Ferm 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Rublic Inspection

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs gov/Form990 for instructions and the latest information. Dipartment of the Treasury Internal Revenue Service 2018, and ending For the 2018 calendar year, or tax year beginning D Employer identification number Check if applicable Joel and Nina Taylor Foundation 4830 Juan Tabo NE F 85-0368687 Address change Telephone number Name change Albuquerque, NM 87111 505-237-0064 Initial return Final return/terminated G Gross receipts \$ 1,028,804. Amended return H(a) Is this a group return for subordinates? F Name and address of principal officer X No Yes Application pending J. Michael Jones Same As C Above X 501(c)(3) 4947(a)(1) or Tax-exempt status 501(c) () (insert no.) 527 Website: ► H(c) Group exemption number 2005 M State of legal domicile X Corporation L Year of formation Form of organization Part | Summarv Briefly describe the organization's mission or most significant activities Governance Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary 6 0 COLUMNE 7a Total unrelated business revenue from Part VIII, 7a b Net unrelated business taxable income from For 7b Prior Year **Current Year** Ö JUN 0.3 2019 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2q) 10 Investment income (Part VIII, column (A), lines 3, 4, 255,576. 121,383. Other revenue (Part VIII, column (A), lines 5, 64 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 255,576. 121,383. 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 147,240. 122,964. Benefits paid to or for members (Part IX, column (A), line 4). 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . 33,639 40,400. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 23,953 29,988. 180,556. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 217,628. Revenue less expenses Subtract line 18 from line 12 75,020. -96,245. End of Year **Beginning of Current Year** 8 20 Total assets (Part X, line 16) 2,944,818. 2,656,322. Total (liabilities (Part X, line 26) 21 0. 0. Net assets or fund balances. Subtract line 21 from line 20 2,656, 2,944,818. Rartill Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Michael Jones President Type or print name and title Print/Type preparer's name Preparer's signature X if P01908130 John K. self-employed John K. Swaim Paid Preparer. Carlow Swaim Danner & **Use Only** 85-0412869 Firm's FIN ► Firm's address 4830 Juan Tabo NE, Suite F 505-350-6067 Phone no

Albuquerque NM, 87111

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

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101L 08/20/18

|X| Yes

No

Form 990 (2018)

	Joel and Nina Taylor Foundation	85-03	368687P	age 2
	ment of Program Service Accomplishments			
Check	if Schedule O contains a response or note to any line in this f	Part III		X
•	pe the organization's mission			
See_Sched	<u>lule O</u>			.
				- - -
2 Did the organiz	ation undertake any significant program services during the year v	nich were not listed on the prior	□ v., ☑	N.
	be these new services on Schedule O.		Yes X	No
	be these new services on Scriedule O. Ization cease conducting, or make significant changes in how	it conducts, any program services?	□ vos [v̄]	No
•	be these changes on Schedule O.	it conducts, any program services.	Yes X	
•	organization's program service accomplishments for each of it	s three largest program services, as r	neasured by expen	242
Section 501(c)(3) and 501(c)(4) organizations are required to report the am if any, for each program service reported	ount of grants and allocations to other	rs, the total expens	ses,
4 a (Code) (Expenses \$ 147,240. including grants of)
Foundati Children Addition Children directed	tions of \$36,810 each were made to the on's Articles of Incorp. require it to 's Home, Albuquerque Christian School and distributions of \$36,810 were made a 's Home to mission works (as directed by distributions went to African Christian (\$10,000) and Mountainside Church of	support, Albuquerque Chind Lubbock Christian Units instructed by Albuque by the Foundation's Art. In College (\$16,810), The	ristian iversity. rque Christi of Inc.). T e Hills Chur	he
4 b (Code) (Expenses \$ including grants of	\$) (Revenue	\$	
				_
4 c (Code) (Expenses \$ including grants of	\$) (Revenue	Ś	<u> </u>
		, , , , , , , , , , , , , , , , , , , ,		—′
			- -	
				
		-		
	- 			
		-		
4 d Other program	n services (Describe in Schedule O)			
(Expenses	\$ including grants of \$) (Revenue \$)	
	service expenses > 147,240.		·	
BAA	TEEA0102L 08/03/18		Form 990	(2018)

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	Х	
_	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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_		Х
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		Х
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		Х
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		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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		Х
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	11 a		Х
b	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	11 b	Х	
c	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	11 c		Х
d	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	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		Х
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	11 f		х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII .	12a		Х
Ь	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		Х
13	Is the organization a school described in section $170(b)(1)(A)(ii)^{9}$ If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х
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		х
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		Х
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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	x	
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[Part!] Checklist of Required Schedules (continued)

			Yes	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		Х
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		Х
24	a 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		Х
	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		
25	tansaction 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		<u>X</u>
	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		<u> </u>
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		<u> </u>
27	Old 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? If 'Yes,' complete Schedule L, Part III	27		<u>x</u>
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)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		х
	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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I .	31		X
32	2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		x
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? If 'Yes,' complete Schedule R, Part L	33		X
	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	Х	
35	ia Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
	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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x
37	treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
ĮP.	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
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b (-1		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1.0		
ВА	(gambling) winnings to prize winners? A TEEA0104L 08/03/18	1 c Form	990 (2018)

Form 990 (2018) Joel and Nina Taylor Foundation

Part,V | Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
ments, 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?	2 b		<u> </u>
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		⊢^
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0	3ь		<u> </u>
4a 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)?	4 a		Х
b If 'Yes,' enter the name of the foreign country			ĺ
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	<u>-</u>		-
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5 b		_^
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		\vdash
6 a 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?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			l
services provided to the payor?	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year . 7 d	7 c		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
q If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			<u> </u>
as required?	7 g		
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		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12 .			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter			
a 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.			
	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b 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	:		
c Enter the amount of reserves on hand . 13c			
	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		x
excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N.	٠,٥		<u>├</u> ^
 -			X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	_16		├ ^
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a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 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. 1 a 3 b Enter the number of voting members included in line 1a, above, who are independent 1 b 3 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8 a a The governing body? Х b Each committee with authority to act on behalf of the governing body? 9 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O Х Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official 15 a X b Other officers or key employees of the organization See Schedule O 15b 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 X 16 a taxable entity during the year? 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 16h organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NM 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Own website 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. See Schedule O 20 State the name, address, and telephone number of the person who possesses the organization's books and records Swaim, Danner & Carlow 4830 Juan Tabo NE, STE F Albuquerque NM 87111 505-237-0064

Part-VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for

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Part VII Compensation of Officers, Directo Independent Contractors	rs, Tru	stee	s, I	(e y	Er	nplo	ye	es, Highest Co	ompensated Em	ployees, and
Check if Schedule O contains a response of	r note to	any	lıne	ın t	hıs I	Part	VII			
Section A. Officers, Directors, Trustees, Ke	y Empl	oye	es,	an	d H	igh	est	Compensated	l Employees	
1 a Complete this table for all persons required to be listed. organization's tax year.	Report co	ompe	nsat	ion	for t	he ca	lenc	dar year ending with	n or within the	
 List all of the organization's current officers, dire compensation. Enter -0- in columns (D), (E), and (F) if 							dual	ls or organizations	s), regardless of am	nount of
• List all of the organization's current key employe										
 List the organization's five current highest competition (Box 5 of Form organization and any related organizations) 	ensated e W-2 and/	or Bo	yee ox 7	s (o	ther Forr	thar n 109	n an 99-N	officer, director, //ISC) of more tha	trustee, or key emp n \$100,000 from the	oloyee) e
 List all of the organization's former officers, key of reportable compensation from the organization and any 	related or	ganıza	ation	ıs						han \$100,000
 List all of the organization's former directors or truste organization, more than \$10,000 of reportable compensation. 	sation fro	m th	e or	gan	ızatı	on a	nd a	any related organi	zations.	
List persons in the following order individual trustees of employees, and former such persons										npensated
Check this box if neither the organization nor any relate	ed organiz	ation	com	<u> </u>		d an	y cu	rrent officer, direct	or, or trustee	
		Pos	ition i	(C) (do.n		eck mo	ore	-	-	450
(A) Name and Title	(B) Average	thar	one both	box, unless person h an officer and a			on	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	0 =	director/trust					compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the
	week (list any hours for related organiza-	Individual trustee or director	institutional trustee	Officer	Key employee	Highest co	omic	(**-2/1099-14113C)	(***271033-14113C)	organization and related
	related organiza-	ctor	lona		ngl Joj	st cor	ਪ			organizations
	tions below dotted	ruste	ă		è	npen			ı	
	line)	Ö	tee			sated				
(1) Bill Williams	5								_	_
Secretary	0	X		X				13,492.	0.	0.
_(2) J. <u>Michael Jones</u> President	<u>5</u> -	X		х				13,454.	0.	0.
(3) Don Gibson	5	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			-			13, 131.		
Vice President		X		Х				13,454.	0.	0.
(4)										
(5)		-								
		1								
_(6)										
<u>(7)</u>										
(8)				-						
(9)		 								
(10)		\vdash								
(11)		_						-		
(12)		-			_		-			
(13)		1				_	_			
\ <u>'</u>		1			1	1	l			

(14)

Part	VII Section A. Officers, Directors, Tru	(B)	Ney	EII	ibic		es, a	and	i nigilest coll	ipensateu Empi	oyees (continued	<u>''</u>
•	(A) Name and title	Average hours per week	offic	, unle	ess pe	erson direct	than is both or/trus	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
		(list any hours for related organiza - tions below dotted line)	or director	Institutional trus.ee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W-2/1099 MISC)	compensation from the organization and related organizations	
(15)									-	-		
(16)					-							
(17)												
(18)												_
<u>(19)</u>			1									_
(20)			-									_
(21)												
(22)	· 											
(23)												
(24)					-							
(25)												
1 b S	ub-total		<u> </u>					>	40,400.			0.
	otal from continuation sheets to Part VII, Secti	on A						>	0.	0.		0.
2 To	otal (add lines 1b and 1c) otal number of individuals (including but not limited om the organization ()	I to those I	ısted	abo	ve)	who	recei	ved	40,400. more than \$100,00	0. 00 of reportable comp		0.
	om the organization 0										Yes N	0
	id the organization list any former officer, direct In line 1a? <i>If 'Yes,' complete Schedule J for suc</i>			, ke	y en	nplo	yee,	or h	nighest compensa	ted employee	3	X
th	or any individual listed on line 1a, is the sum o le organization and related organizations greate	f reportab er than \$1	le co 50,0	mp:	ensa If "	atior Yes,	and con	oth <i>nple</i>	er compensation ete Schedule J for	from		_
5 D	uch individual id any person listed on line 1a receive or accru	ie comper	nsatio	on fr	om	any	unre	late	ed organization or	ındıvıdual		<u>х</u> х
	or services rendered to the organization? If 'Yes	s, comple	16 3	crie	Jule	J 10	ii Suc	.π p	erson			<u>~</u>
1 C	omplete this table for your five highest compen ompensation from the organization. Report comper	sated ind	epen	iden	t co	ntra vear	ctors	tha	at received more to	han \$100,000 of	·.	
	(A) Name and business add			-		,			(B) Description)	(C) Compensation	
												_
		,				_						_
	otal number of independent contractors (including land)		ited t	o th	ose	liste	d abo	ve)	who received more	than		_
BAA	100,000 or compensation from the organization		TEEA	01081	08/	03/18					Form 990 (20	18

85-0368687 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (A) Total revenue (C) Unrelated (D) Revenue excluded from tax exempt business function revenue under sections 512-514 revenue 1 a Federated campaigns 1 a Grants **b** Membership dues 1 b c Fundraising events 1 c Gifts, d Related organizations 1 d Contributions, Gift and Other Similar e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above a Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f Rusiness Code Program Service Revenue f All other program service revenue. g Total. Add lines 2a-2f Investment income (including dividends, interest and other similar amounts) 5,101 5,101 Income from investment of tax-exempt bond proceeds. Royalties (ı) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other (i) Securities 7 a Gross amount from sales of assets other than inventory ,023,703 b Less cost or other basis and sales expenses 907,421 c Gain or (loss) 116,282 d Net gain or (loss) 116,282 116,282 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Loss direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code d All other revenue

e Total. Add lines 11a-11d 12 Total revenue. See instructions

121,383

0

0

85-0368687 Joel and Nina Taylor Foundation Page 10 Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and Fundraising Program service expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 147,240 147,240 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines-15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, 0. trustees, and key employees 40,400 0 40,400 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management 1,348 1,348 **b** Legal 9,133 9,133 c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 19,184 19,184 g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 13 Office expenses 14 Information technology Royalties 15 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 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.) 315 · 315 a Investment Administrative Fees b Bank Charges 8 8 d e All other expenses Total functional expenses. Add lines 1 through 24e 217,628. 147,240 70,388 0. 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** (2018)

		Check if Schedule O contains a response or note to	any line in this Part X			
	_			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		161,546.	2	187,653.
	3	Pledges and grants receivable, net		•	3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated em				
		Part II of Schedule L			5	
	- 6-	Loans and other receivables from other disqualified per section 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c)(5) beneficiary organizations (see instructions). Complete for the section of the sectio		6		
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10 c	
	11	Investments – publicly traded securities		1,852,224.	11	1,553,156.
	12	Investments – other securities See Part IV, line 11		931,048.	12	915,513.
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)	2,944,818.	16	2,656,322
-	17	Accounts payable and accrued expenses		_,,	17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities .			20	
S	21	Escrow or custodial account liability. Complete Part IV	of Schedule D	_	21	
Liabilities	22	Loans and other payables to current and former officer key employees, highest compensated employees, and Complete Part II of Schedule L	s, directors, trustees, disqualified persons.	<u> </u>	22	
Ï	22	Secured mortgages and notes payable to unrelated thir	d narties		23	
	23	Unsecured notes and loans payable to unrelated third p	· ·		24	
	24	• •			24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp	lete Part X of Schedule D		25 26	
_	26	Total liabilities. Add lines 17 through 25	b Dand complete	0.	20	0
ces		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.	and complete	<u></u>	l <u> </u>	· · · - ·
an	27	Unrestricted net assets			27	
Bal	28	Temporarily restricted net assets			28	
פ	29	Permanently restricted net assets	=		29	
Net Assets or Fund Balan		Organizations that do not follow SFAS 117 (ASC 958), che and complete lines 30 through 34.	ck here ► X			
Ŋ.	30	Capital stock or trust principal, or current funds		2,944,818.	30	2,656,322
æ	31	Paid-in or capital surplus, or land, building, or equipme	nt fund		31	
As	32	Retained earnings, endowment, accumulated income, of	or other funds		32	
<u>e</u>	33	Total net assets or fund balances		2,944,818.	33	2,656,322
Z	34	Total liabilities and net assets/fund balances		2,944,818.	34	2,656,322

		5-03 <u>68687</u>		Pag	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				$\perp \! \! \perp$
<u> </u>	Total revenue (must equal Part VIII, column (A), line 12)	1	12	1,3	<u>83.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	21	7,6	28.
3	Revenue less expenses. Subtract line 2 from line 1	3	-9	6,2	45.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,94	4,8	18.
5	Net unrealized gains (losses) on investments	5	-19	2,2	51.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	. 8			
-9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,65	6,3	22.
Pa	t XII Financial Statements and Reporting	_			
	Check if Schedule O contains a response or note to any line in this Part XII				П
			1	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	ı]
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	ewed on a			
٠ (Were the organization's financial statements audited by an independent accountant?		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	arate			
'	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the at review, or compilation of its financial statements and selection of an independent accountant?	dıt,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O]
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133?	•	3 a		Х
1	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3 b		<u> </u>
BAA	TEEA0112L 08/03/18		Form	990 ((2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

Joe.		and Nina Taylor Fou		=		_	85-036868				
Part		Reason for Public Cha						ions.			
The o	rqa	anization is not a private found	ation because it is (For lines 1 through 12,	check o	nly one	box)				
1		A church, convention of church	es, or association of ch	nurches described in sect	ion 170(b)(1)(A)(i).	12			
2		A school described in section 1						10			
3		A hospital or a cooperative h	ospital service organ	ization described in sec	tion 170)(b)(1)(A	()(iii).	·'-V			
4		A medical research organizat	tion operated in conju	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's			
		name, city, and state			. _						
5		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.)									
6 7		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
,		An organization that normally rule in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general pub	lic described			
8	Ш	A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)						
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university										
10		An organization that normally refrom activities related to its envestment income and unrel June 30, 1975 See section 5	exempt functions—sub lated business taxable	oject to certain exception e income (less section	ns. and	(2) no r	more than 33-1/3% of it	s support from gross			
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1509(a)(4).				
12	X	An organization organized ar or more publicly supported o lines 12a through 12d that de	nd operated exclusive	ely for the benefit of, to ed in section 509(a)(1) of	perform or section	the fun	ctions of, or to carry ou (2). See section 509(a)	It the purposes of one (3). Check the box in			
а	X		on operated, supervise gularly appoint or elect	d, or controlled by its sur	ported o	rganizati	ion(s), typically by giving	the supported			
b		Type II. A supporting organize management of the supporting must complete Part IV, Sections A	ation supervised or o	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by I the supported organizati	naving control or on(s) You			
С		Type III functionally integrated.	. A supporting organizat	tion operated in connection plete Part IV, Sections	n with, ar A, D, an	nd function	onally integrated with, its	supported			
d		Type III non-functionally integrated The constructionally integrated The constructions). You must com	organization generally	must satisfy a distribu	nnection tion reqi	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see			
е		Check this box if the organization integrated, or Type III non-fu	ation received a writt	en determination from	the IRS	that it is	a Type I, Type II, Type	e III functionally			
f	Er	nter the number of supported		supporting organization	••			3			
g	Pr	rovide the following information	n about the supported	d organization(s).							
(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
				7							
(A)	Se	e Part VI		<u>T</u>							
(D)				1 2							
<u>(B)</u>					-	<u> </u>					
(C)				ン							
(C)											
(D)											
<u> </u>							-				
(E)											
Total		3					147 240	0			

<u> </u>	(Complete only if you checked organization fails to qualify to	the box on line 5,	7, or 8 of Part I or	if the organization	failed to qualify ur	nder Part III. If the	<u></u>
Sec	tion A. Public Support	\					
Cale: begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')						
2	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						222
4	Total. Add lines 1 through 3		1				
` 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 (f).	·					
6	Public support. Subtract line 5 from line 4			X			
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4			1			
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).						_
	Total support. Add lines 7 through 10						
	Gross receipts from related activ					12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, ti	nird, fourth, or fifth	tax year as a sect	on 501(c)(3)	▶ □
	tion C. Computation of Pu						
	Public support percentage for 20			ne 11, column (f))	14	<u>%</u> %
	Public support percentage from						
	33-1/3% support test 2018. If t and stop here. The organization	qualifies as a pu	blicly supported of	organization			\
b	33-1/3% support test—2017. If the and stop here. The organization	ne organization di i qualifies as a pu	d not check a box iblicly supported	c on line 13 or 16a organization	a, and line 15 is 3	33-1/3% or more, c	hečk this box ►
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-	and-circumstance	es' test, check this	box and stop he	ere. Explain in Part	VI how \
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test The organiz	es' test, check this ation qualifies as	box and stop he a publicly suppor	e re. Explain in Part rted organization	VI how the
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	nis box and see ins	tructions -
BAA			<u> </u>		Sc	hedule A (Form 99	0 or 990-EZ) 2018

- 41	t III Support Schedule fo	r Organization	ns Described i	n Section 509	(a)(2)		
	(Complete only if you che fails to qualify under the t				n failed to qualify	under Part II. If the	ne organization
Sec	tion A. Public Support	ests listed below,	please complete	rait ii)			/
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018 /	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	(a) 2014	(3) 2013	(0) 20.0	(4) 2017	(6)2515	(i) rotal
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	"Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for 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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons			X			
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b.			L	1		
8	Public support. (Subtract line 7c from line 6)						
Sec	tion B. Total Support	``		·	<u> </u>		
Calen	dar year (or fiscal year beginning in)	(a) 2014	/(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		/				
	Cross income from interest dividends		<i>f</i>				- · · · <u>-</u> · · · · ·
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	/			\		
b	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.						
b	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						
b	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.						
6 , 11	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						
b 11 12	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,			,			Δ
b c . 11 12 13	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.)	is for the organiz	ation's first, seco		or fifth tax year as	a section 501(c)(c)	3)
b c 11 12 13 14	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	stop here			or fifth tax year as	a section 501(c)(c)	3)
12 13 14 Sec	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 organization, check, this box and	stop here Iblic Support F	Percentage	nd, third, fourth, c		a section 501(c)(:	3)
12 13 14 Sec 15	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 organization, check, this box and tion C. Computation of Pu	d stop here Iblic Support F 018 (line 8, colum	Percentage n (f), divided by I	nd, third, fourth, c			<u> </u>
12 13 14 Sec 15 16	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 organization, check, this box and tion C. Computation of Public support percentage for 25	d stop here Iblic Support F 018 (line 8, colum 2017 Schedule A	Percentage n (f), divided by I , Part III, line 15	nd, third, fourth, continued in the second s		15	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12 13 14 Sec 15 16 Sec	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 organization, check, this box and tion C. Computation of Pupublic support percentage from	d stop here blic Support F 018 (line 8, colum 2017 Schedule A /estment Incol	Percentage n (f), divided by I , Part III, line 15 me Percentag	nd, third, fourth, connection in the second)	15	90 90
12 13 14 Sec 15 16 Sec 17	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 organization, check, this box and tion C. Computation of Pupublic support percentage from tion D. Computation of Inventor 100 pages 100 percentage from 100 percentage fr	d stop here ublic Support F 018 (line 8, colum 2017 Schedule A vestment Incol for 2018 (line 10c)	Percentage n (f), divided by I , Part III, line 15 me Percentag , column (f), divid	ine 13, column (f))	15 16	8 8
12 13 14 Sec 15 16 Sec 17 18	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 organization, check, this box and tion C. Computation of Pupublic support percentage from those tion D. Computation of Invinvestment income percentage	d stop here ublic Support F 018 (line 8, colum 2017 Schedule A vestment Incor for 2018 (line 10c from 2017 Schedu the organization of	Percentage n (f), divided by I , Part III, line 15 me Percentag , column (f), dividule A, Part III, line did not check the	nd, third, fourth, come 13, column (f) e led by line 13, column (f) in 17	umn (f))	15 16 17 18 than 33-1/3%, an	\$ \$ \$ \$ d line 17
12 13 14 Sec 15 16 Sec 17 18 19a	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 organization, check, this box and tion C. Computation of Pupublic support percentage from the support tests—2018. If	d stop here ublic Support F 018 (line 8, colum 2017 Schedule A vestment Incor for 2018 (line 10c, from 2017 Schedul the organization of the organization of	Percentage n (f), divided by I , Part III, line 15 me Percentag , column (f), dividule A, Part III, line did not check the phere. The organ did not check a bo	e led by line 13, column (f) box on line 14, ar inzation qualifies a cox on line 14 or l	umn (f)) nd line 15 is more as a publicly supp ne 19a, and line 1	15 16 17 18 than 33-1/3%, an orted organization 5 is more than 33-	% % % % % % % % % % % % % % % % % % %

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

ec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status under section _509(a)(1) or _(2)? If _Yes, 'explain in Part VI how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2)	-2-		_ X _
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below			X
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 Part VI 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? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below	 4a		X
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		_	
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		
5a	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	 5a		x
	amendment to the organizing document)	5a		
t	Type I or Type II only. 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?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in Part VI .	6		Х
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		Х
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 I of Schedule L (Form 990 or 990-EZ)	8		X
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 Part VI .	9a		x
t	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		Х
c	Did a disqualified person (as defined in line 9a) 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 Part VI.	9c		X
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding			
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a		X
t	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		

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Par	t IV	Supporting Organizations (continued)		V	•
11	Has f	the organization accepted a gift or contribution from any of the following persons?		Yes	No
•	A per	son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			لب
	-	rning body of a supported organization?	11a		_X
		nily member of a person described in (a) above?	11b		X
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		X
Sec	tion	B. Type I Supporting Organizations		Yes	No
- 1	or ele Part If the direc	the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ext at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in the supported organization's activities or organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, end to such powers during the tax year.		X	
2	Did to	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization			X
Sec	tion	C. Type II Supporting Organizations			
		ſ		Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees inch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s)			<u></u>
Sec	tion	D. All Type III Supporting Organizations			
				Yes	No
1	orgai year,	the organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?			
	,				
2	orgai	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	võice all tii	eason of the relationship described in (2), did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard			
Sec	tion	E. Type III Functionally Integrated Supporting Organizations			
1	Chec	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	_	The organization satisfied the Activities Test. Complete line 2 below			
Ŀ	=	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	Η.	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struc	tions)	
_					T
		rities Test Answer (a) and (b) below.		Yes	No
a	supp orga	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported inizations and explain how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities	2a		
t	the c	the activities described in (a) constitute activities that, but for the organization's involvement, one or more of organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the			
	orga	nization's involvement	2b		ļ
3	Pare	nt of Supported Organizations. <i>Answer (a) and (b) below</i> .			
a	Did t each	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ł	Did tl supp	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		
BAA		TEEA0405L 06/07/18 Schedule A (Form 990	or 9	90-EZ	2018

	Check here if the current year is the organization's first as a (see instructions).	non-functionally inte	grate	d Type III supporting org	anızatıon

3

4

5

6

Schedule A (Form 990 or 990-EZ) 2018

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Enter greater of line 2 or line 3.

7

BAA

Income tax imposed in prior year

temporary reduction (see instructions).

Pai	t.V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Sec	tion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt pur	poses		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
_ 7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions.	on is responsive (provide	details	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI) See instructions.			
3	Excess distributions carryover, if any, to 2018			
	From 2013			
t	From 2014			
	From 2015			
	From 2016			
	From 2017			
	f Total of lines 3a through e			
	Applied to underdistributions of prior years	<u> </u>		
t	Applied to 2018 distributable amount			
	i Carryover from 2013 not applied (see instructions)			
	j Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7			
- 6	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

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.) Part VI

Schedule A, Part I, Line 12 Name(s) of Supported Organization(s)

Name of Supported Organization	Federal EIN		Listed in Governing Document? Yes No	Amount of Monetary Support	Ot	nt of her port
AlbuquerqueChristianChi	ldren'sHome 23-7122398	7	X	\$ 73,620.	\$	0.
Albuquerque Christian S	chool 85-0296318	2	x	36,810.	,	0.
Lubbock Christian Unive	rsity 75-0950119	2	x	36,810.		0.
				\$ 147,240	. \$	0.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection Employer identification number

	Joel and Nina Taylor Found	ation	85-0368687
Par	t Organizations Maintaining Done	or Advised Funds or Other Similar Fu	inds or Accounts.
	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	e 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year),		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in c organization's exclusive legal control?	donor advised funds Yes No
6	Did the organization inform all grantees, done for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant fur t of the donor or donor advisor, or for any othe	nds can be used only er purpose conferring Yes No
Par		wered 'Yes' on Form 990, Part IV, line	e 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g.,	recreation or education) Preservation	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation contribution in the fo	rm of a conservation easement on the
			Held at the End of the Tax Year
_	Total number of conservation easements		2 a
	Total acreage restricted by conservation ease		2 b
C	: Number of conservation easements on a cert	ified historic structure included in (a)	2c
C	structure listed in the National Register	in (c) acquired after 7/25/06, and not on a history.	2 d
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to cons		
5	and enforcement of the conservation easeme		∐Yes ∐ No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing c	onservation easements during the year
7	Amount of expenses incurred in monitoring, insp ▶\$	ecting, handling of violations, and enforcing conse	ervation easements during the year
8	Does each conservation easement reported of and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i) Yes No
9	in Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
Par	HIII Organizations Maintaining Colle	ections of Art, Historical Treasures, o wered 'Yes' on Form 990, Part IV, line	r Other Similar Assets. e 8.
1 a		er SFAS 116 (ASC 958), not to report in its reve eld for public exhibition, education, or research in nicial statements that describes these items	
t	If the organization elected, as permitted under historical treasures, or other similar assets held to following amounts relating to these items	er SFAS 116 (ASC 958), to report in its revenue for public exhibition, education, or research in furth	nerance of public service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1	▶ \$
	(ii) Assets included in Form 990, Part X	• •	▶ \$
	amounts required to be reported under SFAS		
a	Revenue included on Form 990, Part VIII, line	e 1	> \$
- 1	Assets included in Form 990, Part X		►Ś

	D (Form 990) 2018 Joel				85-036	
Part III	Organizations Mainta	ining Collections	s of Art, Histori	cal Treasures, or	Other Similar Ass	ets (continued)
	ng the organization's acquisition ns (check all that apply)	i, accession, and other	records, check any	of the following that are	e a significant use of its	collection
` a 🗍	Public exhibition		d \square Loan or	exchange programs		
ъH	Scholarly research		e Other	go programs		
- E H	Preservation for future gener	rations	- Ш			
	vide a description of the organizet XIII.	zation's collections and	d explain how they fo	urther the organization's	exempt purpose in	
5 Dur	ring the year, did the organiza se sold to raise funds rather the	ation solicit or receive	e donations of art,	historical treasures, or	other similar assets	Yes No
Part IV	1 —					
I altiv	line 9, or reported an	amount on Form	990, Part X, III	ne 21.		
1 a is t	he organization an agent, trus Form 990, Part X?	stee, custodian or oth	ner intermediary fo	r contributions or othe	r assets not included	Yes No
	res, explain the arrangement	t in Part XIII and com	nplete the following	table.		
	, ,			•		Amount
c Beg	ginning balance .		• •		1 c	
d Add	ditions during the year				1 d	
e Dis	tributions during the year				1 e	
f End	ding balance .			•	1 f	
2 a Did	the organization include an a	amount on Form 990,	Part X, line 21, fo	r escrow or custodial	account liability?	Yes No
b lf '\	es,' explain the arrangement	t in Part XIII Check I	nere if the explana	tion has been provided	d on Part XIII	_
						
Part V	Endowment Funds. C	complete if the or		<u>wered 'Yes' on Fo</u>	<u>rm 990, Part IV, Iır</u>	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
	ginning of year balance					
b Cor	ntributions			-		
	i investment earnings, gains, i losses					
d Gra	ants or scholarships					
	ner expenditures for facilities if programs					
f Adr	ministrative expenses		,			
g End	d of year balance					
2 Pro	ovide the estimated percentag	e of the current year	end balance (line	1g, column (a)) held a	as	<u> </u>
a Boa	ard designated or quasi-endowm	nent ►	%			
b Per	manent endowment >	%				
c Ter	mporarily restricted endowmer	nt ►	%			
The	percentages on lines 2a, 2b, a	nd 2c should equal 10	0%.			
	there endowment funds not in t	the possession of the	organization that are	held and administered	for the	N. N.
-	anization by					Yes No
	unrelated organizations		•			3a(i)
	related organizations	atad areas astrona lie		Sahadula D2		3a(ii)
	Yes' on line 3a(ii), are the rela	•	·			3b
	scribe in Part XIII the intended		ation's endowmen	t runus		
Part VI	Land, Buildings, and Complete if the organ		'Yes' on Form	990, Part IV, line	11a. See Form 99	0, Part X, line 10.
	Description of property		it or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Lar	nd		-			-
b Bui	ldıngs					
c Lea	asehold improvements	1				
	uipment .					
e Oth	,					
	ld lines 1a through 1e. (Còlun	nn (d) must equal Fo	rm 990, Part X, co.	lumn (B), line 10c)	>	0.
BAA	- ,	· ·	***	-	Sched	ule D (Form 990) 2018

Part VII Investments – O	ther Securities. rganization answered	'Yes' on Form 990) Part IV line	11b. See Form 9	990. Part X. line 12
(a) Description of security or category		(b) Book value		of valuation Cost or end-	
(1) Financial derivatives	,,				
(2) Closely-held equity interests.					
(3) Other Two Athene Ann	nuity Contracts [915,513.	End of Year	Market Valu	e
(A)					
(B)					
(C) (D)					
(D)	 	<u> </u>			
(E)	 			<u>-</u>	
(F)					
(G)			_		-
(H)			-		
(I)		015 513	_		
Total. (Column (b) must equal Form 990, F		915,513.	N/A		
Part VIII Investments — P	rganization answered	'Yes' on Form 990	0, Part IV, line	11c. See Form 9	990, Part X, line 13
(a) Description of inv		(b) Book value	(c) Method of va	aluation Cost or end	l-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					·····
(7)					
(8)				· · · · · · · · · · · · · · · · · · ·	
(9)					
(10)					
Total. (Column (b) must equal Form 990, I	Part X, column (B) line 13)		I	·	
Part IX Other Assets.	organization answered	N/A	N O Part IV line	11d See Form 9	990 Part X. line 15
Complete ii the o		cription	5,1 a.c. (1, 11.15		(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)	· · · · · · · · · · · · · · · · · · ·				
(6)					
(8)					
(9)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
(10)					
Total. (Column (b) must equal Fe	orm 990, Part X, column (E	3) line 15)		<u> </u>	>
Part X Other Liabilities.					_
Complete if the organ	ization answered 'Yes' on Fo			m 990, Part X, line 25).
(a) Description	of liability	(b) Book value	<u>: </u>		
(1) Federal income taxes		-	 		
(2) .					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)			 		
Total. (Column (b) must equal Form 990,		t-sta to the expansion to see	inanajal atatamanta the	t roporto the erectivativa	a liability for up-a-to-a
2. Liability for uncertain tax positions. In		nas been provided in Part XI		c reports the organization	

Schedule D (Form 990) 2018 Joel and Nina Taylor Foundation	85-0368687	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Reve	nue per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1	2a.	
.1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants . 2c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.		· · · · ·
a Investment expenses not included on Form 990, Part VIII, line 7b	<u> </u>	
b Other (Describe in Part XIII) . 4b		
c Add lines 4a and 4b.	. 4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Exp	enses per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1	2a.	
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities 2a		
b Prior year adjustments . 2b		
c Other losses . 2c		
d Other (Describe in Part XIII) . 2d	<u> </u>	
e Add lines 2a through 2d .	2 e	

Part XIII Supplemental Information.

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

3 Subtract line 2e from line 1

c Add lines 4a and 4b

b Other (Describe in Part XIII.)

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

4 b

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4 c

5

% ⊠ (h) Purpose of grant or assistance Schedule I (Form 990) (2018) Annual Support Annual Support Annual Support Open to Public Inspection Missions Work OMB No 1545-0047 Missions Work Missions Work 2018 Employer identification number Yes Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on 85-0368687 Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncesh assistance (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? TEEA3901L 07/13/18 Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Ö ö 。 0 ö o. (e) Amount of non-cash assistance Go to www.irs.gov/Form990 for the latest information 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant 36,810. 36,810. 36,810. 16,810 10,000 10,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table. Joel and Nina Taylor Foundation Part I General Information on Grants and Assistance 23-7122398 75-0950119 85-0296318 26-0412537 (P) EIN (3) ABQ Christian Childern's Home (2) Albuquerque Christian Schools (5) The Hills Church Eldership C/O ABQ Christian Childern's Albuquergue, NM 87120 (1) Lubbock Christian University (6) Mountainside_CofC_Eldership_ (4) African Christian College 1 (a) Name and address of organization or government 12300 Indian School Rd NE 5700 Winter Haven Dr NW Albuquergue, NM 87197 Albuquerque, NM 87120 Albuquerque, NM 87112 Albuquerque, NM 87109 4931 McLeod Rd. NE <u>5601 19th Street _</u> Lubbock, TX 79407 PO_Box_70033_ Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE I $|\mathcal{E}|$ 8

Joel and Nina Taylor Foundation

Schedule I (Form 990) (2018)

Page 2

85-0368687

Grants and Other Assistance to Domestic Individuals. Complete If the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					_
					Į
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	te the information	required in Part I,	line 2; Part III, co	lumn (b); and any othe	r additional information.

Part IV - Additional Supplemental Information

The distributions which distributions were made, the Foundation Board is not in a position to monitor to The African Christan College for \$16,810, The Hills Church Eldership for \$10,000 supporting organization whose Board of Directors is elected by the three publicly supported 501(c)(3) organizations listed in Part II to whom the distributions for Since the Foundation is controlled by the three organizations to The Joel and Nina Taylor Foundation, Inc. is a IRC Section 509(a)(3), Type I and Mountainside Church of Christ Eldership for \$10,000 were directed by the the use of the funds distributed to the supported organizations. Albuquerque Christian Children's Home. 2018 were made.

Schedule I (Form 990) (2018)

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SCHEDULE O (Form:990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest information.

Joel and Nina Taylor Foundation

85-0368687

Employer identification number

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

Support three specific Church of Christ affiliated ministries, Albuquerque Christian Children's Home, Albuquerque-Christian-School-and Lubbock Christian-University-with-annual distributions from the Foundation. All supported organizations are publicly supported 501(c)(3)organizations.

Form 990, Part III, Line 1 - Organization Mission

To provide financial support to three designated 501(c)(3) publicly supported organizations, Albuquerque Christian School, Lubbock Christian University and Albuquerque Christian Children's Home. Distributions are made annually to the designated organizations or to other 501(c)(3)ministries as directed by the supported organizations.

Form 990, Part VI, Line 11b - Form 990 Review Process

Form 990 is prepared by a CPA, with a detailed review performed by the organization's lawyer - who is also a CPA. The staff of his law firm provides basic bookkeeping services to the organization. Questions are discussed with the organization's President during the preparation process. The final draft of Form 990 is sent to each Board member for review prior to the President signing and filing the Form. Time is given for Board members to review Form 990 and to ask questions, suggest changes, corrections or additions to the Form prior to the President signing and filing the Form.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Board members complete an annual disclosure statement designed to reveal all conflicts of interest between the Board Member and the Organization. The disclosure statement is designed to disclose actual and potential conflicts of interest. The Board reviews all disclosure statements each year. Any Member who has a conflict of

Employer identification number

85-0368687

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

discussion of the matter and does not vote with regard to the matter.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Reasonable compensation for Officers is determined by the Board of Directors.

Reasonable compensation is defined as the amount that would ordinarily be paid for similar services by comparable organization or business organizations under similar circumstances. Compensation is based on the time required, Officer's experience and expertise and the Organization's ability to pay.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Form 1023, Form 990 and the organization's key organizational documents are made available to the public upon request. There were no requests for the organization's documents made during 2018.

(g) Sec 512(b)(13) controlled entity? ٩ Schedule R (Form 990) 2018 (f) Direct controlling entity × × Open to Public Inspection OMB No 1545-0047 Yes Identification of Related Tax-Exempt Organizations. Complete of the organization answered 'Yes' on Form 990, Part IV, line 34, because had one or more related tax-exempt organizations during the tax year. Employer identification number (f)
Direct controlling
entity 85-0368687 None None None (e) End-of-year assets (e)
Public charity status (if section 501(c)(3)) Part I Identification of Disregarded Entities. Complete of the organization answered 'Yes' on Form 990, Part IV, line 33. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.Attach to Form 990. ~ 2 (d) Total income Related Organizations and Unrelated Partnerships Go to www.irs.gov/Form990 for instructions and the latest information. (d) Exempt Code section TEEA5001L 06/07/18 501 (c) (3) 501 (c) (3) 501(c)(3) (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) ¥ ⋛ Z (b) Primary activity University Christian Christian Orphanage Education Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Nina Taylor Foundation (a) Name, address, and EIN (if applicable) of disregarded entity 1) AlbuquerqueChristianChildren'sHome 5700 Winter Haven Dr NW - Albuquerque, NM 87120 - - - - - - 23-7122398 (a) (a) Name, address, and EIN of related organization (2) Albuquerque Christian School 4931 McLeod Rd. NE NE NE Albuquerque, NM 87109 S-0296318 Lubbock Christian University
5601 19th Street
Lubbock, TX 79407 and Joel Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Part II ୍ର ଜ୍ୟ <u>(i)</u> €, ଷ୍ଟ 3

85-0368687 Page 2

Schedule R (Form 990) 2018 Joel and Nina Taylor Foundation

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(k) Percentage ownership.											ırt IV,	(i) Sec 512(b)(13) controlled entity?	s No			_							Schedule R (Form 990) 2018
	٩ ۷										0, Pa		Yes		_		_		· · · ·			-	(Form
General or managing partner?	Yes										rm 99	(h) Percentage ownership											edule R
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form	1065)	-				-	•		_		ble as a Corporation or Trust. Complete if the organization answered 'Yes' on Form 990, Part IV, inganizations treated as a corporation or trust during the tax year.	Share of end-of- Pyear assets										-	Sch
(h) Disproportionate allocations?	No										nswer ear.	-RS											
Dispr tior alloca	Yes				_				<u> </u>		zation a	(f) Share of total income											
e of Fyear ets											rganiz ring tl												
(g) Share of end-of-year assets											of the of trust du	(e) Type of entity (C corp, S corp,	ust)										
total											mplete tion or	Type of (C corp.	or tr										
(f) Share of total income											dentification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answeren 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	Đ.	entity										10/02/18
income elated, om tax tions	۵										on or												TEEA5002L 10/02/18
(e) Predominant income (related, unrelated, under from tax under sections	512-514										orporations treate	(c) Legal domicile (state or foreign	country)							ŀ			TEE
											s a Co	Lega (state	ဗ										
(d) Direct controlling entity											axable a ed organ	(b) Primary activity											
(c) Legal domicile (state or foreign	untry)								_		Identification of Related Organizations Taxaline 34, because it had one or more related o	Primary							1				
-	8										' ganiz a or mo	ıızatıon				İ		1	i 		1	1	
(b) Primary activity											ated Or	ted organ							 			 	
Prim						_					of Rel	of rela						i !			i	i !	
(a) Name, address, and EIN of related organization			 	 		 	 		1 1 1	i ! !	cation becau	(a) Name, address, and EIN of related organization			 	 		 	 		 	 	
(a) ess, and organiza			1 1 1	 		 	 		 	 	dentifi ine 34	address,			 	 					 	 	
ne, addı related				1		 	 		! !	i ! !	Part IV	Name, ¿			 	 			 			 	
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Schedule R (Form 990) 2018 Joel and Nina Taylor Foundation

R5-0368

Part V Transactions With Related Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	٩
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	d in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1 a		×
b Gift, grant, or capital contribution to related organization(s)			1 b	X	
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or loan quarantees to or for related organization(s)			1 d		×
e Loans or loan guarantees by related organization(s)			<u>-</u>		×
f Dividends from related organization(s)			1		×
g Sale of assets to related organization(s)			Jg		×
			1 h		×
j Exchange of assets with related organization(s)			=		×
j Lease of facilities, equipment, or other assets to related organization(s)			<u>:</u>		×
					:
k Lease of facilities, equipment, or other assets from related organization(s)			<u>*</u>		×
I Performance of services or membership or fundraising solicitations for related organization(s).			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)			1m		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1 n		X
o Sharing of paid employees with related organization(s)			10		X
p Reimbursement paid to related organization(s) for expenses			1 p		×
q Reimbursement paid by related organization(s) for expenses			19		×
 Other transfer of cash or property to related organization(s) 			-		×
S Other transfer of cash or property from related organization(40.000	18		×
If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	relationships and trar	saction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Jetern Involv	ed ed
(1) AlbuquerqueChristianChildren'sHome	q	36,810.	Board Analysis	naly	sis
(2) Albuquerque Christian School	q	36,810.	Board Analysis	naly	sis
(3) Lubbock Christian University	q	36,810.	810.Board Analysis	naly	sis
(4)		•			
(5)	:				
(9)					
BAA TEEA5003L 06/07/18		Schedu	Schedule R (Form 990) 2018	066 u	2018

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Schedule R (Form 990) 2018 Joel and Nina Taylor Foundation

Part VI Unrelated Organizations Taxable as a Partnership. Complete If the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Primary activity Legal of foreigned Primary activity Primary ac	(a)	(q)	(3)	(p)	(e)	(6)	(F)	0		(8)
Form 5 F	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are all partners section 501(c)(3)	Share of end-of-year assets	Dispropor- tionate allocations	amount in box		Percentage ownership
					Yes No		- ⊢	- 1	Yes	
	(I)						+		+	
	İ									
TECADOM 060718								-		
TEX-MODAL GROWING										
TEX-MODAL GROWING									-	
								-		
	(3)									
TEE-Stort 0607/18	 							_		
TERSOOUL 06/07/18										
TEEA5004, G607/18										
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	(9)							-		
. TEEA5004L 06/07/18										
. TEEA5004L 06/07/18										
	(8)									
TEEA5004L 06/07/18		•								
TEEA5004L 06/07/18									·	
	ВАА			TEE	3A5004L 06/07/18			1 Schedu	le R (Form 9	90) 2018

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Part VII | Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.