DLN: 93493207010266

# Form **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or the	e 2015 ca	alendar year, or tax year beg	jinning 01-01-2015 $$ , and ending 1	.2-31-201	L <b>5</b>			
		applicable	C Name of organization ANNE K TAYLOR FUND				D Emplo	yer ider	ntification number
	dress c	_					20-46	593436	5
	ime cha	_	Doing business as						
Ini	tıal retu	urn	Number and street (or D.O. he	ox if mail is not delivered to street address)	I Doom/su	uto	E Telepho	one num	ber
Fir ret		rmınated	2724 ARVIN RD	ox ii maii is not delivered to street address)	ROOM/Su	ite	(406)	656-0	706
┌ An	nended	return	City or town, state or province	e, country, and ZIP or foreign postal code					
Гар	plicatio	n pending	BILLINGS, MT 59102				<b>G</b> Gross r	eceıpts \$	246,004
			<b>F</b> Name and address o	of principal officer		H(a) I	s this a group	return	for
			ANNE K TAYLOR 2724 ARVIN RD				ubordinates?		□Yes □No
			BILLINGS, MT 59102				re all subordi ncluded?	nates	□Yes □No
								a list	(see instructions)
I Ta	ax-exer	mpt status	501(c)(3) 501(c) (	) ◀ (insert no )	27	H(c) (	Group exempt	ion nur	nber <b>►</b>
J W	/ebsit	e: ► WV	WW AKTAYLOR COM						
<b>K</b> For	m of o	rganızatıor	n 🔽 Corporation 🗆 Trust 🗀 Asso	ociation Other ►		<b>L</b> Year	of formation 20	006 <b>M</b>	State of legal domicile MT
Pa	rt I	Sun	nmary						-
2	т	OENCO	DURAGE AND ASSIST IND	ssion or most significant activities IVIDUALS, COMMUINITIES AND H SOUND ECONOMIC ACTIVITI		RATIONS	S TO CONSEI	RVE, PI	ROTECT AND
E I	-								
Governance	2	Check tl	his box 🛏 if the organization	on discontinued its operations or dis	sposed o	f more tha	an 25% of its	net ass	sets
Activities &	1			verning body (Part VI, line 1a) .				3	5
Alt le	1			pers of the governing body (Part VI,				4	5
Ę	1			d ın calendar year 2015 (Part V, lır e ıf necessary)	ne 2a) .			5 6	0
4	1			om Part VIII, column (C), line 12				7a	0
				ne from Form 990-T, line 34				7b	0
							Prior Year		Current Year
	8	Contr	ributions and grants (Part VI	II, line 1h)			187,	054	244,800
пï	9	Progr	ram service revenue (Part V				0		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)						597	675
_	11		r revenue (Part VIII, columr	_ —		197	529		
	12	12)	revenue—add lines o throug	ıh 11 (must equal Part VIII, columı	n (A), iin	e	187,	848	246,004
	13	Grant	ts and similar amounts paid	(Part IX, column (A), lines 1-3).			8,	736	2,608
	14		,	Part IX, column (A), line 4)				0	0
SQ.	15	Salar 5-10	ies, other compensation, em	11,	292	21,856			
Expenses	16a		•	rt IX, column (A), line 11e)			21,751		0
<u>₹</u>	Ь		undraising expenses (Part IX, colui						
ш	17		- ' ' '	(A), lines 11a-11d, 11f-24e) .	<del></del> .		161,	987	138,423
	18	Total	expenses Add lines 13-17	(must equal Part IX, column (A), lı	ine 25)		203,	766	162,887
- 05	19	Revei	nue less expenses Subtract	-15,	918	83,117			
Net Assets or Fund Balances						Beginni	ing of Current	Year	End of Year
See.	20	Total	assets (Part X, line 16) .				89,	547	172,664
at A Bd E	21							0	0
zΞ	22			tract line 21 from line 20			89,	547	172,664
Unde my k	nowle	alties of dge and		e examined this return, including ac d complete Declaration of preparer					
		***	***				2016-07-18		
Sigi	n	Sign	nature of officer				Date		
Her		ANN	IE K TAYLOR PRESIDENT						
			e or print name and title	Drog d	Т-	)nto		DTT	
D-:	<b>ل</b>		Print/Type preparer's name DANIEL S MILLER CPA	Preparer's signature DANIEL S MILLER CPA		oate 016-07-18	Check if self-employed	PTIN P00031	554
Pai		<u>,                                    </u>	Firm's name F ANDERSON ZURI	I MUEHLEN & CO PC			Firm's EIN 🕨 8	<u>1</u> 1-038594	10
	pare On	er	Fırm's address ► PO BOX 20435				Phone no (406	5) 245-51	.36
USt	<i>-</i> UII	ייу	BILLINGS, MT 59	91040435					

May the IRS discuss this return with the preparer shown above? (see instructions)

. ✓ Yes ☐ No

Part III	Statement of	Program	Service	Accomplishments

Briefly describe the organization's mission

TO ENCOURAGE AND ASSIST INDIVIDUALS, COMMUINITIES AND CORPORATIONS TO CONSERVE, PROTECT AND RESTORE BIODIVERSITY THROUGH SOUND ECONOMIC ACTIVITIES

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ 98,277 including grants of \$ 2,608 ) (Revenue \$

ANNE K TAYLOR FUND (AKTF) FORTIFIES LIVESTOCK ENCLOSURES, CALLED BOMAS, AROUND MAASAI MARA WITH THE GENEROUS SUPPORT FROM NATIONAL GEOGRAPHIC'S BIG CAT INITIATIVE (NGBCI), ORACLE THROUGH NGBCI, AS WELL AS EDEN WILDLIFE TRUST, AND MANY PRIVATE DONORS THESE BOMAS REDUCE THE NEED FOR HUMANS TO KILL PREDATORS - ESPECIALLY LIONS, LEOPARDS, AND HYENAS - BY PROTECTING LIVESTOCK FROM PREDATORY ATTACKS IN COLLABORATION WITH THE MARA CONSERVANCY AND MARA NORTH CONSERVANCY THROUGH 2015, WE CONTINUED TO REDUCE HUMAN-WILDLIFE CONFLICT, SPECIFICALLY BETWEEN HERDERS AND LIONS, BY BUILDING PREDATOR-RESISTANT BOMAS AND FORTIFYING THE MAASAI'S EXISTING TRADITIONAL BOMAS AKTF HAS BUILT OR FORTIFIED AT LEAST 750 BOMAS SINCE 2008 IN 2015, AKTF CONTINUED TO INSTALL THE SAME PERMANENT, STEEL-CORNER BOMAS THAT WE DESIGNED IN 2014 TO IMPROVE THE QUALITY AND LONGEVITY OF LIVESTOCK FORTIFICATIONS, THESE BOMAS ARE COMPOSED OF STEEL CORNERS SET IN CONCRETE WITH HIGH-TENSILE FENCING WIRE STRETCHED BETWEEN THEM THIS DESIGN USES FEWER WOODEN POSTS THAN PREVIOUS ONES, THUS REDUCING DEFORESTATION IN THE AREA, AND THE METAL CORNERS AND CONCRETE FEET ENSURE THE STRUCTURE'S LONGEVITY EVEN IN THE MARA'S HARSH SOIL AND WEATHER IN 2015 WE BUILT, 43 NEW BOMAS, ALL OF WHICH INCORPORATED OUR STEELCORNER METHODS THE AKTF BOMA TEAM ALSO WORKS HARD TO REVISIT PREVIOUSLY CONSTRUCTED BOMAS IN ORDER TOREFURBISH THOSE IN NEED AND TO MAINTAIN HEALTHY RELATIONSHIPS WITH THE MAASAI BENEFICIARIES THIS YEAR WE REPAIRED 37 BOMAS THAT WE HAD PREVIOUSLY FORTIFIED THIS WORK HAS BEEN SPEARHEADED BY A RETURNING RESEARCHER FROM DUKE UNIVERSITY, ALEXANDRA SUTTON, THE NEW AKTF OPERATIONS MANAGER, MARK DOWNEY, AND THE AKTF BOMA TEAM LEADER, FELIX MUNYAO, AND OF COURSE, WE COULD NOT DO THIS WORK WITHOUT THE SUPPORT OF THE MAASAI LANDOWNERS THEMSELVES EACH BOMA WE HAVE PROTECTED HOUSES AN AVERAGE OF 196 ANIMALS COMPARED TO UN-FORTIFIED BOMAS, THE BOMAS THAT AKTF HAS FORTIFIED ARE 96% MORE EFFECTIVE AT REPELLING ATTACKS FROM PREDATORS

**4b** (Code ) (Expenses \$ 45,064 including grants of \$ ) (Revenue \$ )

IN 1999. AKTF'S VERY FIRST PROJECTS WERE ANTI-POACHING PATROLS AND WILDLIFE RESCUES BEFORE THE MARA CONSERVANCY TOOK OVER MANAGEMENT OF THE MARA TRIANGLE THE PRIMARY RESPONSIBILITIES OF THE AKTF AND MARA CONSERVANCY RANGERS CURRENTLY INVOLVED IN THE PROJECT INCLUDE PATROLLING KEY POACHING HOTSPOTS AROUND THE RESERVE, REMOVING SNARES SET BY POACHERS, AND HELPING THE KENYA WILDLIFE SERVICE/DAVID SHELDRICK WILDLIFE TRUST VETERINARIANS TO RESCUE ANIMALS WITH HUMAN-INDUCED INJURIES THE TEAM ALSO COLLABORATES WITH MARA NORTH CONSERVANCY, OLOISUKUT CONSERVANCY, KENYA WILDLIFE SERVICE, MARA ELEPHANT PROJECT, BORN FREE FOUNDATION, AND EDEN WILDLIFE TRUST - AS WELL AS MANY LOCAL COMMUNITY MEMBERS - TO FULFILL ITS MISSION OUR WORK TO SAVE KENYA'S WILDLIFE FOR FUTURE GENERATIONS COULD NOT BE POSSIBLE WITHOUT THE HELP OF THESE ORGANIZATIONS, AND WE ARE EXTREMELY GRATEFUL FOR THEIR COLLABORATION AKTF SPONSORS ITS RANGERS THROUGH THE MARA CONSERVANCY IN ORDER TO ENSURE ACCOUNTABILITY AND BUILD INTER-ORGANIZATIONAL SYNERGY, AND ELIAS KAMANDE LEADS AND DRIVES THE TEAM AS AKTF'S FULL-TIME STAFF MEMBER. THE OTHER PERMANENT MEMBERS OF THE AKTF ANTI-POACHING TEAM ARE OLE KILONGA, OLE SAITOTI, AND OLE SIRERE, ALL OF WHO ARE LOCAL MAASAI COMMUNITY MEMBERS MARA CONSERVANCY RANGERS OLE KIMORO AND DANIEL KISIEKU, WARDEN CHARLES OF THE OLOOLOLO GATE, AND MARA CONSERVANCY DIRECTOR BRIAN HEATH ALSO DESERVE SPECIAL MENTION AND THANKS FOR THE WORK THEY HAVE BEEN DOING IN COLLABORATION WITH THE AKTF TEAM OLOITU KINANDA ALSO SPENT SIGNIFICANT TIME VOLUNTEERING WITH THE TEAM IN OUR AREA OF WORK, THE BUSHMEAT TRADE LARGELY DRIVES POACHING ACTIVITY ALTHOUGH TROPHIES LIKE IVORY AND RHINO HORNS ALSO PLAY A ROLE THOUGH MANY POACHERS ACTUALLY COME FROM NEIGHBORING COMMUNITIES, THEIR PRESENCE IN THE MARA IS ONLY POSSIBLE WITH PERMISSION FROM THE MAASAI TO COMBAT THIS SIDE OF POACHING, OUR TEAM REGULARLY ARRESTS POACHERS CAUGHT IN THE ACT AND SEEKS TO TEACH LOCALS ABOUT THE DESTRUCTIVE EFFECTS THAT WILDLIFE POPULATION DECLINES HAVE ON THE ECONOMY OF MAASAI MARA POACHERS' WEAPONS OF CHOICE TO CATCH ANIMALS FOR BUSHMEAT ARE METAL NOOSES, CALLED SNARES, ATTACHED TO TREES NEAR WILDLIFE TRAILS THESE SNARES TIGHTEN AS THE ANIMAL WALKS THROUGH AND KEEPS THEM THERE UNTIL THE POACHERS CAN COME TO KILL THEM USUALLY, POACHERS SET MORE SNARES THAN NECESSARY IN ORDER TO ENSURE A BOUNTIFUL HUNT AS A RESULT, EVEN ANIMALS THAT ARE NOT KILLED AND HARVÉSTED ARE LEFT TO DIE IN THE WIRES. THE PATROL TEAM REMOVES THE SNARES AND RELEASES THE ANIMALS THAT ARE CAUGHT IN THEM WHENEVER POSSIBLE IN THE EVENT THAT ANIMALS ARE WOUNDED BY THE SNARES, WE CALL IN THE DAVID SHELDRICK WILDLIFE TRUST VETERINARIANS TO HELP TREAT THE DAMAGE CAUSED BY THE WIRES THE PATROL TEAM REMOVED APPROXIMATELY 819 SNARES IN 2015, AND RESCUED APPROXIMATELY 29 ANIMALS

4c (Code ) (Expenses \$ 15,231 including grants of \$ ) (Revenue \$ )

EDUCATION OF LOCAL COMMUNITIES IS THE KEY TO A HEALTHY FUTURE FOR MAASAI MARA HOWEVER, MOST OF THE SCHOOLS IN THE AREA ARE UNDERFUNDED AND LACK EVEN PROPER FACILITIES FOR HOLDING CLASSES IN 2015, AKTF BUILT 7 NEW CLASSROOMS AT OLOOLMONGI PRIMARY SCHOOL IN ADDITION TO THE CLASSROOMS BUILT IN PREVIOUS YEARS, OLOOLMONGI NOW HAS ENOUGH SPACE TO BE FULLY QUALIFIED FOR STATE FUNDING AS A PRIMARY SCHOOL WE HOPE THAT THE GOVERNMENT WILL STEP UP AND BE WILLING TO SUPPORT THE SCHOOL AS IT CONTINUES TO EDUCATE THE FUTURE MAASAI LEADERS IN ADDITION TO THE CLASSROOMS, WE ALSO CONTINUED DISTRIBUTING TEXTBOOKS AND UNIFORMS, PLANTING TREES AT THE SCHOOL, AND LEVELING A FIELD ON WHICH THE CHILDREN CAN SAFELY EXERCISE AND PLAY WE ARE ALSO VERY GRATEFUL TO MARA-MERU CHEETAH PROJECT FOR VISITING THE SCHOOL AND DONATING BOOKS THAT ELENA CHELYSHEVA HAS WRITTEN ON WILDLIFE CONSERVATION TO THE STUDENTS THERE, IT IS ALWAYS DIFFICULT TO GET ENOUGH BOOKS FOR ALL OF THE STUDENTS WHO ARE HUNGRY FOR KNOWLEDGE THERE, AND THIS WAS A HUGE HELP TO OUR EFFORTS BECAUSE IT IS HARD FOR CHILDREN TO FOCUS ON LEARNING FOR AN ENTIRE DAY AFTER HAVING WALKED MANY MILES TO SCHOOL WITH NOTHING BUT A CUP OF TEA FOR BREAKFAST, WE HAVE BEEN ABLE TO CONTINUE OUR PARTNERSHIP WITH INSTA PRODUCTS WHO GENEROUSLY PROVIDE A NUTRIENT-RICH PORRIDGE FOR A SCHOOL LUNCH PROGRAM WE ALSO BUILT THREE MORE CLASSROOMS AT NAILEPU NURSERY SCHOOL, WHICH IS OVERSEEN BY LONGTIME AKTF FRIEND JOSEPH MPATIANY THIS SCHOOL WAS STARTED IN 2014 WITH THE GENEROUS SUPPORT OF THE LARRY AND SUSAN PATRICK FAMILY, AND WE ARE PLEASED TO SEE IT GROWING AND THRIVING AKTF WAS ALSO ABLE TO FACILITATE SOME ENVIRONMENTAL EDUCATION INITIATIVES WITH LOCAL STUDENTS THIS YEAR, ESPECIALLY AROUND REFORESTATION OF SPECIAL MENTION IS THE GREENMADE GROUP'S FIELD TRIP TO SANCTUARY OLONANA, WHERE AKTF HELPED ORGANIZE SCHOOL CHILDREN TO COME LEARN ABOUT THE ECOSYSTEM OF MAASAI MARA AND PLANT TREES WITH DAVID OSEKU, WHO RUNS GREENMADE GROUP AND THEIR TREE NURSERY IN LOLGORIEN WE HOPE TO CONTINUE PROMOTING TREE-PL

**4d** Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ► 158,572

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$ ?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>			
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part $I$ .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)			Page \$
Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	,,,,,,,,,,,,,,,,,,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
·	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
ь	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a		INU
_	, to the formation of the section of the sect	1		

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 5			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
_	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of			

interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ►ANNE KTAYLOR 2724 ARVIN RD BILLINGS, MT 59102 (406) 656-0706

### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII .

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's

- ◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

▼ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) MARETT A TAYLOR DIRECTOR	2 00	х						0	0	0
(2) STUART D LANSING DIRECTOR	2 00	х						0	0	0
(3) ANNE KENT TAYLOR PRESIDENT	5 00			х				0	0	0
(4) JAMES H TAYLOR SECRETARY/TREASURER	2 00			х				0	0	0
(5) FARLEY T LANSING VICE PRESIDENT	2 00			х				0	0	0
										Form <b>990</b> (2015)

t VII	Section A. Officers,	Directors,	Trustees, k	Cev Employ	ees, and Hig	hest Com	pensated Emplo	vees	(continued
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(A) Name and Title	A verage hours per week (list any hours for related for the formulated for the formulated formulate						.   (	(F) Estimated amount of other compensation from the organization and					
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizat relat organiza	ed
											+		
											-		
4. 0.17.1						<u> </u>							
1b Sub-Total	· · · · · s to Part VII, S	 ection A	٠.										
d Total (add lines 1b and 1c) .						►			0	0			0
Total number of individuals (inc \$100,000 of reportable compe	-					d abov	e) w	ho receive	ed more th	an			
												Yes	No
3 Did the organization list any for on line 1a? If "Yes," complete S					key •	emplo	yee, •	or highes	t compen	sated employee	3		No
For any individual listed on line organization and related organization and related organization.	e 1a, is the sum zations greater	of repo than \$:	rtable 150,0	e co	mpe ? <i>If</i>	nsatio "Yes," d	n and	d other co lete Sched	mpensatio	on from the uch	4		No
5 Did any person listed on line 1 services rendered to the organ										or individual for	5		No
Section B. Independent Co	ntractors												
Complete this table for your five compensation from the organizer.	e highest comp											ax vear	
	(A) ame and business	<u> </u>								(B) cription of services		(C Comper	)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Part V	Ш	Statement o						_
		Check if Schedi	ule O contains a respon	se or note to any lir	(A)	(B)	(C)	   (D)
					Total revenue	Related or	Unrelated	Revenue
						exempt	business	excluded from
						function revenue	revenue	tax under sections
								512-514
se	1a	Federated cam	paigns 1a					
ınt unt	ь	Membership du	es <b>1b</b>					
Grants mounts	_							
s, ( Ar	С							
ons, Gifts, Grants Similar Amounts	d	Related organiz	zations 1d					
s, (	е	Government grants	s (contributions) <b>1e</b>					
Contributions, and Other Sim	f	All other contribution	ons, gifts, grants, and <b>1f</b>	244,800				<u> </u>
Contributic and Other	•	sımılar amounts no	ot included above					
를 등 I	g	Noncash contribute 1a-1f \$	ons included in lines					
ng l	h		c 1a-1f		244,800			
O E		Total: Add lines		· · · · •				
<u>e</u>				Business Code				
JL e⊔	2a							
Æ	b							
90	С		_					
ž.	d							
জু	е							
E	f	All other progra	am service revenue					
Program Serwce Revenue	•	An other progra	ani service reveilue					
<u>Ā</u>	g	Total. Add lines	s 2a – 2f	🛌				
	3		ome (including dividend		675	675		
	_		ar amounts)		075	073		
	4		stment of tax-exempt bond p	proceeds				
	5	Royalties						
		Constants	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental						
	c	expenses Rental income						
	_	or (loss)						
	d	Net rental inco	me or (loss)					
		_	(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
		than inventory						
	b	Less cost or other basis and						
		sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	ss)					
e e	8a	Gross income f						
듄		events (not inc	luaing					
Other Revenue			reported on line 1c)					
<u>.                                    </u>		See Part IV, lin	ne 18					
the			а					
ō			penses b					
			(loss) from fundraising 6	events 🕦				
	9a		rom gaming activities ne 19					
		occi aiciv, iii	a a					
	ь	Less directles	penses b					
			(loss) from gaming activ	rities <b></b>				
		Gross sales of		-				
		returns and allo						
			a	529				
			oods sold <b>b</b>	0				
	С	Net income or (	(loss) from sales of inve	ntory 🛌	529			529
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	С	-						
	d	All other reven	ue					
	e		s 11a-11d	🕨				
	12		See Instructions	<u>,</u>				

Part	IX Statement of Functional Expenses				Page 10
	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiz	ations must com	nplete column (A)	
	Check if Schedule O contains a response or note to any line in t	hıs Part IX			ন
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,608	2,608		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	20,250	20,250		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	,	·		
9	Other employee benefits				
10	Payroll taxes	1,606	1,606		
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	3,599		3,599	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	1,268	1,268		
13	Office expenses	220	220		
14	Information technology				
15	Royalties				
16	Occupancy	3,483	3,483		
17	Travel	8,448	8,448		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,382	2,382		
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SCHOOL	38,203	38,203		
b	BOMA PROJECT	15,231	15,231		
C	AUTO EXPENSE	15,166	15,166		
d	CONTRACT LABOR	14,038	14,038		
е	All other expenses	36,385	35,669	716	
25	<b>Total functional expenses.</b> Add lines 1 through 24e	162,887	158,572	4,315	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X  $\dots \dots \dots \dots \dots$ (A) (B) Beginning of year End of year Cash-non-interest-bearing . . . . . . 40,973 118,354 1 1 46,120 46.780 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net . . . . . . 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Assets Schedule L 6 7 7 8 8 9 9 Prepaid expenses and deferred charges . . . . . 10a Land, buildings, and equipment cost or other basis 15,637 10a Complete Part VI of Schedule D b Less accumulated depreciation . . . . 10b 8,107 2,454 10c 7,530 11 Investments—publicly traded securities . . . 11 12 Investments—other securities See Part IV, line 11 . . . . . 12 13 Investments—program-related See Part IV, line 11 . 13 14 14 15 Other assets See Part IV, line 11 . . . . . . 15

	12	Other assets See Part IV, line II		15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	89,547	16	172,664
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	_
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L		22	
<u>:</u>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
				25	
	26	Total liabilities.Add lines 17 through 25	0	26	0
ر. م		Organizations that follow SFAS 117 (ASC 958), check here ▶ ┌ and complete			
ည်		lines 27 through 29, and lines 33 and 34.			
Balance	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
Fund	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 30 through 34.			
8	30	Capital stock or trust principal, or current funds	0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund	0	31	0
AS	32	Retained earnings, endowment, accumulated income, or other funds	89,547	32	172,664
Ř	33	Total net assets or fund balances	89,547	33	172,664
~	34	Total liabilities and net assets/fund balances	89,547	34	172,664
			•		Form <b>990</b> (2015)

	Check if Schedule O contains a response or note to any line in this Part XII			. Г
			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

efile GRAPHIC print - DO NOT PROCESS

www.irs.gov/form990.

As Filed Data -

DLN: 93493207010266

Employer identification number

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization ANNE K TAYLOR FUND

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

2015

Open to Public Inspection

20-4693436 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ)) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II ) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
			Yes	No		
Total						

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement.

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally

supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.

(see instructions) You must complete Part IV, Sections A and D, and Part V.

integrated, or Type III non-functionally integrated supporting organization

Provide the following information about the supported organization(s)

Enter the number of supported organizations . . . . . . . . . . . .

	rt II Support Schedule for (Complete only if you Part III. If the organization	checked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiz	ation failed to c	ualify under
S	ection A. Public Support						
	Calendar year	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	<b>(e)</b> 2015	(f)Total
	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do	(-,	(-,	(9,2323	(4,232)	(3,2323	(1), 1000
2	not include any unusual grants ) Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
6	(f) <b>Public support.</b> Subtract line 5  from line 4						
Se	ection B. Total Support		Γ	1	T		Γ
(or	Calendar year fiscal year beginning in) 🕨	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
	ection C. Computation of Pul			4 4 1 700			
14	Public support percentage for 201			e 11, column (f))		14	
15	Public support percentage for 201	•	*			15	
	33 1/3% support test—2015. If the and stop here. The organization quasiant 33 1/3% support test—2014. If the box and stop here. The organization	alıfıes as a publıc organızatıon dıd	ly supported orgonot check a box	anızatıon on lıne 13 or 16a			<b>▶</b> ┌
	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me organization	— <b>2015.</b> If the organtion meets the facts the "facts-an	anization did not icts-and-circums d-circumstances	check a box on lii tances test, chec " test The organ	ck this box and <b>st</b> ization qualifies a	op here. Explain is a publicly supp	. ,
18	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization Private foundation. If the organizations	nization meets th ition meets the "f	e "facts-and-circ acts-and-circum	umstances" test stances" test Th	c, check this box ane organization qu	and <b>stop here.</b> Jalifies as a public	:ly ▶┌

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

dividends, payments received on securities loans, rents, royalties and income from similar sources and income from similar sources and income from similar sources by Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  1 Net income from unrelated business is regularly carried on line 10b, whether or not the business is regularly carried on the business is regularly carried on capital assets (Explain in Part VI)  13 Total support. (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2014 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  19 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  10 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  10 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  10 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  11 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  12 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  12 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  12 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  13 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	(or f								
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The control of the c	1								
2 Gross receipts from admissions, merchands as sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.  Under are not an unrelated trade or business under section 513 4 Tax revenues levice for the organization's tax-exempt purpose.  On the are not an unrelated trade or business under section 513 5 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 The value of services or facilities furnished by a governmental unit to the organization without charge 1 The value of services or facilities furnished by a governmental unit to the organization without charge 1 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of the amount on line 13 for the year of y			130,152	52,117	147,231	187,054		244,800	761,354
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many activity that is related to the organization's tax-exempt purpose									
## Organization's tax-exempt purpose			9,003	5,109	22,799	399		529	37,839
Section B. Total Support   Calendar year   C									
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## Calculated by a governmental unit to the organization without charge for Total. Add lines 1 through 5									
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Section B. Total Support   Calendar year (or fixed year beginning in)	С	•	18,500		76,000	109,409		148,750	352,659
Section B. Total Support   Calendar year   Cor fiscal year beginning in   Page   Calendar year									446 524
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VI )  Total support. (Add lines 9, 10c, 139,359 57,482 170,526 188,050 246,004 801,421 1, and 12 )  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))  Public support percentage from 2014 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  17 0 280 %	b c	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	204	256	496	597		675	2,228
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check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2014 Schedule A, Part III, line 15  16 90 230 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2015 (line 10 c, column (f) divided by line 13, column (f))  18 0 280 %	b c 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,	204	256 256	496	597		675	2,228
Section C. Computation of Public Support Percentage  15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2014 Schedule A, Part III, line 15  16 90 230 %  17 0 280 %  18 Public support percentage from 2014 Schedule A, Part III, line 15  18 Public support percentage from 2014 Schedule A, Part III, line 15  19 0 230 %  19 Public support percentage from 2014 Schedule A, Part III, line 15  19 0 230 %	b c c 111	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)	204	256 256 57,482	496 496 170,526	597 597 188,050		675	2,228
Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))  Public support percentage from 2014 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  15  55 720 %  16  90 230 %	b c c 111	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is formatical assets.	204	256 256 57,482	496 496 170,526	597 597 188,050		675	2,228 2,228 801,421 ) organization,
Public support percentage from 2014 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  17  0 280 %	b c 111 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is fineted this box and stop here.	204 204 139,359 or the organization	256 256 57,482 n's first, second,	496 496 170,526	597 597 188,050		675	2,228 2,228 801,421 ) organization,
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))  17 0 280 %	t0a b c 111 12 13 14 Se	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the check this box and stop here.	204  204  139,359 or the organization	256 256 57,482 n's first, second,	496 496 170,526 third, fourth, or f	597 597 188,050	section 5	675	2,228  2,228  801,421 ) organization,
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	toa b c c 111 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the check this box and stop here.  Ection C. Computation of Pub. Public support percentage from 2015.	204  204  204  204  Item Support Pe (line 8, column (f	57,482 n's first, second, rcentage divided by line rt III, line 15	170,526 third, fourth, or f	597 597 188,050	section 5	675	801,421 ) organization,  55 720 %
IS Investment income percentage from 2014 Schedule A, Part III, line 17	t0a b c 111 12 13 14 Se 15 16 Se	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the check this box and stop here.  Ection C. Computation of Pub. Public support percentage from 20.5.  Ection D. Computation of Inv.	204  204  204  204  Iic Support Pe (line 8, column (f	57,482 n's first, second, rcentage ) divided by line rt III, line 15 ne Percenta	170,526 third, fourth, or f	188,050 Ifth tax year as a	section 5	675	2,228  2,228  801,421  organization,  55 720 %  90 230 %
	toa b c c 111 12 13 14 Sec 15 16 Sec 17	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the check this box and stop here.  Ection C. Computation of Pub. Public support percentage for 2015. Computation of Inv. Investment income percentage for Investment income percentage for 2015.	204  204  204  204  204  207  208  209  209  209  209  209  209  209	57,482 n's first, second, rcentage divided by line rt III, line 15 ne Percenta	496 496 470,526 third, fourth, or f 13, column (f)) <b>ge</b> by line 13, colum	188,050 Ifth tax year as a	section 5	675	2,228  2,228  801,421  organization,  55 720 %  90 230 %
<b>19a</b> 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶✓	toa b c c 111 12 13 14 Sec 15 16 Sec 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after. June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part. VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for the check this box and stop here.  Ection C. Computation of Pub. Public support percentage from 20.5.  Ection D. Computation of Inv.  Investment income percentage from Investment Income Investment Investment Investment Investment Investment Investment Investment Investment In	204  204  204  204  204  Iic Support Pe (Ine 8, column (f	57,482 n's first, second, rcentage divided by line rt III, line 15 ne Percentage lumn (f) divided	496 496 496 470,526 third, fourth, or f 13, column (f))  ge by line 13, column 7	188,050 Ifth tax year as a	15 16 17 18	675 675 246,004 01(c)(3)	2,228  2,228  2,228  801,421  organization,  55 720 %  90 230 %  0 280 %  0 240 %

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ction	Δ ΔΙ	Sunna	rtina	Orgai	nizations
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	··		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^2$ If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes?	3с		
<b>4</b> a	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.  Was any supported organization not organized in the United States ("foreign supported organization")?  If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization?  If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)$ ?			
	If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5 <b>a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC $4958(c)(3)(C)$ ), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

Pai	Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?  If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?  If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?  If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
<b>i</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	pt purposes of supported org	anızatıons	
4 A mounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
<b>d</b> From 2013			
e From 2014			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<ul> <li>Carryover from 2010 not applied (see instructions)</li> </ul>			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			

### Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts	And	Circum	stances	Test
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Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493207010266

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 
► Attach to Form 990.

Open to Public

ernal	Revenue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.irs</u>	s.gov/form990.	Inspection
	<b>ne of the organ</b> E K TAYLOR FUND	ization		Employer identif	ication number
				20-4693436	
Pa			Advised Funds or Other Similar Ford "Yes" on Form 990, Part IV, line 6.	unds or Accoun	its.
			(a) Donor advised funds	(b)Funds and o	ther accounts
•	Total numb	er at end of year			
	Aggregate v year)	value of contributions to (during			
3	Aggregate v	value of grants from (during year)			
ŀ	Aggregate v	value at end of year			
•	_		advisors in writing that the assets held in don the organization's exclusive legal control?	or advised	┌ Yes ┌ No
;	used only for c		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for ai		┌ Yes ┌ No
ar	tIII Conse	ervation Easements. Comple	ete if the organization answered "Yes" o	on Form 990, Par	t IV, line 7.
·	Preservati Protection Preservati Complete line	on of land for public use (e g , recre of natural habitat on of open space	· · · · · · · · · · · · · · · · · · ·	i historically import certified historic str the form of a conser	ructure
				Held at	the End of the Year
а	Total number	of conservation easements		2a	
b	_	restricted by conservation easeme		2b	
С		servation easements on a certified	` ,	2c	
d		servation easements included in (c ure listed in the National Register	:) acquired after 8/17/06, and not on a	2d	
}	Number of con tax year ►	servation easements modified, trai	nsferred, released, extinguished, or terminate	ed by the organization	on during the
ļ	Number of sta	tes where property subject to cons	ervation easement is located ►		
;		nization have a written policy regar I enforcement of the conservation e	ding the periodic monitoring, inspection, hand easements it holds?	dling of	Yes
<b>,</b>	Staff and volur year	nteer hours devoted to monitoring,	inspecting, handling of violations, and enforci	ing conservation ea	sements during the
	Amount of exp	enses incurred in monitoring inspe	ecting, handling of violations, and enforcing c	onservation easem	ents during the year
,	► \$		cerning, manaring of violations, and emoreting e	onservation easem	ents during the year
3		nservation easement reported on lii ion 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of sec		Yes No
)	balance sheet		ts conservation easements in its revenue and of the footnote to the organization's financial sements		
ar			tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Other Simila	r Assets.
.a	If the organiza works of art, h	ition elected, as permitted under SF istorical treasures, or other similar	FAS 116 (ASC 958), not to report in its reverses held for public exhibition, education, note to its financial statements that describe	or research in furth	
b	works of art, h		FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education, these items		
(	i) Revenue incl	uded on Form 990, Part VIII, line 1	L	<b>►</b> \$	
(ii	i) <sub>Assets includ</sub>	led in Form 990, Part X		<b>►</b> \$	
	If the organiza	ition received or held works of art, h	nistorical treasures, or other similar assets fo SFAS 116 (ASC 958) relating to these items		
а	Payanua inclu	ded on Form 990 Part VIII line 1		<b>b.</b> ¢	

**b** Assets included in Form 990, Part X

Par	t III	Organizations Maintaining (continued)	Collections of A	Art, H	istori	cal Trea	sures, or	Other	Similar A	ssets	
3		the organization's acquisition, accortion items (check all that apply)	ession, and other rec	cords,	check a				gnıficant us	e of its	
а	┌ P	ublic exhibition		d	Г	Loan or e	exchange pro	grams			
b	Γs	cholarly research		е	Γ	Other					
c	ΓP	reservation for future generations									
4	Provid Part X	de a description of the organization' (III	s collections and exp	plaın h	ow they	/ further th	ne organizati	on's exer	mpt purpose	ın	
5		g the year, did the organization solic								_	
Do		s to be sold to raise funds rather th		as par	t of the	organizat	ion's collecti	on?	☐ Yes	□ No	
Pal	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form	า 990,	Part IV,	line 9, or r	eported	an amour	nt on For	m 990,
1a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other inter	media	ry for c	ontributio	ns or other a	ssets no	t <b>r</b> Yes	┌ No	
b	If"	Yes," explain the arrangement in Pa	art XIII and complet	e the f	ollowin	g table			Am	ount	
C	Beg	ginning balance					1	.с			
d	A d	ditions during the year					1	.d			
е	Dis	tributions during the year					1	.e			
f	End	ding balance					1	.f			
2a	Did th	ne organization include an amount o	n Form 990, Part X,	line 21	., for es	crow or c	ustodial acco	unt liabi	lity? <b>☐ Yes</b>	┌ No	
b Pa	If"Ye	es," explain the arrangement in Part  Endowment Funds. Comple									
		Endownient Fanasi comple	(a)Current year		Prior yea		Two years back				ears back
1a	Begir	nning of year balance					•		·		
b	Conti	ributions · · · · · · ·									
c	Net II losse	nvestment earnings, gains, and es									
d	Grant	ts or scholarships									
e		r expenditures for facilities rograms									
f	A dmı	nistrative expenses									
g		ofyearbalance									
2	Provid	de the estimated percentage of the	current year end bala	ance (I	ıne 1g,	column (a	a)) held as	•			
а	Board	l designated or quasi-endowment 🕨									
b	Perma	anent endowment ►									
c	•	orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	should equal 100%								
За		nere endowment funds not in the pos		nızatıo	n that a	re held ar	nd administer	ed for th	e		
		ization by								Yes	No
		related organizations					•			(i)	<del>                                     </del>
b		elated organizations es" on 3a(ii), are the related organiz							<u> </u>	(ii)   Bb	<u> </u>
4		ribe in Part XIII the intended uses of							· · · <u>_ ·</u>		
Pai	rt VI	Land, Buildings, and Equip	ment.								
		Complete if the organization a	answered 'Yes' to		Cost	Part IV, li or other bas vestment)	ıs <b>(b)</b> Cost or other		990, Part X Accumulated c)depreciation	( <b>d)</b> B	). ook value
1 2	Land						(other)			+	
		gs		.  -			1			+	
		old improvements		<del> </del>			+				
		nent		<u> </u>		15,63	7		<u>8</u>	107	7,530
				. · .  -		13,03	•	_	<u> </u>		.,550
		lines 1a through 1e (Column (d) mus			lumn (B	), line 10(d	<i>z).)</i>	<del>.</del>		_	7,530
									Schedule	D (Form	990) 2015

	<ul><li>(a) Description of security or categon</li><li>(including name of security)</li></ul>	jory	( <b>b)</b> Book value	(c)Method of valuation Cost or end-of-year market va
	ial derivatives			
Closely Other	y-held equity interests			
				_
				_
	mn (b) must equal Form 990, Part X, col (B) line 12			
t VII	Investments—Program Related	l. Orad 'Vas' on Form 99	O Part IV Juno 11c -	
	Complete if the organization answer  (a) Description of investment	red les difform 9:	(b) Book value	ee Form 990, Part X, line 13.  (c) Method of valuation
	(a) Description of investment		(b) book value	Cost or end-of-year market va
			n Form 990, Part IV, line	11d See Form 990, Part X, line 15  (b) Book value
	Other Assets. Complete if the organiz	zatıon answered 'Yes' oı	Form 990, Part IV, line	
al. (Colu	Other Assets. Complete if the organiz	zatıon answered 'Yes' oı	Form 990, Part IV, line	
	Other Assets. Complete if the organiz	zatıon answered 'Yes' oı	Form 990, Part IV, line	
al. (Cold	Other Assets. Complete if the organiz  (a) D  where the organization of the organizati	zation answered 'Y es' or escription		(b) Book value
al. (Cold	Other Assets. Complete if the organiz (a) D  (a) www.equal Form 990, Part X, col.(B) I	zation answered 'Y es' or escription	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
art IX	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
art IX	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colo	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	une 15.)	· · · · · · · · · · · · · · · · · · ·	(b) Book value
al. (Colu	Umn (b) must equal Form 990, Part X, col.(B) In Other Liabilities. Complete if the See Form 990, Part X, line 25.  (a) Description of liability	escription  ine 15.)  organization answere  (b) Book valu	· · · · · · · · · · · · · · · · · · ·	(b) Book value

Par		evenue per Audited Financial Sta Ization answered 'Yes' on Form 990,			per R	eturn
1		r support per audited financial statements		•	1	
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) o	on investments	2a			
b	Donated services and use of fa	icilities	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII )		2d			
e	Add lines $2a$ through $2d$				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990	O, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>				<b>4</b> c	
5	Total revenue Add lines 3 and	<b>4c.</b> (This must equal Form 990, Part I, line	12)		5	
Part		rpenses per Audited Financial Starzation answered 'Yes' on Form 990,			es per	Return.
1		audited financial statements			1	
2	Amounts included on line 1 but	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	icilities	2a			
b	Prior year adjustments		2b			
c	Otherlosses		2c			
d	Other (Describe in Part XIII )		2d			
e	Add lines <b>2a</b> through <b>2d</b>				2e	]
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990	O, Part IX, line 25, but not on line 1:				
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b	.   4a			
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total expenses Add lines <b>3</b> ar	nd <b>4c.</b> (This must equal Form 990, Part I, li	ne 18	)	5	
Pari	XIII Supplemental Info	ormation			·	
		Part II, lines 3, 5, and 9, Part III, lines 1a	and 4	Part IV Junes 1 h and	2 h	
Part	V, line 4, Part X, line 2, Part XI,	lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
Intor	mation	T				
	Return Reference	Explanation				

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493207010266 OMB No 1545-0047 **SCHEDULE F** Statement of Activities Outside the United States (Form 990) ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. Department of the Treasury Open to Public ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** ANNE K TAYLOR FUND Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria ✓ Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (d) Activities conducted in (f) Total expenditures (b) Number of (c) Number of (e) If activity listed in (d) is a program service, describe for and investments employees, region (by type) (e g , region agents, and fundraising, program specific type of ın region ındependent services, investments, grants service(s) in region to recipients located in the contractors in region region) (1) SUB-SAHARAN AFRICA PROGRAM EXPENSES ANNE K TAYLOR FUND 98,277 (AKTF) FORTIFIES LIVESTOCK ENCLOSURES, CALLED BOMAS, AROUND MAASAI MARA WITH THE GENEROUS SUPPORT FROM NATIONAL GEOGRAPHIC'S BIG CAT INITIATIVE (NGBCI), ORACLE THROUGH NGBCI, AS WELL AS EDEN WILDLIFE TRUST, AND MANY PRIVATE DONORS THESE BOMAS REDUCE THE NEED FOR HUMANS TO KILL PREDATORS -ESPECIALLY LIONS, LEOPARDS, AND HYENAS - BY PROTECTING LIVESTOCK FROM PREDATORY ATTACKS IN COLLABORATION WITH THE MARA CONSERVANCY AND MARA NORTH CONSERVANCY THROUGH 2015, WE CONTINUED TO REDUCE HUMAN-WILDLIFE CONFLICT, SPECIFICALLY BETWEEN HERDERS AND LIONS, BY BUILDING PREDATOR-RESISTANT BOMAS AND FORTIFYING THE MAASAI'S EXISTING TRADITIONAL BOMASAKTFHAS BUILT OR FORTIFIED AT LEAST 750 BOMAS SINCE 2008 IN 2015, AKTF CONTINUED TO INSTALL THE SAME PERMANENT, STEEL-CORNER BOMAS THAT WE DESIGNED IN 2014 TO IMPROVE THE QUALITY AND LONGEVITY OF LIVESTOCK FORTIFICATIONS, THESE BOMAS ARE COMPOSED OF STEEL CORNERS SET IN CONCRETE WITH HIGH-TENSILE FENCING WIRE STRETCHED BETWEEN ПНЕМ (2) SUB-SAHARAN AFRICA 1 PROGRAM EXPENSE IN 1999, AKTF'S VERY 45,064 FIRST PROJECTS WERE ANTI-POACHING PATROLS AND WILDLIFE RESCUES BEFORE THE MARA CONSERVANCY TOOK OVER MANAGEMENT OF THE MARA TRIANGLE THE PRIMARY RESPONSIBILITIES OF THE AKTFAND MARA CONSERVANCY RANGERS CURRENTLY INVOLVED IN THE PROJECT INCLUDE PATROLLING KEY POACHING HOTSPOTS AROUND THE RESERVE REMOVING SNARES SET BY POACHERS, AND HELPING THE KENYA WILDLIFE SERVICE/DAVID SHELDRICK WILDLIFE TRUST VETERINARIANS TO RESCUE ANIMALS WITH HUMAN-INDUCED INJURIES THE TEAM ALSO COLLABORATES WITH MARA NORTH CONSERVANCY, OLOISUKUT CONSERVANCY, KENYA WILDLIFE SERVICE. MARA ELEPHANT PROJECT, BORN FREE FOUNDATION, AND EDEN WILDLIFE TRUST - AS WELL AS MANY LO CAL COMMUNITY MEMBERS - TO FULFILL ITS MISSION OUR WORK TO SAVE KENYA'S WILDLIFE FOR FUTURE GENERATIONS COULD NOT BE POSSIBLE WITHOUT THE HELP OF THESE ORGANIZATIONS, AND WE ARE EXTREMELY GRATEFUL FOR THEIR COLLABORATION AKTF SPONSORS ITS RANGERS THROUGH THE MARA CONSERVANCY IN ORDER TO ENSURE ACCOUNTABILITY AND BUILD INT (3) SUB-SAHARAN AFRICA 1 PROGRAM EXPENSE EDUCATION OF LOCAL 15,231 COMMUNITIES IS THE KEY TO A HEALTHY FUTURE FOR MAASAI MARA HOWEVER, MOST OF THE SCHOOLS IN THE AREA ARE UNDERFUNDED AND LACK EVEN PROPER FACILITIES FOR HOLDING CLASSES IN 2015, AKTF BUILT 7 NEW CLASSROOMS AT OLOOLMONGI PRIMARY SCHOOL IN ADDITION TO THE CLASSROOMS BUILT IN PREVIOUS YEARS, OLOOLMONGI NOW HAS ENOUGH SPACE TO BE FULLY QUALIFIED FOR STATE FUNDING AS A PRIMARY SCHOOL WE HOPE THAT THE GOVERNMENT WILL STEP UP AND BE WILLING TO SUPPORT THE SCHOOL AS IT CONTINUES TO EDUCATE THE FUTURE MAASAI LEADERS IN ADDITION TO THE CLASSROOMS, WE ALSO CONTINUED DISTRIBUTING TEXTBOOKS AND UNIFORMS, PLANTING TREES AT THE SCHOOL AND LEVELING A FIELD ON WHICH THE CHILDREN CAN SAFELY EXERCISE AND PLAY WE ARE ALSO VERY GRATEFUL TO MARA-MERU CHEETAH PROJECT FOR VISITING THE SCHOOL AND DONATING BOOKS THAT ELENA CHELYSHEVA HAS WRITTEN ON WILDLIFE CONSERVATION TO THE STUDENTS THERE, IT IS ALWAYS DIFFICULT TO GET ENOUGH BOOKS FOR ALL OF THE STUDENTS WHO ARE HUNGRY FOR KNOWLEDGE (4) (5) 0 158,572 3a Sub-total **b** Total from continuation sheets 0 to Part I 158,572 c Totals (add lines 3a and 3b) 0 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

1 (a) Name of organization	` '	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
(1)								
( 2)								
(3)								
(4)								
	number of recipient ot by the IRS, or for							
3 Enter tota	I number of other or	ganızatıons or en	tities				•	

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	<u>duplicated if addit</u>	tional space is ne	<u>∍eded.</u>				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients		(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					1		
( 2)		+ + +			<u>'</u>		<u> </u>
(3)		+ + +			<u>'</u>		<u> </u>
(4)		+ +			†		<u> </u>
(5)		+ +			<u> </u>		<u> </u>
(6)		+ +			†		<del>                                     </del>
(7)		+ +			+		<del>                                     </del>
(8)		+ +			+		<del>                                     </del>
(9)		+ +			+		<del>                                     </del>
( 10)		+ +			+		+
(11)		+ +			+		+
( 12)		+ +			+		+
( 13)		+ +			+		
( 14)		+ +			+		
( 15)		+ +			+		
( 16)		+ +			+		
( 17)		+ +			<del>                                     </del>		
( 18)		+			<del>                                     </del>		

# Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	r	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	<u>\</u>	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	ᅜ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	<u>~</u>	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	r	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	~	No

Schedule F (Form 990) 2015

### **Additional Data**

Schedule F (Form 990) 2015

Software ID:

**Software Version: EIN:** 20-4693436

Name: ANNE K TAYLOR FUND

Page 5

### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493207010266

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization ANNE K TAYLOR FUND	Employer identification number
ANNE R TATLOR TOND	20-4693436

### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	ANNE K TAYLOR AND JAMES H TAYLOR ARE MOTHER AND FATHER TO MARETT TAYLOR AND FARLEY LANSING FARLEY LANSING IS MARRIED TO SUART LANSING
FORM 990, PART VI, SECTION B, LINE 11	THE PRESIDENT WILL REVIEW THE FINAL FORM 990 PRIOR TO FILING THE RETURN
FORM 990, PART VI, SECTION C, LINE 19	COPIES OF THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
FORM 990, PART IX, LINE 24E	GRATUITIES PROGRAM SERVICE EXPENSES 11,769 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISI NG EXPENSES 0 TOTAL EXPENSES 11,769 SWEEP EXPENSE PROGRAM SERVICE EXPENSES 9,651 MANA GEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 9,651 INSURANCE PROGRAM SERVICE EXPENSES 5,956 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5,956 MISCELLANEOUS PROGRAM SERVICE EXPENSES 3,577 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,808 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,808 PHOTOS PROGRAM SERVICE EXPENSES 1,231 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISI NG EXPENSES 0 TOTAL EXPENSES 1,231 BANK CHARGES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 TOTAL EXPENSE