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Form 990-PF Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0052

2013

Open to Public Inspection

	For c	ale'n	dar year 2013 or tax year beginning		, and en	ding		
	Nar	ne of	foundation				A Employer identification	number
	C	ON	AMOR FOUNDATION				93-1299163	.
			nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	· · · · · · · ·
	_P	0	BOX_5337					6723
			own, state or province, country, and ZIP or foreign p.D., OR 97708	oostal code			C If exemption application is p	ending, check here
			all that apply Initial return	Initial return of a fo	rmer public cl	arity	D 1. Foreign organizations	s, check here
			Final return	Amended return			2.5	
			Address change	Name change			Foreign organizations me check here and attach co	enting the 85% test, pmputation
	H C	-	type of organization. X Section 501(c)(3) ex				E If private foundation sta	tus was terminated
	<u>L_</u>		<u> </u>	Other taxable private founda			under section 507(b)(1))(A), check here 🕨 📖
			rket value of all assets at end of year J Account	-	Accn	al	F If the foundation is in a	
				ther (specify)			under section 507(b)(1))(B), check here ►∟
			219,234. (Part I, colu					1 (4) -
	Pa	irt i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inv		(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received	100,788.		'	N/A	
		2	Check If the foundation is not required to attach Sch. B					
		3	Interest on savings and temporary cash investments					
		4	Dividends and interest from securities	3,165.		3,165.		Statement 1
		5a	Gross rents					
		l _	Net rental income or (loss)	10,345.			<u> </u>	
	ě		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 30, 368.	10,343.	······			
2014	Revenu	_b	assets on line 6a Capital gain net income (from Part IV, line 2)		1 (0,345.		
7	æ	8	Net short-term capital gain			3,313.		
53		g	Income modifications			•		
		-	Gross sales less returns and allowances					
J[١.	Less Cost of goods sold					
		C	Gross profit or (loss)					
SCANNED		11	Other income _				DEVENT	1
Z		12	Total. Add lines 1 through 11	114,298.	1;	3,510.		14437
F		13	Compensation of officers, directors, trustees, etc	0.		0.		014 [7] 0.
ပ္က		14	Other employee salaries and wages				S JUL I 3 (-014 S
,	S	15	Pension plans, employee benefits				OCHEN	IIT I
)Sue		Legal fees Stmt 2	1,294.		0.	H UGJEN	0.
	ž.		Other professional fees	1,2316				•
	/6 E	ŀ	•					
	rati	18	Taxes Stmt 3	100.		0.		0.
	nist	19	Depreciation and depletion					, , , , , , , , , , , , , , , , , , , ,
	<u> </u>	20	Occupancy					
	Ψ	21	Travel, conferences, and meetings					
	anc	22	Printing and publications					
	ing	23	Other expenses Stmt 4	150.		0.		0.
	erat	24	Total operating and administrative	1 544		^		
	Operating and Administrative Expense		expenses. Add lines 13 through 23	1,544. 21,790.		0.		21,790.
	_	25	Contributions, gifts, grants paid	21,/90.				21,190.
		26	Total expenses and disbursements. Add lines 24 and 25	23,334.		0.		21,790.
		27	Subtract line 26 from line 12	23,334.				21,,50.
			Excess of revenue over expenses and disbursements	90,964.				
			Net investment income (if negative, enter -0-)		1	3,510.		
			Adjusted net income (if negative, enter -0-)				N/A	

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

D	ober¥.	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	beginning of year	E10 0	
	CRIL	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	ι	Cash - non-interest-bearing	1 160		
	1	, , , , , , , , , , , , , , , , , , , ,	1,168.	177.	177.
	3	Accounts receivable -			
		Less allowance for doubtful accounts ▶	.,	,,,,	
	4	Pledges receivable ►			
	ŀ	Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	;		
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
ģ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		· · · · · · · · · · · · · · · · · · ·	
Ą		Investments - U.S. and state government obligations		•	
		Investments - corporate stock			-, , , , , , , , , , , , , , , , , , ,
	L	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis	- 8 1 11 11 11		
					•
	12	Less. accumulated depreciation Investments - mortgage loans			
	13	Investments - other Stmt 5	95,732.	187,687.	219,057.
	ļ -		737132.	10170011	215,057.
	14	Land, buildings, and equipment basis		:	
		Less, accumulated depreciation		· · · · · · · · · · · · · · · · · · ·	
	1	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	96,900.	107 061	210 224
_	l	instructions. Also, see page 1, item 1)	90,900.	187,864.	219,234.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	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.			
ő	24	Unrestricted			
Net Assets or Fund Balances	25	Temporanly restricted .			
8	26	Permanently restricted			
핕		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S O	27	Capital stock, trust principal, or current funds	0.	0.	
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	96,900.	187,864.	
Žet	30	Total net assets or fund balances	96,900.	187,864.	
_					
	31	Total liabilities and net assets/fund balances	96,900.	187,864.	
					<u> </u>
P	art	Analysis of Changes in Net Assets or Fund B	aiances		
1	Total	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	96,900.
2		r amount from Part I, line 27a		2	90,964.
3		r increases not included in line 2 (itemize)		3	0.
-		lines 1, 2, and 3		4	187,864.
		eases not included in line 2 (itemize)	•	. 5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	187,864.
_					

323511 10-10-13

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Part IV Capital Gains	and Lo	osses for Tax on In	vestment	Income					
		ind(s) of property sold (e g or common stock, 200 shs				acquired rchase nation	(c) Date a (mo , da		(d) Date sold (mo., day, yr)
<u>1a</u>									
b See Attached	Sta	tement							
<u>C</u>									
d	_								
<u>e</u>					<u> </u>				
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) (f) minus (
a									
b		<u> </u>							
C					_				
e 30,368.				20,02	2	.			10,345.
e 30,368.	0 0310 10	column (h) and owned by t	he foundation	•	3.) Cours (C		
Complete only for assets showin								ol. (h) gain iot less thai	
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), if any	ŀ			(from col (
2									
b									
C									
d									
e .									10,345.
		∫ If gain, also enter	ın Part tılına	7	7				
2 Capital gain net income or (net ca	pital loss				2				10,345.
3 Net short-term capital gain or (los				•	<i>-</i>				
If gain, also enter in Part I, line 8,	•	• •	u (0))				
If (loss), enter -0- in Part I, line 8	(- ,] 3			N/A	
Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Invest	ment Inc	ome		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation does not qual 1. Enter the appropriate amount in a	ion 4942 Ify under	tax on the distributable amo section 4940(e) Do not cor	mplete this pa	rt .				-	Yes X No
(a)		(b)	·		(c)			Diotesh	(d)
Base periód years Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dist	ributions	Net value of no		e-use assets	- - (col (b) div	oùtión ratio rided by col. (c))
2012		2:	2,940.		1:	23,986	•		.185021
2011			8,110.			51,956			.184988
2010			2,303.			61 , 635			.137984
2009			7,300.			62,164			.106682
2008		2	3 , 389.		2	02,821	•		.115318
2 Total of line 1, column (d)							. 2		.729993
3 Average distribution ratio for the S	-		n line 2 by 5,	or by the number	of years				
the foundation has been in exister	nce if less	s than 5 years					3		.145999
4 Enter the net value of noncharitab	le-use as	sets for 2013 from Part X, I	ine 5				4		162,837.
5 Multiply line 4 by line 3							5		23,774.
6 Enter 1% of net investment incom	ne (1% of	f Part I. line 27b)					6		135.
		· · · · · · · · · · · · · · · · · · ·	-	•					23,909.
7 Add lines 5 and 6				•			7		
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Best VI instructions			1b, and comp	lete that part usin	g a 1% ta:	x rate	8		21,790.
See the Part VI instructions				<u> </u>	•				Corm QQQ_DE /2012

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1940(e), oı	4948	- see in	stru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.)					
	Date of ruling or determination letter (attach copy of letter if necessary-see instruct						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 19	6	1	ļ.		2	<u>70.</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, co	I(b) 丿					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	ļ			$\frac{0.}{20}$
	Add lines 1 and 2		_3				70.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	ļ			0. 70.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	 			/U.
	Credits/Payments:						
	2013 estimated tax payments and 2012 overpayment credited to 2013 5a 5b						
	Exempt foreign organizations - tax withheld at source . 6b		\dashv				
	Tax paid with application for extension of time to file (Form 8868)		-				
	Backup withholding erroneously withheld		┥,				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	•	8	+			<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	1		2	70.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	5	10	1			
	Enter the amount of line 10 to be Credited to 2014 estimated tax	Refunded >	11	1			
_	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it partic	pate or interve	ne 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 the definit	ion)?	. [1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any me	atenals publi	shed or	İ			
	distributed by the foundation in connection with the activities.			l			İ
	Did the foundation file Form 1120-POL for this year?			ļ	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1			ĺ
	(1) On the foundation ► \$ (2) On foundation managers. ► \$		<u>.</u>	1			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	foundation		1			ĺ
_	managers ▶\$						v
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.	6		ŀ			ł
J	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	inicorporation	1, 01]	3		Х
Aa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			F	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	1/A	4b		
	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						l
	By state legislation that effectively amends the governing instrument so that no mandatory directions that con	flict with the st	tate law				
	remain in the governing instrument?			. [6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col.	(c), and Part	XV	. [7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	OR						
þ	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or c	esignate)				v	ĺ
_	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 4942(j)(3) or 4	942(j)(5) for 0	alendar				v
40	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			ŀ	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names an	d addresses		Enra	10	DE /	2013)
				FUILI	JJU	(-0101

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▶

Total. Add lines 1 through 3

Page 8 Part X 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 164,417. a Average monthly fair market value of securities 1a 900. 1b b Average of monthly cash balances c Fair market value of all other assets 1 C 165,317. 1d d Total (add lines 1a, b, and c) ... e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d $2,\overline{480}$. 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 162,837. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 8,142 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part) 8,142. Minimum investment return from Part X, line 6 270. Tax on investment income for 2013 from Part VI, line 5 Income tax for 2013 (This does not include the tax from Part VI) 2c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 7,872. Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 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 Amounts set aside for specific charitable projects that satisfy the 3 a Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 21,790. 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 income Enter 1% of Part I, line 27b 5 6 Adjusted qualifying distributions. Subtract line 5 from line 4 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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4940(e) reduction of tax in those years

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,		7		
line 7				7,872.
2 Undistributed income, if any, as of the end of 2013				,,,
a Enter amount for 2012 only			0.	
b Total for prior years				
,,	, ' ',ha)	0.	· · · · · · · · · · · · · · · · · · ·	1
3 Excess distributions carryover, if any, to 2013				
a From 2008 13,354.	İ			
b From 2009 9,242.				
t From 2010 14, 265.				
d From 2011 20,632.	4			
e From 2012 16,841.	74 224			
f Total of lines 3a through e	74,334.			
4 Qualifying distributions for 2013 from				
Part XII, line 4 ► \$ 21,790.			0.	
a Applied to 2012, but not more than line 2a	,, , , , , , , , , , , , , , , , , , ,			
b Applied to undistributed income of prior	İ	0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	· · · · · · · · · · · · · · · · · · ·	' ''	······································	7,872.
d Applied to 2013 distributable amount	13,918.			7,012.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount rrust be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	88,252.			
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				
be distributed in 2014	· · · · · · · · · · · · · · · · · · ·	· · ·		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	_ 0.			
8 Excess distributions carryover from 2008	12 254			
not applied on line 5 or line 7	13,354.			
9 Excess distributions carryover to 2014.	74 000			
Subtract lines 7 and 8 from line 6a	74,898.			
10 Analysis of line 9				
a Excess from 2009 9,242. b Excess from 2010 14,265.				
16 041				
d Excess from 2012 16,841. e Excess from 2013 13,918.				
6 EXC633 HOTH 2013 13/710 6	1		·	Form 990-PF (2013)

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Part XIV Private Operating F	oundations (see In	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2013, enter the date of	the ruling .			
b Check box to indicate whether the found	lation is a private operati	ng foundation described i		<u>4942(j)(3) or 49</u>	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets (2) Value of assets qualifying					-, -
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed		1			
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	rmation (Comple	ete this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t			,, 410 ,041,461.0.		
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	than 2% of the total conf	inbutions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed in					,
BRUCE H. MILLER, \mathcal{P}_{α}	tricia A.	Dilworth			
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a pa	rtnership or
None					
2 Information Regarding Contribut Check here ☐ if the foundation of the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone num	·				
See Statement 6					
b The form in which applications should be	pe submitted and informa	ition and materials they s	hould include.		
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographic	al areas, chantable fields	kinds of institutions, or	other factors	
202001 10 10 12					Farm 000 DE (0010)

Part XV .Sur	plementary Information	(continued)			
3 Grants and Co	ontributions Paid During the Ye	ar or Approved for Future	Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and a	ddress (home or business)	or substantial contributor	recipient	Contribution	
a Paid during th	ne year				
			ŀ		
SEE STATEMENT	GRANTS-1				
 			<u> </u>		21,790.
			1		
					
			:		
			!		
Total				▶ 3a	21,790.
b Approved for	future payment				
			•		
None					
None	;				
					·
			1		
		<u> </u>			
Total				▶ 3b	0.

nter ares	s amounts unless otherwise indicated	Unrelate	d business income	Exch	ded by section	512, 513, or 514	(e)	
_		(a) Business	(b) Amount	(C) Exclu- sion		(d)	Related or e	
1 Progra	im service revenue.	code	Aillouit	code	A	mount	function in	соте
a		.						
p								
ε								
d								
e								
f _							·	
g Fee	es and contracts from government agencies							
Memb	ership dues and assessments							
Interes	st on savings and temporary cash							
ınvestr	ments			14				
Divide	nds and interest from securities			14		3,165.		
Net re	ntal income or (loss) from real estate					77.1	- III	
	bt-financed property							
	t debt-financed property			1				
	ntal income or (loss) from personal							
proper								
	investment income							
	r (loss) from sales of assets other							
	eventory			14		8,388.	1	1,957
	come or (loss) from special events							
	profit or (loss) from sales of inventory							
1 Other								
. —		-						
լ —		1 1						
е —								
	tal Add columns (b), (d), and (e)			0.		11,553.	1	.957
	Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	.l	13	1 ?	1,957 3,510
			•			'3_		,, 510
	sheet in line 13 instructions to verify calculations)							
Part >	(VI-B) Relationship of Activities	to the Acco	omplishment	of Exemp	t Purpos	ses		
Line No.	Explain below how each activity for which inc the foundation's exempt purposes (other than				buted import	antly to the accon	iplishment of	
	INCOME ON INVESTMENTS				חם משי	DDOWIDE	בטם ביויי	יז סווי
<u> </u>	SUPPORT OF FOUNDATION			TIMATION	ED 10	PROVIDE	FOR FUI	LOKE
	SUPPORT OF FOUNDATION	PURPUSE	.					
								
							 	
			·-					
								
	 							
					_			
								

Part XVII	Information Re Exempt Organ		sfers To a	and Transac	ctions a	nd Relationsh	ips With Nonch	aritable	•	
1 Did the o	rganization directly or indi		of the followin	n with any other	organization	n described in section	on 501/c) of		Yes	No
	(other than section 501(c						301(0) 01			
	s from the reporting found									
(1) Casi	·			,				1a(1)		X
(2) Othe				•			•	1a(2)		Х
b Other tra		*								
(1) Sale	s of assets to a noncharita	bie exempt organizat	tion		•			16(1)		X
(2) Puro	chases of assets from a no	ncharitable exempt o	rganization					1b(2)		X
(3) Ren	tal of facilities, equipment,	or other assets						1b(3)		X
(4) Rein	nbursement arrangements							1b(4)		X
(5) Loai	ns or loan guarantees							1b(5)		<u> </u>
(6) Perf	ormance of services or me	embership or fundrais	sing solicitatio	ns				1b(6)		X
c Sharing	of facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees				10	L	<u> </u>
	swer to any of the above is	•	-			-			ets,	
	es given by the reporting f			ed less than fair i	narket value	e in any transaction	or sharing arrangement	, show in		
(a) Line no	(b) Amount involved			exempt organiz	ation	(d) December	of transfers, transactions, an	d shares or		
(a) Line no	(b) Amount involved	(c) ivaline of	N/A	exempt organize	20011	(u) Description	oi transiers, transactions, an	o snanng an	rangeme	ints
			N/A			•				
										
							·			
						<u> </u>				
-	<u> </u>			•						
				•						
_										
	_									
	· · · · · · · · · · · · · · · · · · ·			<u>.</u>						
						<u> </u>				
	undation directly or indirec	•			mpt organiz	ations described				_
	n 501(c) of the Code (othe		(3)) or in sect	ion 527? _.				L Yes	LX	No
b If "Yes,"	complete the following sch			(b) Tone of our			-) D			
	(a) Name of org	janization		(b) Type of org	anization		c) Description of relation	isnip		
	N/A								-	
							·			
Unde	er penalties of perjury, I declare	that I have examined thi	s return, includin	g accompanying so	hedules and s	statements, and to the t	est of my knowledge			
Here	belief it is true, correct, and con	Palew	eparer (other than	taxpayer) is based	on all informa	ation of which preparer President	nas any knowledge	May the IRS of the thin with the hown below X Yes	e prepar (see ins	rer
Się	nature of officer or trustee	···	T =	Date	<i>A</i> +	Title	<u> </u>	:		
	Print/Type preparer's na	ame	Preparer's si	gnature -	///	Date	Check ff PTIN	ı		
Paid	HARLEY ROB		1	J. M.	4	5/30/14		00111		
Preparer Use Only		K, ROBERT	S & CO	, L.L.	c/v—		Firm's EIN ▶ 93-	11596	40	
.	Firm's address ▶ 11	1 SW COLU			SUITE	700	Phone no (503) 224		
		TIPHID!	1 7120	<u></u>			Phone no (503)	, ८८4	-00	5

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. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and OMB No 1545-0047

Employer identification number

its instructions is at www.irs.gov/form990

	CON AMOR FOUNDATION	93-1299163
Preparization type (check one): Filers of: Section: Form 990 or 990-EZ		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
Organization type (check one): Filers of: Section: Form 990 or 990-EZ		
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
Form 990-PF Check if your organization type (check if your organization type) Check if your organization to the contributor Contributor Contributor Contributor Contributor Contributor Contributor Contribution to the amount of the amount of the prevention of the section 50 contributions for if this box is che purpose. Do not religious, charitactured. Caution. An organization	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 50		cial Rule. See instructions.
General Rule		
		e (in money or property) from any one
Special Rules		
509(a)(1) and 1	70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution	
total contributi	ons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary,	
contributions for If this box is che purpose. Do no	or use exclusively for religious, charitable, etc., purposes, but these contributions did tecked, enter here the total contributions that were received during the year for an expot complete any of the parts unless the General Rule applies to this organization because.	not total to more than \$1,000. **Clusively religious, charitable, etc., cause it received nonexclusively
but it must answer 'No	on that is not covered by the General Rule and/or the Special Rules does not file Scholon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or oneet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

Name of organization

Employer identification number

CON AMOR FOUNDATION

93-1299163

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PATRICIA A. DILWORTH & BRUCE H. MILLER PO BOX 5337 BEND, OR 97708	\$ 100,589.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnocash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

CON AMOR FOUNDATION

93-1299163

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t 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
1	8231.5010 SHRS. PIMCO INCM INST CL:PIMIX		
		\$\$	07/02/13
(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

lame of orga	nization			Employer identification number
	OR FOUNDATION Exclusively religious, charitable, etc., individ	tual contributions to section 501/c	(7) (8) or (10) orga	93-1299163
Part III	year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	following line entry. For organization contributions of \$1,000 or less for	ns completing Part III	, enter
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, and	1 ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, and	1 ZIP + 4	Relationship	of transferor to transferee
			-	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, and	3 ZIP + 4	Helationship	of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
			_	
		(e) Transfer of gif	.	
	Transferee's name, address, and	d ZIP + 4	Relationship	of transferor to transferee
323454 10-24-	13		Sch	edule B (Form 990, 990-EZ, or 990-PF) (201

Part IV	Capital Gains and Los	ses for Tax on Investment Income		- ,		
		describe the kind(s) of property sold		(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
		ick warehouse, or common stock, 20		D - Donation		
	VANGUARD BOI		ORT TERM BOND		04/05/10	
	VANGUARD BOY		ORT TERM BOND		04/05/10	
	733 OAKMARK			P	$\frac{11}{14} \frac{14}{03}$	
	ANGUARD BONI		RT TERM BOND		04/05/10	
	VANGUARD BOY		ORT TERM BOND ORT TERM BOND		04/05/10	
	454 OAKMARK			P P	04/05/10 11/14/03	
	PIMCO INCM		FD CL I		01/09/13	
	.361 OAKMARI		E FD CL I	P	$\frac{01}{09}$ $\frac{13}{11}$	
	ital Gains		E FD CL I	P	11/14/03	10/0//13
	ILAI GAINS	DIVIGENUS				
<u>k</u>						
<u>m</u>				-		
<u>n</u>			· - · ·			
0	 "	(f) Depreciation allowed	(g) Cost or other basis	(h)	Gain or (loss)	
(e)	Gross sales price	(or allowable)	plus expense of sale		lus (f) minus (g)	
	1,214.		1,194.	.,,,	., .,	20.
<u>a</u> b	970.		956.			14.
C	2,000.		1,533.			467.
d	162.		159.	· · · · · · · · · · · · · · · · · · ·		3.
e	891.		876.			15.
f	1,376.		1,354.			22.
g	2,000.		1,481.	.		519.
h	9,567.		9,820.			-253.
	3,800.	-	2,650.			1,150.
1	8,388.					8,388.
k						•
1	-					
m	-					
n						
0						
Comp	lete only for assets showin	g gain in column (h) and owned by t	the foundation on 12/31/69	(I) Los	ses (from col (h))	
/I\ E	M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (ı)		of col (h) gain over ot less than "-0-")	col (k),
(1) F	IVI V 45 UI 12/31/09	as of 12/31/69	over col (j), if any	Dutii	ot less than -0-)	
a						20.
<u>b</u>			<u> </u>			14.
<u>c</u>						467.
d						3.
e	_					15.
<u>f</u>	-					22.
9						519. -253.
h						
<u> </u>						1,150.
				- 		8,388.
<u>k</u>						
<u> </u>				· · · · · · · · · · · · · · · · · · ·		
<u>m</u>						
n						
0			L			
9 Canital	gain net income or (net ca	pital loss) { If gain, also enter -0	in Part I, line 7	2		10,345.
-				-		1012420
		s) as defined in sections 1222(5) an	d (6)			
	also enter in Part I, line 8,		ſ l.	,	N/A	

Form 990-PF D	oividends	and Inter	est from Secur	ities St	atement 1
Source	Gross Amount	Capital Gains Dividend	(a) Revenue s Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
CHARLES SCHWAB	11,553.	8,38	8. 3,165.	3,165.	
To Part I, line 4	11,553.	8,38	3,165.	3,165.	
Form 990-PF		Accounti	ng Fees	St	atement 2
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING FEES		1,294.	0.		0.
To Form 990-PF, Pg 1,	ln 16b	1,294.	0.		0.
Form 990-PF		Tax	es	St	catement 3
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
2012 FORM 990PF TAX PA	AID —	100.	0.		0.
To Form 990-PF, Pg 1,	ln 18	100.	0.	<u> </u>	0.
Form 990-PF		Other E	xpenses	St	atement 4
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(C) Adjusted Net Income	(d) Charitable Purposes
MISCELLANEOUS FEES	_	150.	0.		0.

Form 990-PF Other	Investments		Statement 5
Description	Valuation Method	Book Value	Fair Market Value
SEE STATEMENT INV-1	COST	187,687.	219,057.
Total to Form 990-PF, Part II, line 13	3	187,687.	219,057.

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

6

Name and Address of Person to Whom Applications Should be Submitted

CON AMOR FOUNDATION PO BOX 5337 BEND, OR 97708

Telephone Number

(541) 593-6723

Form and Content of Applications

SUBMIT GRANT APPLICATION FORM OR SCHOLARSHIP APPLICATION FORM ALONG WITH ADDITIONAL INFORMATION, AS REQUESTED ON THOSE APPLICATIONS

Any Submission Deadlines

NONE

Restrictions and Limitations on Awards

NONE

Recipient	Address	Purpose	Amount
Cynthia Lai	N/A	Scholarship for education	2,000
Cynthia Car		Scholarship for Cadaction	2,000
Cara Edwards	N/A	Scholarship for education	2,000
Dylan Chaffin	N/A	Scholarship for education	2,000
Hannah Kalamau	N/A	Scholarship for education	2,000
Galapagos Conservancy	11150 Fairfax Blvd. #408 Fairfax, VA 22030	Conservation of the Galapagos	500
Silverspot Productions	N/A	Production of educational films	1,000
Mana Christian Ohana Church	6851 S Laburum Ave. Richmond, VA 23231	To promote Christian fellowship	2,000
The Nature Conservancy	821 SE 14th Ave. Portland, Or 97214-2537	To protect critical natural habitat	400
Keck Observatory	65-1120 Mamalahoa Hwy. Waimea,Hhi 96743	To advance the frontiers of astronomy	300
Rainbow Friends	PO Box 1259 Kurtistown, HI 96760	To aid animals in need	400
Child fund International	2821 Emerywood Parkway, Richmond, VA 23294	To aid children in need	240
Doctors Without Borders	333 7th Ave, 2nd Floor New York, NY 10001	For conservation programs	500
CRM Missionary	1240 N. Lakeview Ave. #120 Anaheim, CA 92807	Empowering leaders	6,500
Seattle Cancer Care Alliance	825 Eastlake Ave. E Seattle, WA 98109	Cancer treatment center	250
Environmental Law Alliance	1877 Garden Ave. Eugen, Or 97403	Helps communities speak out for clean air.	200
Coral Reef Research Foundation	Box 1765, Koror, PW 96940, PALAU	To support Coral Reef conservation efforts	500
Humane Society of Hawaii Island	74-5225 Queen Kaahumanu Hwy, Kailua Kona, HI 96740	To aid animals in need	200
Humane Society of Central Oregon	61170 SE 27th St, Bend, OR 97702	To aid animals in need	200

Recipient	Address	Purpose	Amount
	1441 Broadway 5th floor		
Wildlife Alliance	New York, NY 10018	Environment conservation	300
		To make our oceans as rich,	
	222 NW Davis Street	healthy and abundant as they	
Oceana	Portland, OR 97209	once were	300

Total Charitable Distributions

21,790

CON AMOR FOUNDATION FORM 990-PF, PART II, LINE 13 FOR YEAR ENDED 12/31/2013

Description	Units	Book Value	Market Value
VANGUARD BOND INDEX FUND	189.000	10,511.16	10,550.76
PIMCO INCM INST CL	7656.497	93,379.45	93,868.65
OAKMARK EQUITY INC FD	3511.096_	83,796.59	114,637.28
TOTAL PORTFOLIO		187,687.20	219,056.69

CON AMOR FOUNDATION FORM 990-PF MINIMUM INVESTMENT RETURN FOR THE YEAR ENDED 12/31/2013

SECURITIES	Monthly FMV	Average FMV	Total Assets
January	116,970.89		117,303.24
February	116,118.35		117,437.13
March	114,096.76		119,457.43
April	113,939.09		114,298.26
May	116,298.02		116,617.95
June	113,030.78		114,266.95
July	210,290.48		210,603.76
August	208,312.96		208,636.16
September	213,930.96		214,134.17
October	214,312.25		214,435.17
November	216,642.41		216,775.42
December_	219,056.69		219,233.72

TOTAL 1,972,999.64 164,416.64

CASH BALANCES	Beg. of Month	End of Month	Total	Avg. Monthly
January	1,388.39	332.35		
February	332.35	1,318.78		
March	1,318.78	5,360.67		
April	5,360.67	359.17		
May	359.17	319.93		
June	319.93	1,236.17		
July	1,236.17	313.28		
August	313.28	323.20		
September	323.20	203.21		
October	203.21	122.92		
November	122.92	133.01		
December_	133.01	177.03		
TOTAL	11,411.08	10,199.72	21,610.80	900.45

PF-15

2
Account Number 2490-6438
Schwab One® Account of CON AMOR FOUNDATION

		_	9,844.96	64	9,566.30	65		is reported to the IRS)	Total Short-Term (Cost basis is reported to the IRS)
00.0	24.85	"	9,844.96	#	06.395,6	64			Security Subtotal
	24.85 \$	•	9,844.98	₩	9,568.90	01/09/13 \$ 07/05/13	S.	72201F490	PIMCO INCM INST CL
4-Federal Income	5-Wash sale bas disallowed		3-Cost or other basis		2a-Sales pnce of stocks, bonds, etc. (less commissions and options premiums) 1e-Cuartify sold	1b-Date of acquistion 1a-Date of sale or exchange	‡ 	CUSIP Number 10-Stock or cther symbol	8-Description
SHORT-TERM MOLDING PERIOD TION IS REPORTED TO THE IRS	SHORT-TERM HOLDING PERIOD COST BASIS IN THIS SECTION IS REPORTED TO THE IRS	Ź	COST BASIS IN		c	Box A checked	- E	10-Type of gain or loss: Short-term (Report on Form 8949, Part I, with Box A checked.) 6b-Basis reported to IRS	1c-Type of gain or loss: Short-le 6b-Basis reported to IRS
MB No. 1545-0715)	Copy B for Recipient (OMB No. 1545-0715)	8						smal Revenue Service	Department of the Treasury-Internal Revenue Service
Form 1099-B								ransactions — 2013	Proceeds from Broker Transactions — 2013
		Q	Telephone Number: (800) 435-4000 Federal ID Number: 94-1737782		Telephone N Federal ID N			163	Taxpayer ID Number: 93-1299163 Account Number: 2490-6438
			CHARLES SCHWAB & CO., INC. 211 MAIN STREET SAN FRANCISCO, CA 94105	동발S S	CHARLES SCHWAB & CO., II 211 MAIN STREET SAN FRANCISCO, CA 94105				CON AMOR FOUNDATION PO BOX 5337 BEND OR 97708
		- {	Payer's Name and Address	튑	Payer's Na			ddress	Recipient's Name and Address
Date Prepared: February 7, 2014	Date Prepar								

Please see the "Notes for Your Form 1099-B" section for additional explanation of this Form 1099-B report.

9,844,96

9,566.90 9,568.90

Total Short-Term Sales Price of Stocks, Bonds, etc.

Total Sales Price of Stocks, Bonds, etc. **Total Federal Income Tax Withheld**

9.0

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you it this income is tarable and the IRS determines that it has not been reported.

Page 3 of 12

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charles SCHWAB

Schwab One® Account of CON AMOR FOUNDATION

Date Prepared: February 7, 2014 The information in this and all subsequent sections is not provided to the IRS by Charles Schwab. It is provided to you as additional tax reporting information you may need to complete your tax return. YEAR-END SUMMARY INFORMATION IS NOT PROVIDED TO THE IRS.

REALIZED GAIN OR (LOSS)

The information in the following sections include all your realized gain or (loss) transactions during the tax year. They may be helpful for, but not limited to, Schedule D. Please consult with your tax advisor or financial advisor regarding specific questions.

Short-Term Realized Gain or (Loss)

This section is for covered securities and corresponds to transactions reported on your 1099-B as "cost basis is reported to the IRS." Report on Form 8949, Part I, with Box A checked.

1 1 1	CUSIP	Ouardity/Par	A	Date of Date of utsition Sale	Total Proceeds	Cost Basis	Wash Sale Loss Disallowed	Realized Gain or (Less)
Description DIACO INCH INCT CL	72201F490	790.00		01/09/13 07/05/13 \$	\$ 06.995,6	9,844.96 \$	24.85 \$	(253.21)
Security Subtotal				49	\$ 06.392,6	9,844.96	24.85 \$	(258.21)
Total Short-Term (Cost basis is reported to the IRS)	basis is reported t	o the IRS)		S	\$ 06995'6	\$ 96.44.96	24.85 \$	(253.21)
Total Short-Term				6	\$ 05'995'6	\$ 3644.96	24.85 \$	(253.21)

Long-Term Realized Gain or (Loss)

The transactions in this section are not reported on Form 1099-B or to the IRSReport on Form 8949, Part II, with Box C checked.

	CUSIP	Quantity/Par	Date of Date of Acquisition Sale	Date of Sale	Total Proceeds	Cost Basis	Wash Sate Loss Disallowed	7	Regized Gain or (Loss)
Description 110001 1100010	412030400		11/14/03 D3/21/13 5	S 81/12/8	2.000.00 \$	1,533.16	00.00	\$ 0	466.84
CAKWARK EGUIT & INCOM	00100011	5 1	201111	8 0 V 0 V 0 V 0 V 0 V 0 V 0 V 0 V 0 V 0	\$ 00000	1 480 80	0.00	8	519.20
DAKMARK EQUITY & INCOM 413838400	413838400	54.45	11/14/13 00/02/13	9 67 10 9	* 60000°2	96.035		. <i>u</i> .	1,149.64
OAKMARK EQUITY & INCOM 413838400	413838400	115.36	11/14/03 10/07/13	\$ 51/200	3,900.00	2,000,00		9 6	2 125 GB
Security Subtotal				ur	7,800.00 \$, 26.400 _c c	2	*	1

Page 6 of 12

charles SCHWAB

Schwab One® Account of CON AMOR FOUNDATION

Account Number 2490-6438

TAX YEAR 2013 YEAR-END SUMMARY

YEAR-END SUMMARY INFORMATION IS NOT PROVIDED TO THE IRS.

Date Prepared: February 7, 2014 The information in this and all subsequent sections is not provided to the IRS by Charles Sohwab. It is provided to you as additional tax reporting information you may need to complete your tax return.

Long-Term Realized Gain or (Loss) (continued)

The transactions in this section are not reported on Form 1099-B or to the IRS Report on Form 8949, Part II, with Box C checked.

Description	CUSIP Number	Date of Quantity/Par Acquisition		Date of Sale	Total Proceeds.	Cost Basis	Wash Sale Loss Disallowed	Realized Gath or (Loss)
VANGUARD BOND INDEX FU 921937827	321937827	15.00	04/05/10 01/08/13 \$	1/08/13 \$	1,214.37 \$	1,194.45	0.00 8	19.92
VANGUARD BOND INDEX FU 921937827	321937827	12.00	04/05/10 02/19/13 \$	2/19/13 \$	\$ 90.026	952.58	0.00	14.50
VANGUARD BOND INDEX FU 921937827	321937827	2.00	04/05/10 03/21/13 \$	3/21/13 \$	161.92 \$	159.26	0.00	2.66
VANGUARD BOND INDEX FU 921937827	921937827	11.80	04/05/10 03/21/13	3/21/13 \$	890.54 \$	875.93	0.00	14.61
VANGUARD BOND INDEX FU 921937827	321937827	17.00	04/05/10 03/21/13 \$	3/21/13 \$	1,376.29 \$	1,353.71	0.00	22.58
Security Subtotal				4	4,613.18 \$	4,538,91	0.00	74.27
Total Long-Term (Transactions are not reported on Form 1099-B or to the IRS)	ons are not repo	rled on Form 1	199-B or to th	e IRSJ \$	12,413.18 \$	10,203,23	0.00	2,209.95
Total Long-Term				4	12,413.18 \$	10,203.23	00.00	2,209.95

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Schwab One® Account of CON AMOR FOUNDATION

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TAX YEAR 2013

YEAR-END SUMMARY

والموالية والمحكون والمراجع ومجار والمراجع والمستور والمراجع والمحارب والمحارب والمراجع والمراجع والمارات والمراجع والم

Account Number 2490-6438

Date Prepared: February 7, 2014 YEAR-END SUMMARY INFORMATION IS NOT PROVIDED TO THE IRS.
The information in this and all subsequent sections is not provided to the IRS by Charles Schwab. It is provided to you as additional tax reporting information you may need to complete your tax return.

Realized Gain or (Loss) Summary

Total Realized Gain or (Loss)

Description	Total Proceeds	Cost Basis	Wash Sale Loss Disallowed	Realized Gain or (Loss)
Total Short-Term Realized Gain or (Loss) (Cost basis is reported to the IRS. Report on Farm 8949, Part I, with Box A checked.)	\$ 06'995'6	9,844.96	\$ 24.85 \$	(253.21)
Total Short-Term Realized Gain or (Loss)	\$ 06'995'6	9,844.96	\$ 2485 \$	(253.21)
Total Long-Term Realized Gain or (Loss) (Transactions are not reported on Form 1099-B \$ out to the RS. Report on Form 8949, Part II with Box C checked.)	12,413,18 \$	10,203.23 \$	\$ 0000 \$	2,209.95
Total Long-Term Realized Gain or (Loss)	12,413.18 \$	10,203.23	\$ 00'0 \$	2,209.95
TOTAL REALIZED GAIN OR (LOSS)	\$ 80.086,12	20,048.19	\$ 24.85 \$	1,956.74

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Form **8868**

(Rev. January 2014)

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.

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

OMB No. 1545-1709

If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			▶	X		
-	are filing for an Additional (Not Automatic) 3-Month E x		, , ,	•					
Do not d	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868.	•			
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tir	ne to file (6 months	for a corp	oration		
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically t	ile Form 8	868 to re	quest an e	extension		
of time to	ofile any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associate	∍d With Ce	ertain		
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details	on the ele	ctronic fili	ing of this	form,		
***************************************	v.irs.gov/efile and click on e-file for Charities & Nonprofits		1 /4 / /	1. 0					
Part I									
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		_	_		
Part I on!	•					>	· Ш		
	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an exte	nsion of ti	me			
to THE INC	ome tax retums.			Enter fil	<u>er's ident</u>	tifying nur	nber		
Type or print	Name of exempt organization or other filer, see instru	ctions.		Employe	r identific	ation numi	ber (EIN) or		
	CON AMOR FOUNDATION 93-1299163								
due date for filing your	ue date for Number, street, and room or suite no. If a P.O. box, see instructions.								
instructions.									
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			•	0 4		
		· · ·					·· <u> </u>		
Applicati	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									
		02	Form 1041-A			····	08		
	0 (individual)	03	Form 4720 (other than individual)	 -			09		
Form 990		04	Form 5227				10		
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11		
Form 990	-T (trust other than above)	06	Form 8870				12		
Teleph If the c	BRUCE H. MILLER books are in the care of ► PO BOX 5337 - If the cone No. ► (541) 593-6723 organization does not have an office or place of business s for a Group Return, enter the organization's four digit	SEND, s in the Un Group Exe	Fax No. iited States, check this box imption Number (GEN) I	f this is fo	r the who				
box ▶ L	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the ex	<u>ctension is</u>	for.		
		-	to file Form 990-T) extension of time tion return for the organization name		The exter	nsion			
_	or the organization's return for:								
▶į	X calendar year 2013 or								
►L	tax year beginning	, and	d ending		- ·				
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck reaso	on: Initial return	Final retur	n				
2- 16 46		6060 ·		- 		<u></u>			
	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	UI 0009, 6	enter the tentative tax, less any	2-		(72)			
	refundable credits. See instructions.		refundable and the and	3a	\$				
	is application is for Forms 990-PF, 990-T, 4720, or 6069								
	mated tax payments made. Include any prior year overp			3b	\$				
	ance due. Subtract line 3b from line 3a. Include your pa using EFTPS (Electronic Federal Tax Payment System). \$	_	•	3c	•	X			
					_ ⊅	970 50			
caution. netrictio	If you are going to make an electronic funds withdrawal	(UII 601 1381	ony with this comi acco, see comi a	+oo-c∪ ai	ia Lotti g	01 A-EO 10	r payment		

Form **8868**

(Rev. January 2014)

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.

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

OMB No. 1545-1709

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or print CON AMOR FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 5337 File by the due date for filing your PO BOX 5337	If you a	re filing for an Automatic 3-Month Extension, complete	e only Pa	rt i and check this box		. •	· X			
Electronic filing (a-filiety Nou can electronically file Form 8888 if you need a 3-month automatic extension of time for a corporation required to file Form 980-Ti, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8888 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, sets www. us.g. opinidis and click on a -file for Chamter's Revenues as Revoprofits. Part I	• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).					
required to file Form 990-T), or an additional (not automatic) 3-month extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8970, Information Return for Transfers Associated With Centain 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, wast www.in.gov/effile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	Do not c	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	rm 8868.				
at time to file any of the forms letted in Part I verit 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, yealt www.ns.gevietilite and cilick on e-file for Chartes & Rionportifis Part I I Automatic 3-Month Extension of Time. Only submit original (no copies needed). Acorporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only I all other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I Automatic Part Pa	Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months for a corp	oration			
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Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).	of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for 1	ransfers A	Associated With Ce	ertain			
Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).	Personal	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 this	form,			
Part				•		_				
Mile other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to the incorne tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print CON AMOR FOUNDATION 93–1299163	Part I			ubmit original (no copies ne	eded).					
Application Enter the Return code for the return that this application is for (file a separate application for good of the form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-B Enter the Return code for the return that this application is for (file a separate application) Form 990-Form 990-E Enter the Return code for the return that this application is for (file a separate application) Form 990-Form 990-Form 990-E Enter the Return code for the return that this application is for (file a separate application) Form 990-Form	tion required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete						
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Type or print Section		• •	 ICs. and ti	rusts must use Form 7004 to reques	t an exten	sion of time				
Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print				•			mber			
CON AMOR FOUNDATION Mumber, street, and room or suite no. If a P.O. box, see instructions.	Type or	Name of exempt organization or other filer, see instru-	ctions.							
CON AMOR FOUNDATION Number, street, and room or surte no. If a P.O. box, see instructions. PO BOX 5 33 7 City, town or post office, state, and ZIP code For a foreign address, see instructions. BEND, OR 97708 Enter the Return code for the return that this application is for (file a separate application for each return) Return Code Application Return Application Return Code Reform 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 (individual) 04 Form 990 T (see, 401(a) or 408(a) trust) 05 Form 990 T (see, 401(a) or 408(a) trust) 06 Form 990 T (see, 401(a) or 408(a) trust) 07 Form 990 T (trust other than above) 08 Form 670 T (trust other than above) 09 Form 990 T (see, 401(a) trust) 10 Form 990 T (see, 401(a) or 408(a) trust) 11 Form 990 T (trust other than above) 12 If the organization does not have an office or place of business in the United States, check this box 14 If it is for part of the group, check this box 15 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 16 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 17 I request an automatic 3-month (if months for a corporation required to file Form 990-T) extension of time until August 15, 2014 16 the axyear entered in line 1 is for less than 12 months, check reason: 1 I request an automatic 3-month (if months for a corporation required to file Form 990-T) extension of time until August 15, 2014 16 this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any pror year overpayment with this form, frequired, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3a 311.		, take of ottompt of games and the first many sees that	- 1, - 1 - 1		J,					
Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN)	P ······	CON AMOR FOUNDATION				93-129916	63			
PO BOX 5337 City, town or post office, state, and ZIP code. For a foreign address, see instructions. BEND, OR 97708 Enter the Return code for the return that this application is for (file a separate application for each return) Return Application Return Application Return Service	File by the	le by the								
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Form 990 or Form 990-EZ Form 990-BL 02 Form 190-BL 03 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 ■ BRUCE H. MILLER ■ The books are in the care of ▶ PO BOX 5 337 − BEND, OR 97708 Telephone No. ▶ (541) 593-6723 Fax No. ▶ ■ If the organization does not have an office or place of business in the United States, check this box ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ■ If it is for part of the group, check this box ▶ and attach a list with the names and ElNs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014, to file the exempt organization return for the organization named above. The extension is for the average and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason:	• •	···		• •						
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Form 4720 (individual) 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 BRUCE H. MILLER The books are in the care of ▶ PO BOX 5337 − BEND, OR 97708 Telephone No. ▶ (541) 593-6723 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☑ calendar year 2013 or ▶ □ tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period 3a 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. 3a \$ 311. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3a \$ 311.										
Form 990-PF										
Form 990-T (sec. 401(a) or 408(a) trust) BRUCE H. MILLER Telephone No.										
BRUCE H. MILLER The books are in the care of ▶ PO BOX 5337 − BEND, OR 97708 Telephone No. ▶ (541) 593-6723 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ X calendar year 2013 or ▶ tax year beginning , and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a 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. 3a \$ 311. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 311.							1			
BRUCE H. MILLER The books are in the care of ▶ PO BOX 5337 − BEND, OR 97708 Telephone No. ▶ (541) 593-6723 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if this is for the whole group, check this box If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ X calendar year 2013 or ▶ and ending , and ending . If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 311.							_			
The books are in the care of ▶ PO BOX 5337 - BEND, OR 97708 Telephone No. ▶ (541) 593-6723 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ★ calendar year 2013 or ▶ and ending and ending and ending and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Final return Final return See instructions. 3a 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. 3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ 0. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 311.	Form 990			FOITI 8070		·	_[12			
Telephone No. ► (541) 593-6723 Fax No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if this is for the whole group, check this box If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: EX calendar year 2013 or The tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 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. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3a \$ 311.	• The be			OR 97708						
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Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	by	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	311.			
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For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)