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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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OMB No 1545-0052





2013


Open to Public Inspection

For calendar year 2013, or tax year beginning 01-01-2013 , and ending 12-31-2013

Name of foundation THE NANCY TAYLOR FOUNDATION FOR CHRONIC DISEASES INC		A Employer identification number 26-2343375	
Number and street (or P O box number if mail is not delivered to street address) 2448 E 81ST STREET NO 3711		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code TULSA, OK 74137		B Telephone number (see instructions) (918) 392-9968	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		C If exemption application is pending, check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input type="checkbox"/> \$ 9,711,366		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,154,150			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	2,288			
	4 Dividends and interest from securities.	143,201	143,201		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	2,428,793			
	b Gross sales price for all assets on line 6a 3,687,105				
	7 Capital gain net income (from Part IV, line 2) . . .		2,428,793		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	3,728,432	2,571,994		
	13 Compensation of officers, directors, trustees, etc	90,000	4,500		85,500
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	26,269	1,313		24,956
	16a Legal fees (attach schedule)	 138	7		131
	b Accounting fees (attach schedule)	 5,160	2,580		2,580
	c Other professional fees (attach schedule)	 89,249	63,084		26,165
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	 16,152	3,278		6,543
	19 Depreciation (attach schedule) and depletion . . .	 415	21		
	20 Occupancy	7,376	369		7,007
	21 Travel, conferences, and meetings	8,040	402		7,638
	22 Printing and publications	750	38		713
	23 Other expenses (attach schedule)	 7,187	434		6,753
	24 Total operating and administrative expenses. Add lines 13 through 23	250,736	76,026		167,986
	25 Contributions, gifts, grants paid	1,119,074			1,119,074
	26 Total expenses and disbursements. Add lines 24 and 25	1,369,810	76,026		1,287,060
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	2,358,622			
	b Net investment income (if negative, enter -0-)		2,495,968		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	53,883	71,153	71,153
	2	Savings and temporary cash investments	876,506	1,348,352	1,348,352
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)	500,903	 1,001,715	1,000,685
	b	Investments—corporate stock (attach schedule)	3,954,841	 4,072,507	6,548,834
	c	Investments—corporate bonds (attach schedule).	598,462	 743,109	741,887
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ 2,378 Less accumulated depreciation (attach schedule) ▶ 1,923	870	 455	455
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,985,465	7,237,291	9,711,366	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	5,985,465	7,237,291	
	30	Total net assets or fund balances (see page 17 of the instructions)	5,985,465	7,237,291	
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	5,985,465	7,237,291		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 5,985,465
2	Enter amount from Part I, line 27a	2 2,358,622
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 8,344,087
5	Decreases not included in line 2 (itemize) ▶ 	5 1,106,796
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6 7,237,291

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	2,428,793
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2012	1,054,944	7,703,068	0 136951
2011	1,007,637	6,790,895	0 148381
2010	683,958	6,269,014	0 109101
2009	445,409	2,196,189	0 202810
2008	0	2,437	0 000000

2	Total of line 1, column (d).	2	0 597243
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 119449
4	Enter the net value of noncharitable-use assets for 2013 from Part X, line 5.	4	8,779,802
5	Multiply line 4 by line 3.	5	1,048,739
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	24,960
7	Add lines 5 and 6.	7	1,073,699
8	Enter qualifying distributions from Part XII, line 4. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions	8	1,287,060

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
	Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	24,960
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	24,960
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	24,960
6	Credits/Payments		
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	11,218
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	15,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	26,218
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,258
11	Enter the amount of line 10 to be Credited to 2014 estimated tax <input checked="" type="checkbox"/> 1,258 Refunded <input checked="" type="checkbox"/>	11	0

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file 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: (1) On the foundation <input checked="" type="checkbox"/> \$ 0 (2) On foundation managers <input checked="" type="checkbox"/> \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		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? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> OK _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> 	10	Yes	

Part 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 instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of EDWARD L TAYLOR IV Telephone no (918) 392-9968 Located at 2448 E 81ST STREET SUITE 3711 TULSA OK ZIP+4 74137			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	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? (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? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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).			
b	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)? Organizations relying on a current notice regarding disaster assistance check here.	1b		No
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 2013?	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))			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? 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 instructions).	2b		
c	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 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2013 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 2013.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2013?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions).

Yes

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

b

If any answer is "Yes" to 5a(1)–(5), did **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 instructions)?

5b

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?

Yes

No

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?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

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?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

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

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(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
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
TSP CAPITAL MANAGEMENT GROUP LLC 382 SPRINGFIELD AVE SUMMIT,NJ 07901	INVESTMENT MGT	61,707
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3.	0

Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	8,595,064
b	Average of monthly cash balances.	1b	318,441
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	8,913,505
e	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	8,913,505
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	133,703
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,779,802
6	Minimum investment return. Enter 5% of line 5.	6	438,990

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	438,990
2a	Tax on investment income for 2013 from Part VI, line 5.	2a	24,960
b	Income tax for 2013 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	24,960
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	414,030
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	414,030
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	414,030

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	1,287,060
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	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	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	1,287,060
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 instructions).	5	24,960
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,262,100
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				414,030
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2013				
a From 2008.				
b From 2009.	360,600			
c From 2010.	419,055			
d From 2011.	698,866			
e From 2012.	692,167			
f Total of lines 3a through e.	2,170,688			
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 1,287,060				
a Applied to 2012, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2013 distributable amount.				414,030
e Remaining amount distributed out of corpus	873,030			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,043,718			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).	0			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions). . .	0			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	3,043,718			
10 Analysis of line 9				
a Excess from 2009. . . .	360,600			
b Excess from 2010. . . .	419,055			
c Excess from 2011. . . .	698,866			
d Excess from 2012. . . .	692,167			
e Excess from 2013. . . .	873,030			

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

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling.

2008-06-04

b

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

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2013	(b) 2012	(c) 2011	(d) 2010	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon.					
a	"Assets" alternative test—enter					
	(1) Value of all assets.					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization.					
	(4) Gross investment income.					

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

1

Information Regarding Foundation Managers:

a

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

b

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

2

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

Check here

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

a

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

EDWARD L TAYLOR MD THE NANCY TAYLOR
2448 E 81ST STREET 3711
TULSA, OK 74137
(918) 392-9968

b

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

RESEARCHERS IN UNIVERSITY AND INDEPENDENT RESEARCH LABS WILL SUBMIT GRANT PROPOSALS FOR FUNDING TO THE FOUNDATION

c

Any submission deadlines

N/A

d

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

PERIODIC UPDATES ON THE STATUS OF RESEARCH THAT IS FUNDED WILL BE PROVIDED TO THE FOUNDATION

Form 990-PF (2013)

Part XV

Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	1,119,074
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2013)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

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

Yes

No

a

Transfers from the reporting foundation to a noncharitable exempt organization of

1a(1)

No

1a(2)

No

b

Other transactions

1b(1)

No

1b(2)

No

1b(3)

No

1b(4)

No

1b(5)

No

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes

No

b

If "Yes," complete the following schedule.

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

Sign Here

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

2014-07-18

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below (see instr.)?

Yes

No

Paid Preparer Use Only

Print/Type preparer's name
JOHN F GRACE CPA

Preparer's Signature

Date
2014-07-17

Check if self-employed

PTIN
P00038416

Firm's name

STANFIELD & O'DELL PC

Firm's EIN

73-1293433

Firm's address

3211 S LAKEWOOD AVE TULSA, OK 741354934

Phone no

(918) 628-0500

Form 990-PF (2013)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
COMP ENERGETICA DE MNS GERAIS-CEMIG	P	2013-05-01	2013-05-15
AMERICAN WATER WORKS CO INC	P	2010-03-08	2013-02-20
AT&T INC	P	1981-01-01	2013-03-18
DISCOVERY COMMUNICATIONS SER A	P	1981-01-01	2013-03-18
LIBERTY INTERACTIVE CORP VENTURES A	P	2008-11-04	2013-03-18
LIBERTY INTERACTIVE CORP VENTURES A	P	2008-11-04	2013-03-18
WPX ENERGY INC	P	2007-05-15	2013-03-18
COMCAST CORP CL A	P	1981-01-01	2013-05-01
STARZ LIBERTY CAPITAL	P	2007-07-22	2013-05-01
STARZ LIBERTY CAPITAL	P	2007-07-22	2013-05-01
AT&T INC	P	1981-01-01	2013-05-02
AT&T INC	P	2007-07-22	2013-05-02
COMP ENERGETICA DE MNS GERAIS-CEMIG	P	2010-06-11	2013-05-15
GENERAL ELEC CAP CORP	P	2010-07-08	2013-05-22
CHEMED CORP	P	2011-02-23	2013-05-29
CELLEX THERAPEUTICS INC	P	1998-09-14	2013-06-13
CELLEX THERAPEUTICS INC	P	2001-10-02	2013-06-13
CELLEX THERAPEUTICS INC	P	2002-10-07	2013-06-13
CELLEX THERAPEUTICS INC	P	2002-10-08	2013-06-13
CELLEX THERAPEUTICS INC	P	2002-10-09	2013-06-13
CELLEX THERAPEUTICS INC	P	2002-10-10	2013-06-13
CELLEX THERAPEUTICS INC	P	2002-10-11	2013-06-13
CELLEX THERAPEUTICS INC	P	2005-05-23	2013-06-13
CELLEX THERAPEUTICS INC	P	2006-11-22	2013-06-13
CELLEX THERAPEUTICS INC	P	2006-11-22	2013-09-06
CELLEX THERAPEUTICS INC	P	2006-11-24	2013-09-06
CELLEX THERAPEUTICS INC	P	2007-07-22	2013-09-06
DIRECTV	P	1991-03-19	2013-10-22
DIRECTV	P	2007-07-22	2013-10-22
DIRECTV	P	2007-07-22	2013-10-24

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
FEDERAL HOME LOAN BANK	P	2010-06-17	2013-10-28
DIRECTV	P	2007-07-22	2013-11-05
COMCAST CORP CL A	P	1981-01-01	2013-11-12

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1		2	-1
39,502		21,241	18,261
181,442			181,442
193,538			193,538
49,522		5,194	44,328
11,428		1,199	10,229
11,127		10,642	485
104,540			104,540
52,583		10,290	42,293
65,307		5,837	59,470
250,810			250,810
125,781		133,333	-7,552
			0
100,000		100,000	0
102,252		97,402	4,850
1,866		1,915	-49
1,999		4,130	-2,131
17,334		13,911	3,423
14,187		11,276	2,911
16,825		12,937	3,888
18,322		14,273	4,049
16,667		12,780	3,887
21,467		22,801	-1,334
77,998		88,805	-10,807
11,335		8,582	2,753
58,846		44,665	14,181
50,121		18,436	31,685
467,880			467,880
155,960		55,908	100,052
393,493		139,121	254,372

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
200,000		200,000	0
640,509		223,632	416,877
234,463			234,463

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-1
			18,261
			181,442
			193,538
			44,328
			10,229
			485
			104,540
			42,293
			59,470
			250,810
			-7,552
			0
			0
			4,850
			-49
			-2,131
			3,423
			2,911
			3,888
			4,049
			3,887
			-1,334
			-10,807
			2,753
			14,181
			31,685
			467,880
			100,052
			254,372


Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			416,877
			234,463

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their 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
EDWARD L TAYLOR IV	DIRECTOR 40 00	90,000	26,269	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				
SUZANNE TAYLOR	DIRECTOR 0 00	0	0	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				
SELMAN KREMER	DIRECTOR 0 00	0	0	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				
STEPHEN J TAYLOR	DIRECTOR 0 00	0	0	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				
REBECCA KEEGAN DIXON	DIRECTOR 0 00	0	0	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				
DR HARVEY RUBEN	DIRECTOR 0 00	0	0	0
2448 E 81ST ST STE 3711 TULSA,OK 74137				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DUKE UNIVERSITY 2301 ERWIN ROAD DURHAM,NC 27710	NONE	EXEMPT	DESIGNER STEM CELLS FOR TREATING CHRONIC DISEASES, FARSHID GUILAK, PH D, CHARLES GERSBACH, PH D	108,000
NEMOURSALFRED I DUPONT HOSPITAL FOR 1600 ROCKLAND RD WILMINGTON,DE 19803	NONE	EXEMPT	PROGNOSTIC SYNOVIAL BIOMARKERS IN JUVENILE IDIOPATHIC ARTHRITIS, ANNEMARIE BRESCIA, M D	108,000
THE CHILDREN'S HOSPITAL OF PHILADEL 3401 CIVIC CENTER BLVD PHILADEPHIA,PA 19104	NONE	EXEMPT	DETERMINING THE ROLE OF SYK IN TUMOR NECROSIS FACTOR SECRETION IN A MURINE MODEL OF JUVENILE IDIOPATHIC ARTHRITIS, EDWARD M BEHRENS, M D	100,000
UNIVERSITY OF PITTSBURG DEPT PEDIAT 4401 PENN AVENUE ROOM 5304-AOB PITTSBURG,PA 15224	NONE	EXEMPT	SERUM CYTOKINE PROFILES IN LOCALIZED SCLERODERMA BY KATHRYN TOROK, M D	125,000
UNIVERSITY OF PITTSBURGH 4401 PENN AVENUE ROOM 5304-AOB PITTSBURG,PA 15224	NONE	EXEMPT	MALADAPTIVE DOUBLE NEGATIVE T CELLS IN JUVENILE IDIOPATHIC ARTHRITIS BY ABBE N DE VALLEJO, PH D	162,000
YALE UNIVERSITY 333 CEDAR STREET NEW HAVEN,CT 06510	NONE	EXEMPT	TARGETED NEUROFEEDBACK, A NOVEL NONPHARMACOLOGICAL TREATMENT FOR OBSESSIVE-COMPULSIVE DISORDER, CHRISTOPHER PITTENGER, M D , PH D	115,000
YALE UNIVERSITY 333 CEDAR STREET NEW HAVEN,CT 06510	NONE	EXEMPT	NAV 1 7 AND CHRONIC PAIN GENERATION OF A MODEL OF HUMAN INHERITED ERYTHROMELALGIA IN RODENTS, STEPHEN WAXMAN, M D PH D AND OMAR SAMAD, PH D	123,420
YALE UNIVERSITY 333 CEDAR STREET NEW HAVEN,CT 06510	NONE	EXEMPT	HUMAN GENETIC VARIATION IN CYTOKINE SIGNALING PATHWAYS AND SUSCEPTIBILITY TO AUTOIMMUNE DISEASE, DAVID HALFER, M D	115,000
YALE UNIVERSITY 333 CEDAR STREET NEW HAVEN,CT 06510	NONE	EXEMPT	VALIDATION OF METHODS TO IMAGE KETAMINE-INDUCED CHANGES IN THE HUMAN BRAIN, IRINA ESTERLIS, PH D	162,654
Total  3a				1,119,074

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div>	<div>OMB No 1545-0047</div> <div>2013</div>
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<div>Name of the organization</div> <div>THE NANCY TAYLOR FOUNDATION FOR CHRONIC DISEASES INC</div>	<div>Employer identification number</div> <div>26-2343375</div>
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)() (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

26-2343375

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD L TAYLOR III 8018 SOUTH MARION ST TULSA, OK 74136	\$ 1,154,150	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization THE NANCY TAYLOR FOUNDATION FOR CHRONIC DISEASES INC	Employer identification number 26-2343375
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Part III

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

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
<div></div> <div></div>		<div></div> <div></div> <div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
<div></div> <div></div>		<div></div> <div></div> <div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
<div></div> <div></div>		<div></div> <div></div> <div></div>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
<div></div> <div></div>		<div></div> <div></div> <div></div>	

TY 2013 Accounting Fees Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	5,160	2,580		2,580

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2013 Depreciation Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COPIER	2009-01-25	752	588	SL	5 0000000000000	150	0		
OFFICE FURNITURE	2009-12-10	594	182	SL	10 0000000000000	59	0		
NETBOOK COMPUTER	2009-05-17	1,032	738	SL	5 0000000000000	206	0		

**TY 2013 Investments Corporate
Bonds Schedule**

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC
EIN: 26-2343375

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	743,109	741,887

**TY 2013 Investments Corporate
Stock Schedule**

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC
EIN: 26-2343375

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCKS	4,072,507	6,548,834

TY 2013 Investments Government Obligations Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

US Government Securities - End of Year Book Value:	1,001,715
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US Government Securities - End of Year Fair Market Value:	1,000,685
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State & Local Government Securities - End of Year Book Value:	0
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State & Local Government Securities - End of Year Fair Market Value:	0
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TY 2013 Land, Etc. Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COPIER	752	738	14	
OFFICE FURNITURE	594	241	353	
NETBOOK COMPUTER	1,032	944	88	

TY 2013 Legal Fees Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	138	7		131

TY 2013 Other Decreases Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC
EIN: 26-2343375

Description	Amount
UNREALIZED GAIN/LOSS ON INVESTMENTS	1,106,796

TY 2013 Other Expenses Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	80	80		0
SUPPLIES	785	39		746
INSURANCE	3,088	154		2,934
WORKER'S COMPENSATION INSURANCE	565	28		537
TELEPHONE	1,141	57		1,084
POSTAGE	738	37		701
ASSOC OF SMALL FOUNDATIONS	725	36		689
OTHER EXPENSE	65	3		62

TY 2013 Other Professional Fees Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TSP & FIDELITY	61,707	61,707		0
OUTSIDE CONTRACT	27,542	1,377		26,165

TY 2013 Substantial Contributors Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Name	Address
EDWARD L TAYLOR III	8018 SOUTH MARION ST TULSA,OK 74136

TY 2013 Taxes Schedule

Name: THE NANCY TAYLOR FOUNDATION
FOR CHRONIC DISEASES INC

EIN: 26-2343375

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAX	6,887	344		6,543
FED EXCISE TAX EST PAYMENTS 2013	6,331	0		0
FOREIGN TAX	2,934	2,934		0