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SCANNED FEB 2 1 2017

Form **990-PF**

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf Open to Public Inspection

		endar year 2015 or tax year beginning		04/	01 , 2015,	and ending	_		03/31,2016
		of foundation					A	Employer identific	
		Y G TAYLOR CHARITABLE TR 050						46-	6719506
١	Numbe	er and street (or P O box number if mail is not delivered	to street a	iddress)		Room/suite	В	Telephone numbe	r (see instructions)
							İ		
		BOX 0634						314	4-418-2643
(City or	town, state or province, country, and ZIP or foreign pos	tal code						
							C	If exemption application pending, check here.	on is
	MIL	WAUKEE, WI 53201-0634					l	pending, check here.	
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic charity		1 Foreign organization	and about hore
		Final return		Amended ret		•	"	2 Foreign organization	
		Address change		Name change	•			85% test, check he computation	re and attach
Н	Che	ck type of organization X Section 501(c)(3) ex	empt private for	oundation			,	
Γ	□ s	ection 4947(a)(1) nonexempt charitable trust	Ot	her taxable pri	vate foundat	ion	E	If private foundation a under section 507(b)(
ī	Fair	market value of all assets at J Accord		nethod: X Ca			٦.		
	end		ther (spe						a 60-month termination
		, <u> </u>		d) must be on cas	h basis)		-	211201 00011011 001 (2)(THE POLICE HOLE .
ľ	art	Analysis of Revenue and Expenses (The							(d) Disbursements
		total of amounts in columns (b), (c), and (d)	(0) 11	evenue and penses per	(b) Net inve		(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))		books	incom	e		income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule) .	*****	723,714.					,500.1 20313 OTHY!
	2	Check if the foundation is not required to		, ,					
	3	attach Sch B							
	4	Dividends and interest from securities		12,400.	1	2,321.			STMT 1
	5a	Gross rents		+2,100.		2,321.			SIMI I
		Net rental income or (loss) -21, 493							· · · · · · · · · · · · · · · · · · ·
as		Net gain or (loss) from sale of assets not on line 10		-512,236.					
evenue	b	Gross sales price for all		J12,230.					
Š	7	assets on line 6a 1,814,309. Capital gain net income (from Part IV, line 2).							
2	8	Net short-term capital gain							*
	9	Income modifications					-		
		Gross sales less returns							
		and allowances							<u> </u>
	l	Less Cost of goods sold				-			
	11	Other income (attach schedule)		112.					STMT 2
	12	Total. Add lines 1 through 11	-	223,990.	1	2,321.			SIMI Z
_	13	Compensation of officers, directors, trustees, etc		27,501.		4,751.			2,750.
ŝ	14	Other employee salaries and wages		2/,301.		NONE		NONE	<u>4,750</u> .
nse	15	Pension plans, employee benefits				NONE		NONE	
፵		Legal fees (attach schedule)				MOINT		MOTAE	
짔	16a	Accounting fees (attach schedule) STMT 3		1,500.		NONE		NONE	1 500
Ş	C	Other professional fees (attach schedule)		1,500.		- MOINE		NOME	1,500.
a	17	Interest				<u> </u>			
SE	12	Taxes (attach schedule) (see instructions 4.		181.		181.			
₫	10	Depreciation attach scheduler (see instruoted).		101.		- +01.			
Ë	20	Occupancy							
Ž	21	1 (44	NONE		NONE	
۳	16a b c 17 18 19 20 21	Printing and publications 2017.				NONE		NONE	
 Di	23	Other expenses (attach schedule) SIM . 5.		21,634.	2	1,493.		MONE	141.
8	23 24 25			41,007.		+, = /			141.
ğ	-4	Total operating and administrative expenses Add lines, 13 through 23.		50,816.	1	6,425.		NONE	A 201
ĕ	25	-		172,914.		0,723.		NONE	4,391.
_	25 26	Contributions, gifts, grants paid		223,730.	1	6,425.		NONE	172,914.
-	27	Subtract line 26 from line 12		443,130.		0,743.		INOINE	<u>177,305</u> .
		Excess of revenue over expenses and disbursements		260.					
	l	Net investment income (if negative, enter -0-)		200.		-0-			
	l	Adjusted net income (if negative, enter -0-).							
_	<u> </u>								

JSA For Paperwork Reduction Act Notice, see instructions.
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050016715300

0	27 28 29 30 31	Capital stock, trust principal, or current funds	2,901,951.	2,889,	975.	
ė	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
155	29	Retained earnings, accumulated income, endowment, or other funds				
t A	30	Total net assets or fund balances (see instructions)	2,901,951.	2,889,	975.	
ş	31	Total liabilities and net assets/fund balances (see				
	1	instructions)	2,901,951.	2,889,	975.	
Р	art II	Analysis of Changes in Net Assets or Fund Balance	es			
1	Tot	al net assets or fund balances at beginning of year - Part II,	column (a), line 30 (mus	t agree with		
		l-of-year figure reported on prior year's return)			1 1	2,901,951
2		er amount from Part I, line 27a				260
3	Oth	er increases not included in line 2 (itemize) ▶			3	
4	Add	d lines 1, 2, and 3			4	2,902,211
5	Dec	creases not included in line 2 (itemize) > SEE STATE	MENT 10		5	12,236
		al net assets or fund balances at end of year (line 4 minus line		ne 30	6	2,889,975

2,889,975. Form 990-PF (2015)

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Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Part IV Capital Gains and Losses for Tax on Investment Income

		i describe the kind(s) of property sold (rick warehouse; or common stock, 200	· ·	acquired P - Purchase	acquired	(d) Date sold (mo, day, yr)
 1a	PUBLICLY TRADED	 	, one mile 60,	D - Donation	(mo , day, yr)	(**************************************
b	TODETCET TRIBED	DDCOKI I I I D				
C						
d						
<u>e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo	
а	1,814,309.		2,313,657.		·	-499,348.
<u>b</u>						
C						
_d						
<u>e</u>						
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col. (h) ga	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col.	(k), but not less t Losses (from co	
a						-499,348.
<u>b</u>						
C						
<u>d</u>						
<u>e</u>				ļ		
2	Capital gain net income of		f gain, also enter in Part I, line 7			
	. •	l II	f (loss), enter -0- in Part I, line 7	2		-499,348.
3		in or (loss) as defined in sections				
	_	an i, line 8, column (c) (see ins	structions) If (loss), enter -0- in			
D.			luced Tax on Net Investment In	3		
			e section 4940(a) tax on net investi		\	
lf "\	es," the foundation does r	not qualify under section 4940(e)	butable amount of any year in the b Do not complete this part. r; see the instructions before makin	•		Yes X No
_	(a)	(b)	(c)	<u> </u>	(d)	
Ca	Base period years lendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2014	148,650.	2,814,234.			0.052821
	2013	917.	2,537,218.			0.000361
	2012					
	2011					
	2010					
2				2		0.053182
3	_	· · · · · · · · · · · · · · · · · · ·	e the total on line 2 by 5, or by the			
	number of years the four	idation has been in existence if les	ss than 5 years	3		0.026591
4	Enter the net value of no	ncharitable-use assets for 2015 fr	rom Part X, line 5	4	3	,043,549.
			,			
5	Multiply line 4 by line 3			5		80,931.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		80,931.
8				8		177,305.
			in Part VI, line 1b, and complete	that part	using a 1% ta	
JSA						OOO DE mare

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X

8b

Enter the states to which the foundation reports or with which it is registered (see instructions)

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address \blacktriangleright N/A	13	X	
14	The books are in care of \blacktriangleright US BANK NA Telephone no \blacktriangleright (314) 418 Located at \blacktriangleright PO BOX 387, ST LOUIS, MO ZIP+4 \blacktriangleright 63166	-264	3	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• • •	▶	
16	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			3823
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly)		1	41
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			Ħ
	disqualified person?		54	11
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			夷
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		3	
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	7	n i	14
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			4
ь	termination of government service, if terminating within 90 days)		7.7	Maria
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here	34.	900	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
	were not corrected before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		7	15.1
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	331		7
	If "Yes," list the years		4	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		4	40
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		i.J	22.
	all years listed, answer "No" and attach statement - see instructions.)	2b	10.00	X
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	7		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	4		
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or		4	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	***		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015)	3b		1 K 2 2
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			Ê
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		Х
		99	Λ DE	

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Par	t VII-B Statements Regarding Activitie	s for Which Form 4	720 May Be Req	uired (continued)	
5a	During the year did the foundation pay or incur any a	mount to			
	(1) Carry on propaganda, or otherwise attempt to inf	luence legislation (section	n 4945(e))?	. Yes X No	.
	(2) Influence the outcome of any specific public	election (see section 4	4955), or to carry or),	
	directly or indirectly, any voter registration drive?			Yes X No	
	(3) Provide a grant to an individual for travel, study, of				.]]
	(4) Provide a grant to an organization other than	· ·			
	section 4945(d)(4)(A)? (see instructions)				
	(5) Provide for any purpose other than religious,			• 🗀 🗀	
	purposes, or for the prevention of cruelty to child		• •		
h	If any answer is "Yes" to 5a(1)-(5), did any of			•	1 1 1
•	Regulations section 53 4945 or in a current notice re		• •	•	
					5b
	Organizations relying on a current notice regarding d				<u>니</u>
С	If the answer is "Yes" to question 5a(4), does		,		
	because it maintained expenditure responsibility for t	_		Yes No	']]]
	If "Yes," attach the statement required by Regulations				
6a	Did the foundation, during the year, receive any	•			
	on a personal benefit contract?				·
ь	Did the foundation, during the year, pay premiums, d	rectly or indirectly, on a	personal benefit contra	ct ⁷	6b X
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a	party to a prohibited tax	shelter transaction?.	. Yes X No	
b	If "Yes," did the foundation receive any proceeds or h				7ь
Par	Information About Officers, Direct	tors, Trustees, Fou	ındation Manager	s, Highly Paid Emp	oloyees,
1	and Contractors List all officers, directors, trustees, foundation	managers and their	compensation (see	instructions)	
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
US BA	ANK NA	TRUSTEE			
PO BO	DX 387, ST LOUIS, MO 63166	1	27,501.	-0-	-0-
					
		_		Ì	
_					
		-			
			*		
	****	—			
2	Compensation of five highest-paid employe	es (other than thos	se included on line	1 - see instruction	ns) If none enter
-	"NONE."	oo (otiloi tilali tilos	o moidada on mi	See manadio	moj. Il tione, enter
		(b) Title, and average		(d) Contributions to employee benefit	(a) Evenence account
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	(e) Expense account, other allowances
				compensation	
		<u></u>	1101111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	270275
NON	<u>E</u>		NONE	NONE	NONE
		_			
		_			
Tota	I number of other employees paid over \$50,000				NONE
					Form 990-PF (2015)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter	"NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
ONE		NONE
ONE		NONE
otal number of others receiving over \$50,000 for professional services	, •	NONI
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the num organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ber of	Expenses
1N/A		
2		
2		
3		
4		
		
Part IX-B Summary of Program-Related Investments (see instructions)		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 $1\mathrm{N/A}$		Amount
2		
All other program-related investments See instructions		
3NONE		
Table Add Income 1 abroards 2		
Total. Add lines 1 through 3	<u> ▶</u>	Form 990-PF (20

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	2,974,200.
	Average of monthly cash balances	1b	115,697.
C	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	3,089,897.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	3,089,897.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	1	
	ınstructions)	4	46,348.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,043,549.
6	Minimum investment return. Enter 5% of line 5	6	152,177.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	152,177.
2 a	Tax on investment income for 2015 from Part VI, line 5 2a NONE		• • • • • • • • • • • • • • • • • • • •
b	Income tax for 2015 (This does not include the tax from Part VI.). 2b	i i	
C	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	152,177.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	152,177.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	152,177.
Part	XII Qualifying Distributions (see instructions)		
			
1_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	• -	177 205
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	177,305.
	Program-related investments - total from Part IX-B	1b	-
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		MONE
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	177,305.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4		177,305.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation

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Par	t XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
-	line 7				152,177.
2	Undistributed income, if any, as of the end of 2015	-			232/17/1.
_	Enter amount for 2014 only			111,776.	
	Total for prior years 20 13 ,20,20		NONE		
	Excess distributions carryover, if any, to 2015		110112		
	From 2010 NONE				
	From 2011 NONE				
	From 2012 NONE	ĺ			
	From 2013 NONE				
	From 2014				
	Total of lines 3a through e	NONE			
	Qualifying distributions for 2015 from Part XII,	1101111			
	line 4 ▶ \$177,305.				
а	Applied to 2014, but not more than line 2a			111,776.	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election			Ì	
	required - see instructions)	NONB			
d	Applied to 2015 distributable amount				65,529.
е	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2015 .	NONE NONE			NONE
6	(If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions		NONE		
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2016				86,648.
7	Amounts treated as distributions out of corpus				
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				
а	Excess from 2011 NONE				
b	Excess from 2012 NONE				
c	Excess from 2013 NONE				
d	Excess from 2014 NONE				
e	Excess from 2015 NONE				
					000 DE

Check here $\triangleright |X|$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under

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

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Name and address (home or business) Recipient s an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount									
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	contribution						
a Paid during the year									
SEE STATEMENT 19				172 014					
SEE SIRIEMENT 19				172,914.					
,									
		l							
Total			▶ 3a	172,914.					
b Approved for future payment									
		1							
	<u></u>								
Total	<u> </u>			<u> </u>					
				Form 990-PF (2015)					

Part XVI-A Analysis of Income-Produ	ucing Acti	vities			
Enter gross amounts unless otherwise indicated	Unrela	ted business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					1000
b		-			
С					
d					
e					
f					
g Fees and contracts from government agencies		<u> </u>			
2 Membership dues and assessments	ļ				
3 Interest on savings and temporary cash investments -					
4 Dividends and interest from securities			14	12,400.	
5 Net rental income or (loss) from real estate	 				
a Debt-financed property	<u> </u>				
b Not debt-financed property				-21,493.	
$oldsymbol{\delta}$ Net rental income or (loss) from personal property	} 				
7 Other investment income				512 226	
8 Gain or (loss) from sales of assets other than inventory	<u> </u>		18	-512,236.	
9 Net income or (loss) from special events · · ·	}		~}		_
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a b PY FEDERAL TAX REF			1	112.	
			+	112.	
d					
d e		-	+		
12 Subtotal Add columns (b), (d), and (e)				-521,217.	
13 Total Add line 12, columns (b), (d), and (e)					-521,217.
(See worksheet in line 13 instructions to verify calci					3227227.
Part XVI-B Relationship of Activities		ccomplishment of E	xempt Pur	poses	
Explain below how each activity accomplishment of the foundation					
		NOT APPLICABI	Œ		
			-		
					·
					
					
		<u></u> .			

Form 99	0-PF (20						<u>6-6719506</u>			Pag	ge 1 3
Part 2	(VII	Information R Exempt Organ		nsfers To and	Transacti	ons and	l Relationships W	ith None	hari	table)
ir	sectio	on 501(c) of the Co					other organization of other organization of other organization of other organization of other other organization of other organization organizatio			Yes	No
	rganiza ranefer	itions? is from the reporting	a foundation to	a nonoharitahla ay	omnt organi	antion of					
					. •				1a(1)		Х
									1a(2)		X
b O	ther tr	ansactions [,]									
(1	I) Sale	s of assets to a non	charitable exem	pt organization					1b(1)		X
(2	2) Purc	hases of assets from	m a noncharitabl	e exempt organiza	ition				1b(2)		X
											X
											X
(6	3) Perfe	ormance of services	s or membership	or fundraising sol	icitations			• • • • • •	1b(5)		X
c S	haring	of facilities, equipm	nent, mailing lists	s, other assets, or r	paid employ	ees			1c		X
d If	the a	nswer to any of th	ne above is "Yes	s," complete the f	ollowing sc	hedule. C	olumn (b) should alv	ways show	the 1	fair m	narke
							If the foundation rec				
							of the goods, other a	-			
(a) Line	no	(b) Amount involved	(c) Name of no	oncharitable exempt org	anization	(d) Desc	ription of transfers, transact	ions, and shar	ıng arra	ngeme	nts
				-							
											
							***-*				
				N= -1 = 11							
				 							
				· · ·							
		 									
			l								
d	escribe		of the Code (ot				e tax-exempt organiza 527?		Y(es X	No
	100,	(a) Name of organizatio		(b) Type of o	organization		(c) Descripti	on of relations	hip		
					·						
											
						-					
	Under	penalties of periury. I decla	are that I have examin	ed this return, including	accompanying so	hedules and	statements, and to the best of	of my knowledo	e and b	elief. it	is triv
		and complete Declaration o						······································	- und D	Circi, it	13 110
Sign		anhona	noker	_ 01/20/2	017	TRUST	EE	May the IRS	discus		return below
Here	Signa	ture of officer or trustee		Date		Title		(see instruction		Yes	N
	U.:	S. BANK, N.A.						L			_
Paid		Print/Type preparer's na		Preparer's signatur			Date Che	··· L22 "	TIN		
Prepa	ror	JOSEPH J. CA		1	10c		01/20/2017 self		P012)3
Liehs	61	Firm's name ► PF	RICEWATERHO	USECOOPERS L	LP		Firm's EIN	▶ 13-4	<u>4008</u>	<u> 324</u>	

412-355-6000 Form 990-PF (2015)

Phone no

Use Only Firm's address ▶ 600 GRANT STREET

PITTSBURGH, PA

15219

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

Schedule of Contributors

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990

OMB No 1545-0047

GARY G TAYLOR CHARITA	BLE TR 050016715300	46-6719506						
Organization type (check one).								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on						
	501(c)(3) taxable private foundation							
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000								
or more (in money or contributor's total con	property) from any one contributor. Complete Parts I and II See instruction tributions.	s for determining a						
Special Rules								
regulations under sect 13, 16a, or 16b, and t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/cions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of hat received from any one contributor, during the year, total contributions are amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Co	r 990-EZ), Part II, line of the greater of (1)						
contributor, during the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the γear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).								

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

lame o	f or	ganization				
GARY	G	TAYLOR	CHARITABLE	TR	0500167	15300

Employer identification number 46-6719506

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	GARY G TAYLOR TRUST ESTATE US BANK NA PO BOX 387 ST LOUIS, MO 63166	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

RENT AND ROYALTY INCOME

Taxpayer's Name GARY G TAYLOR CH	ARITABLE TR	05001	6715	300				Identifyi -671	ing Number 9506
DESCRIPTION OF PROPERTY MISSOURI				_					
	tively participate in the	operation o	f the act	vity di	uring the tax year?				
TYPE OF PROPERTY: 4 - C	OMMERCIAL_								
OTHER INCOME									
						l	-		
OTHER EXPENSES:	<u> </u>		· · · · ·	<u> </u>	· · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	•	
								7	
DEPRECIATION (SHOWN BELOW)									
LESS. Beneficiary's Portion AMORTIZATION			• • • •		• • -				
LESS Beneficiary's Portion .									
DEPLETION									
TOTAL EXPENSES									
TOTAL RENT OR ROYALTY INCOME	(LOSS)			<u> </u>	 	<u> </u>	• • • •	<u> </u>	
Less Amount to									
Rent or Royalty									
Depreciation									
Depletion									
Investment Interest Expense									
Other Expenses									
Net Income (Loss) to Others .									
Net Rent or Royalty Income (Loss)									
SCHEDULE FOR DEPRECIATION			·	• • •			• • • • •	·	
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prioryears	(h) Method	(i) Life or rate	(j) Depreciation for this year
								\	
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	<u> </u>			<u> </u>		ļ <u>-</u>			
			<u> </u>	<u> </u>					
			-	 		ļ	ļ	 	
		ļ <u></u>	<u> </u>					<u> </u>	
Totals	<u></u>	L		· · · ·	· · · · · · · · · · · · · · · · · · ·	<u></u>	• • • •	<u></u>	

RENT AND ROYALTY INCOME

Taxpayer's Name GARY G TAYLOR CH	ARITABLE TR	05001	6715	300				Identifyi -671	ing Number 9506
DESCRIPTION OF PROPERTY MISSOURI								_	
Yes No Did you ac	tively participate in the	operation of	f the acti	vity di	uring the tax year?				
TYPE OF PROPERTY. 4 - C	OMMERCIAL								
OTHER INCOME.			_ · ·						
									
TOTAL GROSS INCOME	<u> </u>		• • • • •		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		• -	
OTHER EXPENSES: MANAGEMENT FEES						17	601	- 1	
OTHER EXPENSES	 					1/1	691. 802.		
OTHER EXPENSES						- 31	002.	_	
					···				
				-					
								\dashv	
								-	
								-	
									
DEDDEGLATION (OLIGINAL DELOW)									
DEPRECIATION (SHOWN BELOW)								\dashv	
LESS. Beneficiary's Portion AMORTIZATION					• •			_	
								$\overline{}$	
LESS Beneficiary's Portion . DEPLETION									
LESS Beneficiary's Portion								\dashv	
TOTAL EXPENSES									21,493.
TOTAL RENT OR ROYALTY INCOME								i	-21,493.
Less Amount to	: (LU33)			• • •		<u> </u>	· · · · ·	• •]	21,473.
Rent or Royalty									
Depreciation									
Depletion							 -		
Investment Interest Expense									
Other Expenses						· · · ·			
Net Income (Loss) to Others .						· · · · ———			
Net Rent or Royalty Income (Loss)								• —	-21,493.
Deductible Rental Loss (if Applicable									
SCHEDULE FOR DEPRECIATI									
(a) Description of property	(b) Cost or unadjusted basis	(c) Date	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prioryears	(h) Method	(ı) Lıfe or rate	(j) Depreciation for this year
							T		
			L	L					
Totals		<u> </u>		<u> </u>		<u> </u>	<u></u>		

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER DEDUCTIONS

OTHER EXPENSES

3,802. 3,802. ========

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET	INVESTMENT INCOME	 	355.	11,966.		12,321.
REVENUE AND			355.	11,966.	.97	12,400.
	DESCRIPTION		INTEREST INCOME	DIVIDEND INCOME	NONDIVIDEND DIST/RETURN OF CAPITAL	TOTAL

050016715300

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FORM 990PF, PART I - OTHER INCOME ______________

> REVENUE AND EXPENSES PER BOOKS

==========

DESCRIPTION _____

PY FEDERAL TAX REFUND

112.

TOTALS

112.

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,500.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	1,500. 1,500.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

GARY G TAYLOR CHARITABLE TR 050016715300

TAXES	11 11 11 11 11
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	NET	INVESTMENT	INCOME	1 1 1 1 1 1 1 1	181.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	181.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	181.		181.	
							TOTALS	
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FOREIGN TAXES			

STATEMENT

050016715300

050016715300

R EXPENSES	
OTHE	
PART I	
990PF,	
FORM	

CHARITABLE PURPOSES	141.	141.
NET INVESTMENT INCOME	21,493.	21,493.
REVENUE AND EXPENSES PER BOOKS	21,493.	21,634.
DESCRIPTION	RENT AND ROYALTY EXPENSES RENT AND ROYALTY EXPENSES OTHER NON-ALLOCABLE EXPENSES	TOTALS

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GARY G TAYLOR CHARITABLE TR 050016715300

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	13,359. 71,076. 33,771. 27,748. 37,855. 7,518. 32,638. 74,164. 27,085. 65,060. 51,493.
ENDING BOOK VALUE	13,231. 79,000. 34,024. 28,000. 36,610. 8,000. 32,000. 78,326. 29,000. 70,000. 54,000.
BEGINNING BOOK VALUE	15,000. 5,008. 13,000. 6,077. 23,363. 25,632. 13,000. 9,010. 8,000. 15,000. 13,542. 13,542. 13,000. 20,000.
	TOTALS
DESCRIPTION	T ROWE PRICE GROWTH STOCK #40 SPDR S P 500 ETF VANGUARD STRATEGIC EQUITY ISHARES CORE S&P SMALL-CAP ETF VANGUARD INTL GRWTH FD CL ADM VANGUARD WINDSOR II FUND ADMIR DOUBLELINE TOTAL RET BD I NUVEEN CORE PLUS BOND I NUVEEN CORE PLUS BOND I NUVEEN DIVIDEND VALUE FD CL I CAUSEWAY EMERGING MARKETS INST LOOMIS SAYLES STRATEGIC ALPHA OPPENHEIMER SENIOR FLOATING RA ROBECO BOSTON PARTNERS L S RSR

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GARY G TAYLOR CHARITABLE TR 050016715300 FORM 990PF, PART II - OTHER INVESTMENTS

	/ E005			
MOTHUTEDSEA	FMV	BEGINNING BOOK WALTE	ENDING BOOK WALTE	ENDING
DESCRIPTION	2	1) I I I
מחינהסט וימסט	ر	701 303 0		
KEAL ESTAIE) כ	, coc ,	Ċ	7
SM CO	: ر:		Ď	٦,
	บ		2,85	
	ບ		, 56	οĺ
ALIBABA GROUP HOLDING LTD A D	ບ		, 65	-
ALPHABET INC CL C	ບ		, 60	7,
AMERICAN TOWER CORP	บ		4	1,536.
APPLE INC	ບ		, 32	ω,
BANK OF AMERICA CORP	ט		80,	0
BOEING CO	บ		, 49	9,
BOSTON PPTYS INC	ບ		,87	Q,
BRISTOL MYERS SQUIBB CO	ບ		6,347.	6,388.
CARMAX INC	ບ		, 72	ω
CBS CORP CLASS B NON VOTING	U		80	۲,
CENTURYLINK INC	ບ		3,058.	3,196.
RATION	ט		,35	∞
CHEVRON CORP 1.365% 3	ບ		96,	0
CHEVRON CORPORATION	ບ		, 07	9,540.
CHUBB LTD	ບ		, 79	-
CISCO SYSTEMS INC	ט		, 14	4,
CITIGROUP INC	บ		, 59	3,340.
COSTCO WHSL CORP	บ		, 10	36
CVS HEALTH CORPORATION	ບ		,21	,37
DELTA AIR LINES INC	ບ		,51	7
DISNEY WALT CO	ט		, 86	-
DOLLAR TREE INC	_ت		2,800.	
DOW CHEM CO	U		, 02	~
E O G RES INC	ບເ		۲,	,81
EATON CORP PLC	ບ		4,296.	4,379.

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46-6719506

	1000			
DESCRIPTION	COST/ FMV C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	END I NG FMV
	 			!
ECOLAB INC	U		٦,	, 11
	ບ		2,48	, 01
FIDELITY ADV DIVERS INTL CL I	ບ		101,000.	, 22
GENERAL ELECTRIC CO	ບ		, 65	, 51
GENERAL MILLS INC	ບ		,83	, 16
GILEAD SCIENCES INC	ט		,41	,89
HOME DEPOT INC	ບ		,81	, 33
HUNT J B TRANS SVCS INC	บ		, 15	, 21
INTEL CORP	ບ		, 75	,47
INTERNATIONAL BUSINESS MACHINE	ບ		5,97	, 05
IPATH DOW JONES UBS COMMODITY	ບ		15,883.	13,975.
J P MORGAN CHASE CO	ບ		, 23	,44
JARDEN CORP	ບ		, 67	, 94
JPMORGAN CHASE CO 1.800% 1	ບ		, 01	5,07
LAUDUS INTERNATIONAL MARKETMAS	ບ		00'0	, 68
MARRIOTT INTL INC	ບ		96	,84
	ບ		,32	ω
	ບ		,83	2
	ບ		68	7
CORP	ບ		4,220.	5
MICROSOFT CORP 2.125% 11	ں ا		~	,17
MISSOURI MODGAN GRANTEV	ပ ((1
MORGAN SIANDEI	ۍ ر		ე ე	, 5,
NATIONAL OLLWELL VARCO INC	۱ ن		52	9,
P N C FINANCIAL SERVICES GROUP	ပ (9,021.	8,457.
FFIGER INC	ا ر) 	α
PROCTER & GAMBLE CO	ט י		11	, 23
PRUDENTIAL FINANCIAL INC QUALCOMM INC	บบ		7,825. 11,227.	7,222. 10,228.

FORM 990PF, PART II - OTHER INVESTMENTS				
DESCRIPTION	COST/ FMV C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
TRANSCANADA CORP	บ		3,287.	3,
UNION PACIFIC CORP	บ		10,594.	, 6
UNITED HEALTH GROUP INC	บ		6,528.	, _L
V F CORP	ט		8,591.	ά
W1/2 & W1/2SE1/4 13-62-38	ບ		514,336.	408,
WALGREENS BOOTS ALLIANCE INC	บ		10,568.	10,
APPLE INC 2.150% 2	ט		25,246.	25,
BP CAPITAL MARKETS 2.241% 9	ບ		25,235.	25,
DB X TRACKERS MSCI EAFE HEDGED	บ		34,776.	34,
EXXON MOBIL CORP	ບ		8,438.	8,
FIFTH THIRD BANCORP	บ		6,764.	9
INV BALANCE RISK COMM STR Y	ບ		45,000.	44,
MARATHON PETROLEUM CORP	ບ		7,572.	7,

3,931. 9,944. 7,090. 8,095. 10,530. 25,225. 25,318. 34,479. 8,359. 6,676.

1,067,636.

2,565,127.

TOTALS

1,192,413.

050016715300

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FORM 990PF, PART III - OTHER DECR	EASES IN NE	T WORTH OR	FUND BALANCES
DESCRIPTION			AMOUNT
PY MUTUAL FUND TIMING DIFFERENCE ROUNDING ADJUSTMENT			12,151. 85.
	TOTAL		12,236.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GRAHAM COMMUNITY BETTERMENT ADDRESS: 506 S. MAPLE AVE MAITLAND, MO 64466 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: CAMP QUALITY NORTHWEST MISSOURI ADDRESS: 1325 VILLAGE DRIVE SAINT JOSEPH, MO 64506 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: ST. JOSEPH SAFETY & HEALTH COUNCIL ADDRESS: 118 S 5TH STREET ST. JOSEPH, MO 64501 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CRISIS PREGNANCY CENTER INC. ADDRESS: 311 EAST 3RD ST MARYVILLE, MO 64470 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: NEW NODAWAY HUMANE SOCIETY ADDRESS: 829 SOUTH DEPOT STREET MARYVILLE, MO 64468 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: UNIVERSITY OF MISSOURI GRAVES - CHAPPLE RESEARCH CENTER ADDRESS: 201 EAST HWY 136 ROCK PORT, MO 64482 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID

2,000.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HOLT COUNTY TOY AND BENEVOLENT FUND ADDRESS: 504 STATE ST. MOUND CITY, MO 64470 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: ST JOSEPH CHAMBER OF COMMERCE AGRIBUSINESS COMMITTEE ADDRESS: 3003 FREDERICK AVE ST JOSEPH, MO 64506 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME: RIVERBEND EXTENSION COMPANY ADDRESS: 112 COMMERCIAL STREET FOREST CITY, MO 64451 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SPIRITHORSE OF BROKEN CREEK ADDRESS: 9902 SW HWY 31 STEWARTSVILLE, MO 64490 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,825. RECIPIENT NAME: MAITLAND-GRAHAM AMERICAN LEGION AUX #256 ADDRESS: 300 ASH ST. MAITLAND, MO **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: BIG BROTHERS BIG SISTERS OF NODAWAY ADDRESS: PO BOX 34 MARYVILLE, MO 64468 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: KING CITY COMMUNITY THEATER COMPANY ADDRESS: 108 EAST VERMONT STREET KING CITY, MO 64463 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,616. RECIPIENT NAME: STANBERRY COMMUNITY BETTERMENT CLUB 3328 470TH RD STANBERRY, MO 64489 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: NORTHWEST MISSOURI SOCCER ADDRESS: 211 EAST HAMPSHIRE KING CITY, MO 64463 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID

3,000.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NORTHWEST TECHNICAL SCHOOL CHAPTER OF SKILLS USA ADDRESS: 1515 SOUTH MUNN MARYVILLE, MO 64468 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 4,000. RECIPIENT NAME: COMMUNITY FOOD PANTRY OF MOUND CITY ADDRESS: 1410 NEBRASKA STREET MOUND CITY, MO 64470 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 3,200. RECIPIENT NAME: LETTUCE DREAM ADDRESS: P.O. BOX 272 MARYVILLE, MO 64468 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FAMILY GUIDANCE CENTER ADDRESS: 724 N 22ND STREET ST JOSEPH, MO 64506 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: MWSU FOUNDATION ADDRESS: 4525 DOWNS DRIVE ST JOSEPH, MO 64507 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID 4,000. RECIPIENT NAME: NODAWAY COUNTY ECONOMIC DEVELOPMENT ADDRESS: 423 N MARKET STREET MARYVILLE, MO 64468 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

5,000.

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ___________ RECIPIENT NAME: NORTHWEST FOUNDATION ADDRESS: 800 UNIVERSITY DRIVE MARYVILLE, MO 64468 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: COMMUNITY FOUNDATION OF NW MO, INC 1006 WEST ST. MAARTENS DRIVE , MO 64506 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: PONY EXPRESS COUNCIL BOY SCOUTS OF AMERICA ADDRESS: 1704 BUCKINGHAM ST. ST. JOSEPH, MO 64506 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

GARY G TAYLOR CHARITABLE TR 050016715300 46-6719506 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

GIRL SCOUTS OF NW KS & NW MO INC.

ADDRESS:

3300 DALE AVENUE

ST. JOSEPH, MO 64506

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

TOTAL GRANTS PAID:

172,914.

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RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
MISSOURI MISSOURI			21,493.	-21,493.
TOTALS			21,493.	-21,493.
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