

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

			and ending	ala a se e s	_ 	Final action			
G (ineck a		turn of a former public		e change	Final return			
Name of foundation Amended return Address change Name						A Employer identification number 30 - 6137723			
С	elia	a and Marcos Family Institute	•		B Telep	hone number (see page 16	of the instructions)		
Nu	mber an	nd street (or P O box number if mail is not delivered to street address	s) R	oom/suite	40	4-303-0645			
_6	244	Riverside Drive, NW			C If exe	mption application is pend	ing, check here		
	•	n, state, and ZIP code			D 1. Fo	oreign organizations, check	here 🕨 📗		
		y Springs GA 30328			2. Fo	oreign organizations meetir	ng the		
$\overline{}$		ype of organization X Section 501(c)(3) exempt private	foundation		85	5% test, check here and att	ach computation 🕨 📗		
	Section		le private foundation		4 '	rate foundation status was			
		ket value of all assets at J Accounting method	X Cash Acc	rual	section	on 507(b)(1)(A), check here			
	-	ear (from Part II, col. (c), Uther (specify)				foundation is in a 60-mont	- 1 1		
	ne 16) l	· · · · · · · · · · · · · · · · · · ·		Γ	unde	r section 507(b)(1)(B), che			
	art f	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for chantable		
		the amounts in column (a) (see page 11 of the instructions))	books	1 ''	ome	income	purposes		
	1	Contributions, gifts, grants, etc , received (attach schedule)	230,000				(cash basis only)		
	2	Check ► If the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments				i			
	4	Dividends and interest from securities							
Revenue	5a	Gross rents							
	ь	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on line 10							
Š	b	Gross sales pnce for all assets on line 6a	<u> </u>						
ď	7	Capital gain net income (from Part IV, line 2)			0				
	8	Net short-term capital gain				0			
	9	Income modifications							
	10a	Gross sales less returns & allowances	<u> </u>						
	b	Less: Cost of goods sold			······································				
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)		<u> </u>					
	12	Total. Add lines 1 through 11	230,000		0	0			
	13	Compensation of officers, directors, trustees, etc.	0						
penses	14	Other employee salaries and wages							
ens	15	Pension plans, employee benefits			•				
×	16a	Legal fees (attach schedule)							
ω	b	Accounting fees (attach schedule)		ļ					
Ę	C	Other professional fees (attach schedule)		<u> </u>			···.		
tra	17	Interest .		 					
nis.	18	Taxes (attach schedule) (see page 14 of the instructions)		ļ					
ΞĒ	19	Depreciation (attach schedule) and depletion		 					
1) % 4.914 and Administrative	20	Occupancy		+					
<u>عن.</u>	21 22	Travel, conferences, and meetings Printing and publications		+			-:-		
~ē		Other expenses (att. sch.) Stmt 1	6,726	;					
<u>_</u> g,	124	Total operating and administrative expenses.	1 7,720	 					
可能	23 24 25 26 27	Add lines 13 through 23	6,726	;	0	o	0		
<u> 26</u>	25	Contributions, gifts, grants paid	236,890				236,890		
70	26	Total expenses and disbursements. Add lines 24 and 25	243,616	***************************************	0	0	236,890		
5	4 7	Subtract line 26 from line 12:							
3		Excess of revenue over expenses and disbursements	-13,616	<u> </u>					
Ű	b	Net investment income (if negative, enter -0-)		ļ	0				
_	c	Adjusted net income (if negative, enter -0-)	<u>[</u>	l		0			
-	_	1 D 1 41 - A - A - A - A - A - A - A - A - A -					5 QQQ DE (0040)		

	0-PF (2010) Celia and Marcos Family Institute Attached schedules and amounts in the description column	Beginning of year	End	Page 2 of year
Part	Ratance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	85,638	72,022	72,022
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
	Less: allowance for doubtful accounts			
4	Pledges receivable ▶			
	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see page 15 of the			
	instructions)			
7	Other notes and loans receivable (att. schedule)		··· , · · · · · · · · · · · · · · · · ·	
	Less: allowance for doubtful accounts ▶ 0			
2 8	Inventories for sale or use			
8 9 10a	Prepaid expenses and deferred charges			
) 10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)			
c	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis			
''	Less accumulated depreciation (attach sch.)	İ		
12	Investments—mortgage loans			· · · · · · · · · · · · · · · · · · ·
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis			
'	Less accumulated depreciation (attach sch.)	1		
15	Other assets (describe ►			
16	Total assets (to be completed by all filers—see the			
"	instructions Also, see page 1, item I)	85,638	72,022	72,02
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			1
19 20 21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe ►)		· · · · · · · · · · · · · · · · · · ·	
23	Total liabilities (add lines 17 through 22)	o	C	<u> </u>
25	Foundations that follow SFAS 117, check here	1		1
م	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted	85,638	72,022	,
25	Temporarily restricted	03,030	72,022	4
26	Permanently restricted			1
24 25 26 27 28 29 30	Foundations that do not follow SFAS 117, check here ▶	 		-
5	and complete lines 27 through 31.			
-	-			
5 27	Capital stock, trust principal, or current funds			+
28	Paid-in or capital surplus, or land, bldg., and equipment fund			-
29	Retained earnings, accumulated income, endowment, or other funds		<u> </u>	-
30	Total net assets or fund balances (see page 17 of the			-[
	instructions)	85,638	72,022	4
31	Total liabilities and net assets/fund balances (see page 17	05 634	E0 000	
P	of the instructions)	85,638	72,022	4
Part			<u> </u>	
	al net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with		5- 5-
	of-year figure reported on prior year's return)		1	85,638
	er amount from Part I, line 27a		2	-13,61
2 Oth	er increases not included in line 2 (itemize)		1 2	Ī

Form **990-PF** (2010)

72,022

72,022

4 Add lines 1, 2, and 3

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 30

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

7

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18.

orm	990-PF(2010) Celia and Marcos Family Institute 30-6137723		Pa	ge 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			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-			0
6	Credits/Payments·			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c			
d	Backup withholding erroneously withheld			
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 8			
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 2011 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities	т -		
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> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities	1		
C	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1 1		
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	,,	<u>X</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	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		7.
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1 1		
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1 .	v	
	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 page 19 of the			
	instructions) ► GA			
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	\vdash
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			•
	27)? If "Yes," complete Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			x
	names and addresses	10 om 99	O-DE	
		VIIII 33	J-1 1	IZVIU)

orm	990-PF(2010) Celia and Ma	rcos Family Instit	ute 30-6	137723			<u>Р</u> а	age 6
Pa	rt VII-B Statements Regardii	ng Activities for Which Forn	n 4720 May Be Re	<mark>equired</mark> (conti	nued)			
5a	During the year did the foundation pay or	incur any amount to						
	(1) Carry on propaganda, or otherwise at	tempt to influence legislation (section	n 4945(e))?		res 🗓 No	1	.]	
	(2) Influence the outcome of any specific	public election (see section 4955), o	or to carry on,					
	directly or indirectly, any voter registra	ation drive?			res 🛚 X No			ĺ
	(3) Provide a grant to an individual for tra	ivel, study, or other similar purposes	?		res 🛚 X No			
	(4) Provide a grant to an organization oth	er than a chantable, etc., organization	on described in					
	section 509(a)(1), (2), or (3), or section	n 4940(d)(2)? (see page 22 of the in	structions)		res 🛚 X No]	ĺ
	(5) Provide for any purpose other than re	ligious, charitable, scientific, literary,	or educational		_			ĺ
	purposes, or for the prevention of cru	elty to children or animals?		\Box ,	res X No		.	
b	If any answer is "Yes" to 5a(1)-(5), did an	y of the transactions fail to qualify ur	nder the exceptions de	scribed in			.	ĺ
	Regulations section 53.4945 or in a curre				N/A	5b		
	Organizations relying on a current notice	regarding disaster assistance check	here		▶ []			
С	If the answer is "Yes" to question 5a(4), d	oes the foundation claim exemption	from the tax					
	because it maintained expenditure respoi	nsibility for the grant?		N/A 🗌 🔻	res No			
	If "Yes," attach the statement required by	Regulations section 53.4945-5(d).						
6a	Did the foundation, during the year, received	= ::	pay premiums					İ
	on a personal benefit contract?	•			res X No			ĺ
b	Did the foundation, during the year, pay p	remiums, directly or indirectly, on a c	personal benefit contra			6ь	ĺ	х
-	If "Yes" to 6b. file Form 8870							
7a	At any time during the tax year, was the fo	oundation a party to a prohibited tax:	shelter transaction?	Π,	res X No			
b	If Yes, did the foundation receive any pro	, , ,			N/A	7b	ĺ	
		icers, Directors, Trustees, F			Paid Employe	 es,		
	and Contractors				- •	-		
1 i	ist all officers, directors, trustees, found	lation managers and their compen	sation (see page 22 o	of the instructions	s).			
			(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name and a	ddress	hours per week	(If not paid, enter	employee benefit plans and deferred		pense ac r allowar	
			devoted to position	-0-)	compensation	0.0.1		
Ni	colette Reim Maus	Sandy Springs	Co-Trustee					
_62	44 Riverside Drive, NW	GA 30328	5.00	0	0			0
Te	odoro Maus	Sandy Springs	Co-Trustee			ļ		
62	44 Riverside Drive, NW	GA 30328	5.00	0	0			0
						İ		
						L		
					<u> </u>			
2	Compensation of five highest-paid emp	loyees (other than those included	on line 1 — see page	23 of the instruc	tions).			
	If none, enter "NONE."							
			(b) Title, and average		(d) Contributions to employee benefit	(a) Ev	pense ac	ecount
	(a) Name and address of each employ	ee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowar	
			devoted to position		compensation	ــــــ		
NC	NE .							
			_	-	-	 		
		•						
			 	 	<u> </u>	<u> </u>		
				<u> </u>		 		
				-		<u> </u>		
				 	<u> </u>	<u> </u>		
	land the second	200		l	L.	<u> </u>		
ota	number of other employees paid over \$50),000			·	<u> </u>		<u> </u>
					Fo	m 99	υ-PF	(2010)

Form 990-PF (20	010) Celia and Marcos Family Institute	30-6137723	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emp	oloyees,
3 Five highe	st-paid independent contractors for professional services (see page 23 of the	e instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	·	•	
Total number of	others receiving over \$50,000 for professional services		▶ 0
Part IX-A	Summary of Direct Charitable Activities		
List the foundatio organizations and	n's four largest direct charitable activities during the tax year. Include relevant statistical informat I other beneficianes served, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 N/A			
2			
3 .	••	.	-
4			
Part IX-B	Summary of Program-Related Investments (see page 24 of	f the instructions)	
	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 page 24 of the instructions		
3			
	·		
Total. Add lines	1 through 3	>	

Form **990-PF** (2010)

orm 990-PF (2010) Celia and Marcos Family Institute 30-6137723		Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fo	oundations,
see page 24 of the instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
purposes:	F 1	
a Average monthly fair market value of securities	1a	0
b Average of monthly cash balances	1b	0
c Fair market value of all other assets (see page 25 of the instructions)	1c	0
d Total (add lines 1a, b, and c)	1d	0
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	1 1	
Acquisition indebtedness applicable to line 1 assets .	2	0
3 Subtract line 2 from line 1d	3	0
Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
the instructions)	4	0
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6 Minimum investment return. Enter 5% of line 5	6	0
Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	9
foundations and certain foreign organizations check here and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2010 from Part VI, line 5	1 1	
b Income tax for 2010 (This does not include the tax from Part VI)	. 1	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see page 25 of the instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		_
line 1	7	0
Part XII Qualifying Distributions (see page 25 of the instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	4.	236,890
b Program-related investments—total from Part IX-B	1a 1b	230,030
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	236,890
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	┝ <u>┸</u> ┥	230,030
Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	n
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	236,890
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundat	-	200,000
qualifies for the section 4940(e) reduction of tax in those years.		
The state of the s		Form 990-PF (2010)

	990-PF(2010) Celia and Marcos Family		30-61377	23	Page 9
P	urt XIII Undistributed Income (see page 26 of	the instructions)			
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
_	line 7				0
2	Undistributed income, if any, as of the end of 2010:				
	Enter amount for 2009 only	-			
	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2010.				
	From 2005				
	From 2006				
_	From 2007				
_	From 2008				
e	From 2009 20,621				
f	Total of lines 3a through e	20,621			·····
4	Qualifying distributions for 2010 from Part XII,				
	line 4· ▶ \$ 236,890			ļ l	
а	Applied to 2009, but not more than line 2a				·····
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				****
¢	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
	Applied to 2010 distributable amount				
е	Remaining amount distributed out of corpus	236,890		-	
5	Excess distributions carryover applied to 2010				
	(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:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	257,511			
þ	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has			[
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed		-,··.		
d	Subtract line 6c from line 6b. Taxable				
	amount—see page 27 of the instructions		·		***************************************
е					
	4a from line 2a. Taxable amount—see page				
	27 of the instructions				
T	Undistributed income for 2010. Subtract lines				
	4d and 5 from line 1. This amount must be				
-	distributed in 2011				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	20 621		,	****
٥	instructions)	20,621			······
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2011.				
3	Subtract lines 7 and 8 from line 6a	236,890			
0	Analysis of line 9	230,090			
	Excess from 2006				
a b	Excess from 2007				
	Excess from 2008				
~		ł t		t t	

236,890

Excess from 2009 ...

Excess from 2010

Form 990-PF (2010) Celia and Marcos Family Institute 30-6137723 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year The Humane Society of the Advocate for animal care and animal 2100 L. Street, NW 15,500 Washington DC 20037 GA Latino Alliance for HR 6244 Riverside Drive , NW Scholarships to persons of Latin Her 179,000 Sandy Springs GA 30328 The NY Studio School Educational Arts | Programs 88th Street 2,500 New York NY 10012 American Civil Liberty Un Human Rights Advocates 2,500 High Museum of Arts Arts Program 1,000 Agnes Scott College 1,000 **ASPCA** 2,000 BAT Conservation INTL 6,000 PETA 10,000

			2,500
Total	 	▶ 3a	222,000
b Approved for future payment N/A			

Total

Eastside Players

3b

p	art XVI-A	Analysis of Income-Producing Activ	/ities				
		unts unless otherwise indicated		d business income	Excluded	d by section 512, 513, or 514	(e)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1	Program ser	vice revenue:					the instructions)
	a						
			_				
	_					<u>-</u> -	
	f						
_	•	d contracts from government agencies				·	
	•	dues and assessments				-	
		avings and temporary cash investments id interest from secunties					
		come or (loss) from real estate:					······································
,		anced property					
		-financed property					
6		come or (loss) from personal property		 		· .	· · · · · · · · · · · · · · · · · · ·
	Other invest	• • • • • • • • • • • • • • • • • • • •					
) from sales of assets other than inventory				-	_
		or (loss) from special events				"	
		or (loss) from sales of inventory					
		ue: a					
	c			_			
	d		-				
	е						
		d columns (b), (d), and (e)		0		0,	0
13	Total. Add I	ne 12, columns (b), (d), and (e)				. 13	0
13 (Se	Total. Add li e worksheet	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation	s.)			. 13	
13 (Se	Total. Add li e worksheet art XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc	s.) complishm	ent of Exempt Pu	rpose	. 13 <u> </u>	
13 (Se	Total. Add li e worksheet	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add lose worksheet Part XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0
13 (Se	Total. Add li e worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions on page 29 to verify calculation Relationship of Activities to the Acc Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s.) complishme reported in co	ent of Exempt Pu blumn (e) of Part XVI-A	rpose:	13s	0

Part	NVII	Information Rega Exempt Organiza		nsfers To and	Transactio	ns and Relationships Wit	h Noncharital	ole		
1 Di	d the ora			e in any of the follo	wing with any o	ther organization described			Yes	No
ın	section 5	01(c) of the Code (othe				ction 527, relating to political				
	ganızatıcı		-4: to o		l ercentation of	£.				ı
		om the reporting found	ation to a nor	ncharitable exempl	i organization o	i.		4-(4)		x
•) Cash				•			1a(1)		X
) Other a							1a(2)		
	ther trans									·
•	•	f assets to a noncharita	-	-		•		1b(1)		X
•	•	ses of assets from a no		, -	n			1b(2)		X
	•	of facilities, equipment,		ets				1b(3)		_ <u>X</u> _
•	•	irsement arrangements					•	1b(4)		<u>X</u>
•	•	or loan guarantees						1b(5)		X
(6) Perforn	nance of services or me	mbership or	fundraising solicita	ations			1b(6)		<u>x</u>
	_	acilities, equipment, ma	-	•				1c		_X_
						nn (b) should always show the fa				
						the foundation received less than				
va	lue in any	transaction or sharing	arrangemen	t, show in column	(d) the value of	the goods, other assets, or service	es received.			
(a) L	ine no	(b) Amount involved	(c) Name	of nonchantable exem	pt organization	(d) Description of transfers, to	ansactions, and shar	nng arranger	ments	
A/R					<u> </u>					
				- · · ·						
		_		*						
		**								
					· · · · · ·					
				~						
-										
		·								
										
						 				
		1			,					—
		dation directly or indirec						П,	- T	 1
		n section 501(c) of the		man section 501(c	رد)) or in sectio	III 32/ ?		☐ Ye	S A	1 1/10
b If		mplete the following scl	nedule.	1 43- 6	<u></u>	(-) 5				
		Name of organization		(b) Type of o	organization	(c) Descri	ption of relationship			
N/	A									
										
	Under p	enalties of perjury, I declare	that I have exa	amined this return, inc	luding accompany	ring schedules and statements, and to t ciary) is based on all information of which	ne best of my knowle	dge and		
Sign	belief, it	is true correct, and comple	te Declaration	of preparer (other tha	ın taxpayer or tidu	ciary) is based on all information of which	n preparer nas any i	inoweage		
Here	 	VVICom	TUSI		5		Derecio			
	Sig	nature of officer or trustee			ба	te / Title				
	Print/	Type preparer's name			Preparer's sign	ature	Da	ite	Check	
aid					1					rployed
	R. M	ichael LaBount	₽ Υ		R. Michae	el LaBounty	05,	/18/11		
Jse On				LaBounty			PTIN P	01465	778	}
	* I			Hwy, Ste		-	Firm's EIN ▶ 5	8-194	899	4
			ita, GA	-				04-63		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Name of the organization

Employer identification number

Celia and Marc	cos Family Institute	30-6137723				
Organization type (check one)):					
Filers of:	Section:					
rilers of.	Section.					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	overed by the General Rule or a Special Rule . , (8), or (10) organization can check boxes for both the General Rule and a Special Rule	. See				
General Rule						
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mone e contributor. Complete Parts I and II.	ey or				
Special Rules						
sections 509(a)(1) and	s) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulated 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Com	of the				
the year, aggregate co	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
the year, contributions aggregate to more tha year for an exclusively	(i), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribution of for use exclusively for religious, charitable, etc., purposes, but these contributions did not an \$1,000 If this box is checked, enter here the total contributions that were received during religious, charitable, etc., purpose. Do not complete any of the parts unless the General auton because it received nonexclusively religious, charitable, etc., contributions of \$5,000	ot ing the I Rule				
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Fest answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 99 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 99).	90-EZ, or on				

	3 (Form 990, 990-EZ, or 990-PF) (2010)	Т-	Page 1 of 1 of Part
Name of o	rganization a and Marcos Family Institute		ployer identification number 1–6137723
Part f	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Maus Family Institute Maus Family Institute 6244 Riverside Drive, NW Sandy Springs GA 30328	\$ 230,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person PayrollNoncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and Air + 4	*	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

306137723 Celia and Marcos Family Institute 30-6137723 FYE: 12/31/2010		Federal Statements		5/18/2011 3:14 PM
	Statement 1 - Form 990-PF, Part I, Line 23 - Other Expenses	Part I, Line 23 - Other Ex	benses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses PROFESSIONAL FEES OFFICE EXPENSE Total	\$ 2,690 4,036 \$ 6,726	w w	w w	w w

(Rev January 2011)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization Type or Employer identification number print Celia and Marcos Family Institute 30-6137723 File by the due date for Number, street, and room or suite no. If a P.O box, see instructions. filing your 6244 Riverside Drive, NW return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions Sandy Springs GA 30328 04 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code Is For Code Form 990-T (corporation) Form 990 01 07 Form 990-Bl Form 1041-A 03 Form 4720 Form 990-EZ 09 Form 990-PF 04 Form 5227 IFETTO FOR REVENUE SERVICE Form 990-T (sec. 401(a) or 408(a) trust) 05 11 FORMS870FIFLD ASSISTANCE Form 990-T (trust other than above) 06 12 ATLANTA, GA 30341 Nicolette Reim Maus 6244 Riverside Drive NW MAY 1 2 2011 The books are in the care of ▶ Sandy Springs GA 30328 Telephone No. ► 404-303-0645 FAX No. > If the organization does not have an office or place of business in the United States Check this box.

If this is for a Group Return, enter the organization's four digit Group Exemption CENT OFFICIAL Returns the whole group, check this box.

If it is for part of the group, check this box. for the whole group, check this box a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/11, to file the exempt organization return for the organization named above. The extension is for the organization's return for X calendar year 2010 or tax year beginning . and ending If this tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0 estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. For Paperwork Reduction Act Notice, see Instructions.