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

OMB No 1545-0052

2012

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 , 2012, and ending For calendar year 2012, or tax year beginning Employer identification number THE GABY FAMILY FOUNDATION 45-3956268 C/O BRIDGES & DUNN-RANKIN, LLP Telephone number (see the instructions) 400 GALLERIA PARKWAY #1050 770-563-8888 ATLANTA, GA 30339 C If exemption application is pending, check here G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return X Address change Name change 2 Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method Cash X Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ▶\$ column (d) must be on cash basis) under section 507(b)(1)(B), check here 9,553,518 Part | Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (seé instructions)) Contributions, gifts, grants, etc, received (att sch) 9,555,470 2 if the foundn is not req to att Sch B Interest on savings and temporary cash investments 183. 38 N/A Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) ENU Net short-term capital gain Income modifications 10 a Gross sales less returns and llowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 12 9,555, 38 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits 15 16 a Legal fees (attach schedule) SEE ST 1 **b** Accounting fees (attach sch) 2,144 SEE ST 2 c Other prof fees (attach sch) 4886 17 Interest 18 Taxes (attach schedule)(see instrs) Depreciation (attach 19 sch) and depletion ١٧E 20 Occupancy NG Travel, conferences, and meetings 21 Printing and publications. 22 Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 24 2,632. 488 Contributions, gifts, grants paid 25 Total expenses and disbursements. Add lines 24 and 25 2,632 488 Subtract line 26 from line 12: a Excess of revenue over expenses 9,553,021 and disbursements 0. b Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0)

Form 990-PF (2012)

TEEA0504L 12/23/12

Par	t II	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End o	
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	10.		
	2	Savings and temporary cash investments		9,553,518.	9,553,518.
	3	Accounts receivable	!		
	Ì	Less allowance for doubtful accounts	\ <u></u>		
	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 instructions).			
Α.	7	Other notes and loans receivable (attach sch).	[
ŝ		Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	`		
S	i	Investments – U.S. and state government obligations (attach schedule)			
	l l	nivestments — corporate stock (attach schedule)			
	C	: Investments — corporate bonds (attach schedule)		~~~~	
	11	Investments – land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage Ioans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment. basis			
		Less accumulated depreciation (attach schedule)			
	1	Other assets (describe			
		Total assets (to be completed by all filers – see the instructions Also, see page 1, item !)	10.	9,553,518.	9,553,518.
L	17	Accounts payable and accrued expenses		487.	
Å B	18	Grants payable			•
l B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
F	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	487.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			
E U	25	Temporarily restricted			
D	26	Permanently restricted			
A B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
5 N	28	Paid-in or capital surplus, or land, building, and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds.	10.	9,553,031.	
RS	30	Total net assets or fund balances (see instructions)	10.	9,553,031.	
	31	Total liabilities and net assets/fund balances (see instructions)	10.	9,553,518.	
Par	1111	Analysis of Changes in Net Assets or Fund Balanc		3,000,010.	
	Total	net assets or fund balances at beginning of year - Part II, colum			
_		of-year figure reported on prior year's return)	-	1	10.
		amount from Part I, line 27a		2	9,553,021.
		increases not included in line 2 (itemize)		3	0.550.001
		Ines 1, 2, and 3		4	9,553,031.
		uses not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5) —	Part II column (h) tra	30 5	0 552 021
6	iotal	There assers of Turio Datances at end of year (line 4 minus line 5) -	rait ii, column (b), line	30 6	9,553,031.

(a) List and describe	e the kind(s) of property sold (e g , rease, or common stock, 200 shares MLC	al estate,	(b) How acquired P — Purchase	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	D — Donation				
1a N/A				<u> </u>	
				 	
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
a			<u> </u>		
b					
С					•
d					
e					
Complete only for assets show	ing gain in column (h) and owned by t	he foundation on 12/31/69		(I) Gains (Colu	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		ain minus column (k) an -0-) or Losses (fro	
a					
b					
c					
d					
ее				Y 	
2 Capital gain net income or (ne	If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or ((loss) as defined in sections 1222(5) a	ud (6) [.]		•	
ın Part I, line 8	e 8, column (c) (see instructions) If (lo		3		
Part V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investme	nt Income		
If 'Yes,' the foundation does not qual	tion 4942 tax on the distributable amo ify under section 4940(e) Do not com n each column for each year, see the	plete this part		Yes	☐ No
(a)	(b)		riy entries	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets (colu	(d) Distribution mn (b) divided b	
2011				· -	
2010					
2009					
2008					
2007					
2 Total of line 1, column (d)			2		
	e 5-year base period – divide the tota i has been in existence if less than 5 y		3		
4 Enter the net value of nonchar	table-use assets for 2012 from Part X	line 5	4		
		,			
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions from	•		8		
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI, lii	ne 1b, and complete that par	t using a 1% ta	x rate See the	

	(2012) THE GABY FAMILY FOUNDATION		<u> 3956</u>			F	² age 4
Part VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 – see	instru	ctions	5)		
ገ a Exempt o	perating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	٦	!				
Date of ru	uling or determination letter (attach copy of letter if necessary — see instrs)	į					
b Domest	tic foundations that meet the section 4940(e) requirements in Part V,	-	1				0.
check h	nere ► 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, column (b)			:			
	der section 511 (domestic section 4947(a)(1) trusts and taxable		} }				
	tions only Others enter -0-)		2				0.
_	es 1 and 2		3				0.
	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	-0-)	4				0.
	sed on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				0.
	/Payments·						
a 2012 estu	mated tax pmts and 2011 overpayment credited to 2012						
•	t foreign organizations - tax withheld at source 6b]				
c Tax paı	d with application for extension of time to file (Form 8868)						
d Backup	withholding erroneously withheld 6 d						
7 Total cr	redits and payments. Add lines 6a through 6d		7				0.
8 Enter a	ny 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	•	9				0.
10 Overpayn	nent. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				
	amount of line 10 to be Credited to 2013 estimated tax Refunded	<u> </u>	11				
Part VII-A	Statements Regarding Activities			- ,			
1 a During	the tax year, did the foundation attempt to influence any national, state, or local legislation or o	did it				Yes	No
participa	ate or intervene in any political campaign?			ŀ	1 a		X
b Did it sp (see the	pend more than \$100 during the year (either directly or indirectly) for political purposes a instructions for definition)?				1 b		Х
	nswer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any mate ibuted by the foundation in connection with the activities	erials pub	lished				
c Did the	foundation file Form 1120-POL for this year?				1 c		Х
d Enter th	ne amount (if any) of tax on political expenditures (section 4955) imposed during the year.						
	the foundation \$\ 0. (2) On foundation managers \$\\$	· · · · · · · · · · · · · · · · · · ·		0.			
	he reimbursement (if any) paid by the foundation during the year for political expenditure tax $\overline{\text{in}}$ ion managers \blacktriangleright \$ 0.	iposea or	1	ĺ			
	foundation engaged in any activities that have not previously been reported to the IRS?			Ī	2		Х
	' attach a detailed description of the activities			-	-		
•	·						
3 Has the of incor	foundation made any changes, not previously reported to the IRS, in its governing instrument poration, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the char	, articles naes			3		Х
	foundation have unrelated business gross income of \$1,000 or more during the year?	.3		}	4 a		X
	has it filed a tax return on Form 990-T for this year?			Ì	4 b	N	/A
	a liquidation, termination, dissolution, or substantial contraction during the year?			Ì	5		X
	attach the statement required by General Instruction T						
6 Are the	requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
● By Iar	nguage in the governing instrument, or						
● By sta	ate legislation that effectively amends the governing instrument so that no mandatory directions ne state law remain in the governing instrument?	s that cor	flict		6		v
	undation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			}	7	Х	<u>X</u>
	ne states to which the foundation reports or with which it is registered (see instructions)	•			-		
GA CARCA	is size to mission of the management of the mission	_		-			
	wer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			- [
(or design	iate) of each state as required by General Instruction G? If 'No,' attach explanation				8ь	Х	
9 Is the for cale	bundation claiming status as a private operating foundation within the meaning of section 4942, and are represented by the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' or	(j)(3) or 4 complete	942(j)(! Part X	5) //	9		X
10 Did any and add	persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing dresses	g their na CEMENT	mes 3		10	Х	
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	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?
BAA	

3a Did the foundation hold more than a 2% direct or indirect interest in any business

4 a Did the foundation invest during the year any amount in a manner that would jeopardize its

b If 'Yes,' did it have excess business holdings in 2012 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012).

enterprise at any time during the year?

charitable purposes?

Form 990-PF (2012)

3 b

4 a

4 b

N/A

X

Yes X No

Form 990-PF (2012) THE GABY FAMILY F				-39562	68	Pa	ge (
Part VII-B Statements Regarding Activit		m 4720 May Be Red	quired (continu	ıed)			
5a During the year did the foundation pay or incu	•			<u></u>			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e)) ⁷	∐ Yes	X No			
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	ition drive?	•	Yes	XNo			
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes	X No			
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instruc	ganization described ctions)	Yes	X No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes	X No			
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exceptions disaster assistance	ons		5 b	N/	A
Organizations relying on a current notice regain	ding disaster assistanc	e check here		►			
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	N/A Yes	_ ∏ No			
If 'Yes,' attach the statement required by Regu	ılatıons section 53 4945	i-5(d)					
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes	XNo			
b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?		6 b		X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the found	ation a party to a probit	nited tay chalter transac	tion? Yes	XNo			
b If 'Yes,' did the foundation receive any proceed	, , ,	· · · · · · · · · · · · · · · · · · ·		N/A	7 b	1	
Part VIII Information About Officers, Din					1 1		
and Contractors		· ·			,		
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee ben plans and defe compensatio	efit rred	Expense other all	e accou lowanc	int, es
BARBARA VAN ANDEL-GABY	TRUSTEE	0.		0.			0
_445_OLD_HOMESTEAD_TRAIL JOHNS_CREEK, GA 30097	0						
RICHARD D. GABY	TRUSTEE	0.		0.			0
445 OLD HOMESTEAD TRAIL JOHNS CREEK, GA 30097	0						
				İ			
						_	
2 Compensation of five highest-paid employees	 (other than those inclu	ded on line 1 – see ins	tructions). If none.	enter 'NC	NE.'		
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions		Expense	accou	ınt.
paid more than \$50,000	hours per week devoted to position	,,,	employee bene plans and defer compensation	efit red	other all		
NONE			<u> </u>				
	· .			- -		-	
			·				
			<u> </u>				
Total number of other employees paid over \$50,000				•			0
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Form 990-PF (2012) THE GABY FAMILY FOUNDATION [Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	45-39 tion Managers, Highly Paid Empl	56268 Page 7 oyees,
3 Five highest-paid independent contractors for professional services (see ins	structions). If none, enter 'NONE.'	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
7.1.		
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica organizations and other beneficiaries served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
1 N/A		
2		
3		
4	·	
Part IX-B Summary of Program-Related Investments (see instru	uctions)	<u> </u>
Describe the two largest program-related investments made by the foundation duri	ing the tax year on lines 1 and 2	Amount
1		
N/A		
2		
All other program-related investments See instructions.		
3		
T. 1.1. Add 1 1 1.0		
Total. Add lines 1 through 3		0.
BAA		Form 990-PF (2012)

Form 990-PF (2012) THE GABY FAMILY FOUNDATION	45-39562	268 Page 8
Part X : Minimum Investment Return (All domestic foundations must complete this par see instructions.)	t. Foreign 1	foundations,
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	1,261,189.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	1,261,189.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,261,189.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	18,918.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,242,271.
6 Minimum investment return. Enter 5% of line 5	6	62,114.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private o and certain foreign organizations check here ☐ and do not complete this par		undations
1 Minimum investment return from Part X, line 6	1	62,114.
2 a Tax on investment income for 2012 from Part VI, line 5		·
b Income tax for 2012. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	62,114.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	62,114.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	62,114.
Part XII Qualifying Distributions (see instructions)		
 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 	1 a	
b Program-related investments – total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 	_3a	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

BAA

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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0.

0.

3ь

4

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				62,114.
2 Undistributed income, if any, as of the end of 2012				02,114.
a Enter amount for 2011 only			0.	
b Total for prior years 20 , 20 , 20		0.		······································
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008			1	
c From 2009			1	
d From 2010]			
e From 2011]		#	
f Total of lines 3a through e	0.		1	
4 Qualifying distributions for 2012 from Part				
XII, line 4 🕨 \$			1	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
· · · ·			1	
Enter the net total of each column as			1	
indicated below:	_		1	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section			į	
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	·
f Undistributed income for 2012. Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2013				62,114.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed			#	
by section 170(b)(1)(F) or 4942(g)(3)			-	
(see instructions)	0.			······
3 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	<u> </u>		ŧ	
	0.			
Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.		<u> </u>	
Analysis of line 9				
a Excess from 2008			1	
b Excess from 2009				
c Excess from 2010			-	
d Excess from 2011			1	
e Excess from 2012				

Form 990-PF (2012) THE GABY FAMILY Part XIV Private Operating Founda		ructions and Pa	rt VIII A guactu	45-395626	
1 a If the foundation has received a ruling or d	etermination letter				N/A
is effective for 2012, enter the date of the in b Check box to indicate whether the foundation	-	erating foundation de	scaribad in castion	☐ 4042(\\(2\) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	Talling localidation de	Prior 3 years	4942(j)(3) or	1 4942()(3)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test – enter:					
(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed		-			
c 'Support' alternative test - enter					
 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(1)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	(0: 1:4:4):			1.65.000	<u>L.</u>
Part XV Supplementary Information assets at any time during the			e toundation na	ad \$5,000 or mo	re in
Information Regarding Foundation Manager a List any managers of the foundation who h close of any tax year (but only if they have SEE STATEMENT 4	ave contributed mo	ore than 2% of the to than \$5,000) (See s	otal contributions resection 507(d)(2))	eceived by the found	ation before the
b List any managers of the foundation who o a partnership or other entity) of which the f NONE	wn 10% or more o oundation has a 10	f the stock of a corp 0% or greater intere	oration (or an equa st.	illy large portion of th	ne ownership of
2 Information Regarding Contribution, Grant Check here ► X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions gifts, grants, etc	to preselected char (see instructions) to	itable organizations individuals or orga	nizations under other	
a The name, address, and telephone number	r or e-mail of the p	erson to whom appl	ications should be	addressed [.]	
b The form in which applications should be si	ubmitted and infor	mation and materials	s they should includ	de	
c Any submission deadlines	,, <u>, , , , , , , , , , , , , , , , , ,</u>				-
d Any restrictions or limitations on awards, so	uch as by geograp	hical areas, charitab	le fields, kinds of i	nstitutions, or other f	actors
BAA	TE	EA0310L 12/23/12			Form 990-PF (2012)

3 Grants and Contributions Paid During the Yea	r or Approved for Futur	re Payment		N/A
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year	substantial contributor	recipient		
Total				
Total b Approved for future payment			► 3a	
Total			► 3b	Į

Part XVI-A Analysis of Income-Producing Activities

g. g. 000	amounts unless otherwise indicated	Unrelated	business income	Excluded by	y section 512, 513, or 514	
	arriburts unless otherwise indicated	(a) Business	(b) Amount	(c) Exclu-	(d) Amount	(e) Related or exempt function income
1 Progra	im service revenue:	code		code		(See instructions)
a						
_						
_						
d						
e						
f						
	and contracts from government agencies.					
_	ership dues and assessments				x	
	on savings and temporary cash investments			14	183.	
	nds and interest from securities		······································			
	ntal income or (loss) from real estate		••••••			<u>-,,, , , , , , , , , , , , , , , , , , </u>
	nanced property					
	bt-financed property al income or (loss) from personal property	ļ			 .	
	investment income					
	(loss) from sales of assets other than inventory			 		
-	come or (loss) from special events	-		+ +		
	profit or (loss) from sales of inventory					
	revenue					
a		 	Manage, deliable, communication			
b				 		
С		1				
d						
		 				·
е		1 1		1 1		
·	al. Add columns (b), (d), and (e)				183.	
12 Subtota	Add line 12, columns (b), (d), and (e)				183.	183.
12 Subtota		ns)				183.
12 Subtota 13 Total. (See workshe	Add line 12, columns (b), (d), and (e)		nment of Exem	ot Purpos	13	183.
12 Subtota 13 Total. (See workshe Part XVI-L Line No.	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-L Line No.	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
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12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
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12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the
12 Subtota 13 Total. (See workshe Part XVI-E	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which inc	e Accomplish	ın column (e) of Pa	art XVI-A cor	es tributed importantly to	the

Form 990-PF (2012) THE GABY FAMILY FOUNDATION 45-3956268 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1 a (1) X (2) Other assets 1 a (2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1 b (1) (2) Purchases of assets from a noncharitable exempt organization 1 b (2) (3) Rental of facilities, equipment, or other assets 1 b (3) (4) Reimbursement arrangements 1 b (4) (5) Loans or loan guarantees 1 b (5) (6) Performance of services or membership or fundraising solicitations 1 b (6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1 c **d** If the answer to any of the above is 'Yes,' complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2 a ls the foundation directly or indirectly affiliated with, or related to, one or more tax exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ΧNο Yes b If 'Yes,' complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

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 taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss Sign this return with the preparer shown below Here TRUSTEE of officer or trustee Title X Yes Print/Type preparer's name Date P00117446 self-employed

Paid **Preparer** Use Only

BAA

KENNETH H. BRIDGES

KENNETH H. BRIDGES

BRIDGES & DUNN-RANKIN LLP 400 GALLERIA PARKWAY SUITE Firm's address

Firm's EIN 58-2085823

Phone no

ATLANTA. GA 30339

Form 990-PF (2012)

(770) 563-8888

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization THE G	SABY FAMILY FOUNDATION	Employer identification number
C/O B	BRIDGES & DUNN-RANKIN, LLP	45-3956268
Organization type (check on	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organ	nization
	4947(a)(1) nonexempt charitable trus	it not treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trus	t treated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is	s covered by the General Rule or a Special Rule	
, ,	,	aral Pula and a Casaval Pula Cas unstructure
	7), (8), or (10) organization can check boxes for both the Gene	eral Rule and a Special Rule. See Instructions.
General Rule		
X For an organization filing contributor (Complete P	g Form 990, 990-EZ, or 990-PF that received, during the year,	\$5,000 or more (in money or property) from any one
Complete :		
Special Rules		
•	organization filing Form 990 or 990-EZ that met the 33-1/3% su	apport test of the very letions under sections
509(a)(1) and 170(b)(1)(A	A)(vi) and received from any one contributor, during the year, in (i) Form 990, Part VIII, line 1h or (ii) Form 990, EZ, line 1 Co.	a contribution of the greater of (1) \$5,000 or
For a section 501(c)(7), ((8), or (10) organization filing Form 990 or 990-EZ that receive	ed from any one contributor, during the year,
the prevention of cruelty	re than \$1,000 for use <i>exclusively</i> for religious, charitable, scient to children or animals. Complete Parts I, II, and III	entific, literary, or educational purposes, or
For a section 501(c)(7), ((8), or (10) organization filing Form 990 or 990-EZ that receive	ed from any one contributor, during the year,
contributions for use exc	<i>clusively</i> for religious, charitable, etc, purposes, but these cont inter here the total contributions that were received during the	tributions did not total to more than \$1,000
purpose Do not complet	te any of the parts unless the General Rule applies to this organic	anization because it received nonexclusively
religious, charitable, etc,	, contributions of \$5,000 or more during the year	► \$
Caution: An organization that is not o	covered by the General Rule and/or the Special Rules does not file Schedule B	(Form 990, 990-EZ, or 990 PF) but it must
answer 'No' on Part IV, line 2, of i	its Form 990; or check the box on line H of its Form 990-EZ or on Part I, I of Schedule B (Form 990, 990-EZ, or 990-PF)	line 2, of its Form 990-PF, to certify that it does not
		0.1.4.1.2.6
or 990-PF.	tion Act Notice, see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

	B (Form 990, 990 EZ, or 990 PF) (2012)	Page	1 of 1 of Part 1
Name of org	ABY FAMILY FOUNDATION	' -	r identification number 956268
	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed		330200
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD & BARBARA GABY		Person X Payroll
	445 OLD HOMESTEAD TRAIL	\$2,510,000.	· 🖳
	JOHNS_CREEK, GA_30097		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE BVAG FAMILY TRUST		Person X
	445 OLD HOMESTEAD TRAIL	\$7,045,470.	
	JOHNS CREEK, GA 30097		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is
(2)	4.5		a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990 EZ, or 990 PF) (2012)

Page

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

of Part II

BAA

Employer identification number

THE GABY FAMILY FOUNDATION 45-3956268 Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. from (b) (d) Date received (c) Description of noncash property given FMV (or estimate) Part I (see instructions) N/A (b)
Description of noncash property given (a) No. (c) FMV (or estimate) (d) Date received from Part I (see instructions) (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (a) No. from Part I (see instructions) (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from (d) Date received (c) FMV (or estimate) (b) Description of noncash property given Part I (see instructions)

TEEA0703L 11/30/12

to

of Part III

Employer identification number

- Carlodalo & (1 Citti 550, 550 E2, Ct 550 1 1) (2012)	, ago	T	1 0
Name of organization		Employer identific	ation nun
THE GABY FAMILY FOUNDATION		45-395626	8
Part III Exclusively religious, charitable, etc, individual contributions to section	on 501(c)(7), (8) or (10)	_

organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry

For organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year. (Enter this information once See instructions.)

▶\$ N/A

	Use duplicate copies of Part III if additional s	space is needed		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
		(e) Transfer of gift		L
	Transferee's name, addres	Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e)		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from	_ (b)	(c) Use of gift		(d) Description of how gift is held
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift	Rela	ationship of transferor to transferee
		, and 211 . ,		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
				
		(a)		
•	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
		· · · · · · · · · · · · · · · · · · ·		
J				

2012

FEDERAL STATEMENTS

PAGE 1

CLIENT GABYFAMF

THE GABY FAMILY FOUNDATION C/O BRIDGES & DUNN-RANKIN, LLP

(A)

TOTAL

45-3956268

(D)

11/12/13

03·02PM

STATEMENT 1 FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES**

BRIDGES & DUNN-RANKIN, LLP

(C) INVESTMENT EXPENSES ADJUSTED CHARITABLE PER BOOKS INCOME NET INCOME PURPOSES 2,144. 2,144. \$ 0.

(B) NET

STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

CUSTODIAL FEES

(B) NET INVESTMENT (C) ADJUSTED (A) (D) **EXPENSES** CHARÌTABLE INCOME NET INCOME PER BOOKS **PURPOSES** 488. 488. 0. TOTAL 488. 488.

STATEMENT 3 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

RICHARD D. GABY

445 OLD HOMESTEAD TRAIL JOHNS CREEK, GA 30097

THE BVAG FAMILY TRUST

445 OLD HOMESTEAD TRAIL JOHNS CREEK, GA 30097

STATEMENT 4 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

BARBARA VAN ANDEL-GABY RICHARD D. GABY

Form 8868

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

If you a	re filing for an Automatic 3-Month Extension, co	mplete only f	Part I and check this box .			X	
• If you a	re filing for an Additional (Not Automatic) 3-Mor	nth Extension	, complete only Part II (on page 2 of this	form).		L	
Do not com	plete Part II unless you have already been gran	ted an automa	atic 3-month extention on a previously fil	ed For	m 8868.		
Electronic f corporation request an Associated	illing (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (nextension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ling of this form, visit www irs gov/efile and click	58 if you need ot automatic) n Part I or Pa must be sent	a 3-month automatic extension of time 3-month extension of time. You can elect till with the exception of Form 8870, Infito the IRS in paper format (see instruction	to file (stronication	(6 months fo ally file Form on Return fo	n 8868 to r Transfers	
Part I	Automatic 3-Month Extension of Time	Only subn	nit original (no copies needed).				
<u> </u>	on required to file Form 990-T and requesting an	automatic 6-	month extension – check this box and c	omplet	te Part Loniv	/ ▶ □	
•	rporations (including 1120-C filers), partnerships		d trusts must use Form 7004 to request	an ext	ension of tim	ne to file	
	Name of event amount to or other files are pretambles		Enter filer's identi				
Type or print	rint THE GABI FAMILI FOUNDATION						
File by the	Number, street, and room or suite number If a P O box, se				5-3956268 Social security number (SSN)		
due date for filing your	200 GALLERIA PARKWAY #1950				•		
return See	City, town or post office, state, and ZIP code. For a foreign	address, see inst	ructions	<u> </u>			
instructions	ATLANTA, GA 30339						
Enter the R	eturn code for the return that this application is t	for (file a sepa	arate application for each return)			04	
Application Is For		Return Code	Application Is For			Return Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990-B		02	Form 1041-A			08	
Form 4720 ((individual)	03	Form 4720			09	
Form 990-P		04	Form 5227			10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T	(trust other than above)	06	Form 8870			12	
Telepho If the or If this is check the exte 1 I request the exte The extended The extended	ne No. > 770-563-8888 ganization does not have an office or place of bit for a Group Return, enter the organization's four is box If it is for part of the group, insion is for. lest an automatic 3-month (6 months for a corpor 8/15	FAX Not usiness in the ir digit Group check this botter ration required ganization returns, and endir	United States, check this box Exemption Number (GEN) and attach a list with the na d to file Form 990-T) extension of time urn for the organization named above.		 ,	- '	
	application is for Form 990-BL, 990-PF, 990-T, 4 undable credits. See instructions.	720, or 6069,	enter the tentative tax, less any	3 a	\$	0.	
	application is for Form 990-PF, 990-T, 4720, or 6 ints made include any prior year overpayment a			3 b	\$	0.	
c Balance EFTPS	ce due. Subtract line 3b from line 3a. Include you (a (Electronic Federal Tax Payment System). See	ur payment wi e instructions	th this form, if required, by using	3 c	\$	0.	
Caution. If y payment ins	ou are going to make an electronic fund withdra tructions	iwal with this	Form 8868, see Form 8453-EO and Form	1 8879	-EO for		

Form 8868	3 (Rev 1-2013)				Page 2
• If you a	are filing for an Additional (Not Automatic) 3-1	Month Extension	, complete only Part II and check th	is box	. • X
Note. Only	complete Part II if you have already been gra	anted an automa	itic 3-month extension on a previous	ly filed Form 8868.	_
	are filing for an Automatic 3-Month Extension				
	Additional (Not Automatic) 3-Mont	th Extension	of Time. Only file the original	(no copies needed	1).
				entifying number, see in	
	Name of exempt organization or other filer, see instructions	5		Employer identification number	r (EIN) or
Type or	THE GABY FAMILY FOUNDATION				
print				45-3956268	
File by the	Number, street, and room or suite number. If a P O box, see instructions Social security number (SSN) by the				
tide by the extended to the standard BRIDGES & DUNN-RANKIN LLP to the date for					
iling your eturn See	400 GALLERIA PARKWAY, SUITE City, town or post office, state, and ZIP code For a foreign				
nstructions		address, see mstruct	ions		
	ATLANTA, GA 30339				
	Datum and for the return that this configuration	us for (file a sor	norsta anniversion for each return		<u></u>
Enter the	Return code for the return that this application	is for time a sep	Darate application for each return).	•	04
A II 41 .		Dottor.	A - Basica		T
Applicatio Is For	in .	Return Code	Application Is For		Return Code
Form 990 c	or Form 990-EZ	01			
orm 990-	BL	02	Form 1041-A		08
orm 4720	(Individual)	03	Form 4720		09
orm 990-		04	Form 5227		10
orm 990-	T (section 401(a) or 408(a) trust)	05	Form 6069		11
orm 990-	T (trust other than above)	06	Form 8870		12
If the oIf this iwhole ground	one No. > 770-563-8888 organization does not have an office or place of some form a Group Return, enter the organization's up, check this box If it is for part of the extension is for	of business in the four digit Group	e United States, check this box Exemption Number (GEN)		s is for the
5 For 6 6 If the 7 State	uest an additional 3-month extension of time calendar year 2012, or other tax year begin tax year entered in line 5 is for less than 12 change in accounting period and the extension. TORMATION NECESSARY FOR THE F	inning months, check re	, 20 , and ending eason: Initial return [
nonre		<u></u>		8a \$	0.
	s application is for Form 990-PF, 990-T, 4720, ients made. Include any prior year overpayme Form 8868.	nt allowed as a	credit and any amount paid previous	I tax sly . 8b\$	0.
c Bala EFTF	nce due. Subtract line 8b from line 8a Include S (Electronic Federal Tax Payment System).	your payment v See instructions	with this form, if required, by using	8c \$	0.
	_		st be completed for Part II on		
Jnder penaltie correct, and o	es of perjury, I declare that I have examined this form, including omplete, and that I am authorized to prepare this form	ng accompanying sch	edules and statements, and to the best of my kn	owledge and belief, it is true,	//11-
Signature >	Title	TRUSTEE	- (1/4	Date ► 7	5/17
BAA		FIFZ0502L	01/21/13	Form 8868	(Rey/1-2013

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