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

OMB No 1545-0047

Department of the Treasury

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

▶Go to www.irs.gov/Form990PF for instructions and the latest information. 

↓ Q 12 | Open to Public Insepections

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			and ending		T		<del></del>	
	me of fou				A Emplo	oyer identification number		
		RT L. & MARY MARGARET TAYLOR			77.1	0020501		
FOUNDATION  Number and street (or P O box number if mail is not delivered to street address)  Room/suite				<del></del>	- 0839501 hone number (see instruction:			
		CALDWELL	"	omsuite		1 - 3 3 6 - 9 0 9 9	5)	
		n, state or province, country, and ZIP-or foreign postal code		<u></u>			<del></del>	
С	ONW	AY AR 72034			C If exer	mption application is pending,	check here	<b>P</b>
G	Check a	all that apply Initial return Initial retu	rn of a former public cl	narity	D 1 Fo	reign organizations, check he	ere	<b>•</b>
		Final return Amended	return		2 Fo	reign organizations meeting t	he	
		Address change Name cha	ange		85	% test, check here and attach	computation	▶ [
Н (	Check t	type of organization X Section 501(c)(3) exempt private	e foundation	~ ^	E If priva	ate foundation status was tern	minated under	
			le private foundation	03	1	n 507(b)(1)(A), check here		<b>▶</b> _
		rket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	foundation is in a 60-month te	rmination	
		rear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	nere	>
	•	▶ \$ 1,967,964 (Part I, column (d), mus	t be on cash basis)					
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disburse for charit	
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books	(b) Net In		income	purpos	es
_	Т.					· · · · · · · · · · · · · · · · · · ·	(cash basis	only)
	1	Contributions, gifts, grants, etc., received (attach schedule)  Check   X  if the foundation is not required to attach Sch. B						
/	2	•					<b></b>	
ጓ	3 4	Interest on savings and temporary cash investments  Dividends and interest from securities	42,988		42,988	42,988		
,			1 12,300		12,500	12,500	<del> </del>	
	5a	Gross rents Net rental income or (loss)				<del></del>		
Ē	b	• • • • • • • • • • • • • • • • • • • •	19,132			***************************************	<b></b>	
en,	6a b	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a 491,971						
Revenue	7	Capital gain net income (from Part IV, line 2)		<u> </u>	19,132			
Œ	8	Net short-term capital gain				0		
	9	Income modifications				<u>-</u>		•••••
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						***************************************
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)					, , , , , , , , , , , , , , , , , , , ,	W 1111
	12	Total. Add lines 1 through 11	62,120		62,120	42,988		
S	13	Compensation of officers, directors, trustees, etc	0					
enses	14	Other employee salaries and wages				PEC	EIVED	
e	15	Pension plans, employee benefits				70		7있
×	16a	Legal fees (attach schedule) See Stmt 1	6,000			1-1-0-5	1 4 2020	8-0
- -	b	Accounting fees (attach schedule) Stmt 2	1,975			SEP SEP	1 4 2020	18
?}	С	Other professional fees (attach schedule) Stmt 3	15,310		15,310	O	1 1 -	75
>₽	17	Interest	1.405			<del></del>	<u>=N, U</u>	
Operating and Administrative Exp	18	Taxes (attach schedule) (see instructions) Stmt 4	1,135		1,135	1,135		
ΣΈ	19	Depreciation (attach schedule) and depletion						
₹₽	20	Occupancy		<del> </del> -				
ΣĞ	21	Travel, conferences, and meetings	25					<del></del>
a L	22	Printing and publications	25				<del></del>	
ğ	23	Other expenses (att sch)						
at )	24	Total operating and administrative expenses.	24,445		16,445	1,135		0
Se S	25	Add lines 13 through 23 Contributions, gifts, grants paid	88,040			2,233	8	8,040
ō	26	Total expenses and disbursements. Add lines 24 and 25	112,485		16,445	1,135		8,040
_	27	Subtract line 26 from line 12	112,103			,	<u>_</u>	
	a	Excess of revenue over expenses and disbursements	-50,365					
	b	Net investment income (if negative, enter -0-)			45,675	- <u></u>		.,
	آ ا	Adjusted net income (if negative, enter -0-)				41,853		

71-0839501 Form 990-PF (2019) ROBERT L. & MARY MARGARET TAYLOR Page 2 End of year Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Part II (b) Book Value (c) Fair Market Value (a) Book Value 1 Cash - non-interest-bearing 6,789 6,789 Savings and temporary cash investments 28,736 2 3 Accounts receivable-▶ Less allowance for doubtful accounts ▶ Pledges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (att schedule) 0 Less allowance for doubtful accounts ▶ 8 Inventories for sale or use Prepaid expenses and deferred charges 9 Investments – U S and state government obligations (attach schedule) Stmt 5 142,703 152,839 146,412 10a 1,392,579 See Stmt 6 1,350,419 1,491,413 b Investments - corporate stock (attach schedule) See Stmt 7 344,820 354,853 316,923 Investments - corporate bonds (attach schedule) C 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans 13 Investments - other (attach schedule) Land, buildings, and equipment basis 14 Less accumulated depreciation (attach sch.) Other assets (describe > ) 15 Total assets (to be completed by all filers - see the 16 1,908,838 1,858,473 1,967,964 instructions Also, see page 1, item l) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 20 Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe ) 0 0 Total liabilities (add lines 17 through 22) 23 Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Balances Net assets without donor restrictions 24 25 Net assets with donor restrictions X Foundations that do not follow FASB ASC 958, check here Net Assets or Fund and complete lines 28 through 30. 26 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund 27 1,858,473 1,908,838 28 Retained earnings, accumulated income, endowment, or other funds 1,908,838 1,858,473 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see 1,858,473 1,908,838 Analysis of Changes in Net Assets or Fund Balances Part III 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with 1,908,838 end-of-year figure reported on prior year's return) 2 -50,365 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) ▶

> 1,858,473 Form 990-PF (2019)

1,858,473

4

5

6

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

	L. & MARY MARGARET nd Losses for Tax on Investm		71-0839501		Page 3
(a) List and describe	the kind(s) of property sold (for example, real estate		(b) How acquired	(c) Date acquired	(d) Date sold
2-story brick wa	arehouse, or common stock, 200 shs MLC Co )		P – Purchase D – Donation	(mo , day, yr )	(mo , day, yr )
1a PUBLICALLY TRAD		<u> </u>	P -		
b PUBLICALLY TRAD	<del></del>		P		
c LONG TERM CAPIT	AL GAIN DISTR		<del> </del>	<del>-</del>	
_d			<del> </del>		<del></del>
е		(-) ()		<i>(</i> E.)	2
(e) Gross sales príce	(f) Depreciation allowed (or allowable)		r other basis ense of sale		Gain or (loss) us (f) minus (g))
a 61,053		<del>                                     </del>	71,397		-10,344
ь 389,962			401,442		-11,480
c 40,956					40,956
d			<u>.</u>		
е					
Complete only for assets showing	g gain in column (h) and owned by the	foundation on 12/31/	69	(I) Gains (	(Col (h) gain minus
(1) FAM an of 10/21/60	(j) Adjusted basis	(k) Exce	ss of col (ı)	col (k), but	not less than -0-) or
(ı) FMV as of 12/31/69	as of 12/31/69	over co	l (j), if any	Losse	s (from col (h))
а					-10,344
b			.,,,,,		-11,480
С					40,956
d		-			
е		<u> </u>		•	
2 Capital gain net income or (net c	apital loss) If gain, also enter in				10 120
, ,	If (loss), enter -0- in	_		2	19,132
· · · · · · · · · · · · · · · · · · ·	ss) as defined in sections 1222(5) and (		•		
	, column (c) See instructions. If (loss),	enter -0- in		3	
Part I, line 8	nder Section 4940(e) for Redu	and Tay on Not	Investment Inco		
<del></del>				1116	<del></del> .
•	e foundations subject to the section 494	o(a) tax on het inves	tment income )		
If section 4940(d)(2) applies, leave the	iis part blank				N/A
Was the foundation liable for the sec	tion 4942 tax on the distributable amou	nt of any year in the	base period?		☐ Yes ☐ No
	y under section 4940(e) Do not comple				
1 Enter the appropriate amount in	each column for each year, see the inst	tructions before maki	ing any entries		
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginning in	. Adjusted qualifying distribution	s Net valu	e of noncharitable-use asset		Distribution ratio (b) divided by col (c))
2018					
2017					
2016					
2015					
2014					
2 Total of line 1, column (d)				2	
<del>_</del>	5-year base period – divide the total on	•		1 1	
the number of years the foundati	on has been in existence if less than 5	years		3	<del></del>
		_			
4 Enter the net value of noncharita	ble-use assets for 2019 from Part X, lin	e 5		4	
				_	
5 Multiply line 4 by line 3				5	
	(40) (50 ) (10 ) (27)				
6 Enter 1% of net investment incor	ne (1% οτ Paπ I, line 2/b)			6	
				,	
7 Add lines 5 and 6				7	<del></del>
O Fata analyting distribution for	- Dod VII line 4			8	
8 Enter qualifying distributions from	n Part XII, line 4 n line 7, check the box in Part VI, line 1	h and complete that	nartusing a 10% toy r		
·	i ilie 7, check the box in Part VI, ilie 1	o, and complete that	. part using a 170 tax f	ate decille	
Part VI instructions					Form 990-PF (2019
					12010

Form	990-PF (2019) ROBERT L. & MARY MARGARET TAYLOR 71-0839501	• •	4.0		age 4
Pa	ਜੇ ਨਾਂ Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – sec	<u>e inst</u>	ructi	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here <b>X</b> and enter "N/A" on line 1				
	Date of ruling or determination letter 03/06/01 (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check N/A				
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				<del></del> 0
6	Credits/Payments		4		
а	2019 estimated tax payments and 2018 overpayment credited to 2019				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)  6c				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	[			
	instructions for the definition	l	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				-
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		<u> </u>
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	[			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ļ	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T		1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or		1		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>				
	conflict with the state law remain in the governing instrument?	-	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	-	7	_X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions <b>AR</b>				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	Į	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1	-
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes,"				
	complete Part XIV		. 9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				_
	names and addresses		10		<u> </u>
		Fc	orm <b>99</b>	0-PF	(2019)

Statements Regarding Activities (continued) Part VII-A Yes No At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the 11 meaning of section 512(b)(13)? If "Yes," attach schedule See instructions Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 12 X person had advisory privileges? If "Yes," attach statement. See instructions 12 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no ▶ 501-336-9099 EDGAR J TYLER 14 The books are in care of 1511 CALDWELL ZIP+4 ▶ 72034 AR Located at R CONWAY Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority Х over a bank, securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a Yes Nο disqualified person? No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? No (5) Transfer any income or assets to a disqualified person (or make any of either available for X No the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after X No termination of government service, if terminating within 90 days ) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in X. Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1b Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A 1c were not corrected before the first day of the tax year beginning in 2019? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private 2 operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines X No Yes 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years ▶ .20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to N/A 2b all years listed, answer "No" and attach statement - see instructions ) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here , 20 . 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No at any time during the year? Yes If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the N/A 3b foundation had excess business holdings in 2019) X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its X charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? Form 990-PF (2019)

77-77		& MARY MARGARET TA		0839501	(	=	P	age 6
		arding Activities for Which Fo	rm 4/20 May Be F	Requirea (con	tinuea)			
5a	, , ,	· •		<u></u>	(a)		Yes	No
		ise attempt to influence legislation (sec	` ''		Yes X No			
		ecific public election (see section 4955	), or to carry on,	L	🕶			
	directly or indirectly, any voter re	•		<b>=</b>	Yes X No			
	- · ·	for travel, study, or other similar purpos			Yes X No			
		on other than a charitable, etc , organiz	ation described in	L-7	-			
	section 4945(d)(4)(A)? See instr				Yes X No			
	(5) Provide for any purpose other th	nan religious, charitable, scientific, litera	iry, or educational		<b>E</b>			
	purposes, or for the prevention of	of cruelty to children or animals?			Yes X No			
b	If any answer is "Yes" to 5a(1)-(5), o	did any of the transactions fail to qualify	under the exceptions of	described				
		a current notice regarding disaster ass		ns	N/A	5b	,	
	Organizations relying on a current ne	otice regarding disaster assistance, ch	eck here		▶ ∐			
С	If the answer is "Yes" to question 5a	(4), does the foundation claim exempti	on from the tax	. —				
	because it maintained expenditure re	esponsibility for the grant?		N/A	Yes No			
	If "Yes," attach the statement require	ed by Regulations section 53 4945–5(d	)					
6a	Did the foundation, during the year,	receive any funds, directly or indirectly,	to pay premiums		_			
	on a personal benefit contract?				Yes X No			
b	Did the foundation, during the year,	pay premiums, directly or indirectly, on	a personal benefit cont	ract?		6b		X
	If "Yes" to 6b, file Form 8870			_				
7a	At any time during the tax year, was	the foundation a party to a prohibited t	ax shelter transaction?	□ ,	Yes X No			
þ	If "Yes," did the foundation receive a	iny proceeds or have any net income a	ttributable to the transac	ction?	N/A	7b		
8	Is the foundation subject to the secti	on 4960 tax on payment(s) of more tha	ın \$1,000,000 ın					
	remuneration or excess parachute p				Yes X No			
Pa	art VIII Information About	Officers, Directors, Trustees	, Foundation Man	agers, Highly	Paid Employe	ees,		
	and Contractors							
1 1	ist all officers, directors, trustees,	and foundation managers and their	compensation. See in	structions.				
			(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name	and address	hausa aasuusalu	(If not noted	employee benefit		pense ac	Count.
		and address	hours per week	(If not paid,	plans and deferred		r allowar	
	<del></del>		devoted to position	enter -0-)				
CI	IFF GARRISON	CONWAY			plans and deferred			
	JIFF GARRISON		devoted to position		plans and deferred compensation			
20		CONWAY	devoted to position	enter -0-)	plans and deferred compensation			nces
20 EI	003 BERRY PLACE	CONWAY AR 72032	devoted to position DIRECTOR 1.00	enter -0-)	plans and deferred compensation			o o
20 EI	03 BERRY PLACE	CONWAY AR 72032 CONWAY	DIRECTOR  1.00  DIRECTOR	enter -0-) 0	plans and deferred compensation			o o
20 EI 15 MA	03 BERRY PLACE GAR J TYLER 11 CALDWELL STREET	CONWAY AR 72032 CONWAY AR 72034	DIRECTOR 1.00 DIRECTOR 2.50	enter -0-) 0	plans and deferred compensation  0	othe		o o
20 EI 15 MA	OGAR J TYLER CALDWELL STREET ATT MALLET	CONWAY AR 72032 CONWAY AR 72034 CONWAY	DIRECTOR 1.00 DIRECTOR 2.50 DIRECTOR	enter -0-)	plans and deferred compensation  0	othe		
20 EI 15 MA	OGAR J TYLER CALDWELL STREET ATT MALLET	CONWAY AR 72032 CONWAY AR 72034 CONWAY	DIRECTOR 1.00 DIRECTOR 2.50 DIRECTOR	enter -0-)	plans and deferred compensation  0	othe		
20 EI 15 MA	OGAR J TYLER  GIL CALDWELL STREET  ATT MALLET  OLS WESTOVER  Compensation of five highest-page	CONWAY AR 72032 CONWAY AR 72034 CONWAY	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50	enter -0-) 0	plans and deferred compensation  0	othe		
20 EI 15 MA	003 BERRY PLACE  GAR J TYLER  611 CALDWELL STREET  ATT MALLET  015 WESTOVER	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50	enter -0-) 0	plans and deferred compensation  0	othe		
20 EI 15 MA	OGAR J TYLER COLORD TYLER COLOR	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  ce, enter	(e) Exp	pense ac	O O Count,
20 EI 15 MA	OGAR J TYLER  GIL CALDWELL STREET  ATT MALLET  OLS WESTOVER  Compensation of five highest-page	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins	enter -0-) 0	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  ce, enter	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER COLORD TYLER COLOR	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 M2 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 MA 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 EI 15 MA 30	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72032 CONWAY AR 72034 CONWAY AR 72032  d employees (other than those include	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,
20 ET 15 MP 30 2	OGAR J TYLER  COMPENSATION OF FIVE HIGHEST-PARK  COMPENSATION OF FIVE HIGHEST-PARK  (a) Name and address of each employer	CONWAY AR 72034 CONWAY AR 72032  d employees (other than those included by the paid more than \$50,000	devoted to position  DIRECTOR  1.00  DIRECTOR  2.50  DIRECTOR  2.50  ded on line 1 - see ins  (b) Title, and average hours per week	enter -0-) 0 0 tructions). If non	plans and deferred compensation  0  0  0  c, enter  (d) Contributions to employee benefit plans and deferred	(e) Exp	pense ac	O O Count,

Form 990-PF (2019) ROBERT L. & MARY MARGARET TAYLOR 71-0839501		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	i Emplo	yees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."		
	<del></del>	(c) Compensation
(a) Name and address of each person paid more than \$50,000 (b) Type of service  NONE		(c) comparisation
NONE		
Table and a stable as a second a super CEO 000 for professional population		···
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 CATHOLIC RELIGIOUS EDUCATION, YOUTH ACTIVITIES, HISPANIC		
MINISTRY, TRAINING PROGRAMS, AND RETREATS		
		33,472
2 METHODIST YOUTH, COLLEGE, & CHILDREN'S RELIGIOUS		
EDUCATION, EVANGELISM & MISSION		
		30,056
3 CARE FOR THE POOR- HEALTH, FOOD, EMERGENCY RELIEF		
		13,125
4 METHODIST MINISTRY AND WORSHIP SUPPORT, EDUCATION, AND		13,123
EVANGELISM		
		11,339
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions	<del></del>	
3		
	1	
Total. Add lines 1 through 3	<b>&gt;</b>	

Form 990-PF (2019)

88,040

88,040

3a

3b

4

purposes

3

5

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b See instructions

Cash distribution test (attach the required schedule)

	990-PF (2019) ROBERT L. & MARY MARGAF		71-08395	01	Page 9
Pa	It XIII Undistributed Income (see instructions)				/
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
2	line 7			<i></i>	
2	Undistributed income, if any, as of the end of 2019  Enter amount for 2018 only				
	Total for prior years 20 , 20 , 20			<del></del>	
3	Excess distributions carryover, if any, to 2019			<i></i>	
	From 2014			1	
	From 2015			1	
	From 2016			V	
	From 2017		1		
	From 2018		1		
f	Total of lines 3a through e		1		
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$88,040		1		
а	Applied to 2018, but not more than line 2a		1		
b	Applied to undistributed income of prior years		/		
	(Election required – see instructions)		/		
C	Treated as distributions out of corpus (Election		Ĵ		
	required – see instructions)		<i></i>		
d	Applied to 2019 distributable amount		<i></i>		
е	Remaining amount distributed out of corpus	88,040	1		
5	Excess distributions carryover applied to 2019		,		
	(If an amount appears in column (d), the same			+	
_	amount must be shown in column (a) )				
6	Enter the net total of each column as				
_	indicated below:	88,040			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,010			
D	Prior years' undistributed income Subtract line 4b from line 2b	1			
_	Enter the amount of prior years' undistributed	<i>j</i>	·············		
·	income for which a notice of deficiency has	1			
	been issued, or on which the section 4942(a)	1			
	tax has been previously assessed	1			
d	Subtract line 6c from line 6b Taxable	7			
	amount - see instructions	<i>f</i>			
е	Undistributed income for 2018 Subtract line	<b>F</b>			
	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2020				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)				,
8	Excess distributions carryover from 2014 not				
٥	applied on line 5 or line 7 (see instructions)	<del>-</del>			
9	Excess distributions carryover to 2020.  Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
a	Excess from 2015				
a b	Excess from 2016	ı	, ,		, ,- ,-, ,-
c	Excess from 2017				
d	Excess from 2018				
e	Excess from 2019				
					Form 990-PF (2019)

DAA

Private Operating Foundations (see instructions and Part VII-A, question 9) **Part XIV** If the foundation has received a ruling or determination letter that it is a private operating N/A foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(1)(5) Check box to indicate whether the foundation is a private operating foundation described in section X 4942(i)(3) or Prior 3 years Tax year 2a Enter the lesser of the adjusted net (e) Total (a) 2019 (b) 2018 (c) 2017 (d) 2016 income from Part I or the minimum investment return from Part X for 41,719 27,873 13,118 124,563 each year listed 41,853 35,461 23,692 11,150 35,575 105,878 85% of line 2a Qualifying distributions from Part XII, 88,040 103,000 94,734 93,940 379,714 line 4, for each year listed Amounts included in line 2c not used directly for active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities 88,040 103,000 94,734 93,940 379,714 Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test - enter 2/3 of minimum investment return shown in 64,948 57,857 Part X. line 6, for each year listed 66,443 62,413 251,661 "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at Part XV any time during the year - see instructions.) Information Regarding Foundation Managers: List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions The name, address, and telephone number or email address of the person to whom applications should be addressed N/A The form in which applications should be submitted and information and materials they should include N/A Any submission deadlines Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors N/A Form 990-PF (2019)

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FIRST UNITED METHODIST CHURCH 1610 PRINCE STREET CONWAY AR 72034 PROGRAMS SUBMITTED BY CHURCH 44,020 ST. JOSEPH CATHOLIC CHURCH 1115 COLLEGE AVENUE CONWAY AR 72032 PROGRAMS SUBMITTED BY CHURCH 44,020 ▶ 3a 88,040 Total **b** Approved for future payment N/A ▶ 3b Total

Enter gross amounts unless otherwise indicated

**Analysis of Income-Producing Activities** 

Unrelated business income

Excluded by section 512, 513, or 514

(e)

		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program se	rvice revenue			code		(See instructions )
-						
_						
						,
f						
g Fees ar	nd contracts from government agencies				_	
_	dues and assessments					
,	savings and temporary cash investments					
	nd interest from securities			14	42,988	
5 Net rental in	icome or (loss) from real estate	,	,		1	r "doll l a r' barda l
	anced property		1			
	t-financed property					•
	ncome or (loss) from personal property					
7 Other invest	tment income					
8 Gain or (los	s) from sales of assets other than inventory			18	19,132	
	or (loss) from special events					
	or (loss) from sales of inventory					
11 Other reven	ue a					
_						
e						
12 Subtotal Ad	dd columns (b), (d), and (e)			0	62,120	0
13 Total. Add i	ine 12, columns (b), (d), and (e)	•			13	62,120
	in line 13 instructions to verify calculations)					
Part XVI-B						
Line No. ▼	Explain below how each activity for which incon accomplishment of the foundation's exempt pur					ns )
N/A	accomplishment of the realization of exempt par	pood (dillo: tildill	, p		(000	
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Form 990-PF (2019) ROBERT L. & MARY MARGARET TAYLOR

Part XVII	Information Regarding Organizations	g Transfers To and	d Transactio	ns and Relationships W	ith Noncharitable Ex	emp	t
1 Did the or	ganization directly or indirectly e	engage in any of the follo	owing with any o	other organization described		Yes	No
	501(c) (other than section 501(						
organizati		o,(o, o.gaea.ono, o	, , , , , , , , , , , , , , , , , , , ,	g to pomice.			
-	from the reporting foundation to	o a noncharitable exemp	t organization o	f		'	
(1) Cash		·	Ü		1a(1)		X
(2) Other	assets				1a(2)		Х
b Other tran							
(1) Sales	of assets to a noncharitable ex	empt organization			1b(1)		Х
(2) Purch	ases of assets from a noncharit	table exempt organization	on		1b(2)		X
(3) Renta	al of facilities, equipment, or othe	er assets			1b(3)		Х
(4) Reiml	bursement arrangements				1b(4)		X
(5) Loans	s or loan guarantees				1b(5)	<u> </u>	X
(6) Perfo	rmance of services or members	hip or fundraising solicit	ations		1b(6)	<u> </u>	X
c Sharing o	f facilities, equipment, mailing li	sts, other assets, or paid	d employees		1c		X
d If the ans	wer to any of the above is "Yes,"	" complete the following	schedule Colu	mn (b) should always show the f	air market		
	<del>-</del>	- · ·	=	the foundation received less tha			
value in a	1			the goods, other assets, or serv			
(a) Line no	(b) Amount involved (c	c) Name of noncharitable exemp	ot organization	(d) Description of transfers, to	ransactions, and sharing arrangeme	ants	
<u>N/A</u>		<del></del>					
				-			
	<u> </u>				<del></del>		
	-						
	-						
· · · · · · · · · · · · · · · · · · ·	<del>-  </del>				·		
					<del></del>		
		<del></del>			····		
		•					
_							
2a Is the fou	ndation directly or indirectly affili	iated with, or related to,	one or more tax	-exempt organizations			
described	I in section 501(c) (other than se	ection 501(c)(3)) or in se	ction 527?		<u></u>	es X	No
b If "Yes," c	complete the following schedule						
	(a) Name of organization	(b) Type of or	rganization	(c) Descri	ption of relationship		
<u>N/A</u>					· · · · · · · · · · · · · · · · · · ·		
					<del> </del>		
				<del></del>			
Linder	nenalties of negury I declare that I have	evamined this return, including	accompanying sch	edules and statements, and to the best of	my knowledge and belief, it is true	a.	
correct	, and complete Declaration of preparer (	(other than taxpayer) is based	on all information of	which preparer has any knowledge	May the IRS discuss this n		
Cimm		Λ			with the preparer shown b		
Sign	d 1 1	///			See instructions	Yes	Nο
Here	100 d	.//	19	-8-20 DIRE	ECTOR		
, <u>s</u>	ignative of officer or troutes	<u> </u>	Date	Title	301010		
1 7 1 1 3	Tues eroperado porto	Т	Prepared stands		Date	Ī	
Print	/Type preparer's name		Preparer's signatu	11/1		Check self-em	
Paid Deb	orah B. Turner		Leg	Mu	9/1/2020		p.0,00
Preparer -		eswell PLLC			PTIN P00292	273€	
Use Only	s address > 811 Park				Firm's EIN ▶ 46 - 395		
-   -	Conway,				Phone no 501-32		
	302				Form 95		

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# TAYLORFOUND ROBERT L. & MARY MARGARET TAYLOR 71-0839501

FYE: 12/31/2019 71-0839501

Statement 1 - Form 990-PF. Part I. Line 16a - Legal Fees		
•	Fees	
•	Legal	
•	- 16a -	
•	L Line	
•	Part	
•	90-PF	֡
•	orm 9	
Statemen	•	
	Statemen	

Charitable Purpose	v.	w
Adjusted Net	φ.	\$
Net Investment		0
Inve	₩	w
Total	6,000	6,000
	တ	ļ
Description	Legal research & admistration	Total

### Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	δ	\$
Adjusted Net	w.	8
Net Investment	w	ν <sub>0</sub>
Total	\$ 1,975	\$ 1,975
Description	Tax form preparation	Total

### Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description		Total	드	Net Investment	Adjusted	Charitable Purpose
lanagement rees nvestment sales fees	ሌ <u>-</u>	15,310	<b>ን</b> ጉ	15,310	<sub>የ</sub> ጉ	Λ·
	₩.	15,310	ŵ	15,310	\$	\$

### Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	\$	٥ •
Adjusted Net	1,135	1,135
₹	ۍ.	ςς.
Net Investment	1,135	1,135
, cl	တ	w
Total	1,135	1,135
	₩	w
Description	Foreign tax paid	Total

# TAYLORFOUND ROBERT L. & MARY MARGARET TAYLOR 71-0839501

71-0839501

FYE: 12/31/2019

Statement 5 - Form 990-PF, Part II, Line 10a - US and State Government Investments		
- Form 990-PF, Part II, Line 10a - US and St	Government Investments	
- Form 990-PF, Part II, Line 10a - US an	State	
- Form 990-PF, Part II, Line 10a -	JS and	
- Form 990-PF, Part II,	10a - L	
- Form 990-PF, Part	Line	
- Form 990-P	Part II	
Statement 5 -	Form 990-PF.	
	Statement 5 -	

Fair Market Value	\$ 152,839	\$ 152,839
Basis of Valuation	Cost	
End of Year	146,412	146,412
Beginning of Year	\$ 142,703	\$ 142,703
Description	FIDELITY GNMA FUN	Total

# Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

	ш	Beainnina		End of	Basis of	Fair Market
Description		of Year		Year	Valuation	Value
AMERCAN CENTURY INTL CORE EQUITY IN	₩.	, 18	₩		Cost	₹.
AMERICAN FUNDS NEW WORLD F1		9,76		104,013	Cost	119,254
COHEN & STEERS REALTY SHARES		7		, 55	Cost	0
CREDIT SUISSE COMMODITY RETURN STRAT		,08		75,062	Cost	
DWS MID CAP VALUE		9,64			Cost	
BNY MELLON MID CAP INDEX INV		1,75		5,50	Cost	9
BNY MELLON SMALL CAP STOCK IDX		, 56		, 63	Cost	3,51
FIDELITY ADVISOR NEW INSIGHTS CL A		1,84		89,502	Cost	24,10
FIDELITY 500 INDEX INVESTOR		1,24		2,30	Cost	2,02
FIDELITY EMERGIN MKT INDEX		, 32		0,01	Cost	7
FIDELITY EXT MKT INDEX PREMIUM		,40		2,48	Cost	9,95
FIDELITY INTERNATIONAL CAPITAL APPRE				Ц	Cost	127,388
FIDELITY INTERNATIONAL INDEX		194,699		0,98	Cost	, 60
FIDELITY LARGE CAP VALUE ENHANCED IN				45,75	Cost	58,33
HARDING LOEVNER EMERGING MARKETS ADV		20,199		6,21	Cost	3,32
HARTFORD DIVIDEND AND GROWTH				, 23	Cost	8,47
NUVEEN REAL ESTATE SEC CL A		4,05		9,61	Cost	2,53
INVESTCO OPPENHEIMER DEV MARKETS A		9,94		0,52	Cost	7,95
PRINCIPAL HIGH YIELD INST		,76		74,111	Cost	5,5
VIRTUS CERE LARGE CAP VALUE EQUITY A		6,9			Cost	
VIRTUS EMERGING MARKETS OPPORTUNITIE		49,231			Cost	
MFS MID CAP VALUE I				25,779	Cost	26,833
Total	ω	1,392,579	₩.	1,350,419		\$ 1,491,413

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# TAYLORFOUND ROBERT L. & MARY MARGARET TAYLOR 71-0839501

71-0839501 FYE: 12/31/2019

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Description		Beginning of Year		End of Year	Basis of Valuation	<b>"</b>	Fair Market Value
BYN MELLON INTERNATIONAL BOND I LOOMIS SAYLES GLOBAL BOND RETAIL	₩	115,681 30,178	₩	115,681 30,443	Cost	₩	107,569
INVESCO OPPENHEIMER INTNTL BOND A TEMPLETON GLOBAL BOND A		71,267 127,694		74,497	Cost Cost		67,446 110,396
Total	က ျ	344,820	ψ.	354,853		ూ	316,923