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# Form 990-PF Department of the Treasury Internal Revenue Service

Name of foundation

For calendar year 2013 or tax year beginning

CONWAY FOUNDATION

**Return of Private Foundation** 

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

Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

and ending

2013

A Employer identification number

26-3006797

Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 3539 THIRTY THREE MILE ROAD 586-752-4496 City or town, state or province, country, and ZIP or foreign postal 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 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 F 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 177,739. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (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)) expenses per books income income 10,851. N/A Contributions, gifts, grants, etc., received Check ▶ [ ] If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3,936 3,936 STATEMENT SCANNEL DEC 0 1 2014 2,871 2,871 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 5,652 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 5,652. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications EIVED 10a Gros Cost of goods sold c Gross Mofit of (loss) 2 5 <u>33</u>, 33 11 Other income STATEMENT 23,343. 12,492 Total. Add lines (10 ppg 11) 12 Compensation of officers, directors, truste Ο. 0 . 0. Other employee salanes and wages 15 Pension plans, employee benefits Expenses 16a Legal fees **b** Accounting fees STMT 4 2,134. 2,134 c Other professional fees Operating and Administrative 19. 17 Interest 19. 18 Taxes STMT 5 855 4 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 53. 53 0. 24 Total operating and administrative 3,061. 2,210. 0. expenses. Add lines 13 through 23 10,000. 25 Contributions, gifts, grants paid 10,000.

13,061

10,282.

2,210

10,282

N/A

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

26 Total expenses and disbursements.

Add lines 24 and 25

27 Subtract line 26 from line 12

Form **990-PF** (2013)

10,000.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	139,974.
2	Enter amount from Part I, line 27a	2	10,282.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	150,256.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 7	5	607.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	149,649.

Form 990-PF (2013) CON	WAY I	FOUNDATION						2	6-3006	5797	Page 3
Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income							
		nd(s) of property sold (e g or common stock, 200 shs			(b) I P D	low acqu - Purcha - Donati	uired se on		acquired lay, yr )	(d) Dai (mo , d	
1a											
b SEE ATTACHED	STĀ!	<b>FEMENTS</b>									
<u>d</u>											
е					<u></u>						
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss) s (f) minus (g	9)	
a											
_b	<u> </u>										
C	ļ										
<u>d</u>				40.10	_						
e 48,759.	_			43,10	/ •					5	<u>,652.</u>
Complete only for assets show	ng gain in	column (h) and owned by t	he foundation	on 12/31/69					ol (h) gain i		
(i) FMV as of 12/31/69	(	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			COI		not less than (from col. (h		
<u>a</u>									<del> </del>		
<u>b</u>											
<u>C</u>											
<u>d</u>											<u> </u>
<u>e</u>					_						<u>,652.</u>
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				5	<b>,</b> 652.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	•		d (6)		Ĵ						
If (loss), enter -0- in Part I, line 8	,					3			N/A		
Part V Qualification \	Jnder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estme	ent Inco	me			
(For optional use by domestic prival	e foundats	ons subject to the section 4	940(a) tax on	net investment in	come	:)					
If section 4940(d)(2) applies, leave	hie nart hl	ank									
Was the foundation liable for the sec	ction 4942	tax on the distributable am	ount of any ye	ar in the base per	nod?					Yes	X No
If "Yes," the foundation does not qua											
1 Enter the appropriate amount in	each colui	nn for each year, see the in	structions bef	ore making any e	ntries			T		/d\	
(a) Base period years	l	(b)		Net value of no	(c)	etabla			Distribi	(d) ition ratio	
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist		ivet value of flo	пспа				(col (b) divi		
2012			9,489.				,525				64760
2011			9,965.				,446.				80724
2010			4,975.			96	,460.				51576
2009			0.				0.				00000
2008			0.				0.	<del>'</del>			00000
										1	07060
2 Total of line 1, column (d)								2			<u>97060</u>
3 Average distribution ratio for the	-		in line 2 by 5,	or by the number	of ye	ars				0	20412
the foundation has been in existe	ence if less	than 5 years						3			39412
4 Enter the net value of noncharita	ble-use as:	sets for 2013 from Part X, I	ine 5					4		163	,063.
5 Multiply line 4 by line 3								5		6	,427.
6 Enter 1% of net investment inco	me (1% of	Part I. line 27b)						6			103.
7 Add lines 5 and 6	,	· ·, · · · ·		• • •	••	• • • •		7		6	,530.
·		• • • • • • • • • • • • • • • • • • • •	•			•					
8 Enter qualifying distributions fro	m Part XII,	line 4						8		10	<u>,000.</u>
If tine 8 is equal to or greater tha	n line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax rat	е				
See the Part VI instructions			<del></del>							200	DE :::

	,							
Forr	1990-PF (2013) CONWAY FOUNDATION				26-3	006793	7	Page 4
_	rt VI Excise Tax Based on Investment Income (Section 49	40(a), 4	940(b), 4940	(e), or 4				
12	Exempt operating foundations described in section 4940(d)(2), check here and			ì		·······		
	Date of ruling or determination letter (attach copy of letter if n			- 1				
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			•	1		1	103.
	of Part I, line 27b					7777		
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4	% of Part	I, line 12, col (b)	)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only				2			0.
3	Add lines 1 and 2		•		3			103.
4	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others en	ter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		•		5		1	103.
6	Credits/Payments						**.	
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a		438.				
	Exempt foreign organizations - tax withheld at source	6b			1 1			
	Tax paid with application for extension of time to file (Form 8868)	6c		<u> </u>	1 1			
	Backup withholding erroneously withheld	6d			1 1			
	Total credits and payments Add lines 6a through 6d				7		4	138.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is at	tached			8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			•	10		3	335.
	Enter the amount of line 10 to be Credited to 2014 estimated tax		335 . Ref	unded >	11			0.
	rt VII-A Statements Regarding Activities		1					
12	During the tax year, did the foundation attempt to influence any national, state, or local leg	uslation or	did it participate	or intervene	ın .		Yes	No
	any political campaign?	,				1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses (see	instructions for th	e definition	)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a					1	1	1
	distributed by the foundation in connection with the activities.							
	Did the foundation file Form 1120-POL for this year?					10	ĺ	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	he vear:			-			
	(1) On the foundation > \$ 0 • (2) On foundation manage	-		0.				
6	Enter the reimbursement (if any) paid by the foundation during the year for political experi			lation	-			
	managers ▶\$ 0.		•					
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.					11 1111		<b>!</b>
3	Has the foundation made any changes, not previously reported to the IRS, in its government	ınstrume	nt, articles of inco	rporation.	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chan	ges	·			3	İ	1 x
42	Did the foundation have unrelated business gross income of \$1,000 or more during the y	-				4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N/			<b>†</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	rγ		•		5		X
	If "Yes," attach the statement required by General Instruction T.						·	1
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 mandat	ory direction	ons that conflict w	ith the state	e law	1		
	remain in the governing instrument?	•				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete l	Part II, col. (c), a	nd Part XV	,	7	Х	
		·						
82	Enter the states to which the foundation reports or with which it is registered (see instruct	ions)						
	MI	,				_		
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney (	General (or design	ate)	•	_		
	of each state as required by General Instruction G? If "No," attach explanation	•		•		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of	section 49	42(j)(3) or 4942(i	(5) for cale	ndar		1	
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"					9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sche			esses		10		X

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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Part VII-B. Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	. <b> Y</b> o	es X No		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire	ectly,			
any voter registration drive?		Yo	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	, ,	Y <sub>1</sub>	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section		į		
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	or			
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instri			N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check l		•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption is	**	ined	_		
expenditure responsibility for the grant?		/A 🔲 Y	es No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		i		
a personal benefit contract?	End brannanna an		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	х
If "Yes" to 6b, file Form 8870.			•	-	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	+
Part VIII Information About Officers, Directors, Trust		nagers. Highly			
Paid Employees, and Contractors	,	go.o,g	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) E	xpense int, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	accou	int, other wances
DANIEL J. CONWAY	PRESIDENT/TRE	ASURER/DI			
3539 THIRTY THREE MILE ROAD	1				
ROMEO, MI 48065	0.00	0.	0.		0.
CATHY L. CONWAY	SECRETARY/DIR	ECTOR			
3539 THIRTY THREE MILE ROAD	1				
ROMEO, MI 48065	0.10	0.	0.	.]	0.
JENNIFER HAUTIMAKI	DIRECTOR				
3539 THIRTY THREE MILE ROAD					
ROMEO, MI 48065	0.10	0.	0.		0.
JESSICA CONWAY	DIRECTOR				
3539 THIRTY THREE MILE ROAD					
ROMEO, MI 48065	0.10	0.	0.	İ	0.
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."	<u>-</u>		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deferred compensation		wances
NONE					
			-		
				<u> </u>	
		L		<u> </u>	
Tetal number of other employees paid over \$50,000					- 11

Form 990-PF (2013) CONWAY FOUNDATION	26–300	6797 Page 7
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."	<del></del>
(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 stat number of organizations and other beneficiaries served, conferences convened, research papers pr	istical information such as the oduced, etc	Expenses
1 N/A		
2		-
3		
4		<del>-</del>
Part IX-B Summary of Program-Related Investments		<del>_</del> ·
Describe the two largest program-related investments made by the foundation during the tax year o	in lines 1 and 2	Amount
1 N/A	THINGS TAILO E	Amount
2		
All other program-related investments. See instructions  3		

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а		1a	158,887.
b		1b	158,887. 6,659.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	165,546.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)   1e   0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	165,546.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,483.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	163,063.
6	Minimum investment return. Enter 5% of line 5	6	8,153.
P	<b>Tart XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	8,153.
2a	Tax on investment income for 2013 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	103.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,050.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	8,050.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	8,050.
P	Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u></u>
3	Amounts set aside for specific charitable projects that satisfy the		
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	10,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	103.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	9,897.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for th	ne section

Form **990-PF** (2013)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7		···-		8,050.
2 Undistributed income, if any, as of the end of 2013	· · · · · · · · · · · · · · · · · · ·		· · ·	0,030.
a Enter amount for 2012 only			0.	
b Total for prior years		0.		.,(. 1
3 Excess distributions carryover, if any, to 2013	7.1111 II II		<del>                                     </del>	
a From 2008				
b From 2009				
s From 2010 372.				
d From 2011 3,863.				
e From 2012 2,985.				
f Total of lines 3a through e	7,220.	······	······	
4 Qualifying distributions for 2013 from				
Part XII, line 4 ► \$ 10,000 .			_	
a Applied to 2012, but not more than line 2a	<u> </u>	1.11	0.	- <del></del>
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	. ,,,, . ,		
d Applied to 2013 distributable amount	1 050			8,050.
e Remaining amount distributed out of corpus	1,950.		, 'd <del>'</del> !###	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,170.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must	į.			•
be distributed in 2014			'l., ,,,,,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	9,170.			
F	7,170.			
10 Analysis of line 9 a Excess from 2009				
b Excess from 2010 372.				
c Excess from 2011 3,863.				į
d Excess from 2012 2,985.				
e Excess from 2013 1,950.				
				<del></del>

	FOUNDATION				06797 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	· <del></del>
1 a If the foundation has received a ruling of			İ		
foundation, and the ruling is effective fo		-	▶ └		
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 0040	Prior 3 years	(4) 0040	(-) 7-4-1
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					-
<b>b</b> 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed				<del>-</del>	<u> </u>
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	-				<del>-</del>
alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" afternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info		• . •	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	<del></del>	uctions.)	<del></del>		<del></del>
1 Information Regarding Foundation	-				
a List any managers of the foundation wh year (but only if they have contributed r	o have contributed more	than 2% of the total conf	tributions received by th	e foundation before the clo	se of any tax
• • •	note than \$5,000) (See S	ection 507(a)(2) )			
SEE STATEMENT 10					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large port	tion of the ownership of a p	artnership or
NONE	o a 10 % of groater interes				
	: O O O	0.b.b			
2 Information Regarding Contribut Check here ► X If the foundation of			=		
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	·				
b The form in which applications should be	pe submitted and information	tion and materials they s	hould include		
c Any submission deadlines.		,			
d Any restrictions or limitations on award	s such as by apparanhies	il areas, charitable fields	kinds of institutions or	other factors	
2 7my rostrictions of militations on award	o, addir as by govyrapillo	ir areas, enantable licius.	, milius of institutions, of	outer meters	
<del> </del>					

CONWAY FOUNDATION Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year BEST FRIENDS NONE PC TO REDUCE THE NUMBER 5001 ANGEL CANYON ROAD OF EUTHANIZED ANIMALS **KANAB, UT 84741** IN SHELTERS 1,750. CAL RIPKEN SR. FOUNDATION NONE PC BUILD CHARACTER & 1427 CLARKVIEW ROAD, STE. 100 TEACH CRITICAL LIFE BALTIMORE, MD 21209 LESSONS TO DISADVANTAGED YOUNG PEOPLE 1,000. NONE DETROIT INSTITUTE OF ARTS PC CREATING EXPERIENCES 5200 WOODWARD AVENUE THAT HELP EACH VISITOR DETROIT, MI 48202 FIND PERSONAL MEANING IN ART 1,000. UNICEF NONE PC PROVIDES CHILDREN WITH 125 MAIDEN LANE HEALTH CARE, CLEAN NEW YORK, NY 10038 WATER, NUTRITION & MORE 1,750. CURE ALZHEIMER'S FUND NONE PC TO FUND RESEARCH WITH 34 WASHINGTON ST. THE HIGHEST WELLESLEY, MA 02481 PROBABILITY OF PREVENTING, SLOWING OR REVERSING ALZHEIMER'S 1,750. SEE CONTINUATION SHEET(S) Total 10,000. **b** Approved for future payment NONE

0.

**▶** 3b

Total

323621 10-10-13

Form **990-PF** (2013)

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclud	led by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code	_	4000		
a	-	-	1 1		
	_		1 1		
	-	·	<del>  </del>		13
•	_		+		·
e	_		+ +		·
g Fees and contracts from government agencies			+		<del></del>
2 Membership dues and assessments		. <u>-</u>	1 1	· <del></del> ··-	
3 Interest on savings and temporary cash			+ +		
investments			14	3.936.	
4 Dividends and interest from securities		<del></del>	14	3,936. 2,871.	
5 Net rental income or (loss) from real estate			1 - 1	2,0,10	
a Debt-financed property	ļ		1 1		
b Not debt-financed property			+ +		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	33.	<del></del>
	-		1 7 7	33.	
8 Gain or (loss) from sales of assets other			18	5,652.	
than inventory  Net income or (loss) from special events			1 1 9	3,032.	
Gross profit or (loss) from sales of inventory			1		<del></del>
1 Other revenue			+ +	<del></del>	·
			1 1		
ab	-		+		<del></del>
			┼		
			1 1		•
d e			1		
2 Subtotal Add columns (b), (d), and (e)	_	0.		12,492.	0.
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	•			12,492.
See worksheet in line 13 instructions to verify calculations	١				12,152.
	•				
Part XVI-B Relationship of Activities	s to the Acc	omplishment of E	xemp	Purposes	
Line No. Explain below how each activity for which in	e.s renorted	in column (e) of Part XVI-	A contrib	uted importantly to the accom	onlishment of
the foundation's exempt purposes (other than			1 COILLID	ated importantly to the accom	pisiment of
		· · · · · · · · · · · · · · · · · · ·			
					<del></del>
		,			· · · · · · · · · · · · · · · · · · ·
				<u> </u>	·
	•			<del></del>	<del></del>
		<del></del>			
		· **			
				<u> </u>	
			· ·		
					<del></del>
		<u> </u>			
		<del></del>			<del> </del>
					<del></del>

•									
orm 990-PF (	2013) CONWA	Y FOUNDATION			26-3006	5797	Pa	ge 13	
Part XVII	Information Re	egarding Transfers To	and Transactions a	nd Relations	nips With Nonchar	ritable			
	Exempt Organizations								
1 Did the o	rganization directly or indi	rectly engage in any of the following	ng with any other organization	on described in section	on 501(c) of		Yes	No	
	-	)(3) organizations) or in section 53	• •						
	,	ation to a noncharitable exempt or		1128(10110					
	• •	ation to a nonchantable exempt of	yanızatıdı di			1	1	v	
(1) Cash		••		•		1a(1)	$\vdash \vdash \vdash$	<u>X</u>	
(2) Othe	r assets					1a(2)	<b></b>	<u>X</u>	
<b>b</b> Other trai	nsactions						1		
(1) Sale:	s of assets to a nonchanta	ble exempt organization				1b(1)		<u>X</u>	
(2) Purc	hases of assets from a no	ncharitable exempt organization				16(2)		X	
(3) Rent	al of facilities, equipment,	or other assets				1b(3)		X	
(4) Reim	nbursement arrangements					1b(4)		X	
	is or loan guarantees					1b(5)		X	
		embership or fundraising solicitation	200					X	
• •			-			1b(6)		$\frac{\mathbf{x}}{\mathbf{x}}$	
		iling lists, other assets, or paid em				10		<u></u>	
	•	"Yes," complete the following sche	• •	•	• .		ets,		
		oundation If the foundation receiv	ed less than fair market valu	ie in any transaction	or shanng arrangement, si	ni wor			
column (	d) the value of the goods,	other assets, or services received							
a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	hanng an	angeme	nts	
		N/A		-					
			<del></del>			-			
				-					
						<u>_</u>			
			U. 2225						
		·							
					·				
-	<del></del>								
+			<del></del>						
		<u> </u>							
	•	tly affiliated with, or related to, one	, •	zations described		_	_		
ın sectior	1 501(c) of the Code (othe	r than section 501(c)(3)) or in sec	tion 527?		. L	Yes	X	] No	
b If "Yes," c	omplete the following sch	edule							
	(a) Name of org	anization	(b) Type of organization	(	c) Description of relationsh	ıp			
	N/A				• • •				
	· <del>-</del>								
					-				
	<u> </u>			-	<del></del>				
Linda	s popultion of posue. I dealers	that I have examined this return, including	a cocomposition and	etatements and to the	ont of my boundaries				
and b	pelief, it is true, correct, and cor	that I have examined this return, includir implete Declaration of preparer (other that	n taxpayer) is based on all inform	statements, and to the transfer of which preparer	mas any knowledge May	the IRS d			
Sign   and c	( Tanilo		111 12 11		1	m with the	(see <u>inst</u>	7)?	
Here	Dane.	Low	11,-12-1.	URER	\[ \]	Yes		No	
Sıg	nature of officer or truetee		Date	Title					
	Print/Type preparer's na	ame Preparer's	ignature	Date	Check ff PTIN				
	MICHAEL J.	BERRY, $\left( \right)$	$\setminus \mathcal{V}$		self- employed				
Paid	CPA	·   Jund	19 aps	11/11/19	POC	360	664		
Preparer	Firm's name ► DOE	REN MAVHEW	<del>\</del>	<u> </u>	Firm's EIN ► 38-24	_			
Use Only		MULTIDW			FINAL S ENV P 30-29		, 0		
OGC OINY		E WINCE DIO DESC	מאים						
		5 WEST BIG BEAV	EK KUAD						
	TR	OY, MI 48084			Phone no 248-24	4-36	<b>000</b>		

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

Name of the organization

Employer identification number

C	CONWAY FOUNDATION	26-3006797
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	50.1 (c)(3) taxable private foundation	
Note. Only a section 501(  General Rule  X For an organizati	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and II.	
Special Rules		
509(a)(1) and 170	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cont ns of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or ed f cruelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contuse exclusively for religious, charitable, etc., purposes, but these contributions did not to cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because ble, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000.  vely religious, charitable, etc.,
but it <b>must</b> answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Feet 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) (2013)

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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	<b>\$</b>	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

# CONWAY FOUNDATION

26-3006797

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il 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
		     \$	

Page 4 Name of organization Employer identification number CONWAY FOUNDATION 26-3006797 Exclusively religious, charatable, 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 Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (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. 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

x con x r + 1 capital dama and cosacs to rax on in	resument intente		
	(s) of property sold, e.g., real estate, common stock, 200 shs. MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo, day, yr) (mo, day, yr.)
1a CALUMET SPECIALTY PROD		P	07/31/1202/14/13
b LINN ENERGY	0010	P	VARIOUS 02/19/13
c ROCKIES EXPRESS PIPELI	NE UNSECURED NOTES	P	01/20/1202/19/13
d UNITEDHEALTH GROUP	NE ONDECORED NOTED	P	07/15/1102/19/13
e SYNGENTA		P	04/21/1103/19/13
	YMERS	P	12/21/1103/13/13/13
	YMERS	P	<del>                                     </del>
	YMERS	P	08/31/1104/11/13 12/06/1104/11/13
<del>- ' '</del>	YMERS	P	
·	IMERS		12/20/1104/11/13
DEVON ENERGY CORP	NOMEC	D	09/23/0305/02/13
	NOTES	P	02/14/1205/13/13
DUKE ENERGY CORP	<u> </u>	P	07/11/1205/13/13
m DR PEPPER SNAPPLE GROU		P	04/23/1005/22/13
n DR PEPPER SNAPPLE GROU	<u>P</u>	P	01/12/1205/22/13
O ZOETIS INC		P	02/19/1306/27/13
(e) Gross sales price (f) Depreciat	wable) plus expense of sale	(e) p	) Gain or (loss) llus (f) minus (g)
a 1,072.	660		412.
b 1,796.	1,512		284.
c 5,117.	5,082	•	35.
d 1,397.	1,308		89.
e 4,236.	3,498	•	738.
f 520.	823	•	-303.
g 833.	997	•	-164.
h 208.	219	•	-11.
416.	431	•	-15.
1,403.	607	•	796.
k 5,000.	4,960	•	40.
2,070.	1,934		136.
m 1,447.	1,013		434.
n 965.	768		197.
0 26.	21		5.
Complete only for assets showing gain in column (		-	ses (from col (h))
(i) F M V as of 12/31/69 (j) Adjust as of 12	ed basis (k) Excess of col (i)	Gains (excess o	of col (h) gain over col (k), ot less than "-0-")
a			412.
b			284.
С			35.
d			89.
e			738.
f			-303.
g			-164.
h			-11.
1		-	-15.
			796.
k			40.
1			136.
m			434.
n			197.
0			5.
		1 1	
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7	2	
	`	-	
3 Net short-term capital gain or (loss) as defined in se if gain, also enter in Part I, line 8, column (c)	ctions 1222(5) and (6)		

CONTINUATION FOR 990-PF, PART IV 26-3006797 PAGE 2 OF 2

Part IV Capital Gains and Lo	sses for Tax on Investment Income					
	describe the kind(s) of property solution describe the kind(s) of property solution (s) describe the kind(s) of property solution (s) of property		i i uiciiusc	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr )	
<u></u>	C FINANCING CORP		D - Donation P	03/02/12		
b NEWS CORP	<del> </del>		P	05/22/13	07/25/13	
c NV ENERGY			P	09/12/12		
	d QUALCOMM INC					
e CENTENE CORP	P	11/03/11 12/02/03				
† MCDONALDS CORP						
g MCDONALDS CORP		•	P	06/08/12 06/08/12		
h MCDONALDS CORP	· · · · · · · · · · · · · · · · · · ·		P	03/13/13		
CENTENE CORP			D	12/02/03		
GENESEE & WYOM	ING INC		P	06/28/04		
k CENTENE CORP	ING INC		D	12/02/03		
BIO - RAD LABS	INCURODINATED	NOMEC	P	02/28/12		
		NOTES	P			
m SEADRILL LIMIT			P P	06/24/11		
	LTY PRODUCTS				02/14/13	
O CAPITAL GAINS	DIVIDENDS			]		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) lus (f) minus (g)		
a 4,728.		5,113.			-385.	
b 228.		235.			<del>-7.</del>	
c 1,884.		1,447.		-	437.	
d 652.		565.			87.	
e 574.		293.			281.	
f 1,877.		1,743.		<del></del> _	134.	
g 964.		872.			92.	
h 964.		1,004.			-40.	
597.		293.		-	304.	
1,881.		316.			1,565.	
k 632.	·	293.			339.	
5,200.		5,416.			-216.	
m 2,051.		1,670.			381.	
n		14.			-14.	
0 21.					21.	
Complete only for assets showing	ng gain in column (h) and owned by t	the foundation on 12/31/69	(I) Los	ses (from col (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		of col. (h) gain over ot less than "-0-")	col (k),	
a	-				-385.	
b					<del>-7.</del>	
C			•		437.	
d					87.	
e					281.	
f				<del></del>	134.	
g					92.	
h					-40.	
1	·				304.	
1					1,565.	
k			·- · · · ·		339.	
					-216.	
<u>:</u> m	·				381.	
n			<del></del>		<del>-14.</del>	
0					21.	
	<u> </u>					
2 Capital gain net income or (net ca	ipital loss) {   If gain, also enter   If (loss), enter "-0	in Part I, line 7 -" in Part I, line 7	2		5,652.	
3 Net short-term capital gain or (los		d (6)				
If gain, also enter in Part I, line 8,		}		NT / N		
If (loss), enter "-0-" in Part I, line 8	<u> </u>		3	N/A		

3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	,
CLA FOUNDATION	NONE	PC	TO ACTIVELY PROMOTE	
0920 WILSHIRE BLVD., STE. 900			PHILANTHROPY AND	
OS ANGELES, CA 90024			MANAGE DONATED	
			RESOURCES FOR THE	
			ADVANCEMENT OF UCLA	1,75
ETROIT ACHIEVEMENT ACADEMY	NONE	PC	FREE PUBLIC CHARTER	
.5000 SOUTHFIELD RD.			SCHOOL THAT	
DETROIT, MI 48223			HOLISTICALLY SUPPORTS	
			THE EDUCATION AND	
		ļ	DEVELOPMENT OF IT'S	1,00
			1	
			1	
<u> </u>		<del> </del>	+	<del></del> _
			1	
Total from continuation sheets		1		2,75

FORM 990-PF INTERE	ST ON SAVING	GS AND T	EMPOR	ARY (	CASH	INVE	STMENTS	SI	ATEMENT
SOURCE		RE	(A) VENUE BOOK			(B INVE INCO	STMENT	N	(C) ADJUSTED IET INCOME
COMPASS DIVERSIFIED NATIONAL FINANCIAL RBC RBC			1,4	93.			38. 1,464. 793. 1,641.		
TOTAL TO PART I, LI	NE 3		3,9	36.			3,936.		
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	1 SEC	URIT	IES	SI	'ATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV	(A) /ENUE BOOK		(B) ET INVEST ENT INCO		(C) ADJUSTED NET INCOME
COMPASS DIVERSIFIED HOLDINGS LAZARD LTD. NATIONAL FINANCIAL SERVICES RBC RBC TO PART I, LINE 4	6. 100. 1,353. 1,302. 131.		0. 0. 21. 0. 0.		10 1,33 1,30 13	2. 2. 1.	1,333 1,303 13 2,87	2. 2. 1.	
FORM 990-PF	2,032.	OTHER		MF	2,07	= =	2,07	==	'ATEMENT 3
DESCRIPTION		OTHER	RE	(A) VENUI BOOI			(B) INVEST- I INCOME		(C) ADJUSTED NET INCOME
LINN ENERGY LLC CALUMET SPECIALTY P SAN JUAN BASIN ROYA		INERS			-28. -17. 78.		-28 -17 78	•	•
TOTAL TO FORM 990-P	F, PART I, 1	LINE 11			33.		33	•	

FORM 990-PF C	OTHER PROFES	SIONAL FEES	S	TATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
INVESTMENT ADVISORY FEES	2,134.	2,134.			0.
TO FORM 990-PF, PG 1, LN 16C	2,134.	2,134.			0.
FORM 990-PF	TAX	ES	S	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
FOREIGN TAXES FEDERAL EXCISE TAX	4. 851.	4.0.			0.
TO FORM 990-PF, PG 1, LN 18	855.	4.			0.
TO FORM 990-PF, PG 1, LN 18 =	0THER E		S	PATEMENT	
=			(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	6 BLE
FORM 990-PF  DESCRIPTION  BANK FEES	OTHER E  (A)  EXPENSES	XPENSES  (B)  NET INVEST-	(C) ADJUSTED	(D) CHARITA	6 BLE ES
FORM 990-PF  DESCRIPTION  BANK FEES	OTHER E  (A)  EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITA	6 BLE ES
FORM 990-PF  DESCRIPTION  BANK FEES OTHER PORTFOLIO DEDUCTIONS FROM K-1'S	OTHER E  (A)  EXPENSES PER BOOKS  30.	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITA	BLE ES 0.
FORM 990-PF  DESCRIPTION  BANK FEES OTHER PORTFOLIO DEDUCTIONS FROM K-1'S  TO FORM 990-PF, PG 1, LN 23	OTHER E  (A) EXPENSES PER BOOKS  30. 23.	(B) NET INVEST- MENT INCOME  30. 23.	(C) ADJUSTED NET INCOME	(D) CHARITA	6BLE ES 0.
FORM 990-PF  DESCRIPTION  BANK FEES OTHER PORTFOLIO DEDUCTIONS FROM K-1'S  TO FORM 990-PF, PG 1, LN 23	OTHER E  (A) EXPENSES PER BOOKS  30. 23.	(B) NET INVEST- MENT INCOME  30. 23.	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	6BLE ES 0. 0.
FORM 990-PF  DESCRIPTION  BANK FEES OTHER PORTFOLIO DEDUCTIONS FROM K-1'S  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF OTHER DECREASE	OTHER E  (A) EXPENSES PER BOOKS  30. 23. 53.	(B) NET INVEST- MENT INCOME  30. 23. 53.	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS  TATEMENT  AMOUNT	0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
RBC		110,936.	137,854.
TOTAL TO FORM 990-PF	PART II, LINE 10B	110,936.	137,854.
FORM 990-PF	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
RBC		30,966.	32,138.
TOTAL TO FORM 990-PF	PART II, LINE 10C	30,966.	32,138.
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGE	PDC	STATEMENT 10

NAME OF MANAGER

DANIEL J. CONWAY CATHY L. CONWAY

### Form **8868** (Rev. January 2014)

Department of the Treasury

**Exempt Organization Return** 

File a separate application for each return.

**Application for Extension of Time To File an** 

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

Internal Revenue Service

 $\triangleright X$ • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,

visit www	.irs.gov/efile and click on e-file for Charities & Nonprofits	; <u> </u>				_
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpora	tion required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete		
Part I only			_		. •	
All other o	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
to file ınco	ome tax returns.		·	Enter file	er's identifying nun	nber
Type or	Name of exempt organization or other filer, see instru	Employe	r identification numl	per (EIN) or		
print	, -		, ,			
•	CONWAY FOUNDATION			26-300679	-3006797	
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SSN	<u>0</u>
filing your	3539 THIRTY THREE MILE ROAL	D			,	,
return See instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			
	ROMEO, MI 48065					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
<b>Applicati</b>	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	·BL	02	Form 1041-A			08
Form 4720 (individual) 03 Form 4720 (other than individual)					09	
Form 990-PF 04 Form 5227						10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
	DANIEL J. CONW	AY				
• The bo	poks are in the care of $\triangleright$ 3539 THIRTY THI	REE M	ILE ROAD - ROMEO,	MI 48	065	
Teleph	one No. ► 586-752-4496		Fax No. ▶		<u> </u>	
• If the c	organization does not have an office or place of business	s in the Ur	nited States, check this box	-	<b>•</b>	
• If this i	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is fo	r the whole group, o	heck this
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	f all memb	ers the extension is	for.
1 Ire	quest an automatic 3-month (6 months for a corporation					
	AUGUST 15, 2014 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
	or the organization's return for:					
▶l	X calendar year 2013 or					
▶[	tax year beginning	, an	d ending		_ •	
2 If th	e tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	n	
	Change in accounting period					
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			
non	refundable credits. See instructions.			3a	\$	90.
<b>b</b> If th	is application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
<u>estı</u>	mated tax payments made. Include any prior year overp	payment a	llowed as a credit.	3ь_	\$	438.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,			
by ı	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3с	\$	0.
Caution.	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	453-EO aı	nd Form 8879-EO fo	or payment

instructions.

Form 8868 (Rev. 1-2014)				Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check the	s box	X
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously	filed Form 8868.	
• If you are filing for an Automatic 3-Month Extension, complet			is	
Part II Additional (Not Automatic) 3-Month E	xtensio	<b>n of Time.</b> Only file the origin	nal (no copies needed).	
<u> </u>		Enter filer's	identifying number, see ins	tructions
Type or Name of exempt organization or other filer, see instru-	ctions.		Employer identification num	ber (EIN) or
Print CONTAIN FOLINDAMION			26 200670	7
File by the due date for Number street and room or suite no. If a R.O. have a			26-300679	
number, street, and room or suite no. If a P.O. box, so return See 3539 THIRTY THREE MILE ROAD	ee Instruc	tions.	Social security number (SSN	1)
City, town or post office, state, and ZIP code. For a for ROMEO, MI 48065	oreign add	dress, see instructions.		
Enter the Return code for the return that this application is for (file	e a separa	ite application for each return)		0 4
Application	Datum	Tandination	<del></del>	Deture
Application Is For	Return	Application Is For		Return
Form 990 or Form 990-EZ	01	15 FOI	······································	Code
Form 990-BL	02	Form 1041-A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	08
Form 4720 (individual)	03	Form 4720 (other than individual)		09
Form 990-PF	04	Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870		12
STOP! Do not complete Part II if you were not already granted	an autor	matic 3-month extension on a prev	viously filed Form 8868.	
• If this is for a Group Return, enter the organization's four digit of box   DANIEL J. CONWA  3539 THIRTY THE  3539 THIRTY THE  24496  If the organization does not have an office or place of business  If this is for a Group Return, enter the organization's four digit of box   ∴ If it is for part of the group, check this box   □	REE M	Fax No. ▶nted States, check this box	If this is for the whole group, o	
4 I request an additional 3-month extension of time until		BER 15, 2014.		-
5 For calendar year 2013, or other tax year beginning		, and endin	9	•
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final return	
7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO A	COLLE	DE MUE INFORMATION	NECECCADY DO	
PREPARE A COMPLETE AND ACCURAT			NECESSARY TO	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any		
nonrefundable credits. See instructions.			8a \$	90.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated		
tax payments made. Include any prior year overpayment allepreviously with Form 8868.	owed as a	a credit and any amount paid	8b \$	438.
C Balance due. Subtract line 8b from line 8a. Include your pa	=	th this form, if required, by using		^
EFTPS (Electronic Federal Tax Payment System). See Instru		ak baranmaka di fan Dari H	8c \$	0.
Under penalties of perjury, I declare that I have examined this form, including it is true, correct, and complete, and that I am authorized to prepare this form.	ing accomp	st be completed for Part II of panying schedules and statements, and t	•	elief,
Signature ▶ Title ▶ C			Date ►	

Form 8868 (Rev. 1-2014)

Date 🕨

Signature >