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Form 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

For	alend	ar year 2010, or tax ye	ar beginning		, and ending		<u> </u>
G	heck a	III that apply	Initial return	Initial return of a f	ormer public charity	Final retur	'n
			Amended return	Address char	nge	Name change	
Na	ne of f	oundation				A Employer Identification	n number
			R FAMILY FOU			30-0083160	0
Nur	nber and	· ·	r if mail is not delivered to street	•	Room/suite	D TOTOPHONE HUMBER	1751
-			RD HUGHES PK	WY STE 200-	-316	(805)966-	
City	ortov	wn, state, and ZIP code LAS VEGAS	, NV 89169			C If exemption application is	
H (heck t	ype of organization	X Section 501(c)(3) ex	empt private foundation		D 1. Foreign organization 2. Foreign organizations m check here and attach of	neeting the 85% test, computation
		tion 4947(a)(1) nonexer		Other taxable private found	ation	E If private foundation st	atus was terminated
		ket value of all assets at	·	-	Accrual	under section 507(b)(1)(A), check here
		art II, col. (c), line 16)		her (specify)		F If the foundation is in a	
<u> </u>	\$		9,641. (Part I, colu	mn (d) must be on cash	T	under section 507(b)(1	4.00
Pa		Analysis of Revenue a (The total of amounts in colinecessarily equal the amou	umns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for chantable purposes (cash basis only)
		Contribut <u>ions</u> , gifts, grar				N/A	
		Check 🕨 🗶 if the foundati					
	3 8	nterest on savings and temp cash investments	corary	1,700.	1,700	•	STATEMENT 1
	4 [Dividends and interest fr	rom securities				, ,,,,
	5a (Gross rents					
	þΝ	Net rental income or (loss)					· [, · · · · · · · · · · · · · · · · · · ·
ě		Net gain or (loss) from sale of Gross sales price for all	f assets not on line 10				
ē	Dа	assets on line 6a		,	1		
Revenue		Capital gain net income (from			0	•	
_		Net short-term capital ga	ain		 		
_		ncome modifications Gross sales less returns	1			···	
		and allowances	-			-	,
		Less Cost of goods sold Gross profit or (loss)		: 		-	
		Other income				<u> </u>	
		Fotal Add lines 1 through	ah 11	1,700.	1,700		
_		Compensation of officers, di		0.	0		0
•		Other employee salaries	· ·		1		
•	l	Pension plans, employee	•				
o c	i	_egal fees		EACHIED	1	•	
ei ei	b A	Accounting fees	FK	COCIVEO			
ŭ	c (Other professional fees	.	AY 3 1 2011 S	41		
<u>š</u>	17 I	nterest	82 M	AY 3 1 2011 S			
trat	18 1	Taxes		ŏ			
nis	19 [Depreciation and depleti	on O	GDEN, UT			
풀	}	Occupancy	,	DDLIV, OI	<u> </u>		
Ą		Fravel, conferences, and	•				
ä		Printing and publications		1 426			ļ <u>.</u>
ing		Other expenses	STMT 2	1,426.	0	•	0
Operating and Administrative		Total operating and adm		1 126	0		
ŏ		expenses. Add lines 13	•	1,426. 21,000.		•	21,000
		Contributions, gifts, grar Fotal expenses and disl	·	21,000.			21,000
	!	Fotal expenses and dis l Add lines 24 and 25	naigements.	22,426.	0		21,000
		Subtract line 26 from line	e 12	22,720.		-	21,000
		Excess of revenue over expe		<20,726.	\		
		vet investment Income			1,700	•	
		Adjusted net income (if				N/A	1

Da	- X	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	f year
re	IFI.	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	180,367.	159,641.	159,641.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
٠ ا	I O a	Investments - U S and state government obligations			· · · · · · · · · · · · · · · · · · ·
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
-	11	Investments - land, buildings, and equipment basis			
1		Less accumulated depreciation			
-	12	Investments - mortgage loans			
-	13	Investments - other			
-	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
-	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	180,367.	159,641.	159,641.
-	17	Accounts payable and accrued expenses			
-	18	Grants payable			
S .	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
- :	22	Other liabilities (describe)			
4	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
Sec	24	Unrestricted			
ig	25	Temporarily restricted			
ě z	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
님		and complete lines 27 through 31.		_	
is (27	Capital stock, trust principal, or current funds	0.	0.	
SSE	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
*	29	Retained earnings, accumulated income, endowment, or other funds	180,367.	159,641.	
ž	30	Total net assets or fund balances	180,367.	159,641.	
		-	100 267	150 641	
;	31_	Total liabilities and net assets/fund balances	180,367.	159,641.	
Pa	rt	Analysis of Changes in Net Assets or Fund B	alances		
1 T	ota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	180,367.
		r amount from Part I, line 27a		2	<20,726.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	159,641.
		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, c	olumn (b), line 30	6	159,641.
	, ,44	7,500			Form 990-PF (2010)

(a) List and describ	nd Losses for Tax on In le the kind(s) of property sold (e g house, or common stock, 200 sha	, real estate,	· · · · · · · · · · · · · · · · · · ·	P	How acquired - Purchase - Donation		acquired lay, yr)	(d) Date sold (mo , day, yr)
1a		-						
b NON	E							
C	<u></u>				. <u></u>			
d				<u> </u>				
е				<u>L</u>	<u>.</u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) s (f) minus (
a b					· -	 		
С								
d								
е								_
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains (C	ol (h) gain	minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (ı), ıf any		C	ol (k), but i Losses	not less thar (from col (1 -0-) or h))
a								
b								
С								
d								
е								
2 Capital gain net income or (net capi	tal loss) { If gain, also enter the loss, enter -0	r in Part I, line ' - in Part I, line	7 7	}	2			
3 Net short-term capital gain or (loss)	`			(
If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8		(2)		}	3			
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estment Ir	ncome		
Vas the foundation liable for the section f "Yes," the foundation does not qualify	under section 4940(e). Do not co	mplete this pa	rt .					Yes X N
1 Enter the appropriate amount in ea		uctions before	making any entri					(d)
(a) Base period years Calendar year (or tax year beginning			Net value of no	(c) oncha	rıtable-use asse			útión ratio ided by col. (c))
2009		9,400.			187,39			.15688
2008		6,237.			218,08		 	.25786
2007		4,649.			183,34		<u> </u>	.46169
2006		5,715. 1,894.			294,37 59,84			.46102 2.53808
2005		1,034.			33,04	0.		2.33000
2 Total of line 1, column (d)	was base payed. douds the total	oo kaa O by E	or by the number	of 110		2		3.87555
3 Average distribution ratio for the 5- the foundation has been in existence		un iine z by 5,	or by the number	oi ye	ais	3		.77511
4 Enter the net value of noncharitable	-use assets for 2010 from Part X,	line 5				4		163,154
5 Multiply line 4 by line 3						5		126,462
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		_17
7 Add lines 5 and 6						7		126,479
8 Enter qualifying distributions from I	Part XII, line 4					8		21,000
If line 8 is equal to or greater than li See the Part VI instructions	·	1b, and comp	lete that part usin	ig a 1	% tax rate			
023521 12-07-10							Fo	orm 990-PF (201

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Pa	t VI Excise Tax Based on Investment Income (Section 4940	(a), 4940(b), 4	940(e), or 4	948 -	- see in	stru	ction	ns)
ìa	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and en	ter "N/A" on line 1	Ì					-,-,-
	Date of ruling or determination letter (attach copy of letter if nece	essary-see instruction	ins)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	and enter 1%)	1				34.
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part I, line 12, col	(b) J					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Oth	ners enter -0-)		2				0.
	Add lines 1 and 2			3				34.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			.5	ļ		,	34.
	Credits/Payments	1 - 1						
	2010 estimated tax payments and 2009 overpayment credited to 2010	6a						
	Exempt foreign organizations - tax withheld at source	6b	2.4					
	Tax paid with application for extension of time to file (Form 8868)	6c	34.					
	Backup withholding erroneously withheld	6d		_				2.4
	Total credits and payments Add lines 6a through 6d			7				<u>34.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9				0.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		.	10				
	Enter the amount of line 10 to be Credited to 2011 estimated tax		Refunded -	11	<u> </u>			
	↑ VII-A Statements Regarding Activities				Г		Yes	No
12	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it particip	ate of intervene	III	ŀ	10	163	X
	any political campaign?	aa laaa matuustiona i	ios definition\?		-	1a 1b		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos				F	10.		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies or any mai	eriais publishe	a or				
_	distributed by the foundation in connection with the activities.					10		х
	Did the foundation file Form 1120-POL for this year?	voor			-	10		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation \blacktriangleright \$ (2) On foundation managers		0.					
_	Enter the reimbursement (if any) paid by the foundation during the year for political expendit			•				
ť		ture tax imposed on i	ouncation					
2	managers ► \$ O . Has the foundation engaged in any activities that have not previously been reported to the IR	152				2	1	х
2	If "Yes," attach a detailed description of the activities.				F			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	estrument articles of	incorporation o	ır				
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		moorporadon, c	,,		3		X
Δa	Did the foundation have unrelated business gross income of \$1,000 or more during the year					4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	•		N	/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.				ř		,	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther						
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory	directions that conf	ict with the state	law				
	remain in the governing instrument?					6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?					7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.							
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨						
	NV							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or d	esignate)					
	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 sec	ction 4942(j)(3) or 49	942(j)(5) for cale	ndar				
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," co	omplete Part XIV			Ĺ	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and	addresses			10		X

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orm 990-PF (2010) J L TAYLOR FAMILY FOUNDA	TION		<u>30-00831</u>	60	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to	·				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire	• •			
any voter registration drive?		Ye	es 🗓 No 📗		
(3) Provide a grant to an individual for travel, study, or other similar purposes	9	Ye	es 🗓 No 📗		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described i	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru	ıctıons)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai	ned			
expenditure responsibility for the grant?	N	//A 🔲 Ye	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y		
Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their					
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(0)	Evnanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	employee benefit plans and deferred	accor	Expense unt, other wances
JEFFREY L. TAYLOR	PRES, SEC, TR	enter-0-) EAS, DIRE	compensation	allo	waiices
3753 HOWARD HUGHES PKWY STE 200-316	1				
LAS VEGAS, NV 89169	1.00	0.	l 0.		0.
	_				
		IINONE II	<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	,	enter "NONE."	(d) Contributions to	(0)	Evnanca
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accor	Expense unt, other
NONE	devoted to position	<u>.</u>	compensation	allo	wances
NONE					
	-				-
	1				
 	-			<u> </u>	
	1				
	1				
				1 -	
Total number of other employees paid over \$50,000			•		0
			Form	990-P	F (2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. 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		<u> </u>
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 N/A		
Ι		
2		
3		
4	-	
		-
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NO PROGRAM RELATED INVESTMENTS WERE MADE DURING THE YEAR.		
		•
		0.
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	A STATE OF THE STA	1a	0.
	Average of monthly cash balances	1b	0. 165,639.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	165,639.
	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	165,639.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,485.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	163,154.
6	Minimum investment return. Enter 5% of line 5	6	8,158.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations of the foreign organizations check here and do not complete this part.)	ons and certain	
1	Minimum investment return from Part X, line 6	1	8,158.
2a		34.	
b	Income tax for 2010 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	34.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,124.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	8,124.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	8,124.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	21,000.
a		1b	0.
	Program-related investments - total from Part IX-B	2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the	-	
3		3a	
	Suitability test (prior IRS approval required)	3b	
	Cash distribution test (attach the required schedule)	4	21,000.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	-	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	5	0.
_	income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4	6	21,000.
6	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	L T	
	4940(e) reduction of tax in those years	iation qualifies for the	, 30000011

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				8,124.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years		0		
3 Excess distributions carryover, if any, to 2010		0.		
a From 2005 148, 914.				
b From 2006 121, 210.				
c From 2007 75,637.				
d From 2008 45, 443.				
e From 2009 20,090.				
f Total of lines 3a through e	411,294.			
4 Qualifying distributions for 2010 from				·····
Part XII, line 4 ►\$ 21,000.				
a Applied to 2009, but not more than line 2a		1	0.	
b Applied to undistributed income of prior	,, , , , , , , , , , , , , , , , , , , ,			, 11 , 14,11,111111111111111111111111
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				8,124.
e Remaining amount distributed out of corpus	12,876.			
5 Excess distributions carryover applied to 2010 (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.				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	424,170.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		·····
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2011				0.
7 Amounts treated as distributions out of		Į.		
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.	•		
8 Excess distributions carryover from 2005	0.			······································
not applied on line 5 or line 7	148,914.			
9 Excess distributions carryover to 2011.	110/3141			
Subtract lines 7 and 8 from line 6a	275,256.			
10 Analysis of line 9				······································
a Excess from 2006 121,210.				
b Excess from 2007 75,637.				
c Excess from 2008 45,443.			1	
d Excess from 2009 20,090.			1	
e Excess from 2010 12,876.				
				Form 990-PE (2010)

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Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year SAVE THE CHILDREN NONE 10,000. PUBLIC HEALTH & EDUCATION FOR 54 WILTON RD WESTPORT, CHARITY CHILDREN CT 06880 THE SMILE TRAIN NONE PUBLIC 5,000. HEALTH SERVICES FOR PO BOX 96246 WASHINGTON, CHARITY CHILDREN DC 20090 THE INTERNATIONAL NONE PUBLIC 5,000. EDUCATIONAL SUPPORT IN EMERGING FILM TALENT CHARITY DEVELOPING COUNTRIES ASSOC - 1, AVE HENRY DUNANT MONACO, MONACO THE BACHMANN-STRAUSS NONE PUBLIC 1,000. MEDICAL RESEARCH DYSTONIA & PARKISON CHARITY FOUNDATION - 551 FIFTH AVE STE 250 NEW YORK, NY 21,000. Total ▶ 3a b Approved for future payment NONE 0. Total

er gross amounts unless otherwise indicated Program service revenue a b	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	code		code	Ainount	
			+		
D	- 		-		····
- 			+ +		
<u> </u>			 		
d			+ +		
e	_		+ +		
1	_		 -		
g Fees and contracts from government agencies		<u></u>			
Membership dues and assessments			 		
Interest on savings and temporary cash					1 700
investments		•	+ +		1,700
Dividends and interest from securities			 		
Net rental income or (loss) from real estate					
a Debt-financed property			+ +		
b Not debt-financed property			 		
Net rental income or (loss) from personal					
property			+		
Other investment income			 		
Gain or (loss) from sales of assets other	i l		1 1		
than inventory			1		
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory			+-+	····	
Other revenue					
a	_		1		
b	_				
C	_			-	
d	_				
e		<u> </u>			
Subtotal Add columns (b), (d), and (e)		0.	•	0.	1,700
Total. Add line 12, columns (b), (d), and (e)				13	1,700
ee worksheet in line 13 instructions to verify calculations)		_		·
Part XVI-B Relationship of Activities	s to the Acco	mplishment of E	xempt	Purposes	
ine No. Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI-	A contribut	ed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other the	an by providing fun	ds for such purposes)			
FINANCIAL SUPPORT FOR			ORGA	NIZATIONS, IN	NCLUDING
RELATED ADMINISTRATIV	E EXPENSE	ES.			
			-		

Form 990-PF (2	2010) J L T	'AYLOR FAMILY FO	UNDATION	30-008	3160 Page 13
Part XVII	Information Re Exempt Organ		and Transactions an	nd Relationships With Noncha	
1 Did the or	rganization directly or indi	rectly engage in any of the followi	ng with any other organization	described in section 501(c) of	Yes No
the Code	(other than section 501(c)(3) organizations) or in section 5	27, relating to political organiz	ations?	
a Transfers	from the reporting found	ation to a noncharitable exempt oi	ganization of		
(1) Cash					1a(1) X
(2) Othe	r assets				1a(2) X
b Other tran	isactions				
(1) Sales	s of assets to a noncharita	ble exempt organization			1b(1) X
		ncharitable exempt organization			1b(2) X
(3) Rent	al of facilities, equipment,	or other assets			1b(3) X
• •	bursement arrangements				1b(4) X
	s or loan guarantees				1b(5) X
		embership or fundraising solicitation			1b(6) X
		illing lists, other assets, or paid en			1c X
				lys show the fair market value of the goods,	
			ed less than fair market value	in any transaction or sharing arrangement, s	how in
		other assets, or services received	a avament avanamentian	(4)	
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	shanng arrangements
-		N/A			 -
	· · · · · · · · · · · · · · · · · · ·				
					-
	<u> </u>				
			·		
2a Is the fou	ndation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiza	tions described	
ın section	501(c) of the Code (othe	r than section 501(c)(3)) or in sec	tion 527?		Yes X No
b If "Yes," c	omplete the following sch				
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relations	hip
	N/A				
					
					
Lind	or panelties of partire. I declar	n that I have exempted this miture undus	ling secomponium schodules and s	statements, and to the best of my knowledge and be	liof it in this comet
and	complete Declaration of prepa	ren(other than taxpayer or fiduciary) is b	ased on all information of which p	parer has any knowledge	iei, it is true, correct,
Sign Here	-41/0	100001	1200	DESTREME DE	Æ
	Signature of officer or tru	ISIAAN PARAMETER	Date	Title	7(1)
	Print/Type preparer's na			Date / Check If PTIN	
	Tring Type properties one) //)		2 self- employed	
Paid	STEVEN K.	RIDGEWAY 1/	CAROCAROLL!	524U	
Preparer		GEWAY & WARNER		Firm's EIN	
Use Only		O. BOX 20310	,	THIN S LIN	
-,			93120-0310	Phone no (805)966-1751
			· · · · ·	1.10110110 (000)	,
		·····		Fo	rm 990-PF (2010)

03-04-11

Form, **8868** (Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you ar	re filing for an Automatic 3-Month Extension, complete only Part I and check this box	\blacktriangleright X								
• If you ar	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)									
Do not co	Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868									
Electronic	Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation									
required to	ofile Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file F	orm 8868 to request an extension								
of time to	file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Tran	sfers Associated With Certain								
Personal E	Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the	ne electronic filing of this form,								
visit www.	irs.gov/efile and click on e-file for Charities & Nonprofits.									
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).									
A corporat	ion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete								
Part I only		▶ 🗔								
	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an me tax returns	extension of time								
Type or	Name of exempt organization	Employer identification number								
print										
	J L TAYLOR FAMILY FOUNDATION	30-0083160								
File by the	Number streat and room or suite no. If a P O. box, see instructions.									

	AUGUST 15, 2011 , to file the exempt organization return for the organization names		-	
	is for the organization's return for.			
	► X calendar year 2010 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 Change in accounting period	al retur	n	
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions	3a	\$	34.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit	Зь_	\$	0.
С	Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,		1	
	by using FFTPS (Flectronic Federal Tax Payment System). See instructions	3с	\$	34.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

				 			
FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT			
SOURCE				AMOUNT			
MEADOWS BANK	1,700.						
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A							
FORM 990-PF OTHER EXPENSES STATEMENT							
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME					
ADMINISTRATIVE EXPENSES TAXES	1,366.		•	0 0			
TO FORM 990-PF, PG 1, LN 23	1,426.	0	•	0.			

2848

(Rev June 2008)
Department of the Treasury
Internal Revenue Service

Power of Attorney and Declaration of Representative

► Type or print. ► See the separate instructions.

OMB No	1545-0150
For IRS U	Jse Only

Received by
Name

Part I Power of Attorney					Telephone	9		
	Caution: Form 2848 will not be honored for any purpose other than representation before the IRS				Function			
1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9				Date	//_			
Taxpayer name(s) and address				Social security number	r(s) Emp	oloyer iden	tification	
JL	Taylor Family Foundation			ļii		inei		
	3 Howard Hughes Pkwy Ste 200-316					•		
Las	s Vegas, NV 89169			ļi	30		083160	
				Daytime telephone num	ber Plan	number (ıf	applicable)	
				[(_)		·		
herel	by appoint(s) the following representative(s) as attorney(s)-in-	-fact.						
2	Representative(s) must sign and date this form on page 2	, Part	t II.	······································				
Nam	e and address		CAF No. 9000-20469R					
Ste	ven K. Ridgeway	,	Telephone No. 805-966-1751					
	Box 20310			1 ax 140	5-965-2619	<u></u>		
Sai	nta Barbara, CA 93120		Check if r	new Address Te	ephone No	Fax	x No 🔲	
Nam	e and address	İ		CAF No				
				Telephone No				
				Fax No.		<u></u>	···	
			Check if r	new: Address 🔲 Te	ephone No	L Fax	x No. 📙	
Nam	ne and address	1		CAF No				
		}		Telephone No				
				Fax No.				
			Check if r	new Address L. Te	ephone No	L_i Fax	x No 📙	
to re	epresent the taxpayer(s) before the Internal Revenue Service	for th	e following	tax matters:				
3	Tax matters				1			
	Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)			Form Number . 941, 720, etc.)		ear(s) or Per	riod(s) is for line 3)	
	of civil i charty (see the mendencie io line of	(1040, 041, 120, 00)		(000 1110			_	
Inc	come		990-PF 2008 thro		rough 2012			
		_						_
					İ			
					 			
4	Specific use not recorded on Centralized Authorization check this box. See the instructions for Line 4. Specific U			L L OAF	specific use			<u> </u>
_								_
5	Acts authorized. The representatives are authorized to rec I (we) can perform with respect to the tax matters describe documents. The authority does not include the power to rece or add additional representatives, the power to sign certain information to a third party. See the line 5 instructions for	ed on eive re n retu	line 3, for e efund check irns, or the p	example, the authority to s is (see line 6 below), the po power to execute a reque	ign any agre wer to subst	ements, con tute anothe	nsents, or otler rrepresentat	he
	Exceptions. An unenrolled return preparer cannot sign any See Unenrolled Return Preparer on page 1 of the instruction section 10 3(d) of Treasury Department Circular No 230 (Cito the extent provided in section 10 3(e) of Circular 230 Sthe student practitioner's (levels k and l) authority is limited	ctions rcular See th	An enrolle 230) An er ne line 5 ins	d actuary may only repres prolled retirement plan adm structions for restrictions of	ent taxpayer ninistrator ma on tax matte	s to the ext by only repress rs partners.	tent provided esent taxpaye . In most cas	l in ers ses
	List any specific additions or deletions to the acts otherwise Includes the power to sign Form 990-PF, Return of						••••••	

Receipt of refund checks. If you want to authorize a representative named on line 2 to receive, BUT NOT TO ENDORSE OR CASH, refund

__ and list the name of that representative below

Name of representative to receive refund check(s) ▶

checks, initial here -

Page ∠			2
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• 7	Notices and commi representative listed	unications. Original notice on line 2	es and other written	communications will be	sent to you and a cop	by to the first
	- " •	second representative listency notices or communicat	•	•		oox ▶ [▶ [
8	Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here					
g	otherwise, see the in trustee on behalf of	yer(s). If a tax matter constructions. If signed by a the taxpayer, I certify that D AND DATED, THIS F	corporate officer, p	partner, guardian, tax mat y to execute this form on	tters partner, executor behalf of the taxpay	r, receiver, administrator, o
			/	5/18/11	Preside	ent
_		Signature		Date	Preside	(if applicable)
<u>.</u>	Teffrey L. 7	Taylor [PiN Number		Family Fo	
		Signature		Date	Title	(ıf applicable)
	Print Nai	me [PIN Number			
U • a	I am aware of regulation coountants, enrolled age I am authorized to repretent an one of the following a Attorney—a member be Certified Public According to Centrolled Agent—enrolled Agent—enrolled Return Perparetice before the Internal of Student Attorney—student CPA—student Officer Centrolled Return Perparetice Internal of Circular 23 Internal of Circular 24 Internal of Circular 24 Internal of Circular 25 Inte	, I declare that: r suspension or disbarment ns contained in Circular 23 ents, enrolled actuaries, and esent the taxpayer(s) ident ng: r in good standing of the trountant—duly qualified to colled as an agent under the estimate of the taxpayer's of member of the taxpayer's nrolled as an actuary by the linternal Revenue Service is preparer—the authority to preparer to page 1 of the instructions tudent who receives permission 30. ent who receives permission 30. Plan Agent—enrolled as a	30 (31 CFR, Part 10) do others; iffied in Part I for the bar of the highest control or practice as a certification of the taxpayer. Immediate family (for the Joint Board for the silmited by section practice before the turn in question and so issues to practice before the practice before the practice before the turn of the practice before the practice the practice before the practice that the practice the practice that the practic	a tax matter(s) specified to tax matter(s) specified to the jurisdiction shed public accountant in the circular 230. For example, spouse, pare the Enrollment of Actuaries 10 3(d) of Circular 230). Internal Revenue Service the return must be under the IRS by virtue of the IRS by virtue of the the IRS by virtue of the IRS by virtue of the the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of the IRS by virtue of	there; and sown below. The jurisdiction shown shown the jurisdiction shown and, child, brother, or set under 29 U.S.C 12 is limited by Circular or examination by the fitheir status as a law air status as a CPA stream.	sister). 242 (the authority to 230, section IRS. See Unenrolled student under section
	► IF THIS DECL	Revenue Service is limited ARATION OF REPRES See the Part II instructi	ENTATIVE IS NO	OT SIGNED AND DAT	ED, THE POWER	OF ATTORNEY WILL
_	Designation—Insert above letter (a-r)	Jurisdiction (state) or identification	/0 (Signature		Date
_	b	CA	DVS	HIDWA		5/23/11
		1	1	1		1 6