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Form **990-PF** 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.

OMB No 1545-0052

For	alen	dar year 2012 or tax year beginning		, and ending				
Nar	ne of	foundation			A Employer identification number			
THE TAYLOR FOUNDATION					45-3167120			
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number			
		. BOX 569			770-957-18	66		
		own, state, and ZIP code ONOUGH, GA 30253			C If exemption application is p	ending, check here		
		all that apply: Initial return	Initial return of a for	mer nublic charity	D 1. Foreign organizations	check here		
u	HOOK	Final return	Amended return	mer public chartty	D 1.1 oreign organizations	, check here		
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,		
H 0	heck	type of organization: X Section 501(c)(3) ex		· · · · · · · · · · · · · · · · · · ·	1			
$\Box$		remains	Other taxable private foundat	ion	E If private foundation sta under section 507(b)(1)			
1 Fa		rket value of all assets at end of year J Accounts		L Accrual	F If the foundation is in a	• •		
			her (specify)		under section 507(b)(1)			
Þ		1,050,546. (Part I, colu		asis)		(		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
<u>~</u>		necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)		
記記	1	Contributions, gifts, grants, etc., received	900,000.					
	2	Check if the foundation is not required to attach Sch. B				1		
8	3	Interest on savings and temporary cash investments	9.	9.		STATEMENT 1		
1	4	Dividends and interest from securities	12,631.	9,143	12,631.	STATEMENT 2		
3	5a	Gross rents						
Ž		Net rental income or (loss)	2 076		<u> </u>			
댦	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all 110 760	<2,876.	<u>•</u>	· ·			
艺	b Gross sales price for all assets on line 6a 110,760.  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain  9 Income modifications			0.		[		
SCANNED NOV				0.	N/A	<u> </u>		
Ö					N/A			
(J)	100	Gross sales less returns and allowances						
		Less Cost of goods sold				<u> </u>		
		Gross profit or (loss)						
	11	Other income	121.	121	121.	STATEMENT 3		
	12	Total. Add lines 1 through 11	909,885.	9,273	12,761.			
	13	Compensation of officers, directors, trustees, etc	0.	0	0.	0.		
	14	Other employee salaries and wages						
s	15	Pension plans, employee benefits	F.			_		
enses		Legal fees STMT 4	78.	0	0.	0.		
<u> </u>		Accounting fees	2 160	2 160				
e Expe	ľ	Other professional fees STMT 5	3,169.	3,169	0.	0.		
žį	17 18	Interest			<del></del>			
ST	19	Depreciation and depletion		R	P gars   A game			
ini	20	Occupancy						
Operating and Administrative	21	Travel, conferences, and meetings		m	70	<del> </del>		
ď	22	Printing and publications		<u> </u>	V 0 8 2013 13			
e B	23	Other expenses STMT 6	279.	40	maria i.e.	0.		
atin	24							
per		expenses. Add lines 13 through 23	3,526.	L3,20'9"	DEN, UT of	0.		
0	25	Contributions, gifts, grants paid	56,000.			56,000.		
	26	Total expenses and disbursements.						
	L.	Add lines 24 and 25	59,526.	3,209	0.	56,000.		
	27	Subtract line 26 from line 12:	050 350			,		
		Excess of revenue over expenses and disbursements	850,359.	6.064				
		Net investment income (if negative, enter -0-)		6,064	12,761.	<del> </del>		
2235 12-0		Adjusted net income (if negative, enter -0-)  LHA For Paperwork Reduction Act Notice, see	instructions		14,761.	Form <b>990-PF</b> (2012)		
12-0	)-12	FIN I OI I abel mois recommon ver monce, see	monuquono.			101111 3 3 3 3 TF (2012)		

Page 2

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	/ear
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	189,980.	458,623.	458,623.
	2	Savings and temporary cash investments		131,481.	131,481.
	1	Accounts receivable			
	ľ	Less: allowance for doubtful accounts			
	١.				
	4	Pledges receivable -			
		Less; allowance for doubtful accounts			
	_	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other	į.		
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts		A 400 W	•
10	8	Inventories for sale or use			
Assets	١.	Prepaid expenses and deferred charges		-	
Ąŝ	9		0.	14,635.	14,434.
•					82,399.
		Investments - corporate stock STMT 8	0.	83,293.	82,399.
	C	Investments - corporate bonds			
	11	Investments - land, puildings, and equipment basis			·
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	0.	352,307.	363,609.
	14	Land, buildings, and equipment: basis ▶	,		ž.
	' '	Less accumulated depreciation			
	45	Other assets (describe >		<del></del>	
	13	Other assets (describe	<del> </del>		
		Takal are sky (to be a secondated by all filess)	189,980.	1,040,339.	1,050,546.
	_	Total assets (to be completed by all filers)	109,300.	1,040,333.	1,030,340.
	Ī	Accounts payable and accrued expenses			, , ,
	18	Grants payable			1
e)	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			, , , , , , , , , , , , , , , , , , ,
Liabilities	21	Mortgages and other notes payable			
=	22	Other liabilities (describe  )			
	l	·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	L. Carrier and Car
_		Foundations that follow SFAS 117, check here			i e
		and complete lines 24 through 26 and lines 30 and 31.			:
Š	۰۰	Unrestricted			
ances	24				ı
	25	Temporarily restricted			
Ö	26	Permanently restricted			į
Net Assets or Fund Ba	]	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
Ö	27	Capital stock, trust principal, or current funds	0.	0.	i
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	,
Asi	29	Retained earnings, accumulated income, endowment, or other funds	189,980.	1,040,339.	ı
e t	30	Total net assets or fund balances	189,980.	1,040,339.	
Z	"				•
	١,,	Total liabilities and net assets/fund balances	189,980.	1,040,339.	
_	31	· · · · · · · · · · · · · · · · · · ·		1,040,3334	· · · · · · · · · · · · · · · · · · ·
P	art	III Analysis of Changes in Net Assets or Fund B	Balances		
_				· · · · · · · · · · · · · · · · · · ·	
1		net assets or fund balances at beginning of year - Part II, column (a), line	30	1	400 000
	•	t agree with end-of-year figure reported on prior year's return)	•	. 1	189,980.
2	Ente	amount from Part I, line 27a		2	850,359.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	ines 1, 2, and 3		4	1,040,339.
		eases not included in line 2 (itemize)	• • •	. 5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,040,339.
Ť					Form <b>990-PF</b> (2012)
					· · · · · · · · · · · · · · · · · · ·

P	Part IV Capital Gains	and Losses for Tax on In	vestment	Income					
	2-story brick wa	ribe the kind(s) of property sold (e.g. irehouse; or common stock, 200 shs	, real estate, . MLC Co.)		( <b>b</b> )	low acqui - Purchas - Donatio	red ( e n	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	PUBLICLY TRADE					P			
	PUBLICLY TRADE				<u> </u>	P			
_	CAPITAL GAINS	DIVIDENDS			<u> </u>				
d		<del></del>		_					
<u>e</u>	· -	(A) Depresenting allowed	(=) Coo	t or other base	┸┑			(h) Coin or (loop	<u> </u>
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale	_			(h) Gain or (loss (e) plus (f) minus	(g)
_a		<u></u>	·- ·· · · · · · · · · · · · · · · · · ·	93,01					<5,453.3 374.
_ <u>b</u>				20,02	.0.				2,203.
d								-	2,203.
u		10000000			-			<del></del> _	
_		ng gain in column (h) and owned by t	the foundation	on 12/31/69			(1)	Gains (Col. (h) gain	minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any			còl. (	k), but not less tha Losses (from col. (	n -0-) <b>or</b>
			<u> </u>					<del>.</del>	<5,453.
								·	374.
					_				2,203.
<u> </u>									
		-					-		
2	Capital gain net income or (net ca	If gain, also enter  apital loss) (If (loss), enter -0-	r in Part I, line	7 7	}	2			<2,876.
	, ,	`		•	1				•
3	If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an .column (c)	iu (o).		٦				
	If (loss), enter -0- in Part I, line 8				<u> </u>	3			<5,079.
F	Part V   Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	t Inv	estme	nt Inco	ome	
(Fo	or optional use by domestic private	e foundations subject to the section 4	4940(a) tax on	net investment ir	ncom	e.)			
lf c	section 4940(d)(2) applies, leave t	hie nart hlank							
11 3	section 4340(0)(2) applies, leave t	nis part blank.							
W	as the foundation liable for the sec	tion 4942 tax on the distributable arr	nount of any ye	ear in the base pe	rıod?				Yes X No
_		lify under section 4940(e). Do not co							
1		each column for each year; see the ir	nstructions dei	fore making any e					(4)
	Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(C) ancha		e seepte	Distril	(d) oution ratio
	Calendar year (or tax year beginni	"''y "'' <i>)</i>	0,000.	Not value of he	Jilona	TRADIC US	0 4		olded by col. (c))
_	2011		0,000.				0.	•	•000000
_	2010								<del></del>
_	2009					<del></del> .			
_	2007	-						<del>                                     </del>	
_	2007							† 1	
2	Total of line 1, column (d)							2	.000000
		5-year base period - divide the total of	on line 2 by 5.	or by the number	r of ve	ears	-		<del></del>
Ĭ	the foundation has been in existe	- ·	- · · · · · - · · , · · ,					3	.000000
				•	-				
4	Enter the net value of noncharital	ble-use assets for 2012 from Part X,	line 5					4	500,015.
						•			-
5	Multiply line 4 by line 3							5	0.
6	Enter 1% of net investment incor	me (1% of Part I, line 27b)						6	61.
7	Add lines 5 and 6							7	61.
я	Enter qualifying distributions from	m Part XII, line 4						8	56,000.
,		n line 7, check the box in Part VI, line		late that north-		0/ tay			
	See the Part VI instructions.	n mio 7, Glicok ule DUX III Fait VI, IIII	, iu, anu cump	note that part USII	ny a l	∕o ua∧ iali	·-		

orm	990-PF (2012) THE TAYLOR FOUNDATION		5-31				Page 4
	rt VI   · Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	48 - se	e inst	ru	ction	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	L	1				61.
	of Part I, line 27b .	İ	1				
	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-)	. <u>L</u>	2				<u>0.</u>
3	Add lines 1 and 2	L	3				61.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	L	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	L	5				61.
6	Credits/Payments:						
а	2012 estimated tax payments and 2011 overpayment credited to 2012						1
b	Exempt foreign organizations - tax withheld at source				*		
C	Tax paid with application for extension of time to file (Form 8868)			,		*	1
d	Backup withholding erroneously withheld 6d 6						
7	Total credits and payments. Add lines 6a through 6d	L	7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>▶</b> L	9				61.
10	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 2013 estimated tax ▶ Refunde	d▶	11				_
	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or int	ervene ir	1	<u> </u>		Yes	
	any political campaign?			1	a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit			1	b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials per	ıblıshed	f or		%	*	*
	distributed by the foundation in connection with the activities.			<u>_</u> .			
	Did the foundation file Form 1120-POL for this year?			1	C		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_		- 1			İ
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1					
	managers. ► \$ 0 .				_		<u> </u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities.				ı		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, or			*		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•		-	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		/-	• —	a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A		ь		<del> </del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	٠		<u> </u>	5		Х
	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 t	ne state l	aw		<u>-</u> -		
	remain in the governing instrument?				6	37	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	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 instructions)			_	ı		
	WY			_			1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			_	_		
	of each state as required by General Instruction G? If "No," attach explanation	_		_8	3b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for calen	dar		.		- <u></u> .
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	٠. ـــ	ns em = 1	_	9	<del></del>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse	្ធន្ធា	<u>rmt 1</u>	.Q   1	0	Х	

Dud the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

Yes

b If "Yes," did it have excess business holdings in 2012 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 2012.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

Form **990-PF** (2012)

X

X

3b

Yes X No

		in the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second se			l
2	Compensation of five highest-paid employees (other than those is	ncluded on line 1). If none	e, enter "NONE."		
	(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 benefit plans and deterred compensation	(e) Expense account, othe allowances
	NONE				
_		<u> </u>			
		T			
_					
_					
_					
_			1	}	
_					
_					1
_ T	otal number of other employees paid over \$50,000			•	

Form **990-PF** (2012)

Form 990-PF (2012) THE TAYLOR FOUNDATION		316/120	_ Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly		_
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Corr	npensation
NONE	(3) 1) p 3 1 1 1 1		
ПОИП	$\dashv$		
	<del>  </del>		
	<u> </u>		
		ŀ	
	<del> </del>		
The sumbay of others recovered over \$50,000 for professional convices		<b>—</b>	0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·		
			_
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	istical information such as the	Expense	s
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expense	J
1 N/A			
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 o	n lines 1 and 2.	Amount	
1 N/A			
· · · · · · · · · · · · · · · · · · ·			
2			
<u> </u>			
All other program-related investments. See instructions.			
3			
Total Add lines 1 through 2			Λ.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	377,857.
b	Average of monthly cash balances	1b	129,772.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	507,629.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2 ~	0.
3	Subtract line 2 from line 1d	3	507,629.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,614.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	500,015.
6	Minimum investment return. Enter 5% of line 5	6	25,001.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	25,001.
2a	Tax on investment income for 2012 from Part VI, line 5		·
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	61.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	24,940.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	24,940.
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	24,940.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		F.C. 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	56,000.
þ	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	
3	Amounts set aside for specific charitable projects that satisfy the:		
а		3a	
þ		3b	56.000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	56,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<i>~</i> a
	income. Enter 1% of Part I, line 27b	5	61. 55,939.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (	qualifies fo	or the section

Form **990-PF** (2012)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	( <b>d)</b> 2012
1 Distributable amount for 2012 from Part XI,		•		
line 7				24,940.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
<b>b</b> Total for prior years:		•		
,,		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007		:		·
<b>b</b> From 2008				
<b>c</b> From 2009				
d From 2010				
eFrom 2011 10,000.				l l
f Total of lines 3a through e	10,000.			
4 Qualifying distributions for 2012 from				l
Part XII, line 4: ►\$ 56,000.				·
a Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.	 	<u> </u>
c Treated as distributions out of corpus	0.	ė	,	
(Election required - see instructions)	<u> </u>		,	24,940.
d Applied to 2012 distributable amount	31,060.			24,940.
e Remaining amount distributed out of corpus	31,000.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	<b>U</b> •			<b>.</b>
6 Enter the net total of each column as indicated below:				`
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	41,060.	,		
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 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
1 Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013 7 Amounts treated as distributions out of		<u> </u>		0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.		******		
Subtract lines 7 and 8 from line 6a	41,060.			
10 Analysis of line 9:				
a Excess from 2008				1
b Excess from 2009				
c Excess from 2010			1	
d Excess from 2011 10,000.				
e Excess from 2012 31,060.	<u> </u>			
				Form <b>QQ0_DE</b> (2012)

THE TAYLOR FOUNDATION Form 990-PF (2012) Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax vear 2 a Enter the lesser of the adjusted net (a) 2012 (b) 2011 (c) 2010 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail of the person to whom applications should be addressed: LYNETTE ALT, 770-957-1866

1001 INDUSTRIAL PARKWAY, MCDONOUGH, GA 30253

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

ALL REQUESTS SHOULD BE SUBMITTED IN WRITING.

c Any submission deadlines:

#### NONE

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

#### NONE

Form 990-PF (2012) THE TAYLOR FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment	<del></del>	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year	Ci ouscania contributor			
,				
		501/01/21	CENTED I OPED MING	
A FRIENDS HOUSE 111 HENRY PKWY	N/A	501(C)(3)	GENERAL OPERATING FUNDS	
MCDONOUGH, GA 30253			T ON D D	5,000
		-		•
BOY SCOUT PACK #265	N/A	501(C)(3)	GENERAL OPERATING	
4200 STRONG ROCK PKWY	, A		FUNDS	
LOCUST GROVE, GA 30248				500
				<del></del>
PREGNANCY RESOURCE CENTER OF HENRY	N/A	501(C)(3)	GENERAL OPERATING FUNDS	
COUNTY 3834 JODICO RD			FUNDS	
MCDONOUGH, GA 30253				500
NATIONAL DEFENSE TRANSPORTATION	N/A	501(C)(3)	GENERAL OPERATING FUNDS	
ASSOCIATION 165 CW GRANT PARKWAY			FUNDS	
ATLANTA, GA 30354	1			5,000
				•
C5 GEORGIA	N/A	501(C)(3)	GENERAL OPERATING	
2500 WINDY RIDGE PARKWAY	N/A	501(0)(3)	FUNDS	
ATLANTA, GA 30339		ļ		3,000
Total SEE CO	NTINUATION SHE	ET(S)	<b>▶</b> 3a	56,000
<b>b</b> Approved for future payment				
NONE				
		ŀ		
				<del></del>
		1		
Total			. > 3b	<del></del>

Part XVI-A	Analysis of Income-Producing Activities
I GILATI-A	Analysis of moonie i readening mentines

F-1	Unrelated business income		Excluded	by section 512, 513, or 514	(e)		
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income		
1 Program service revenue:	code		code	- Alliount			
a	-		+ +				
b	-		+				
C	-						
d	-				<u> </u>		
e	-		<del></del>		<del></del>		
f	-		+				
g Fees and contracts from government agencies		-	+				
2 Membership dues and assessments			+				
3 Interest on savings and temporary cash	1		1 4	٠			
investments			14	9.			
4 Dividends and interest from securities			14	12,631.			
5 Net rental income or (loss) from real estate:			+	· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property .			$\perp$				
<b>b</b> Not debt-financed property			+				
6 Net rental income or (loss) from personal			1				
property			+				
7 Other investment income .		<del> </del>	14	121.			
8 Gain or (loss) from sales of assets other	i i			0 056			
than inventory	<u> </u>		18	<2,876.	<u> </u>		
9 Net income or (loss) from special events	ļ						
10 Gross profit or (loss) from sales of inventory		<del></del>					
11 Other revenue:	1 1						
a	-	· ·····	<b></b>				
b	-						
C	_		<del>-  -</del>				
d	_		$\bot$		<del></del>		
e	_	··-		0.005			
12 Subtotal. Add columns (b), (d), and (e)		0	•	9,885.	<u> </u>		
13 Total. Add line 12, columns (b), (d), and (e)		•		13	9,885.		
(See worksheet in line 13 instructions to verify calculations.)					<del></del>		
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	Exempt	Purposes			
Line No. Explain below how each activity for which in	nome is reported in	column (a) of Part V/I	A contribut	ted importantly to the accom	nlichment of		
Line No. Explain below how each activity for which in the foundation's exempt purposes (other that			-A COMMINUM	ted importantly to the accom	pholinent of		
the foundation o exempt purposes (earlet and							
			<del>.</del>				
		·					
	***			*			
	<u></u>	<del></del>					
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		<del></del>					
				·			
•							
		<u> </u>					

orm 990				FOUNDATIO				3167120		age 13
Part 2	KVII·	Information Exempt Org		Transfers To a	and Transactions a	and Relations	ships With No	ncharitabl	е	
1 Did	the oro			e in any of the followin	g with any other organization	n described in sec	tion 501(c) of		Yes	Ν̈́ο
					7, relating to political organ		1011 00 1(0) 01		100	1
	•		. , , , ,	ncharitable exempt org						
	Cash				,			ia(1)	l -	х
٠,	Other	assets		•				1a(2)		Х
		sactions:	• •		•		•			
(1)	Sales	of assets to a noncha	aritable exempt o	rganization				1b(1)		x
٠.		ases of assets from a	•	=	• •		•	1b(2)		х
(3)	Rental	of facilities, equipme	ent, or other asse	ets		•		1b(3)		X
(4)	Reimb	ursement arrangeme	ents .					1b(4)		Х
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	mance of services or	r membership or	fundraising solicitatio	ns			1b(6)		X
c Sha	aring of	facilities, equipment,	, mailing lists, otl	her assets, or paid em	ployees			1c		Х
d If th	ne answ	er to any of the abov	e is "Yes," comp	lete the following sche	dule. Column (b) should ah	ways show the fair	market value of the	goods, other as:	sets,	
or s	services	given by the reporti	ng foundation. If	the foundation receive	ed less than fair market valu	ie in any transactio	n or sharing arrange	ment, show in		
col	umn <b>(d</b>	) the value of the goo	ds, other assets,	, or services received.						
(a)Line n	0	(b) Amount involved	(c)	Name of noncharitable	exempt organization	(d) Description	on of transfers, transaction	ons, and sharing a	rangem	ents
				N/A						
										_
					<del> </del>					
					<del></del>					
		=	-		or more tax-exempt organ	zations described		<del></del>	_	_
				n 501(c)(3)) or in sect	ion 527?			L Yes	LX	No 🗋
b If "	Yes," co	mplete the following			L (L) Torres et enforciet en	·	<u></u>	-1-4		
			f organization		(b) Type of organization		(c) Description of r	elationsnip		
		N/.	A			ļ	· · · · · · · · · · · · · · · · · · ·			
						1				
			<del></del>			<del> </del>				
	Under	nenalties of nection 1 do	clare that I have ava	mined this return include	ng accompanying schedules and	statements and to th	e hest of my knowledge			
Sian	and be	lief, it is true, correct, and	d complete Declara	ation of preparer (other to	(axpayer) is based on all inform	nation of which prepar	er has any knowledge	May the IRS return with the		
Sign Here		$\sim 0.$	T (		$\geq$ $_{\scriptscriptstyle 1}$	PRESI	הבאת	shown below	v (see in:	str )?
	Sign	ature of officer or tru	stee .		L Date	Title	DEMI	_ X Ye	š L_	_ No
<u> </u>	Jigii	Print/Type preparer		Preparer's s		Date	Check   if	PTIN		
		Jeo proparci	5 man 10	, Topuloi 3 3	.g		self- employed	' ' '''		
Paid		STEVEN M	עממוו		70	7/18/17	55 5pioyod	P00592	771	l
Pren	arer			OL SOM & CO	MDANV D C	1 1.31.3	Tirmin FINE N. 5	Q_16530		

Firm's address ► 1640 POWERS FERRY RD, BLDG 11
MARIETTA, GA 30067

770-989-0028

Phone no.

Use Only

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization

**Employer identification number** 

1	THE TAYLOR FOUNDATION	45-3167120
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 50	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See instructions.
General Rule		
<del>-</del>	ation filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or manipulate Parts I and II.	nore (in money or property) from any one
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contributor on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	on of the greater of <b>(1)</b> \$5,000 or <b>(2)</b> 2%
total contributi	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any cons of more than \$1,000 for use exclusively for religious, charitable, scientific, literator of cruelty to children or animals. Complete Parts I, II, and III.	
contributions for this box is check purpose. Do no	601(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any corruse exclusively for religious, charitable, etc., purposes, but these contributions checked, enter here the total contributions that were received during the year for an of complete any of the parts unless the <b>General Rule</b> applies to this organization litable, etc., contributions of \$5,000 or more during the year	did not total to more than \$1,000. n exclusively religious, charitable, etc.,
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not file S on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ oneet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

Name of organization

Employer identification number

## THE TAYLOR FOUNDATION

45-3167120

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BENNETT INTERNATIONAL GROUP, LLC  1001 INDUSTRIAL PARKWAY  MCDONOUGH, GA 30253	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CAP INSURANCE COMPANY P.O. BOX 569 MCDONOUGH, GA 30253	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Omnicash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
223452 12-2		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2012)

Employer identification number

# THE TAYLOR FOUNDATION

45-3167120

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		.   - - - -   \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		-   -   -   \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		-   -   -   \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		- - - - - - - -					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		- - - \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		Schodule P (Form (	90 990-F7 or 990-PF) (2012				

Employer identification number

rt III	YLOR FOUNDATION	dual contributions to section 501(c)(7).	(8), or (10) organizations that total more than \$1,000 for th
	year. Complete columns (a) through (e) and the	e following line entry. For organizations co	(8), or (10) organizations that total more than \$1,000 for the organizations that total more than \$1,000 for the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization
	Use duplicate copies of Part III if additiona		(Enter this information once)
No.			
om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   ]			
.			
_			
		(e) Transfer of gift	
	Transferee's name, address, an	d 7ID + 4	Relationship of transferor to transferee
	mansieree s name, add ess, an	<u> </u>	Treationally of damaleror to damalere
-			
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No. om ert l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I	(5). 4. peed o. g		(-,
-			
-			_
		(e) Transfer of gift	
L	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
.			*
No.			
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
[			
<u> </u>			_
		(e) Transfer of gift	
	Transferse's name address as		Polationship of transferor to transferor
-  -  -	Transferee's name, address, ar		Relationship of transferor to transferee
-   ·	Transferee's name, address, ar		Relationship of transferor to transferee
	Transferee's name, address, ar		Relationship of transferor to transferee
	Transferee's name, address, ar		Relationship of transferor to transferee
No.		nd ZIP + 4	
No. om	Transferee's name, address, ar		Relationship of transferor to transferee  (d) Description of how gift is held
No. om art I		nd ZIP + 4	
No. om art I		nd ZIP + 4	
No. om art I		nd ZIP + 4	
No. om art I		(c) Use of gift	
No. om art I		nd ZIP + 4	
No. om art I		(c) Use of gift  (e) Transfer of gift	
No. om irt I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
No. om art I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held

### Form **8868**

(Rev. January 2013) 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.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

OMB No. 1545-1709

 $\triangleright X$ 

Form 8868 (Rev. 1-2013)

due date for Number, street, and room or suite no. If a P.O. box, see instructions.	<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of t	hıs form).		
Electronic filing (gfile). You can electron-cally file Form 8988 if you need a 3-month automatic extension of time to file (ill commits for a corporation required to the Form 990-T), or an additional (not automatic) 3-month extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Confracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, viset wawn-is govidefile and click on a-file for Charless & Nonpronts.    Part I	Do not d	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	y filed Fo	rm 8868.	
required to file Form 990-Ti, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8888 to request an extension of time to file any of the forms listed in Part I or Part I with the exception of Form 8870, Information Ratium for Transfers Accounted With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visits www.ris.gov/elide and citics, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visits www.ris.gov/elide and citics, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visits www.ris.gov/elide and citics, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visits with the paper formatic filing the filing of this form, visits with the paper formation of time to the income tax returns.    Part I only							oration
of time to file arry of the forms lated in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Cortain Personal Benefit Contracts, which must be sent to the IRS in paper forms (see instructions). For more details on the electronic filing of this form, wait www.nrs.govietife and click on e-file for Chantes & Notyporitis.    Part I		· ,					
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, west www.rs.govietle and cisc on -et-fe for Charanse & Nonprofits.  Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to life Form 990-T and requesting an automatic 6-month extension: check this box and complete Part I only 40 other corporations (including 1120-C fliers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  Type or Name of exempt organization or other filer, see instructions.  THE TAYLOR FOUNDATION	of time t	o file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for T	ransfers /	Associated With Ce	ertain
visit www.rs.gov/efile and click on e-file for Chantes & Nonprotiss.		•	•				
Part		• •		<b>,</b> · · · · · · · · · · · · · · · ·			
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for file income tax returns.  Type or I print The TAYLOR FOUNDATION	_			submit original (no copies nee	ded).	· · · · · · · · · · · · · · · · · · ·	
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tear returns.    Type or   Name of exempt organization or other filer, see instructions.   Employer identification number (EIN) or The TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     THE TAYLOR FOUNDATION   45-3167120     City, town or post office, state, and ZIP code. For a foreign address, see instructions.     THE TAYLOR FOUNDATION   76-800     City, town or post office, state, and ZIP code. For a foreign address, see instructions.     The Taylor Foundation   75-800     The Taylor Foundation   75-900     The Taylor Fo				<del></del>			
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Form 4720 (individual)  Form 990-PF  O4 Form 5227  10  Form 990-T (trust of the than above)  DAVID PITTMAN  The books are in the care of ▶ P.O. BOX 569 - MCDONOUGH, GA 30253  Telephone No. ▶ 770 - 957 - 1866  If this so for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for part of the group, check this box  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2013  Is for the organization's return for:  □ X calendar year 2012 or  □ If the tax year beginning  , and ending  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any norrefundable credits. See instructions.  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any norrefundable credits. See instructions.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3a \$ 0.			†	<del></del>			
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Form 990-T (sec. 401(a) or 408(a) trust)  DAVID PITTMAN  The books are in the care of ▶ P.O. BOX 569 - MCDONOUGH, GA 30253  Telephone No. ▶ 770-957-1866  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box ▶ ☐ and attach a list with the names and ElNs of all members the extension is for.  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2012 or  X calendar year 2012 or  Change in accounting period  au 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.  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.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 0.		- · · · · · · · · · · · · · · · · ·	<del>†                                      </del>	· · · · · · · · · · · · · · · · · · ·			
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Telephone No. ▶ 770 – 957 – 1866 FAX No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  □ X calendar year 2012 or  □ Lax year beginning , and ending and ending  2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period  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.  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.  c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3a \$ 0.	● The b		MCDOI	NOUGH, GA 30253			
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If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ X calendar year 2012 or, and ending  If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	-	<del></del>	e in the l lr			<del></del>	
box  □ . If it is for part of the group, check this box  □ and attach a list with the names and EINs of all members the extension is for.  1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for: □		•			 f thie ie fo	r the whole group	chack this
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2012 or  tax year beginning , and ending  If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  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.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c. \$ 0.			٦				
AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:    X   Calendar year 2012   Calendar year 2012   Calendar year 2012   Calendar year beginning   And ending						ers the extension i	3 101.
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tax year beginning , and ending  If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0.  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. 3b \$ 0.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 0.							
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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 \$ 0.  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.  3b \$ 0.  c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 0.		<b></b>	, , oon , oac		mar rotar	••	
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estimated tax payments made. Include any prior year overpayment allowed as a credit.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3b \$ 0.  C Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 0.	_		enter any	refundable credits and	- Ja	<b>-</b>	
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by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 0.	_				130	<del>"</del>	
		- •	•	• • •	3~	<u>«</u>	0.

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor BRAIN TUMOR FOUNDATION FOR CHILDREN N/A 501(C)(3) GENERAL OPERATING 6065 ROSWELL ROAD, NE, SUITE 505 FUNDS ATLANTA, GA 30328 3,000. NON-PROFIT GENERAL OPERATING AMBUCS N/A FUNDS SERVICE ORG PO BOX 3092 LONGVIEW, TX 75606 3,000. TRUCKERS AGAINST TRAFFICKING N/A 501(C)(3) GENERAL OPERATING FUNDS PO BOX 816 ENGLEWOOD, CO 80151 2,000. CONNECTING HENRY N/A 501(C)(3) GENERAL OPERATING FUNDS 333 PHILLIPS DR, SUITE D MCDONOUGH, GA 30253 3,000. CITY KIDS N/A 501(C)(3) GENERAL OPERATING FUNDS 515 MARY STREET, SE WASHINGTON, DC 20003 2,500. SCHOOL GENERAL OPERATING ROCK SPRINGS CHRISTIAN ACADEMY N/A FUNDS 219 ROCK SPRINGS RD 3,000. MILNER, GA 30257 COMMUNITY BIBLE FELLOWSHIP CHURCH N/A CHURCH GENERAL OPERATING FUNDS 1500 TARA PLACE 500. HAMPTON, GA 30228 501(C)(3) ANDERSON FAMILY CHARITABLE FOUNDATION N/A GENERAL OPERATING FUNDS PO BOX 38 15,000. OLD TOWN, FL 32680 ELAM MINISTRIES N/A CHURCH GENERAL OPERATING FUNDS 5755 NORTH POINT PARKWAY ALPHARETTA, GA 30022 2,500. FERST FOUNDATION FOR CHILDHOOD N/A 501(C)(3) GENERAL OPERATING FUNDS LITERACY PO BOX 1337 MADISON, GA 30650 5,000. Total from continuation sheets 42,000.

#### THE TAYLOR FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to **Amount** any foundation manager Name and address (home or business) or substantial contributor LOCUST GROVE UNITED METHODIST CHURCH N/A CHURCH GENERAL OPERATING FUNDS 211 PEEKSVILLE ROAD LOCUST GROVE, GA 30248 1,000. N/A CHURCH GENERAL OPERATING STOCKBRIDGE PRESBYTERIAN CHURCH FUNDS 4740 NORTH HENRY BLVD, NW STOCKBRIDGE, GA 30281 500. 501(C)(3) GENERAL OPERATING POTTER'S HOUSE FOR WOMEN N/A FUNDS 112 POINTE VIEW CT JACKSON, GA 30233-6343 500. GENERAL OPERATING N/A 501(C)(3) BOY SCOUT PACK #64 FUNDS 35 JANET ROAD GRIFFIN, GA 30224 500. **Total from continuation sheets** 

<del></del>						<del></del>	
FORM 990-PF INTEREST ON SAVI	NGS AND	TEME	PORARY C	ASH 1	INVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
RAYMOND JAMES					- -		9.
TOTAL TO FORM 990-PF, PART I,	LINE 3	, COI	LUMN A		-		9.
FORM 990-PF DIVIDENI	OS AND I	NTERI	EST FROM	SECU	JRITIES	STATEMENT	2
SOURCE	G	ROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	.)
RAYMOND JAMES RETIREMENT WEALTH SPECIALISTS	 5		8,895. 5,939.		1,251. 952.	7,6 4,9	
TOTAL TO FM 990-PF, PART I, I	LN 4		14,834.		2,203.	12,6	31.
FORM 990-PF	ОТН	IER II	NCOME			STATEMENT	3
DESCRIPTION		1	(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME		
OTHER INVESTMENT INCOME				121.	121	. 1	21.
TOTAL TO FORM 990-PF, PART I	, LINE 1	.1		121.	121	. 1	21.
FORM 990-PF	L	ÆGAL	FEES			STATEMENT	4
DESCRIPTION	(A) EXPENS PER BC	SES	(B) NET INV MENT IN	EST-			
LEGAL FEES		78.		0	•	0.	0.
TO FM 990-PF, PG 1, LN 16A		78.		0	•	0.	0.

FORM 990-PF O	THER PROFES	SIONAL FE	es ———		STATI	EMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		(D) HARITA PURPOS	
INVESTMENT MANAGEMENT FEES	3,169.	3,:	169.		0.		0.
TO FORM 990-PF, PG 1, LN 16C	3,169.	3,	169.		0.		0.
FORM 990-PF	OTHER E	XPENSES			STAT	EMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		(D) HARITA PURPOS	
BANK CHARGES SUPPLIES REGISTRATION FEES	40. 214. 25.		40. 0. 0.		0. 0. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	279.		40.		0.		0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	IGATIONS	STAT	EMENT	7
DESCRIPTION	U.S GOV'	-	вос	OK VALUE		MARKE ALUE	T
GNMA FUND	X	<del></del>		14,635.		14,4	34.
TOTAL U.S. GOVERNMENT OBLIGAT	rions			14,635.		14,4	34.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS					
TOTAL TO FORM 990-PF, PART II	T TAYE 103	•		14,635.		14,4	

FORM 990-PF CORE	PORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
PHILIP MORRIS INTERNATIONAL INC	-	13,861.	13,329.
FIRST TRUST DIVIDEND INCOME PLUS 4		28,910.	28,926.
FIRST TRUST CAPITAL STRENGTH 15	_	40,522.	40,144.
TOTAL TO FORM 990-PF, PART II, LINE	10B	83,293.	82,399.
FORM 990-PF OTHER	RINVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
U.S. MANAGED VOLATILITY FUND	COST	44,667.	47,310.
TAX-MANAGED LARGE CAP FUND	COST	10,095.	10,206.
GLOBAL MANAGED VOL FUND	COST	10,278.	11,183.
CORE FIXED INCOME FUND	COST	21,094.	22,128.
TAX-ADVANTAGED INCOME FUND	COST	18,002.	19,083.
HIGH YIELD BOND FUND	COST	15,977.	17,184.
EMERGING MKTS DEBT FUND	COST	16,565.	16,847.
BOND FUND OF AMERICA CLASS F2	COST	16,804.	17,210.
DWS RREEF REAL ESTATE SECURITIES FD	COST	41,657.	39,850.
DWS MANAGED MUNICIPAL BD FD CL S	COST	50,403.	51,652.
FRANKLIN HIGH YIELD TAX FREE INC FD	COST	38,766.	40,269.
LORD ABBETT VOND DEBENTURE FUND CL	COST		
F		31,262.	31,972.
MFS INTL NEW DISCOVERY FD CL A	COST	7,927.	8,548.
OPPENHEIMER DEVELOPING MARKETS FD	COST		
CL A		7,546.	8,026.
PIMCO EMERGIN MARKETS BD FD CL A	COST	15,663.	16,794.
SPDR GOLD TR GOLD SHS	COST	5,601.	5,347.
TOTAL TO FORM 990-PF, PART II, LINE	13	352,307.	363,609.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

10

NAME OF CONTRIBUTOR

ADDRESS

BENNETT INTERNATIONAL GROUP, LLC

1001 INDUSTRIAL PARKWAY

MCDONOUGH, GA 30253

CAP INSURANCE COMPANY

P.O. BOX 569

MCDONOUGH, GA 30253