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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation Ruth J & Robert A Conway Foundation Inc		A Employer identification number 31-1575184	
Number and street (or P O box number if mail is not delivered to street address) 5799 Manemont Avenue		B Telephone number (see instructions) (513) 271-2349	
City or town, state or province, country, and ZIP or foreign postal code Cincinnati, OH 45227		C If exemption application is pending, check here	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here  2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 15,307,609		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)			

Part I Analysis of Revenue and Expenses					
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . . . .	346,946	346,946		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	1,259,679			
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . . .		1,259,679		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	467,352	467,352		
	12 Total.Add lines 1 through 11 . . . . .	2,073,977	2,073,977		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .				
	b Accounting fees (attach schedule). . . . .	12,815	6,408		6,407
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . .	31,993	3,993		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings. . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule). . . . .	103,716	102,308		1,408
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	148,524	112,709		7,815
	25 Contributions, gifts, grants paid . . . . .	1,410,200			1,410,200
	26 Total expenses and disbursements.Add lines 24 and 25	1,558,724	112,709		1,418,015
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	515,253			
	b Net investment income (if negative, enter -0-)		1,961,268		
	c Adjusted net income(if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	8,517	5,260	5,260
	2	Savings and temporary cash investments . . . . .	533,263	1,210,670	1,210,670
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	6,950,688	7,251,676	8,617,514
	c	Investments—corporate bonds (attach schedule) . . . . .	2,822,563	2,988,206	2,797,356
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	3,073,047	2,347,038	2,676,809
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	13,388,078	13,802,850	15,307,609	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule). . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	13,388,078	13,802,850	
	30	Total net assets or fund balances(see instructions) . . . . .	13,388,078	13,802,850	
31	Total liabilities and net assets/fund balances(see instructions) . . . . .	13,388,078	13,802,850		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1 13,388,078
2	Enter amount from Part I, line 27a . . . . .	2 515,253
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 13,903,331
5	Decreases not included in line 2 (itemize) ▶ _____	5 100,481
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6 13,802,850

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 1,246,440		1,224,637	21,803
b 2,493,946		2,073,417	420,529
c 1,272,580		720,643	551,937
d 25,980			25,980
e 374,265		134,835	239,430

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
(i) FM V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			21,803
b			420,529
c			551,937
d			25,980
e			239,430

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	1,259,679
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	1,244,535	15,696,058	0 079290
2013	1,478,211	16,531,103	0 089420
2012	1,446,024	15,542,150	0 093039
2011	1,162,539	15,917,612	0 073035
2010	1,323,663	15,669,757	0 084472

2	Total of line 1, column (d).	2	0 419256
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 083851
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	15,144,604
5	Multiply line 4 by line 3.	5	1,269,890
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	19,613
7	Add lines 5 and 6.	7	1,289,503
8	Enter qualifying distributions from Part XII, line 4.	8	1,418,015

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	19,613
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3 Add lines 1 and 2. . . . .		3	19,613
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .		5	19,613
6 Credits/Payments			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	40,891	
b Exempt foreign organizations—tax withheld at source . . . . .	6b		
c Tax paid with application for extension of time to file (Form 8868). . . . .	6c	25,000	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments Add lines 6a through 6d. . . . .		7	65,891
8 Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶		9	
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . ▶		10	46,278
11 Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> ▶ 46,278 <b>Refunded</b> ▶		11	0

Part 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 participate or intervene in any political campaign? . . . . .		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b		No
c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation ▶ \$ _____ 0 <b>(2)</b> On foundation managers ▶ \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	Yes	
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ OH _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	10		No

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>SISTER CARREN HERRING</u> Telephone no ► <u>(513) 271-2349</u> Located at ► <u>5799 Manemont Avenue Cincinnati OH</u> ZIP+4 ► <u>45227</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <b>15</b>			
<b>16</b>	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ► <u>OC</u>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
<b>1a</b>	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i> ). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)**

<b>5a</b> During the year did the foundation pay or incur any amount to			
<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		<b>5b</b>	
Organizations relying on a current notice regarding disaster assistance check here. <span style="float: right;">▶</span>			
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>	<b>No</b>
<i>If "Yes" to 6b, file Form 8870</i>			
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
<b>Total</b> number of other employees paid over \$50,000. <span style="float: right;">▶</span>				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. 0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0



**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	15,002,402
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	372,830
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	15,375,232
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	15,375,232
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	230,628
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	15,144,604
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	757,230

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	757,230
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	19,613
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	19,613
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	737,617
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	737,617
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	737,617

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	1,418,015
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,418,015
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	19,613
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	1,398,402

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				737,617
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .				1,340,590
b From 2011. . . . .				1,162,539
c From 2012. . . . .				690,146
d From 2013. . . . .				665,880
e From 2014. . . . .				493,702
f Total of lines 3a through e. . . . .	4,352,857			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 1,418,015				
a Applied to 2014, but not more than line 2a			0	
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 2015 distributable amount. . . . .				737,617
e Remaining amount distributed out of corpus	680,398			
5 Excess distributions carryover applied to 2015 (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	5,033,255			
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 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	1,340,590			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	3,692,665			
10 Analysis of line 9				
a Excess from 2011. . . .				1,162,539
b Excess from 2012. . . .				690,146
c Excess from 2013. . . .				665,880
d Excess from 2014. . . .				493,702
e Excess from 2015. . . .				680,398

Part XIV

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

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a . . . . .				
c Qualifying distributions from Part XII, line 4 for each year listed . . . . .				
d Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .				

3

Complete 3a, b, or c for the alternative test relied upon

a

"Assets" alternative test—enter

(1)

Value of all assets . . . . .

(2)

Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .

b

"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .

c

"Support" alternative test—enter

(1)

Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .

(2)

Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3)

Largest amount of support from an exempt organization . . . . .

(4)

Gross investment income . . . . .

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SISTER CARREN HERRING  
5799 MARIEMONT AVENUE  
MARIEMONT AVENUE, OH 45227  
(513) 271-2349

b

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

APPLICATION MUST BE REQUESTED IN WRITING

c

Any submission deadlines

NONE

d

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

RECIPIENTS MUST BE PUBLIC CHARITIES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3)

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			▶ 3a	1,410,200
b Approved for future payment				
Total . . . . .			▶ 3b	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)

1. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:			
<b>(1)</b> Cash.		<b>1a(1)</b>	<b>No</b>
<b>(2)</b> Other assets.		<b>1a(2)</b>	<b>No</b>
<b>b</b> Other transactions:			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.		<b>1b(1)</b>	<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.		<b>1b(2)</b>	<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.		<b>1b(3)</b>	<b>No</b>
<b>(4)</b> Reimbursement arrangements.		<b>1b(4)</b>	<b>No</b>
<b>(5)</b> Loans or loan guarantees.		<b>1b(5)</b>	<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.		<b>1b(6)</b>	<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		<b>1c</b>	<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes  
☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

\* \* \* \* \*

2016-11-14

\* \* \* \* \*

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below

(see instr )? ☒ Yes ☐ No

(see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use  
Only**

Print/Type preparer's name Courtney Reitman- Deinlein	Preparer's Signature	Date	Check if self- employed <input type="checkbox"/>	PTIN P00420933
Firm's name <input type="checkbox"/> DELOITTE TAX LLP			Firm's EIN <input type="checkbox"/> 86-1065772	
Firm's address <input type="checkbox"/> 250 EAST FIFTH SUITE 1900 CINCINNATI, OH 45202			Phone no. (513) 784-7100	

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT A CONWAY SR	TREASURER 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
WILLIAM J KEATING	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
TIM CONWAY	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
Judy Wimberg	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
Robert Conway JR	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
Mary Lois Conway Drath	CHAIRMAN 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
MARY RUTH SMYJUNAS	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
SISTER CARREN HERRING	SECRETARY 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
SEAN CONWAY	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
JOSEPH A CONWAY	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
SHEILA CONWAY	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
EILEEN CONWAY	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				
KATHLEEN BELL	TRUSTEE 5 00	0	0	0
5799 MARIEMONT AVENUE CINCINNATI,OH 45227				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ARCHBISHOP MCNICHOLAS HIGH SCHOOL 6536 BEECHMONT AVENUE CINCINNATI, OH 45230	NONE	PC	GENERAL SUPPORT	14,450
BISHOP FENWICK HIGH SCHOOL 4855 OHIO 122 FRANKLIN, OH 45005	NONE	PC	GENERAL SUPPORT	45,000
BOYS & GIRLS CLUB 1620 CENTRAL PKWY CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	10,000
CAMP JOY 10117 OLD 3 C HWY CLARKSVILLE, OH 45113	NONE	PC	GENERAL SUPPORT	5,000
CATHOLIC CHARITIES OF SOUTHWESTERN OHIO 100 EAST 8TH STREET CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	4,000
CATHOLIC MINISTRIES APPEAL - ARCHDIOCESE OF CINCINNATI 100 E EIGHT STREET CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	4,000
CHATFIELD COLLEGE 18000 LOGAN ST 210 CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	55,000
CINCINNATI WORKS INC 708 WALNUT STREET SUITE 200 CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	5,000
CISE FOUNDATION 100 E EIGHT STREET CINCINNATI, OH 45202	NONE	PC	GENERAL SUPPORT	81,000
DEPAUL CRISTO REY HIGH SCHOOL 1133 CLIFTON HILLS AVENUE CINCINNATI, OH 45220	NONE	PC	GENERAL SUPPORT	15,000
DOWN SYNDROME ASSOCIATION 4623 WESLEY AVE CINCINNATI, OH 45212	NONE	PC	GENERAL SUPPORT	5,000
EAST END ADULT EDUCATION CENTER 5721 DRAGON WAY 401 CINCINNATI, OH 45227	NONE	PC	GENERAL SUPPORT	3,000
EPISCOPAL RETIREMENT HOMES 3870 VIRGINIA AVE CINCINNATI, OH 45227	NONE	PC	GENERAL SUPPORT	15,000
IGNATIAN SPIRITUALITY CENTER 1641 S ALLPORT ST CHICAGO, IL 60608	NONE	PC	GENERAL SUPPORT	5,000
JESUIT SPIRITUAL CENTER AT MILFORD 5361 S MILFORD RD MILFORD, OH 45150	NONE	PC	GENERAL SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				1,410,200



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
LEGAL AID SOCIETY OF CINCINNATI 215 E NINTH STREET NO 200 CINCINNATI,OH 45202	NONE	PC	GENERAL SUPPORT	250
MOTHER OF MERCY HIGH SCHOOL 3036 WERK ROAD CINCINNATI,OH 45211	NONE	PC	GENERAL SUPPORT	10,000
MOUNT NOTRE DAME HIGH SCHOOL 711 E COLUMBIA AVE CINCINNATI,OH 45215	NONE	PC	GENERAL SUPPORT	5,000
MOUNT ST JOSEPH UNIVERSITY 5701 DELHI AVENUE CINCINNATI,OH 45233	NONE	PC	GENERAL SUPPORT	103,000
NATIVITY OF OUR LORD 5936 RIDGE AVE CINCINNATI,OH 45213	NONE	PC	GENERAL SUPPORT	8,000
OHIO INNOCENCE PROJECT 2540 CLIFTON AVE CINCINNATI,OH 45221	NONE	PC	GENERAL SUPPORT	50,000
OUR DAILY BREAD MINISTRIES 3000 KRAFT AVENUE SE GRAND RAPIDS,MI 49501	NONE	PC	GENERAL SUPPORT	5,000
OUR LORD CHRIST THE KING CHURCH 333 WARNER STREET CINCINNATI,OH 45219	NONE	PC	GENERAL SUPPORT	148,000
OVER-THE-RHINE KITCHEN 1620 VINE STREET CINCINNATI,OH 45202	NONE	PC	GENERAL SUPPORT	5,000
PEOPLE WORKING COOPRERATIVELY INC 4612 PADDOCK ROAD CINCINNATI,OH 45229	NONE	PC	GENERAL SUPPORT	5,000
PURCELL MARIAN HIGH SCHOOL 2935 HACKBERRY ST CINCINNATI,OH 45206	NONE	PC	GENERAL SUPPORT	5,000
SANTA MARIA COMMUNITY SERVICES 617 STEINER AVENUE CINCINNATI,OH 45204	NONE	PC	GENERAL SUPPORT	2,500
SISTERS OF NOTRE DAME DE NAMUR 701 E COLUMBIA AVE CINCINNATI,OH 45215	NONE	PC	GENERAL SUPPORT	2,000
SPRINGER SCHOOL 2121 MADISON ROAD CINCINNATI,OH 45208	NONE	PC	GENERAL SUPPORT	1,000
ST CLEMENT SCHOOL 4534 VINE STREET ST BERNARD,OH 45217	NONE	PC	GENERAL SUPPORT	20,000
<b>Total . . . . . ▶ 3a</b>				1,410,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ST JOSEPH'S INDIAN SCHOOL 1301 N MAIN STREET CHAMBERLAIN,SD 57325	NONE	PC	GENERAL SUPPORT	25,000
ST MARGARET HALL 1960 MADISON ROAD CINCINNATI,OH 45206	NONE	PC	GENERAL SUPPORT	10,000
ST URSULA HIGH SCHOOL 1339 EAST MCMILLIAN STREET CINCINNATI,OH 45206	NONE	PC	GENERAL SUPPORT	5,000
ST URSULA VILLA 3660 VINEYARD PL CINCINNATI,OH 45226	NONE	PC	GENERAL SUPPORT	25,000
ST VINCENT DE PAUL CINCINNATI 1125 BANK STREET CINCINNATI,OH 45214	NONE	PC	GENERAL SUPPORT	25,000
ST XAVIER HIGH SCHOOL 600 W NORTH BEND ROAD CINCINNATI,OH 45224	NONE	PC	GENERAL SUPPORT	10,000
STRATEGIES TO END HOMELESSNESS 2368 VICTORY PARKWAY SUITE 600 CINCINNATI,OH 45206	NONE	PC	GENERAL SUPPORT	25,000
SUMMIT COUNTRY DAY SCHOOL 2161 GRANDIN ROAD CINCINNATI,OH 45208	NONE	PC	GENERAL SUPPORT	100,000
TAFT MUSEUM 316 PIKE STREET CINCINNATI,OH 45202	NONE	PC	GENERAL SUPPORT	8,000
TENDER MERCIES INC 27 WEST 12TH STREET CINCINNATI,OH 45202	NONE	PC	GENERAL SUPPORT	5,000
THE ANTHENAUM 2936 N SOUTHPORT AVE CHICAGO,IL 60657	NONE	PC	GENERAL SUPPORT	125,000
THE JESUITS OF CHICAGO 2050 N CLARK ST CHICAGO,IL 60614	NONE	PC	GENERAL SUPPORT	1,000
UNIVERSIY OF CINCINNATI FOUNDATION PO BOX 19970 CINCINNATI,OH 45219	NONE	PC	GENERAL SUPPORT	200,000
URSULINE ACADEMY 5535 PFEIFFER ROAD CINCINNATI,OH 45242	NONE	PC	GENERAL SUPPORT	5,000
URSULINES OF BROWN COUNTY 20860 OHIO 251 FAYETTEVILLE,OH 45118	NONE	PC	GENERAL SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				1,410,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
XAVIER UNIVERSITY 3800 VICTORY PARKWAY CINCINNATI, OH 45207	NONE	PC	GENERAL SUPPORT	200,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,410,200

**TY 2015 Accounting Fees Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DELOITTE TAX LLP	12,815	6,408		6,407

**TY 2015 Investments Corporate Bonds Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BOND MUTUAL FUNDS	2,988,206	2,797,356

**TY 2015 Investments Corporate Stock Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCKS	7,251,676	8,617,514

**TY 2015 Investments - Other Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTERNATIVE INVESTMENTS	AT COST	2,347,038	2,676,809

## TY 2015 Other Decreases Schedule

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Description	Amount
MISCELLANEOUS ADJUSTMENT	100,481



**TY 2015 Other Expenses Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
 Inc  
**EIN:** 31-1575184

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHECKING SERVICES CHARGE	9	9		0
INVESTMENT FEES	70,359	70,359		0
BAY CAPITAL PARTNERS - PORTFOLIO DEDUCTIONS	3,888	3,888		0
KW DISCOVERY LLC - PORTFOLIO DEDUCTIONS	192	192		0
SAM VENTURES - PORTFOLIO DEDUCTIONS	2,042	2,042		0
KW REDHAWK - PORTFOLIO DEDUCTIONS	90	90		0
FT WASHINGTON PRIVATE EQUITY - POTFOLIO DEDUCTIONS	5,669	5,669		0
SOUTHEAST LANDCO - PORTFOLIO DEDUCTIONS	1,900	1,900		0
LIFFEY THAMES - SECTION 179	9,667	9,667		0
FT WASHINGTON PRIVATE EQUITY - INVESTMENT INTEREST	36	36		0
SOUTHEAST LANDCO - INVESTMENT INTEREST	1,186	1,186		0
FT WASHINGTON PRIVATE EQUITY - CONTRIBUTIONS	1	0		1
RD CRIMSTONE LP - CONTRIBUTIONS	1,247	0		1,247
FT WASHINGTON PRIVATE EQUITY - SECTION 59 EXPENSE	89	89		0
FT WASHINGTON PRIVATE EQUITY - CREDITS	2	2		0
ADR FEES	281	281		0
OAKTREE CAPITAL GROUP LLC - PORTFOLIO DEDUCTIONS	206	206		0
SOUTHEAST LANDCO - CONTRIBUTIONS	1	0		1
LIFFEY THAMES - CREDITS	1,655	1,655		0
LIFFEY THAMES - CONTRIBUTIONS	159	0		159
COMPASS DIVERSIFIED HOLDINGS - PORTFOLIO DEDUCTIONS	5,037	5,037		0

## TY 2015 Other Income Schedule

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BAY CAPITAL PARTNERS LP - RENTAL INCOME	-3,880	-3,880	-3,880
ALPINE MOUNTAIN RANCH - ORDINARY INCOME	-44,151	-44,151	-44,151
BLACKBOOK EXPERIENCE MANAGEMENT GROUP LLC - ORDINARY INCOME	-56,351	-56,351	-56,351
LIFFEY THAMES - ORDINARY INCOME	52,067	52,067	52,067
RD CRIMSTONE LP - ORDINARY INCOME	79,584	79,584	79,584
FT WASHINGTON PRIVATE EQUITY - ORDINARY INCOME	16	16	16
FT WASHINGTON PRIVATE EQUITY - ROYALTY INCOME	9	9	9
FT WASHINGTON PRIVATE EQUITY - OTHER INCOME	471	471	471
UT STARCOM CLASS ACTION SETTLEMENT	241	241	241
FT WASHINGTON PRIVATE EQUITY - 1231 GAIN	-39	-39	-39
OAKTREE CAPITAL GROUP - OTHER INCOME	-119	-119	-119
SOUTHEAST LANDCO - ORDINARY INCOME	-8,849	-8,849	-8,849
RD CRIMSTONE LP - 1231 LOSS	-1	-1	-1
FT WASHINGTON PRIVATE EQUITY - ORDINARY INCOME UBIT	-123	-123	-123
5AM VENTURES II LP - LONG-TERM CAPITAL GAIN	49,604	49,604	49,604
5AM VENTURES II LP - SHORT-TERM CAPITAL GAIN	3,108	3,108	3,108
FT WASHINGTON PRIVATE EQUITY - SHORT-TERM CAPITAL GAIN	301	301	301
FT WASHINGTON PRIVATE EQUITY - LONG-TERM CAPITAL GAIN	40,946	40,946	40,946
SOUTHEAST LANDCO - 1231 GAIN	4	4	4
OAKTREE CAPITAL GROUP - SHORT-TERM CAPITAL GAIN	172	172	172

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
LIFFEY THAMES - OTHER INCOME	2	2	2
KW COMMERCE - LONG TERM CAPITAL GAIN	284,492	284,492	284,492
COMPASS DIVERSIFIED HOLDINGS	-212	-212	-212
COMPASS DIVERSIFIED HOLDINGS - LONG-TERM CAPITAL GAIN	1,198	1,198	1,198
INDIA CAPITAL - LONG-TERM CAPITAL GAIN	68,974	68,974	68,974
OAKTREE CAPITAL GROUP - LONG-TERM CAPITAL LOSS	-2,307	-2,307	-2,307
COMPASS DIVERSIFIED HOLDINGS - LONG-TERM CAPITAL GAIN	2,195	2,195	2,195

**TY 2015 Taxes Schedule**

**Name:** Ruth J & Robert A Conway Foundation  
Inc

**EIN:** 31-1575184

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	3,921	3,921		0
FT WASHINGTON PRIVATE EQUITY - FOREIGN TAXES	23	23		0
FEDERAL 2014 EXTENSION PAYMENT	28,000	0		0
FT WASHINGTON PRIVATE EQUITY - STATE TAXES WITHHELD	43	43		0
OAKTREE CAPITAL GROUP LLC - FOREIGN TAXES	6	6		0