99</u>	0-PF (20	012) CONWA	Y FOUNDA'I	NOI			_		26-3	<u>00</u> 6797	Pa	ige 13
Part	XVII	Information Re Exempt Organ		sfers To a	and Transaction	ns an	d Relations	hips Wit	h Non	charitabl		
1 Die	the org	anization directly or indi	rectly engage in any	of the followin	g with any other organ	nization	described in sec	tion 501(c) o	f		Yes	No
the	Code (other than section 501(c)	(3) organizations) (or in section 52	?7, relating to political o	organiza	itions?					
a Tra	ansfers f	rom the reporting found:	ation to a nonchanta	able exempt or	ganization of:	-						
	Cash	, •								1a(1)		Х
	Other		•••	•	•	•		•• ••		1a(2)		Х
	her trans	-	•••				• ••		••			
		of assets to a noncharital	hla avamnt arazniza	ition						1b(1)		Х
								•	•• ••		1	X
		ases of assets from a no		urganization						1b(2)		X
		of facilities, equipment,						• •		1b(3)	-	
(4)		ursement arrangements					• • • • • • • • • • • • • • • • • • • •			1b(4)		X
(5)) Loans	or loan guarantees .					•			1b(5)	ļ	X
(6)	Perfor	mance of services or me	mbership or fundra	ısıng solicitatio	ns					1b(6)		X
c Sh	aring of	facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees					10	L	X
d Ift	he answ	er to any of the above is	"Yes," complete the	following sche	dule Column (b) shou	ıld alway	ys show the fair	market value	of the go	ods, other as	sets,	
		given by the reporting for the value of the goods,			ed less than fair marke	t value i	n any transactio	n or shanng a	arrangem	ent, show in		
a) Line i		b) Amount involved			exempt organization		(d) Description	n of transfers, t	ransactions	s, and shanng a	rangeme	ents
	" '		(5)	N/A			(.,			,		
				217 22							-	
	-										-	
	_											
	_											
	_	<u> </u>										
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		· · · ·										
		•	-		•							-
									-			
												
	-											
		dation directly or indirection of the Code (other	-			rganizat 	tions described			Yes	X	No
b If	Yes," co	mplete the following sch			Y-							
		(a) Name of org	anization		(b) Type of organization	tion		(c) Descripti	on of rela	tionship		
		N/A										
	-											
	Under	penalties of perjury, I declare	that I have examined th	ns return, includir	ng accompanying schedule	≈ and sta	atements, and to th	best of my kno	owiedge	Maritha IDC	diamina	M
Sign Here		lief it is true, correct, and cor	polete. Declaration of p	reparer (other tha	n taxpayer) is based on all	_	on of which of a line of PREST	ĎĔŇŦŸŦ	ŔĔas	May the IRS return with the shown below	re prepar (see ins	rer
	Sign	ature of officer or trustee			Date		Trtle					
		Print/Type preparer's na	ame /	Preparer's s	gnature)	0	ate	Check] II [PTIN		
		1		()	'H		1 1	self- emplo	yed			
Paid		Moorrel Bel	ZEY	1 har.	-+->	Q8+	11/6/13			P00360	664	
Prep		Firm's name ► DOE	REN MAYHI	≅W				Firm's FIN		-24925		-
مر د حمالا	O-1-											

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

26-3006797 CONWAY FOUNDATION 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 X 501(c)(3) exempt private foundation Form 990-PF 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** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not total to 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 of \$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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

CONWAY FOUNDATION

26-3006797

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	DANIEL AND CATHY CONWAY 3539 33 MILE ROAD ROMEO, MI 48065	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	•	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· · ·			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

CONWAY FOUNDATION

26-3006797

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
		- - - - \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 4 Employer identification number Name of organization CONWAY FOUNDATION 26-3006797 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III year. 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.) Use duplicate copies of Part III if additional space is needed. (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (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

26-3006797 PAGE Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co. (mo , day, yr) (mo, day, yr) D - Donation 1a CENTENE CORP D 12/02/0301/10/12 b DEVON ENERGY CORP 09/23/0301/10/12 D c MEAD JOHNSON NUTRITION CO 02/10/0901/10/12 D d PHILIP MORRIS INTL INC 02/13/0101/10/12 D e CENTENE CORP D 12/02/0301/20/12 \overline{P} f QUANTA SVCS INC 12/09/1002/03/12 VANGUARD NATURAL RESOURCES P 12/06/1002/13/12 h ROYAL GOLD INC 09/26/1103/08/12 p P 10/28/1103/08/12 i ROYAL GOLD INC | PHILIP MORRIS INTL INC D 02/13/0103/14/12 k METLIFE INC P 01/24/1203/15/12 | OCCIDENTAL PETE CORP P 08/03/1003/29/12 11/04/1003/29/12 m OCCIDENTAL PETE CORP P n CALL DEVON ENERGY 02/23/1204/09/12 P MERITAGE HOMES CORP 01/20/1204/10/12 P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 24,027 16,093. 7,934. a 13,208. 4,860. 8,348. b $7,\overline{112}$ 2,401. 4,711. C 7,719. 2,515. 5,204. d 1,734. 1,170. 564. е 2,222. 1,985. 237. 2,032. 2,011. 21. g $1,\overline{377}$ -41. 1,336. h 735. -67. 668. ı 5,108. 1,509. 3,599. 2,625. 2,589. 36. 926. 798. 128. 1,701. 853. 152. m 294. 106. 188. n 5,065. 5,010. 55. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col. (k), (j) Adjusted basis (k) Excess of col (i) (i) F.M V as of 12/31/69 but not less than "-0-") over col (j), if any as of 12/31/69 7,934. $8,\overline{348}$. b 4,711.C 5,204. đ 564. 8 237. f 21. g -41.h -67. 3,599. 36. 128. -1 m 152. 188. n 55. 0 If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 2 Capital gain net income or (net capital loss) 2 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)

If (loss), enter "-0-" in Part I, line 8

i MANITOWOC

j MANITOWOC

а

b

C

d

g

h

m

n

0

CONTINUATION FOR 990-PF, PART IV 26-3006797 PAGE OF 3 Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold P - Purchase D - Donation 2-story brick warehouse, or common stock, 200 shs MLC Co. (mo., day, yr) (mo, day, yr) 1a OLD REPUBLIC INTL CORP 04/07/1007/31/12 b PHILIP MORRIS INTL INC D 02/13/0108/21/12 04/23/1008/23/12 c DR PEPPER SNAPPLE GROUP P d UNITED PARCEL SERVICE P 12/08/1109/10/12 e GENESEE & WYOMING INC P 06/28/0409/14/12 f LAZARD LTD 03/11/0909/14/12 D g MEAD JOHNSON NUTRITION CO D 02/10/0909/14/12 09/17/1009/14/12 h MANITOWOC INC P 09/30/1009/14/12 INC P INC P 08/29/1109/14/12 k CALUMET SPECIALTY PRODUCTS P 07/31/1210/10/12 | CALUMET SPECIALTY PRODUCTS P |07/31/12|10/16/12 m MEAD JOHNSON NUTRITION CO 02/10/0910/17/12 D n GENERAL MOTORS 4.75% CONV P 11/19/1011/19/12 4.75% CONV 03/23/1111/19/12 o GENERAL MOTORS P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -977. 1,371 2,348. 657. 908. 251. 210. 885 675. 2,173. 2,196. -23. 3,276. 790. 2,486. $2,\overline{489}$ 3,075. 586. 3,7751,200. 2,575. 321. 1,138. 817. 758. 615. 143. 224. 910. 686. 449. 385. 64. 455. 385. 70. 3,580. 1,200. 2,380. $3,\overline{887}$ 5,067.-1,180.3,887.4,812. -925.

Complete only for assets showing	g gain in column (h) and owned by	(I) 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	Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-977.
b			657.
			210.
			-23.
			2,486.
			586.
			2,575.
			321.
			143.
			224.
	-		64.
-			70.
			2,380.
			-1,180.
			-925.
Capital gain net income or (net cap	ortal loss) - { If gain, also ente	er in Part I, line 7 0-" in Part I, line 7	2
Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		nd (6)	

If (loss), enter "-0-" in Part I, line 8

, CONTAIN	FOUNDATIO	NT.		NTINU -3006	ATION FOR		PART IV
Part IV		sses for Tax on Investment Income	·	-3000	191 P	AGE 3	OF 3
	(a) List and	I describe the kind(s) of property solute rick warehouse, or common stock, 2	ld, e g , real estate,		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a URBA	N OUTFITTE				P	03/14/12	
		FITCH CO		-	P	03/14/12	
		LTY PRODUCTS K-1			P		
đ						_	
е							
f							
g						_	
h :		 			· · · · · · · · · · · · · · · · · · ·		
<u>i</u>					-		<u> </u>
<u> </u>					 		
ı. I							
m		-			·		
П							-
0							
(e) G	iross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
a	2,316.		1,6	97.			619.
b	1,389.		1,5	65.		<u> </u>	-176.
<u>c</u>							-4.
<u>d</u>							
0 f							
					 ·		
<u>g</u> h							
1							-
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m							
<u>n</u>							
Complet	to only for accets chawle	g gain in column (h) and owned by	the foundation on 12/21/60		W.L	(6 (1-1)	
	V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (excess of	ses (from col. (h)) of col (h) gain ove ot less than "-0-")	r col. (k),
a			***			<u></u>	619.
<u></u> b							-176.
С					 		-4.
d				_			
e			<u> </u>	_		<u> </u>	
<u>f</u>							
<u>g</u>							
<u>h</u> _							
<u> </u>							
<u>) </u>							
<u> </u>						_	-
m		· · · · · · · · · · · · · · · · · · ·					
n							
0							
2 Capital ga	ain net income or (net ca	ipital loss) { If gain, also ente If (loss), enter "-(r in Part I, line 7 0-" in Part I, line 7	2			38,119.

N/A

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)

If (loss), enter "-0-" in Part I, line 8

Part XV Supplementary Informati	on	***		
3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual,	T	T	
necipietti	show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of	contribution	Amount
	or substantial contributor	recipient		
LMOST HOME ANIMAL RESCUE	NONE	PUBLIC CHARITY	TO RESCUE MISTREATED	
P.O. BOX 250602			OR HOMELESS ANIMALS	
WEST BLOOMFIELD, MI 48325			AND PLACE THEM IN	
			LOVING ENVIRONMENTS	1,000
RONALD MCDONALD HOUSE	NONE	PUBLIC CHARITY	PROVIDE FAMILIES	· -
1600 WASHINGTON HEIGHTS			STABILITY AND	
ANN ARBOR, MI 48104			RESOURCES SO THEY CAN	
,			KEEP THEIR CHILD	
			HEALTHY AND HAPPY	
	··	 	HEALTHI AND HAPPI	1,567
	L	L	L	
TEACH FOR AMERICA	NONE	PUBLIC CHARITY	TO ENSURE THAT KIDS	
19 8TH AVENUE, 15TH FLOOR			GROWING UP IN POVERTY	
IEW YORK, NY 10018			GET AN EXCELLENT	
			EDUCATION	1,000
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FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY C	ASH :	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
LINN ENERGY LLC RBC RBC RBC RBC			-	2	1. 75. 61. 50.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		=	2,5	88.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GROSS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A	.)
LAZARD LTD.	172. 2,275.		0.	1 2,2	72. 75.
TOTAL TO FM 990-PF, PART I, LN 4	2,447.		0.	2,4	47.
FORM 990-PF O	THER INCOME			STATEMENT	3
DESCRIPTION	(A) REVENUE PER BOOK	s	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
VANGUARD NATURAL RESOURCES-ORDINAR INCOME LINN ENERGY LLC CALUMET SPECIALTY PRODUCTS PARTNER SAN JUAN BASIN ROYALTY TRUST VANGUARD NATURAL RESOURCES-ORDINAR GAIN	- s y	-10. 260. -33. -22.		•	
TOTAL TO FORM 990-PF, PART I, LINE	11 -	192.	-192		

FORM 990-PF O	THER PROFES	SIONAL FEES	S'	TATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
INVESTMENT ADVISORY FEES	1,800.	1,800.			0.
TO FORM 990-PF, PG 1, LN 16C =	1,800.	1,800.			0.
FORM 990-PF	TAX	ES	S	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
EODERAN ENVEG	21.	21.			0.
FOREIGN TAXES					
_	21.	21.			0.
TO FORM 990-PF, PG 1, LN 18 =	OTHER E		S	ТАТЕМЕПТ	
TO FORM 990-PF, PG 1, LN 18 =			(C) ADJUSTED NET INCOME	TATEMENT (D) CHARITAI PURPOSI	6 BLE
TO FORM 990-PF, PG 1, LN 18 = FORM 990-PF DESCRIPTION OTHER PORTFOLIO DEDUCTIONS	OTHER E. (A) EXPENSES	XPENSES (B) NET INVEST-	(C) ADJUSTED	(D) CHARITAI	6 BLE ES
TO FORM 990-PF, PG 1, LN 18 = FORM 990-PF DESCRIPTION OTHER PORTFOLIO DEDUCTIONS FROM K-1'S	OTHER E. (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITAI	BLE ES
FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION OTHER PORTFOLIO DEDUCTIONS FROM K-1'S TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER INCREASES	OTHER E (A) EXPENSES PER BOOKS 1.	XPENSES (B) NET INVEST- MENT INCOME 1.	(C) ADJUSTED NET INCOME	(D) CHARITAI	BLE ES 0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION OTHER PORTFOLIO DEDUCTIONS FROM K-1'S TO FORM 990-PF, PG 1, LN 23	OTHER E (A) EXPENSES PER BOOKS 1.	XPENSES (B) NET INVEST- MENT INCOME 1.	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	6 BLE ES
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION OTHER PORTFOLIO DEDUCTIONS FROM K-1'S TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER INCREASES	OTHER E (A) EXPENSES PER BOOKS 1. 1. IN NET ASS	(B) NET INVEST- MENT INCOME 1. 1. ETS OR FUND BA	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI TATEMENT AMOUNT	6BLEES 0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
RBC		66,479.	76,523
TOTAL TO FORM 990-PF, PA	RT II, LINE 10B	66,479.	76,523
FORM 990-PF	CORPORATE BONDS		STATEMENT S
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
RBC		58,530.	59,714
TOTAL TO FORM 990-PF, PA	RT II, LINE 10C	58,530.	59,714
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGE	un a	STATEMENT 10

NAME OF MANAGER

DANIEL J. CONWAY CATHY L. CONWAY

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	- Charles Courted						
If you	are filing for an Automatic 3-Month Extension, complet	e only Pa	rt i and check this box	•		ightharpoonup X	
If you	are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II (on page 2 of	this form).			
Do not	complete Part II unless you have already been granted a	ın automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.		
	nic filing (e-file). You can electronically file Form 8868 if y						
-	to file Form 990-T), or an additional (not automatic) 3-mor						
of time t	o file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for	Transfers A	Associated With	Certain	
Persona	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	on the elec	tronic filing of the	s form,	
visit wwi	w.irs.gov/efile and click on e-file for Charities & Nonprofits						
Part I							
•	ration required to file Form 990-T and requesting an auton	natic 6-mc	onth extension - check this box and	complete		. []	
Part I on		ico and t		 ot an axtan			
	corporations (including 1120-C filers), partnerships, REM.	os, and u	rusts must use Form 7004 to reques				
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employer	dentification nu	mber (EIN) or	
print	CONWAY FOUNDATION				26-3006	797	
File by the due date for			tions.	Social se	curity number (S	(SSN)	
filing your return See instructions			ress see instructions	l			
	ROMEO, MI 48065	or cigir dad					
						[]	
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Applica	lion	Return	Application			Return	
ls For		Code	Is For			Code	
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 99	0-BL	02	Form 1041-A			08	
Form 47	20 (individual)	03	Form 4720			09	
Form 99	0-PF	04	Form 5227			10	
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 99	0-T (trust other than above)	06	Form 8870			12	
	DANIEL J. CONWA						
	pooks are in the care of ► 3539 THIRTY THE	REE M		MI 48	065		
	phone No. ► 586-752-4496		FAX No. ▶			. \Box	
	organization does not have an office or place of business					▶ □	
	s is for a Group Return, enter the organization's four digit	ì					
	. If it is for part of the group, check this box				ers the extension	ı is for.	
1 Ir	equest an automatic 3-month (6 months for a corporation AUGUST 15, 2013, to file the exemption of the components of the		to file Form 990-T) extension of time tion return for the organization nam		The extension		
-	for the organization's return for:	t Organiza	tion return for the organization ham	cu above.	THE EXCENSION		
15	X calendar year 2012 or						
		, an	d ending				
	tax year oeginning	,			 -		
2 If	the tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return	Final retur	n		
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, 0	or 6069, e	nter the tentative tax, less any				
	onrefundable credits. See instructions.			3a	\$	625.	
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
	stimated tax payments made. Include any prior year overp			3ь	\$	0.	
	alance due. Subtract line 3b from line 3a. Include your pa						
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	625.	
Caution	. If you are going to make an electronic fund withdrawal y	vith this Fo	orm 8868, see Form 8453-EO and F	orm 8879-	EO for payment I	nstructions.	

Form 886	68 (Rev. 1-2013)				Page 2
● If yoù	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check thi	s box	X
Note. On	nly complete Part II if you have already been granted an a	automatic	3-month extension on a previously t	filed Form 8868.	
	are filing for an Automatic 3-Month Extension, comple			<u> </u>	
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no copies needed).	<u> </u>
			Enter filer's	identifying number, see in	structions
Type or	Name of exempt organization or other filer, see instru	ictions		Employer identification num	nber (EIN) or
print	CONWAY FOUNDATION				
File by the	26-30067	97			
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 3539 THIRTY THREE MILE ROAD	ee instruc	tions.	Social security number (SS	N)
instructions	City, town or post office, state, and ZIP code. For a for ROMEO, $MI = 48065$	oreign add	dress, see instructions.		
Cataziba	Return code for the return that this application is for (file	a copara	te application for each return)		0 4
	Return code for the return that this application is for this	e a separa	te application for each return)		<u> </u>
Applicat	ion	Return	Application		Return
ls For		Code	Is For	······································	Code
Form 990	0 or Form 990-EZ	01			
Form 990	0-BL	02	Form 1041-A		08
	20 (individual)	03	Form 4720		09
Form 990		04	Form 5227		10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
	0-T (trust other than above)	06	Form 8870		12
STOP! D	o not complete Part II if you were not already granted		natic 3-month extension on a prev	nously filed Form 8868.	
	DANIEL J. CONWA cooks are in the care of ► 3539 THIRTY THI		TIE BOND - BOMEO	MT 49065	
	ooks are in the care of 3339 1111K11 1111 hone No. ► 586-752-4496	KEE M.	FAX No. ►	HI 40003	
-		a ia tha 1 le			
	organization does not have an office or place of business is for a Group Return, enter the organization's four digit			If this is for the whole group	ah aak thia
box ►	. If it is for part of the group, check this box	7	ach a list with the names and EINs o		
			BER 15, 2013.	Tail members the extension	<u> 5 UI.</u>
	r calendar year 2012 , or other tax year beginning		, and endin	10	
	he tax year entered in line 5 is for less than 12 months, c	heck reas		Final return	·
	Change in accounting period				
7 Sta	ate in detail why you need the extension				
	DDITIONAL TIME IS NEEDED TO	ACQUI	RE THE INFORMATION	NECESSARY TO	
$\overline{\mathbf{P}}$	REPARE A COMPLETE AND ACCURA	TE RE'	TURN.	<u>–</u>	
8a If ti	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		
noi	nrefundable credits. See instructions.			8a \$	<u>625.</u>
b If the	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		
tax	payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid		
pr	eviously with Form 8868.			8b \$	625.
с Ва	lance due. Subtract line 8b from line 8a. Include your pa	ayment wit	th this form, if required, by using		
EF	TPS (Electronic Federal Tax Payment System). See instru			8c \$	<u> </u>
	_		st be completed for Part II	•	
	ialties of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo		panying schedules and statements, and t	o the best of my knowledge and	belief,
Signature	► Title ► (CPA		Date ►	