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DLN: 93491251004012

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

2011

24 Total operating and administrative expenses. Add lines 13 through 23	For	cale	ndar year 2011, or tax y	year beginning 05-	01-2011 , and	lend	ling 04-30-	2012			
Rame of Countries	G C1	neck a	· · · · —	_	·—	-		curn			
December December			ındatıon	eturii i Audress ciia	nge i Name	Cilaii		entification numbe	er		
Carry or how, state, and /P code Carry or how, state, and /P code	TA	YLOR CO	OMMUNITY				02-0222149				
City or Lover, state, and ZP code City or Lover, state, and ZP code	Num	her and	street (or P.O. hov number if mail is	not delivered to street address	s) Room/suite						
Circumpton aphatation in pending, check bern				not delivered to street address	Nooni suite		(603) 524-5600)			
Decided Deci							, ,				
Marchaek type of organization							·		. ,		
Section 4947(a)(1) nonexempt chantable trust			·				_		•		
Part						n					
Other (specify) Filt foundation is a do-month termination Filt foundation is do-month termination Filt foundation Filt											
Cart Counting Cart Counting Cart Counting Cart Ca	of	ear <i>(f</i>	rom Part II, col. (c),	· — -	_						
1	line	e 16) -	\$ 59,572,575	(Part I, column (d) mus	t be on cash basıs.)						
2 Check	Pa	rt I	total of amounts in columns (b), (necessarily equal the amounts in c	c), and (d) may not	expenses per	(b) l			for charitable purposes		
1		1	Contributions, gifts, grants, etc , rece	eived (attach schedule)	523,078						
1		2	Check ► ┌─ if the foundation is not	required to attach Sch B							
10		3	Interest on savings and tempo	orary cash investments							
Net rental income or (loss) 5,010		4	Dividends and interest from se	ecurities	249,897		249,897	249,897			
Net gain or (loss) from sale of assets not on line 10 0 -78,549 0 0 0 0 0 0 0 0 0		5a	Gross rents		6,573			6,573			
Total Add lines 1 through 11 10,136,218 249,897 9,691,689 13 Compensation of officers, directors, trustees, etc 10 10 10 10 10 10 10 1		ь	Net rental income or (loss)	5,010							
10a Gross sales less returns and allowances	Reveilue	6a	Net gain or (loss) from sale of	assets not on line 10	-78,549						
10a Gross sales less returns and allowances		Ь									
10a Gross sales less returns and allowances		7					0	_			
10a Gross sales less returns and allowances		-	. •					0			
Description		-									
C Gross profit or (loss) (attach schedule)											
11 Other Income (attach schedule) 9,435,219 0 9,435,219 12 Total. Add lines 1 through 11 10,136,218 249,897 9,691,689 13 Compensation of officers, directors, trustees, etc 326,062 0 326,062 0 0 14 Other employee salaries and wages		_	-								
12 Total. Add lines 1 through 11 10,136,218 249,897 9,691,689					₩ 9 435 219		0	9 435 219			
13 Compensation of officers, directors, trustees, etc 326,062 0 326,062 0 0 0 0 0 0 0 0 0											
14 Other employee salaries and wages							•				
15 Pension plans, employee benefits											
C Other professional fees (attach schedule)	φ										
C Other professional fees (attach schedule)	Ψ										
C Other professional fees (attach schedule)	Š	Ь									
23 Other expenses (attach schedule)											
23 Other expenses (attach schedule)	ativ	17	Interest								
23 Other expenses (attach schedule)	2	18	Taxes (attach schedule) (see page 1	4 of the instructions)	1,563		0	1,563	0		
23 Other expenses (attach schedule)		19	Depreciation (attach schedule	e) and depletion	1,760,600		0	1,760,600			
23 Other expenses (attach schedule)	ē	20	Occupancy								
23 Other expenses (attach schedule)	7 P.	21	Travel, conferences, and meet	ings							
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) d 399 10,943,599 0 9,776,689 1,166,910 249,897		22									
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) d 399 10,943,599 0 9,776,689 1,166,910 249,897	Ü	23	Other expenses (attach sched	iule)	8,854,775		0	7,688,464	1,166,311		
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) d 399 10,943,599 0 9,776,689 1,166,910 249,897	rat	24	Total operating and administra	ative expenses.							
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) d 399 10,943,599 0 9,776,689 1,166,910 249,897	8		Add lines 13 through 23		10,943,000		0	9,776,689	1,166,311		
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	U	25	Contributions, gifts, grants pa	ıd					599		
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		26	•	ts. Add lines 24 and 25	10,943,599		0	9,776,689	1,166,910		
b Net investment income (if negative, enter -0 -) c Adjusted net income (if negative, enter -0 -)		27									
c Adjusted net income (if negative, enter -0 -) 0					-807,381						
			• -				249,897				
THE THREE WALL SHE MAINING IN MALINE HAVE BEEN AND SHOT THE INCIDENCE / AS MA 13 1000 V LAWS HELD THE / 17/1/1/	Ea- '	_	<u> </u>		of the instructions		h No. 11200Y		000-DE (2011)		

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	41.5		_	year	
	1	Cash—non-interest-bearing	(a) Book Value	(b) Boo	k Value	+	(c) Fa	ır Market Value
	2	Savings and temporary cash investments	856,149		1,202,1	06		1,202,106
	3	Accounts receivable 250,305	000,113		1,202,1	-		
	,	Less allowance for doubtful accounts	285,373		250,3	05		250,305
	4	Pledges receivable -	200,070		200,0	-		
	7	Less allowance for doubtful accounts -						
	5	Grants receivable				+		
	6	Receivables due from officers, directors, trustees, and other				+		
	Ū	disqualified persons (attach schedule) (see page 15 of the						
		Instructions)						
	7	Other notes and loans receivable (attach schedule)				+		
	•	5,000						
ا د		Less allowance for doubtful accounts 🕨0	299,480		5,0	-		5,000
§ 8 8 8	8	Inventories for sale or use	12,873		13,0	\dashv		13,009
쪾	9	Prepaid expenses and deferred charges	135,509		196,0	_		196,099
		Investments—U S and state government obligations (attach schedule)		_	417,7	-		417,772
		Investments—corporate stock (attach schedule)			2,387,6	\dashv		2,387,613
		Investments—corporate bonds (attach schedule)	677,400	6 50	953,5	36		953,536
	11	Investments—land, buildings, and equipment basis -						
		Less accumulated depreciation (attach schedule)				4		
		Investments—mortgage loans		o57	5 240 2	-		
		Investments—other (attach schedule)	6,394,835	75)	5,219,2	99		5,219,299
	14	Land, buildings, and equipment basis (3,425,048)	44 574 240	o s ⊡	40.000.41	72		40,000,473
		Less accumulated depreciation (attach schedule) 22,434,876	41,574,249		40,990,1	_	<u></u>	40,990,172
	15	Other assets (describe)	9,075,656	759	7,937,6	64	<u> </u>	7,937,664
	16	Total assets (to be completed by all filers—see the	62.050.550		F0 F73 F	7.		FO F72 F7F
\dashv	4-	Instructions Also, see page 1, item I)	62,858,558		59,572,5	\dashv		59,572,575
	17	Accounts payable and accrued expenses	1,097,378		1,097,2	02		
ا م	18	Grants payable	23,106,979		21,535,5	73		
ě	19	Deferred revenue	23,100,979		21,333,3	/3		
ᇢ	20	Mortgages and other notes payable (attach schedule)	25,380,000		24,755,0	00		
≘	21 22	Other liabilities (describe	2,812,799		3,529,0	_		
	22	Other habilities (describe F	2,012,733	239	3,323,0			
	23	Total liabilities (add lines 17 through 22)	52,397,156		50,916,9	20		
		Foundations that follow SFAS 117, check here 🕨 🔽						
		and complete lines 24 through 26 and lines 30 and 31.						
or Fund Balances	24	Unrestricted	-3,489,917		-4,779,8	15		
핅	25	Temporarily restricted	5,935,234		5,686,9	57		
8	26	Permanently restricted	8,016,085		7,748,5	13		
힏		Foundations that do not follow SFAS 117, check here 🕨 🦵						
킈		and complete lines 27 through 31.						
히	27	Capital stock, trust principal, or current funds						
	28	Paid-in or capital surplus, or land, bldg , and equipment fund						
Assets	29	Retained earnings, accumulated income, endowment, or other funds						
٦	30	Total net assets or fund balances (see page 17 of the						
ĕ		${\tt instructions).} \ . \ . \ . \ . \ . \ . \ . \ . \ . \$	10,461,402		8,655,6	55		
	31	Total liabilities and net assets/fund balances (see page 17 of						
		the instructions)	62,858,558		59,572,5	75		
Pa	rt II	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 a	gree				
		with end-of-year figure reported on prior year's return)			1			10,461,402
2		Enter amount from Part I, line 27a			2			-807,381
3		Other increases not included in line 2 (itemize)		<u>~</u>	3			177,076
4		Add lines 1, 2, and 3			4			9,831,097
5		Decreases not included in line 2 (itemize) ▶			5			1,175,442
6		Total net assets or fund balances at end of year (line 4 minus line 5)—f	art II, column (b), l	ine 30 . .	6			8,655,655

		ınd(s) of property sold (e g , r or common stock, 200 shs Î		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SALE OF INVESTMENTS				Р		
b	SALE OF ASSETS HELD F	ORSALE		Р		
С						
d						
e						
(€	e) Gross sales price	(f) Depreciation allowe (or allowable)		t or other basıs xpense of sale		or (loss)) mınus (g)
a	1,777,63	38		1,870,34	2	-92,704
b	488,90	00		474,74	5	14,155
С						
d						
e						
Co	mplete only for assets shown	ng gain in column (h) and own				(h) gain minus
(i)	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (j), ıf any		less than -0-) or om col (h))
a						-92,704
b						14,155
с						
d						
e					<u> </u>	
2	Capital gain net income or	(net capital loss)	If gain, also enter If (loss), enter -0		2	-78,549
3	Net short-term capital gair	n or (loss) as defined in sectio	ns 1222(5) and (6)		
	If gain, also enter in Part I If (loss), enter -0- in Part	, line 8 , column (c) (see page: I , line 8		instructions)	}	
Part		r Section 4940(e) for F		· · · · ·	J 3	0
Was the		this part blank tion 4942 tax on the distribut lify under section 4940(e) D			eriod?	┌ Yes ┌ No
		each column for each year, s			making any entries	
	(a) e period years Calendar or tax year beginning in)	(b) djusted qualifying distributions	(c) Net value of noncha		(d) Distribution (col (b) divided	
, , , , ,	2010				(55. (5) 4.11.454	27 001 (077
	2009					
	2008					
	2007					_
	2006					
2	Total of line 1, column (d).				2	
3		for the 5-year base period—di undation has been in existenc			3	
4	Enter the net value of nonc	harıtable-use assets for 201	1 from Part X, line	5	4	
5	Multiply line 4 by line 3.				5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 2	7b)		6	
7	Add lines 5 and 6				7	
8		ns from Part XII, line 4		<u> </u>	8 nort using a 104 tox	rata Caa
	the Part VI instructions or	ter than line 7, check the box i page 18	m rait VI, iine ID,	and complete that	pair using a 1% (a)	Tale See

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structio	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🔽 and enter "N/A" on line 1			
	Date of ruling or determination letter 1985-12-09 (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			N/A
	here Fand enter 1% of Part I, line 27b			
С	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-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0
6	C redits/P ayments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded Refunded 11			
	t VII-A Statements Regarding Activities		I	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	<u> </u>	Yes	No
_	it participate or intervene in any political campaign?	. 1a		No
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of	1		
	the instructions for definition)?	. 1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year	<u> </u>		110
u	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$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?	. 2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
_	instructions) NH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	۱		
^	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on			
	page 27)? If "Yes," complete Part XIV	و ا	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

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Pai	t VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►WWW TAYLORCOMMUNITY ORG			
14	The books are in care of ▶DENISE KENNEY Telephone no ▶(603) 524.	-5600	
	Located at ►435 UNION AVENUE LACONIA NH ZIP+4 ►03246			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			<u> </u>
10	and enter the amount of tax-exempt interest received or accrued during the year	•	•	- ,
16			1	l
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the			
-	foreign country			
Pal	t 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
1.	, , , , , , , , , , , , , , , , , , ,		165	NO
Ia	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? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
Ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2011?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business			
p .	enterprise at any time during the year?			
D	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2011.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
ъ ъ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	Tu		110
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		No

### GENER ### 40 00 ### 40	Form 990-PF (2011)		nagi "				-		Page	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, siny voter registration drive? (3) Provide a grant to an engineziation of travel, study, or other similar purposes? (4) Provide a grant to an engineziation other than a charable, etc. organization described in section 509(kt), (2), or (3), or section 496(d)(2)? (see page 22 of the instructions). (5) Provide for any purpose other than religious, charables, scientific, literary, etc. organization described in section 509(kt), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). (6) Provide for any purpose other than religious, charables, scientific, literary, etc. organization section 53 4945 or in a current notice regarding disaster assistance disective assistance section 500 kt). (6) Provide for any purpose other than religious, charables, scientific, literary, etc. organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? (6) Provide for the section of the transaction fail to qualify under the exception described in Regulations section 534945 or in a current notice regarding disaster assistance (see page 22 of the instructions). (6) If the animal religious it maintained expenditure responsibility for the grant? (7) Understand the statement responsibility for the grant? (8) Did the bundation, during the year, preceive any funds, directly or indirectly, on a personal benefit contract? (9) Tries, did the foundation for cerve any premiums on a personal benefit contract? (1) Tries, did the foundation for the provide of the provided or indirectly, on a personal benefit contract. (1) Tries, did the foundation for the provided or provided or indirectly, or a provided to the transaction? (1) Tries, and average for the provided or provid				h Form 4720	May	Be Required <i>(cont</i>	inue	<i>d)</i> □ □		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any visite registration drive?	-									
on, directly or indirectly, any voter registration dive? (3) Provide a great to an individual for travel, study, or atter similar purposes? (4) Provide a great to an organization other than a chantable, etc., organization described in section 50 9(8)(1), (2), or (3), or section 49 40(6)(2)? (see page 22 of the instructions). (5) Provide for any purpose other than religious, chantable, etc., organization described in section 50 9(8)(1), (2), or (3), or section 49 40(6)(2)? (see page 22 of the instructions). (6) If any anxier is "Yes" to 54(1) (-5), did any of the transactions that to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Sb Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Sb Organizations relying on a current notice regarding disaster assistance (see here. I Yes I'No If Yes, I'Asiach the statement required by Regulations section 53.4935-5(d). Organization and page of the statement required by Regulations section 53.4935-5(d). Die the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Organization during the tax year, was the foundation aparty to a prohibited tax shelter transaction? I List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). Organization during the foundation received any processed or have any nation and contractors. I List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). Organization of the highest pa		•								
(3) Provide a grant to an individual for travel, study, or other similar purposes?			-	**	-		. No			
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 59(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)										
in section 509(a)13, (2), or (3), or section 49.40(d)(2)? (see page 22 of the instructions).					scribe	· ·	140			
(a) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?							- No			
educational purposes, or for the prevention of cruelty to children or animals? Yes						,,				
b. If any answer is "tes" to 5a(1)-(5), aid any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "res," attach the statement required by Regulations section 53.4945–5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						Yes ▽	, No			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here										
c 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?							ns)?	5b		
tax because it maintained expenditure responsibility for the grant?	Organizations relying on a current	t notice regarding disas	terassis	stance check her	e	▶↑	-			
If "Yes," attach the statement required by Regulations section 53.4945–5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	c If the answer is "Yes" to question	5a(4), does the foundat	tion clair	n exemption from	n the					
Did the foundation, during the year, raceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	tax because it maintained expend	iture responsibility for t	he grant	?		T Yes T	- No			
premiums on a personal benefit contract?	If "Yes," attach the statement requi	red by Regulations section	on 53.49	45-5(d).						
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a Did the foundation, during the yea	r, receive any funds, dir	ectly or	indirectly, to pay	,					
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	premiums on a personal benefit co	ontract?				┌ Yes ┌	No			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	b Did the foundation, during the yea	r, pay premiums, direct	ly or ind	rectly, on a perso	onal be	nefit contract?		6b	No	
The part vision of the foundation receive any proceeds or have any net income attributable to the transaction?	If "Yes" to 6b, file Form 8870.									
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1. List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position 2. Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NoNE." (a) Name and address of each employee paid more than \$50,000 DENISE KENNEY DIRECTOR OF FINANCE 4000 DIRECTOR OF FINANCE 4000 ASS UNION AVENUE 4000 DIRECTOR OF 59,414 ANAMETIN 4000 DIRECTOR OF 68,302 3 ANAMETIN 4000 ANAME	7a At any time during the tax year, w	as the foundation a part	ty to a p	rohibited tax shel	lter tra	nsaction? TYes F	No			
1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter -0-) 2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (c) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation plans and deferred compensation other allowances (e) Expense account,	b If yes, did the foundation receive	any proceeds or have a	ny net in	come attributabl	e to the	e transaction?		7b		
1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average devoted to position (If not paid, enter employee benefit plans and deferred compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). 2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NoNE." (a) Name and address of each employee plant in the paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation plant and deferred compensation of the instructions). DENISE KENNEY DIRECTOR OF FINANCE 435 UNION AVENUE 4000 DIRECTOR OF 435 UNION AVENUE 4000 ANAKETIN 4000 ANAKETI		Officers, Director	s, Trus	stees, Founda	ation	Managers, Highly	Paid	Empl	oyees,	
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (tif not paid, enter devoted to position (tif not paid, enter devoted to position) 2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (c) Compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions to employee denefit plans and deferred compensation (d) Contributions t	and Contractors	foundation managers	and thei	r compensation (see na	ne 22 of the instruction	ne)			
(a) Name and address devoted to position See Additional Data Table 2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 DENISE KENNEY DIRECTOR OF FINANCE 4000 AUXIONION AVENUE ACCONIA, NH 03426 PAUL CHARTON DIRECTOR OF FORD MARKETIN 4000 ASSISTED 4000 TONI MARIE SMITH HUMAN RESOURCE 50,477 17,885 (Finance of the instructions). (b) Title, and average hove paid more than \$50,000 (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of the railowances of the instructions). (e) Expense account, other allowances of the instructions). (a) Name and address of each employee benefit plans and deferred compensation of the instructions). (b) Title, and average hove paid to position of employee benefit plans and deferred compensation of the instructions). (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of employee bene	List all officers, directors, trustees									
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2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000		devoted to position		-0-)	and d	eferred compensation	01	— allo		
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(a) Name and address of each employee paid more than \$50,000 DENISE KENNEY DIRECTOR OF A35 UNION AVENUE LACONIA, NH 03426 PAUL CHARTON A35 UNION AVENUE LACONIA, NH 03426 TONI MARIE SMITH LACONIA, NH 03426 PAULETTE BEYER DIRECTOR OF ASSISTED ACONIA, NH 03426 DIRECTOR OF BENER BENE	IT none, enter NONE.					(d) Contributions to				
DENISE KENNEY	(a) Name and address of each employ	AA 1 ` ' '	- 1	(a) Companyation	. n		(e) E	Expense	account,	
DENISE KENNEY DIRECTOR OF FINANCE 435 UNION AVENUE LACONIA, NH 03426 PAUL CHARTON DIRECTOR OF MARKETIN 40 00 TONI MARIE SMITH HUMAN RESOURCE GENER 40 00 PAULETTE BEYER DIRECTOR OF ASSISTED 40 00 DIANE POH DIRECTOR OF CARE MAN	paid more than \$50,000			(c) Compensation	on	•	ot	her allo	wances	
### ### ##############################	DENICE KENNEY			7.0	220	·				
LACONIA, NH 03426 40 00 PAUL CHARTON DIRECTOR OF 59,414 17,750 435 UNION AVENUE 40 00 17,885 CONI MARIE SMITH HUMAN RESOURCE 50,477 17,885 GENER 40 00 68,302 3 PAULETTE BEYER DIRECTOR OF 68,302 3 435 UNION AVENUE ASSISTED 40 00 40 00 DIANE POH DIRECTOR OF CARE 52,457 11,478 435 UNION AVENUE MAN 40 00 11,478				/8	,320	538				
PAUL CHARTON DIRECTOR OF 59,414 17,750 435 UNION AVENUE MARKETIN 40 00 17,885 TONI MARIE SMITH HUMAN RESOURCE 50,477 17,885 435 UNION AVENUE GENER 40 00 3 PAULETTE BEYER DIRECTOR OF 68,302 3 435 UNION AVENUE ASSISTED 40 00 40 00 DIANE POH DIRECTOR OF CARE 52,457 11,478 435 UNION AVENUE MAN 40 00 11,478		40 00								
### MARKETIN ####################################		DIRECTOR OF		59	.414	17.750				
LACONIA, NH 03426 TONI MARIE SMITH HUMAN RESOURCE 435 UNION AVENUE LACONIA, NH 03426 PAULETTE BEYER DIRECTOR OF ASSISTED LACONIA, NH 03426 DIANE POH DIRECTOR OF CARE MAN MAN MAN MAN MAN MAN MAN MA		MARKETIN			, · <u>-</u> ·	27,77.00				
### GENER ### 40 00 ### 40		40 00								
#35 UNION AVENUE LACONIA, NH 03426 PAULETTE BEYER DIRECTOR OF ASSISTED 40 00 ASSISTED 40 00 DIANE POH DIRECTOR OF CARE MAN 40 00 DIRECTOR OF CARE MAN 40 00	TONI MARIE SMITH		E	50	,477	17,885				
PAULETTE BEYER DIRECTOR OF 68,302 3 435 UNION AVENUE 40 00 DIANE POH DIRECTOR OF CARE MAN 435 UNION AVENUE 40 00	435 UNION AVENUE									
435 UNION AVENUE LACONIA, NH 03426 DIANE POH 435 UNION AVENUE ASSISTED 40 00 DIRECTOR OF CARE MAN 40 00	LACONIA,NH 03426	40 00								
435 UNION AVENUE LACONIA, NH 03426 DIANE POH 40 00 DIRECTOR OF CARE MAN 435 UNION AVENUE 40 00	PAULETTE BEYER			68	,302	3			1	
DIANE POH 435 UNION AVENUE DIRECTOR OF CARE MAN 40.00										
435 UNION AVENUE MAN										
435 UNION AVENUE			RE	52	,457	11,478			1	
	435 UNION AVENUE LACONIA,NH 03426									

Total number of other employees paid over \$50,000.

Part VIII Information About Officers, Directors, Tr and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ces (see page 23 of the instructions). If none, e	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 service	ces	. 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers		Expenses
1 OPERATION AND MAINTENANCE OF 250 UNITS OF INDEPE	NDENT HOUSING AND 82 ASSISTED	9,908,338
LIVING/NURSING UNITS TO PROVIDE HEALTH CARE MANA	GEMENT AND LONG-TERM HEALTH CARE	
FOR ELDERLY PERSONS		
2		
		1
3		
		†
		-
4		4
Part IX-B Summary of Program-Related Investmen	ts (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation de	uring the tax year on lines 1 and 2	A mount
1		
		1
2		
		†
		+
All other program-related investments See page 24 of the instruc	tions	
3		1
	-	

Form	990-PF (2011)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	9,798,740
b	A verage of monthly cash balances	1b	1,029,132
С	Fair market value of all other assets (see page 24 of the instructions)	1c	516,901
d	Total (add lines 1a, b, and c)	1d	11,344,773
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	11,344,773
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	170,172
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	11,174,601
6	Minimum investment return. Enter 5% of line 5	6	558,730
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 🚩 and do not complete t		art.) T
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5	-	
Ь	Income tax for 2011 (This does not include the tax from Part VI) 2b	4	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	
Par	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,166,910
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	743,089
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,909,999
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,909,999
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	her the	foundation qualifies for

	ondistributed income (see page	(a)	(b)	(c)	(d)
		Corpus	Years prior to 2010	2010	2011
	Distributable amount for 2011 from Part XI, line 7				
	Undistributed income, if any, as of the end of 2011				
	Enter amount for 2010 only				
b	Total for prior years 20 , 20 , 20 ,				
	Excess distributions carryover, if any, to 2011				
	From 2006				
	From 2007				
C	From 2008				
d	From 2009				
	From 2010				
f	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
al.	required—see page 26 of the instructions) Applied to 2011 distributable amount				
	Remaining amount distributed out of corpus				
	·				
5	Excess distributions carryover applied to 2011				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
u	amount—see page 27 of the instructions				
e	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see page 27				
	of the instructions				
f	Undistributed income for 2011 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2011				
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see page 27 of the				
0	Instructions)				
3	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2007				
Ь	Excess from 2008				
c	Excess from 2009				
d	Excess from 2010				
е	Excess from 2011				

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	Part XIV Private Operating Four		_		t VII-A, question	9)
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2					1985-12-09
ь	Check box to indicate whether the organiz	ation is a private op	erating foundation	described in sectio	n 🔽 4942(J)(3) o	r Г 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Iotai
	year listed	0	0	0	870,194	870,194
ь	85% of line 2a	0	0	0	739,665	739,665
С	Qualifying distributions from Part XII, line 4 for each year listed	1,909,999	2,213,193	1,370,631	9,502,439	14,996,262
d	Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	1,909,999	2,213,193	1,370,631	9,502,439	14,996,262
	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					•
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in	372,487	452,555	497,091	580.129	1,902,262
	Part X, line 6 for each year listed	372,107	132,333	137,031	300,123	1,302,202
С	"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)					0
	(2) Support from general public and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information	n (Complete th	is part only if	the organization	on had \$5,000 d	or more in
	assets at any time during				. ,	
1 a	Information Regarding Foundation Manage List any managers of the foundation who had before the close of any tax year (but only i	ave contributed mor				dation
b	List any managers of the foundation who ov ownership of a partnership or other entity)				ly large portion of th	ne
	Information Regarding Contribution, Grant	t, Gift, Loan, Schola	rship, etc., Program	ns:		
	Check here 🕶 if the foundation only ma unsolicited requests for funds If the found under other conditions, complete items 2a	kes contributions to ation makes gifts, g	preselected charit	able organizations	and does not acceptions) to individual	ot s or organizations
a	The name, address, and telephone numbe	r of the person to wh	nom applications sh	nould be addressed		
b	The form in which applications should be s	submitted and inforn	nation and material	s they should inclu	de	
С	Any submission deadlines					

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

factors

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	Foundation status of	Purpose of grant or contribution	A mount		
Name and address (home or business)	or substantial contributor	recipient				
a Paid during the year LRSF SPELLING BEE POB 7312 GILFORD,NH 03247	N/A	PUBLIC CHARITY	SUPPORT OF CHARITABLE ORGANIZATION	150		
ST VINCENT DEPAUL 1269 UNION AVE LACONIA,NH 03247	N/A	PUBLIC CHARITY	SUPPORT OF CHARITABLE ORGANIZATION	123		
CATHEDRAL SQUARE CORPORATION 412 FARRELL ST SOUTH BURLINGTON, VT 05403	N/A	PUBLIC CHARITY	SUPPORT OF CHARITABLE ORGANIZATION	200		
LAKE WINNIPESAUKE WATERSHED ASSOCIATION POB 1624 MEREDITH,NH 03253	N/A	PUBLIC CHARITY	SUPPORT OF CHARITABLE ORGANIZATION	126		
Total				599		
b Approved for future payment						
Total			⊫ 3h	0		

	-PF (2011) I-A Analysis of Income-Produc	cing Activitie	:s			Page 12
	s amounts unless otherwise indicated		ısıness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Progra	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See page 28 of the instructions)
a ENTR	ANCE FEES					6,918,731
b PERIO	DDIC RESIDENT INCOME					2,275,684
с						
	and contracts from government agencies	;				
	ership dues and assessments					
3 Interest	on savings and temporary cash investments					
4 Divide	nds and interest from securities			14	249,897	
5 Net re	ntal income or (loss) from real estate					
a Debt	-financed property					
b Not o	debt-financed property			16	5,010	
	tal income or (loss) from personal property					
	investment income				70.540	
	(loss) from sales of assets other than inventory			18	-78,549	
	come or (loss) from special events					
	profit or (loss) from sales of inventory	•		03	240,804	
	revenue <u>aAUXILIARY INCOME</u>			03	240,804	
e			(417 162	9,194,415
12 Subtot	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		·	<u>'l</u>	417,102	9,611,577
(See	worksheet in line 13 instructions on page	28 to verify calc	ulations)	1	3	9,611,5//
	I-B Relationship of Activities t			Exempt Purpose	25	
Line No.	Explain below how each activity for wh the accomplishment of the organization page 28 of the instructions)					
1A-B	IT IS THE TAYLOR COMMUNITY'S MI ELDERLY THE COMMUNITY IS RESPONDED TO THE COMMUNITY OF ALERT SYSTEM THE COMMUNITY OF INCLUDING HEALTH CARE, ACTIVIT COMMUNITY TRANSFER TO ANY RESPONDED TO THE COMMUNITY TRANSFER TO THE COMMUNITY	ONSIBLE FOR A FFERS RESIDEN IES, TRANSPOF IDENT ANY INT	LL PROPERTY MA TS A COMPREHE RTATION AND SH EREST IN REAL	AINTENANCE AND ENSIVE PACKAGE HOPPING ASSISTA PROPERTY THE E	PROVIDES A 24 OF IN-HOME SE ANCE AT NO TIM NTRANCE FEES A	-HOUR MEDICAL RVICES 1E DOES THE AND PERIODIC
	+					
	+					
	+					
	+					
	1					

Part	XVII	Information Re Noncharitable		ansfers To and Trai anizations	nsac	tions a	and Relations	hips With			<u> </u>
1 Did	the orga	nızatıon dırectly or ındırectly	engage in any of	the following with any other o	rganıza	ation desci	ribed in section			Yes	No
501	(c) of the	e Code (other than section	501(c)(3) organiza	tions) or in section 527, relatii	ng to p	olitical org	anızatıons?				
a Tra	nsfers	from the reporting four	ndation to a non	charıtable exempt organ	ızatıo	n of					
(1)	Cash.								1a(1)		No
(2)	Other	assets							1a(2)		No
b Oth	ner tran	sactions									
(1)	Sales	of assets to a noncha	rıtable exempt o	organization					1b(1)		No
(2)	Purch	ases of assets from a	noncharitable e	xempt organization					1b(2)		No
(3)	Renta	l of facilities, equipme	nt, or other ass	ets					1b(3)		No
(4)							1b(4)		No		
									1b(5)		No
				undraising solicitations.					1b(6)		No
			•	her assets, or paid emplo					1c		No
of t ın a	he good ny tran	ds, other assets, or se isaction or sharing arr	rvices given by angement, show	lete the following schedu the reporting foundation vin column (d) the value charitable exempt organization	If the	e founda e goods,	tion received les other assets, or	s than fair marke services receive	et value d	!	
(a) Line	NO	(b) Amount involved	(c) Name of non-	charitable exempt organization	1	(a) Desc	ription of transfers, t	ransactions, and sna	ririg arra	ngemer	its
Ī					+						
					_						
					-						
					+						
des	cribed	in section 501(c) of the omplete the following s	ne Code (other t schedule	with, or related to, one of than section 501(c)(3)) o	orıns	ection 5	27?		. ⊢ Y€	es F	No
		(a) Name of organization	n 	(b) Type of organ	ızatıon		(c)	Description of relation	onship		
	the b		and belief, it is t	have examined this returue, correct, and completed has any knowledge		eclaratio	n of preparer (oth				
	N _	ignature of officer or t	rustos				2-08-30	Title			
	- 5	- I continue of officer or the	rustee			Date		ritte			
Sign Here		Preparer's Signature					Date	Check if self- employed ▶	PTIN		
Ś	Paid Preparer?	Firm's name 🕨	N	IATHAN WECHSLER & C	OMP	ANY PA		Firm's EIN ► 02	2-0327	524	
			7	0 COMMERCIAL STREE	T SU	ITE 40:	1				
		Firm's address 🕨		CONCORD, NH 03301				Phone no (603)224-	5357	
May the	IRS d	 Iscuss this return with	the preparer s	nown above? See instruc	tions			▶Г	_{ves} Γ	No	

Schedule B	Schedule of Contributors	OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.	2011	
Name of organization TAYLOR COMMUNITY		Employer id	entification number
Organization type (che	eck one)	02-022214	.9
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation	
	527 political organization		
Form 990-PF	√ 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on	
	501(c)(3) taxable private foundation		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or ny one contributor Complete Parts I and II	more (in money or	
Special Rules			
under sections 5	1(c)(3) organization filing Form 990 or 990-EZ, that met the 33 ¹ /3% support test 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during to 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-	the year, a contribut	
during the year,	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from aggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, or, or educational purposes, or the prevention of cruelty to children or animals of	charitable,	
during the year, not aggregate to the year for an e applies to this or	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the more than \$1,000. If this box is checked, enter here the total contributions that exclusively religious, charitable, etc., purpose. Do not complete any of the parts ganization because it received nonexclusively religious, charitable, etc., contributions	hese contributions of twere received dur sunless the Gener butions of \$5,000 or	did ring al Rule
990-EZ, or 990-PF), but i	on that is not covered by the General Rule and/or the Special Rules does not file t must answer "No" on Part IV, line 2 of its Form 990, or check the box in the	heading of its	

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

990-EZ, or 990-PF)

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Cat No 30613X

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

DLN: 93491251004012

Name of organization
TAYLOR COMMUNITY

Employer identification number
02-0222149

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	See Additional Data Table	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Fayroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)

Name of organization
TAYLOR COMMUNITY

Employer identification number

02-0222149 Noncash Property (see Instructions) Use duplicate copies of Part II if Part II additional space is needed (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Name of organization

TAYLOR COMMUNITY

Part III

Employer identification number

02-0222149

	se duplicate copies of Part III if additional s	pace is needed	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _	Transferee's name, address, an	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee
a) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee
a) No. From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee
a) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- <u>-</u>	Transferee's name, address, an	(e) Transfer of gift d ZIP 4 Relatio	onship of transferor to transferee

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)

Software ID: Software Version:

EIN: 02-0222149

Name: TAYLOR COMMUNITY

Form 990 Schedule B, Part 1 - Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ALMIRA T CAMPBELL 8820 WALTHER BLVD APT 1614 BALTIMORE, MD 21234	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
_2	ESTATE OF ANTHONY E MORSE PO BOX 7606 GILFORD, NH 03247	\$ <u>79,674</u>	Person
_3	FRANK B STANLEY TRUST - RECEIVED QT CITIZENS BANK LACONIA, NH 03246	\$ <u>12,025</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
_4	FRANK E BUSIEL TRUST - RECEIVED MON MELLON BANK BOSTON, MA 02108	\$ <u>14,293</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
5	H THOMAS VOLPE 255 HADLEY ROAD EXT LACONIA, NH 03246	\$5,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
6	LACONIA SAVINGS BANK 62 PLEASANT ST LACONIA, NH 03246	\$5,000	Person

Form 990 Schedule B, Part 1 - Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	OSCAR J GEORGE TRUST - RECEIVED MON CITIZENS BANK LACONIA, NH 03246	\$ <u>190,164</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
8	OSCAR JGEORGE TRUST - RECEIVED QTRL LACONIA SAVINGS BANK LACONIA, NH 03246	\$51,220	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
9	ESTATE OF WILLIAM STIMSON 62 PLEASANT ST LACONIA, NH 03246	\$34,823	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
10	ESTATE OF THORNE SPAULDING POB 575 LACONIA, NH 03247	\$80,388	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Additional Data

Software ID: Software Version:

EIN: 02-0222149

Name: TAYLOR COMMUNITY

Form 990PF - Special Condition Description:

Special Condition Description

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

compensation	•			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
RODNEY DYER 603-524-5831	TRUSTEE	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
ROBERT SELIG 603-527-0111	TRUSTEE, CHAIR	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
JANET MITCHELL 603-524-9574	TRUSTEE	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
H THOMAS VOLPE 603-524-4567	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
DEBORAH COTTON 603-524-2883	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
TIMOTHY MARTIN 603-524-5600	TRUSTEE,	186,572	17,668	0
435 UNION AVENUE LACONIA,NH 03246	PRESIDENT/CEO 40 00			
SUSAN E SMITH 603-527-0417	ADMINISTRATOR	54,490	7,773	0
435 UNION AVENUE LACONIA,NH 03246	40 00			
ROBERT T SMITH 603-528-4205	TRUSTEE,	0	0	0
435 UNION AVENUE LACONIA,NH 03246	TREASURER 2 00			
FRANK TILTON 603-528-8466	TRUSTEE	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
MITCHELL JEAN 603-524-1376	TRUSTEE	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
MATTHEW LAHEY 603-524-4283	TRUSTEE, VICE	0	0	0
435 UNION AVENUE LACONIA,NH 03246	CHAIR 2 00			
PETER WALKLEY 603-524-7493	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
JAMES O ANDERSON 603-524-9495	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
RONALD BAKER III 603-524-9345	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
NANCY CRUTCHER 603-527-8810	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
MARGARET KERNS 603-528-3802	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
CARMEN LORENTZ 518-744-2095	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
JEANNE SAFFAN 603-527-9179	TRUSTEE 2 00	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
MICHAEL TOOMEY 603-528-4129	TRUSTEE, ASST TREASURER	0	0	0
435 UNION AVENUE LACONIA,NH 03246	2 00			
ELIZABETH POMEROY 603-524-5600	VP, HEALTH SERVICES & ORG	85,000	8,979	0
435 UNION AVENUE LACONIA,NH 03246	DEVELOPMENT 40 00			

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TY 2011 Investments Corporat Bonds Schedule	te		
Name:	TAYLOR COMMUNITY		
EIN: (02-0222149		
Name of Bond		End of Year Book	End of Year Fair

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BARCLAYS BK PLC 5%	25,648	25,648
BURLINGTON NORHTERN 4.7%	45,412	45,412
CARDINAL HEALTH INC	16,172	16,172
GENERAL ELECTRIC CAP CORP VARIABLE	34,598	34,598
GOLDMAN SACHS GROUP	35,244	35,244
HSBC FINANCIAL CORP	20,217	20,217
MORGAN STANLEY	30,947	30,947
NATL RURAL UTL	10,353	10,353
ROWAN COMPANIES	26,983	26,983
EATON CORP 4.9%	52,232	52,232
NEW YORK LIFE GBL 5.375%	53,144	53,144
TJX COS INC 4.2%	109,365	109,365
PNC FUNDING CORP 2.7%	104,078	104,078
STRYKER CORP 2.00%	102,941	102,941
STATOIL ASA 1.8%	102,200	102,200
UNITED TECHNOLOGIES 5.375%	119,836	119,836
PUERTO RICCO CMMON WLTH GOV'T	30,351	30,351
UNIVERSITY OF OKLAHOMA BAB	33,815	33,815

TY 2011 Investments Corporate Stock Schedule

INGERSOLL RAND PUBLIC LIMITED COMPANY

Name: TAYLOR COMMUNITY

EIN: 02-0222149 Name of Stock	End of Year Book	End of Year Fair
	Value	Market Value
ABBOTT LABS	55,544	55,544
ARCELORMITTAL SA AUTOMATIC DATA PROCESSING	17,330 55,898	17,330 55,898
BALL CROP	64,644	64,644
BLACKROCK INCORPORATED CLASS A	45,213	45,213
CISCO SYSTEMS	34,646	34,646
CONCOPHILLIPS	44,554	44,554
DANAHER CORP	59,588	59,588
DOMINION RESOURCES INC	29,487	29,487
DU PONT E I DE NEMOURS & CO	64,687	64,687
EXELON CORP	21,143	21,143
EXXON MOBIL	47,228	47,228
FRANKLIN RESCOURCES INC	60,370	60,370
ILLINOIS TOOL WORKS INC	53,478	53,478
INTERNATIONAL BUSINESS MACHINES CORP	55,497	55,497
JOHNSON & JOHNSON	44,594	44,594
JOHNSON CONTROLS INC MARATHON OIL CORP	32,226 17,311	32,226 17,311
MARATHON OIL CORP MARATHON PETROLEUM CORPORATION	12,275	12,275
MARSH & MCLENNAN COS INC	55,661	55,661
MCKESSON CORPORATION	50,184	50,184
NIKE INC	44,524	44,524
NORFOLK SOUTHERN CORP	46,383	46,383
ORACLE CORPORATION	51,274	51,274
PEPSICO INC	43,956	43,956
SNAP-ON INC	42,215	42,215
STAPLES	20,343	20,343
SYSCO CORP	41,732	41,732
THERMO FISHER SCIENTIFIC	47,748	47,748
UNITED TECHNOLOGIES	48,902	48,902
WAL-MART STORES INC	49,367	49,367
CONOCOPHILLIPS	35,457	35,457
DOMINION RESOURCES INC VA	19,571	19,571
INTERNATIONAL BUSINESS MACHINES CORP	31,062	31,062
JOHNSON & JOHNSON NORFOLK SOUTHERN CORP	27,668 36,830	27,668 36,830
ORACLE CORPORATION	24,696	24,696
FORD MOTOR CO	19,458	19,458
FORTUNE BRANDS INC	9,096	9,096
GAMESTOP CORP	21,622	21,622
MCDONALDS CORP	37,518	37,518
TJX CO INC	41,710	41,710
ARCHER DANIELS MIDLAND CO	27,747	27,747
HEINZ H J CO	31,986	31,986
PEPSICO INC	31,350	31,350
EXXON MOBIL CORP	34,536	34,536
SPECTRA ENERGY CORP	33,046	33,046
TRANSOCEAN LTD	20,156	20,156
AFLAC INC	22,520	22,520
AGILENT TECHNOLOGIES	20,036	20,036
BANK OF AMERICA CORP	26,279	26,279
BEAM INC COM	17,437 22,712	17,437 22,712
HARTFORD FINANCIAL SERVICE GROUP	16,029	16,029
WELLS FARGO & CO	36,757	36,757
STRYKER CORP	31,378	31,378
GENERAL ELEC CO	21,538	21,538
TEXTRON INC	21,312	21,312
зм со	33,510	33,510
AUTOMATIC DATA PROCESSING INC	25,029	25,029
MICROSOFT CORP	32,015	32,015
MICROCHIP TECHNOLOGY INC	36,254	36,254
DUPONT E I DE NEMOURS & CO	32,076	32,076
PRAXAIR INC	24,876	24,876
VERIZON COMM	36,342	36,342
MDU RES GROUP INC	28,675	28,675
GLAXO SMITHLINE	30,050	30,050
INGERSOLL RAND PUBLIC LIMITED COMPANY	31 277	31 277

31,277

31,277

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417,772

TY 2011 Investments Government Obligations Schedule

Name: TAYLOR COMMUNITY

EIN: 02-0222149

US Government Securities - End of

Year Book Value: 0

US Government Securities - End of

Year Fair Market Value:

State & Local Government

Securities - End of Year Book

Value:

State & Local Government

Securities - End of Year Fair

Market Value: 417,772

TY 2011 Investments - Other Schedule

Name: TAYLOR COMMUNITY

EIN: 02-0222149							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
GOVERNMENT II MONEY MARKET FUND 033	FMV	11,914	11,914				
FEDERATED #853 I	FMV	6,777	6,777				
CASH	FMV	138	138				
GOVERNMENT II MONEY MARKET FUND 033	FMV	20,218	20,218				
FEDERATED TOTAL RETUN #288	FMV	406,158	406,158				
JOHN HANCOCK GOVT INC FD #56	FMV	18,177	18,177				
BLACKROCK INFL PROTECTED #360 CL I	FMV	57,358	57,358				
VANGUARD GNMA FUND #36	FMV	26,999	26,999				
VANGUARD HIGH-YIELD CORP FUND #529	FMV	126,417	126,417				
VANGUARD HIGH YEILD CORP FUND ADM	FMV	289,551	289,551				
VANGUARD INTER-TERM INVEST-GR ADM	FMV	662,344	662,344				
VANGUARD LONG-TERM BOND INDEX	FMV	333,084	333,084				
VANGUARD SHORT TERM BOND INDEX	FMV	284,672	284,672				
VANGUARD SHORT TERM INVEST-GR	FMV	377,062	377,062				
VANGUARD SHORT-TERM BOND INDEX	FMV	12,123	12,123				
FEDERATED INDEX TR #281	FMV	408,401	408,401				
ISHARES S&P MIDCAP 400 GROWTH	FMV	105,094	105,094				
ISHARES S&P MIDCAP 400 VALUE	FMV	105,292	105,292				
ISHARES S&P SMALL CAP	FMV	38,150	38,150				
ISHARES TR S&P SMALLCAP 600	FMV	51,560	51,560				
ISHARES S&P SMALLCAP 600 GROWTH	FMV	38,243	38,243				
SPDR CONSUMER STAPLES SECTOR	FMV	21,978	21,978				
SPDR ENERGY SECTOR	FMV	83,351	83,351				
SPDR FINANCIAL SECTOR	FMV	66,179	66,179				
SPDR - HEALTHCARE SECTOR	FMV	43,362	43,362				
SPDR INDUSTRIAL SECTOR	FMV	17,358	17,358				
SPDR MATERIALS SECTOR	FMV	17,822	17,822				
SPDR TECHNOLOGY SECTOR	FMV	99,480	99,480				
MORGAN GROWTH FUND ADM	FMV	536,537	536,537				
VANGUARD TOTAL STOCK MARKET IDX	FMV	92,951	92,951				
BLACKROCK INTL OPP #334	FMV	63,729	63,729				
ISHARES INC FRANCE	FMV	36,467	36,467				
ISHARES INC AUSTRALIA	FMV	53,378	53,378				
ISHARES TR MSCI EMERGING MKTS	FMV	25,920	25,920				
ISHARES INC MSCI GERMANY	FMV	54,614	54,614				
ISHARES MSCI HONG KONG	FMV	18,726	18,726				
MSCI ITALY	FMV	6,396	6,396				
ISHARES MSCI JAPAN	FMV	49,109	49,109				
ISHARES MSCI NETHERLANDS	FMV	7,623	7,623				
ISHARES MSCI SOUTH AFRICA	FMV	20,168	20,168				
ISHARES MSCI SPAIN'	FMV	6,198	6,198				
ISHARES MSCI SWEDEN	FMV	13,287	13,287				
ISHARES MSCI SWITZERLAND	FMV	14,321	14,321				
ISHARES MSCI UNITED KINGDOM	FMV	47,947	47,947				
SPDR S&P CHINA EXCHANGE TRADED FUND	FMV	19,970	19,970				
TOTAL INTL STOCK IX ADMIRAL	FMV	422,696	422,696				

TY 2011 Land, Etc. Schedule

Name: TAYLOR COMMUNITY

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND & IMPROVEMENTS	4,314,810	291,001	4,023,809	4,023,809
BUILDINGS & IMPROVEMENTS	53,832,119	18,917,621	34,914,498	34,914,498
FURNISHINGS & EQUIPMENT	5,278,119	3,226,254	2,051,865	2,051,865

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TY 2011 Other Assets Schedule

Name: TAYLOR COMMUNITY

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
LOAN ORIGINATION FEES, LESS ACCUMULATED AMORTIZATION	315,862	302,793	302,793
TRUST FUNDS HELD BY OTHERS	7,027,967	6,760,395	6,760,395
ASSETS HELD FOR SALE	1,731,827	874,476	874,476

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TY 2011 Other Decreases Schedule

Name: TAYLOR COMMUNITY

Description	Amount
CHANGE IN UNREALIZED APPRECIATION OF INVESTMENTS - BOOK PURPOSES	13,233
DECREASE IN TRUST FUNDS HELD BY OTHERS	267,573
CHANGE IN BOND SWAP FAIR VALUE	894,636

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TY 2011 Other Expenses Schedule

Name: TAYLOR COMMUNITY

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NURSING & ASSISTED LIVING	2,580,756	0	2,580,756	0
CARE MANAGEMENT	1,232,504	0	1,232,504	0
RESIDENT ACTIVITIES	165,059	0	165,059	0
DIETARY	1,044,228	0	1,044,228	0
BEAUTY SHOP	52,098	0	52,098	0
HOUSEKEEPING	291,778	0	291,778	0
MAINTENANCE	1,251,214	0	642,079	609,135
GROUNDS	570,303	0	570,303	0
ADMINISTRATION	1,109,659	0	1,109,659	0
MUNICIPAL PAYMENTS	428,011	0	0	428,011
NURSING FACILITY QUALITY ASSESSMENT	129,165	0	0	129,165

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TY 2011 Other Income Schedule

Name: TAYLOR COMMUNITY

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ENTRANCE FEES	6,918,731		6,918,731
PERIODIC RESIDENT INCOME	2,275,684		2,275,684
AUXILIARY INCOME	240,804		240,804

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TY 2011 Other Increases Schedule

Name: TAYLOR COMMUNITY

Description	Amount
LEGAL SETTLEMENT	177,076

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TY 2011 Other Liabilities Schedule

Name: TAYLOR COMMUNITY

Description	Beginning of Year - Book Value	End of Year - Book Value
DEPOSITS ON ENTRANCE FEES	124,045	250,872
ANNUITIES PAYABLE	246,416	220,893
INTEREST RATE SWAP CONTRACT	1,627,879	2,522,515
NURSING FACILITY QUALITY ASSESSMENT PAYABLE	474,459	394,269
LINE OF CREDIT	340,000	140,536

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TY 2011 Taxes Schedule

Name: TAYLOR COMMUNITY

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REAL ESTATE TAXES	1,563	0	1,563	0