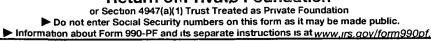


## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

#### **Return of Private Foundation**





For ca	alen	dar year 2013 or tax year beginning		, and ending		
		foundation SED, INC.	A Employer identification	n number		
		MARCUS FAMILY OFFICE,	LLC		58-0231691	-
	Number and street (or P O box number if mail is not delivered to street address)  Room/suite					
_12	266	W. PACES FERRY RD.,		615	404-240-77	700
		wn, state or province, country, and ZIP or foreign po ANTA , GA 30327	ostal code		C If exemption application is p	pending, check here
		all that apply: Initial return	Initial return of a for	mer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		2 Foreign erganizations m	eeting the 85% test
		Address change	Name change		<ol><li>Foreign organizations m check here and attach c</li></ol>	omputation Street,
H C		type of organization: X Section 501(c)(3) ex	• •		E If private foundation sta	
<u>_</u>		(-)(-)	Other taxable private foundat		under section 507(b)(1	
		rket value of all assets at end of year J Accounting	-	Accrual	F If the foundation is in a under section 507(b)(1	. 1
(πc		Ot Ot 6 , 642 , 962 . (Part I, colui	her (specify) mn (d) must be on cash b	asis.)	ander section 507(b)(	)(b), check here
Pai		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u>. u</u>		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
$\Box$	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	180.	180.	· · · · ·	STATEMENT 1
	4	Dividends and interest from securities	209,935.	209,935.		STATEMENT 2
1	5a	Gross rents				
1	þ	Net rental income or (loss)	05 426			
힐		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 260 001	85,436.			<del> </del>
Revenue		assets on line 6a		85,436.		
ě		Capital gain net income (from Part IV, line 2)	<del></del>	03,430.		
		Net short-term capital gain CEIVED Income modifications CEIVED				-
	9 10a	Gross sales less returne and allowances				
		Less Cost of goods sold NOV 1 4 2014		·		
		Gross profit or Hoss)				
1	11	Other income	1,291.	1,291.		STATEMENT 3
	12	Total. Add lines 1 through 1 EN, U	296,842.	296,842.		
	13	Compensation of officers, directors, trustees, etc	18,000.	0.		18,000.
i	14	Other employee salaries and wages	4 300			1 277
ņ		Pension plans, employee benefits	1,377.	0.		1,377.
uses		Legal fees		<u> </u>	-	
ğ		Accounting fees Other professional fees STMT 4	39,300.	39,300.		0.
e E		Interest	35,300.	33,300.		† ·
Operating and Administrative Expe	18	Taxes STMT 5	38,385.	258.		0.
str	19	Depreciation and depletion		=		
盲	20	Occupancy				
Ad	21	Travel, conferences, and meetings				
and	22	Printing and publications				
ng :	23	Other expenses STMT 6	83.	0.		83.
rati	24	Total operating and administrative	07 445	30 550		10 460
obe		expenses. Add lines 13 through 23	97,145.	39,558.		19,460. 357,632.
		Contributions, gifts, grants paid	357,632.			331,032.
	26	Total expenses and disbursements. Add lines 24 and 25	454,777.	39,558.	1	377,092.
-	27	Subtract line 26 from line 12:				1
		Excess of revenue over expenses and disbursements	<157,935.	<b>&gt;</b>		
		Net investment income (if negative, enter -0-)		257,284.		
		Adjusted net income (if negative, enter -0-)			N/A	
32350	)1	1114 For Bonomiark Daduction Act Matica, and	! A			Form <b>QQQ_DF</b> (2013

	_	
	<u> </u>	
orm	990-PF (2013)	

C/O MARCUS FAMILY OFFICE, LLC

58-0231691

Parr

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of	f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		•	<del></del>
	2	Savings and temporary cash investments	1,887,656.	1,175,679.	1,175,679.
	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			
	7				
		Less: allowance for doubtful accounts ▶ 0.	0.	4,231.	4,231.
Ø	8	Inventories for sale or use			<u> </u>
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			<del>-</del>
	l	Investments - corporate stock STMT 8	1,717,523.	1,246,601.	1,246,601.
	ŀ	: Investments - corporate bonds			
	ı	Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	3,181,885.	4,216,451.	4,216,451.
		Land, buildings, and equipment basis	3,202,0001	1,220,2320	1,220,2320
	''	Less accumulated depreciation			
	15	Other assets (describe )			· · · · · · · · · · · · · · · · · · ·
		Total assets (to be completed by all filers - see the			
	'"	instructions. Also, see page 1, item 1)	6,787,064.	6,642,962.	6,642,962.
_	17	Accounts payable and accrued expenses	322.	264.	0,042,502.
	18	Grants payable	322.	201.	
		Deferred revenue			
ties	19	<b>-</b>			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	"	Other liabilities (describe )			
	22	Total liabilities (add lines 17 through 22)	322.	264.	
_	20	Foundations that follow SFAS 117, check here	322.	2010	
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
	25	Temporarily restricted	·		
Net Assets or Fund Balan	ı				
힏	-"	Foundations that do not follow SFAS 117, check here	<u> </u>		
Ξ		and complete lines 27 through 31.			
٥	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	!
Ass	29	Retained earnings, accumulated income, endowment, or other funds	6,786,742.	6,642,698.	
et	30	Total net assets or fund balances	6,786,742.	6,642,698.	
Z	"	Total net assets of fund balances	0,700,7421	0,042,030.	
	31	Total liabilities and net assets/fund balances	6,787,064.	6,642,962.	
			•	0,012,002	
LP	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	6,786,742.
2	Ente	r amount from Part I, line 27a		2	<157,935.
3	Othe	er increases not included in line 2 (itemize)	SEE STA	ATEMENT 7 3	13,891.
		lines 1, 2, and 3		4	6,642,698.
5	Dacı	reases not included in line 2 (itemize)		<u>-                                   </u>	0

323511 10-10-13

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form **990-PF** (2013)

Rart IV Capital Gains a	and Losses for Tax on In	vestment	Income					
(a) List and descr	be the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs			( <b>b)</b> Ho	w acquired Purchase Donation	(c) Da (mo.	te acquired , day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADEI						VAR	IOUS	VARIOUS
b CAPITAL GAINS I	DISTRIBUTIONS							
<u>c</u>	<del></del>			<b>├</b>		ļ		
d						ļ		<del> </del>
<u>e</u>	(f) Depreciation allowed	/=\ Coo	t or other basis	<del>!                                    </del>			Gain or (loss	<u></u>
(e) Gross sales price	(i) Depreciation allowed (or allowable)		pense of sale	ĺ			lus (f) minus	
a 1,254,762.			L,184,55	5.	<del></del>			70,207.
b 15,229.								15,229.
C								·- <u></u>
d								
e								
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69		_		(Col. (h) gair	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (1)		(	טו. (K), טו Loss	ut not less tha es (from col.	(h))
	as of 12/31/69	over	col. (j), if any				·	
<u>a</u>								70,207. 15,229.
<u>b</u>								15,229.
<u>c</u>								
		<u> </u>	<del></del> -					
	C 16	Doob L look "	<del></del>	$\overline{}$				
2 Capital gain net income or (net ca	pital loss) If gain, also enter	r in Part I, line i I- in Part I, line i	, 7	<b> </b>	2			85,436.
, , ,	•		,	<b>↑</b>				
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	, , ,	10 (6).		J				
If (loss), enter -0- in Part I, line 8	• •			別	3		N/A	1
Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment li	ncome	:	
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment ir	ncome.)	)	-		
If section 4940(d)(2) applies, leave th	us part blank							
ii section 4540(u)(2) applies, leave ti	ns part blank.							
Was the foundation liable for the sect			•	rıod?				Yes X No
If "Yes," the foundation does not qual				ntrion		_		
1 Enter the appropriate amount in 6	<del></del>	instructions bei	ore making any e					(d)
Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifying dis	stributions	Net value of no	(c) onchard	table-use asse	ets	Distri (col. (b.) di	(d) bution ratio vided by col. (c))
2012	ייי וייי פיי	7,191.	<del></del>		424,39		(001. (0) 0	• 066495
2011		3,294.			165,03			.080015
2010		7,858.			310,34			.094743
2009		5,934.			436,83		· · · · · · · · · · · · · · · · · · ·	.080153
2008		8,759.			080,26			.100091
		·						
2 Total of line 1, column (d)						_ 2	:	.421497
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	r of yea	rs			
the foundation has been in exister	nce if less than 5 years							.084299
4 Enter the net value of noncharitat	le-use assets for 2013 from Part X,	line 5					<u> </u>	6,637,824.
5 Multiply line 4 by line 3						ئــا	<u> </u>	559,562.
								0 572
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)					<u></u> ⊢•	<u> </u>	2,573.
7 4446						.	.	560 105
7 Add lines 5 and 6						-	<u>'</u>	562,135.
8 Enter qualifying distributions from	n Part XII. line 4						3	377,092.
· · · ·	line 7, check the box in Part VI, line	e 1b. and com	lete that part usi	ng a 1%	6 tax rate.	<u>`</u>	-	
See the Part VI instructions.		,		<u> </u>				

8b | X

10

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

year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

of each state as required by General Instruction G? If "No," attach explanation

				- T	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	<u>No</u>
	During the year did the foundation (either directly or indirectly):	[ <del></del> ]			
	(1) Linguigo III III out of Charles of Charl	es 🗶 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a dioqualified percent	es X No			
	(b) Turnion goods, on most to (or except and or except and	es X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	res No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	res 🗶 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	res 🗓 No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here	▶∟			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		ŀ		
	before the first day of the tax year beginning in 2013?		1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1			
	defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn	ing	1		
	before 2013?	Yes 🗶 No			
	If "Yes," list the years  ,,,,,,,,				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre	ct			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack	ch .			
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	• , <u> </u>				
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		}		
	during the year?	Yes 🗓 No	1	1	
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons a	ıfter			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to			1	
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule				
	Form 4720, to determine if the foundation had excess business holdings in 2013)	N/A	3b	<u> </u>	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?		4b		X

Yes X No

Yes X No

N/A

Х

6b

7b

Part VII-B Staten .5a During the year did th (1) Carry on propaga

> (5) Provide for any p the prevention of b If any answer is "Yes" section 53,4945 or in Organizations relying c If the answer is "Yes"

a personal benefit contract?

If "Yes" to 6b, file Form 8870.

rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Require	ed (continued)		
During the year did the foundation pay or incur any amount to:			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Yes X No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	Yes X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	Yes X No	1	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	Yes X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	Yes X No		
If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulat		1	
section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check here			1
If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained			
expenditure responsibility for the grant? N/A	Yes No		
If "Yes," attach the statement required by Regulations section 53 4945-5(d).			

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		18,000.	0.	0.
	-			
	1			
O Comment of the bight of a side of the si	luded as line d) If none	onton UNIONE SI		

2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, othe allowances
NONE				
Total number of other employees paid over \$50,000			<b></b>	1

Form **990-PF** (2013)

C/O MARCUS FAMILY OFFICE, LLC

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (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 Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses N/A Part IX-B | Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

Form **990-PF** (2013)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P.	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	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	1a	5,230,537.
b	Average of monthly cash balances	1b	5,230,537. 1,508,371.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,738,908.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,738,908.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	101,084.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,637,824.
6	Minimum investment return. Enter 5% of line 5	6	331,891.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	331,891.
2a			
b	Income tax for 2013. (This does not include the tax from Part VI.)	] [	
C	Add lines 2a and 2b	2c	5,146.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	326,745.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	326,745.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	326,745.
P	Qualifying Distributions (see 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	1a	377,092.
b	Program-related investments - total from Part IX-B	1b	0.
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		3a	· · · · · · · · · · · · · · · · · · ·
b		3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	377,092.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	377,092.
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation	qualifies fo	r the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,		<del></del> -		226 745
line 7	·			326,745.
2 Undistributed income, if any, as of the end of 2013			0.	
a Enter amount for 2012 only			-0.	<u> </u>
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 407, 250.				
bFrom 2009 195,782.				
c From 2010 287, 395.				
dFrom 2011 190,880.				
eFrom 2012 143,153.				
f Total of lines 3a through e	1,224,460.			
4 Qualifying distributions for 2013 from				_
Part XII, line 4: ►\$ 377,092.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)	<u>-</u> -	0.		
c Treated as distributions out of corpus		!		
(Election required - see instructions)	0.			206 545
d Applied to 2013 distributable amount	F0 24F			326,745.
e Remaining amount distributed out of corpus	50,347.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,274,807.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	0.	· · · · · · · · · · · · · · · ·		
8 Excess distributions carryover from 2008 not applied on line 5 or line 7	407,250.			
9 Excess distributions carryover to 2014.	407,2300	<del> </del>		
Subtract lines 7 and 8 from line 6a	867,557.			
10 Analysis of line 9:	23,700,0			
a Excess from 2009   195,782.				
b Excess from 2010 287, 395.				
c Excess from 2011 190,880.				
d Excess from 2012 143,153.				
e Excess from 2013 50,347.				
			·	Form <b>990-PF</b> (2013)

323581 10-10-13

58-0	2	3.	1 6	α.	1

	CUS FAMILY				1310AT
Rart XIV   Private Operating Fo	<del></del>	<del></del>	-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		_	. ▶ └	14949449	0.40(.)(5)
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or4	942( <sub>J</sub> )(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 2012	Prior 3 years (c) 2011	(d) 2010	(e) Total
income from Part I or the minimum	(a) 2013	(b) 2012	(6)2011	- (u) 20 10	(e) iulai
investment return from Part X for					
each year listed				<u> </u>	
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					
e 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)		1			
<b>b</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:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	<u> </u>		<del>-</del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					<del> </del>
(3) Largest amount of support from			1		
an exempt organization			<del> </del>		
(4) Gross investment income			if the formulation	- bad \$5 000 as	
Part XV Supplementary Info			ir the foundatio	n nad \$5,000 or m	iore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh year (but only if they have contributed r			tributions received by th	ie foundation before the ci	ose of any tax
	nore man 40,000). (See	Section 507 (d)(2).)			
FREDERICK R MARCUS		<del></del>			<del></del>
b List any managers of the foundation who other entity) of which the foundation ha	no own 10% or more of t as a 10% or greater intere	ne stock of a corporation est.	(or an equally large por	tion of the ownership of a	partnersnip or
NONE	J .				
2 Information Regarding Contribut	ion, Grant Gift Loan	. Scholarship etc. F	Programs:		
Check here <b>X</b> if the foundation of				not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	ividuals or organizations	under other conditions,	complete items 2a, b, c, ar	nd d.
a The name, address, and telephone num	<u> </u>				
N/A	iber of e mail address of	the person to whom app	indutions should be usual	00000.	
11/41					
b The form in which applications should	he submitted and inform	ation and materials they	should include:		
N/A	20 Submitted and mileting	materials tricy			
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on award	ls, such as by neographic	cal areas, charitable fields	s, kinds of institutions of	r other factors:	
N/A	.o, outin as by goograping	ou. arvae, onarrabio nola.	., 31		
,					
323601 10.10-13				<del></del>	Form <b>990-PF</b> (201

C/O MARCUS FAMILY OFFICE, LLC Form 990-PF (2013) 58-0231691 Pag: Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) recipient or substantial contributor a Paid during the year AM FRIENDS OF THE ISRAEL DEMOCRACY NONE 501(C)(3) TO SUPPORT THE EXEMPT INSTITUTE PURPOSE OF THE 1266 WEST PACES FERRY ROAD, #615 RECIPIENT ORGANIZATION ATLANTA, GA 30327 5,000. ATLANTA AUSTISM CENTER CONSORTIUM NONE 501(C)(3) TO SUPPORT THE EXEMPT PURPOSE OF THE 1932 OAK GROVE ROAD NE ATLANTA, GA 30345 RECIPIENT ORGANIZATION 5,000. AUTISM SPEAKS NONE 501(C)(3) TO SUPPORT THE EXEMPT 99 WALL STREET - RESEARCH PARK PURPOSE OF THE PRINCETON, NJ 09854 RECIPIENT ORGANIZATION 1,000. BETH MEDRASH GOVOHA NONE 501(C)(3) TO SUPPORT THE EXEMPT 617 SIXTH STREET PURPOSE OF THE LAKEWOOD, NJ 08701 RECIPIENT ORGANIZATION 7,500. CHABAD AT EMORY 501(C)(3) TO SUPPORT THE EXEMPT NONE 1526 NORTH DECATUR RD. PURPOSE OF THE ATLANTA, GA 30307 RECIPIENT ORGANIZATION 18,000. SEE CONTINUATION SHEET(S) 357,632. Total b Approved for future payment NONE

323611 10-10-13

Total

Form **990-PF** (2013)

**▶** 3b

Part XVI-A	Analysis of Income-Producing	Activities
------------	------------------------------	------------

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income_		by section 512, 513, or 514	(e)
-	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
2	- <del>                                    </del>				
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments	· · · · · · · · · · · · · · · · · · ·				
3 Interest on savings and temporary cash					
investments			14	180.	
4 Dividends and interest from securities		. <u></u>	14	209,935.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	1,291.	
8 Gain or (loss) from sales of assets other					-
than inventory			18	85,436.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	296,842.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	296,842
(See worksheet in line 13 instructions to verify calculations	.)				

### Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).					
_ +						
	<u></u>					
3621 -10-13	Form <b>990-PF</b> (2					

OITH 330 11 (201	of C/O IMMCOD	LAMITUI	OLLICH, THE	30 0231031
Part XVII	Information Regarding	Transfers 1	To and Transactions and	Relationships With Noncharitable
	<b>Exempt Organizations</b>			·

1 Did the	organization directly or indir	rectly engage in any of th	e following	with any other organization	n described in secti	on 501(c) of		Yes	Nο
the Co	de (other than section 501(c)	)(3) organizations) or in s	section 527	, relating to political organi	zations?				
<b>a</b> Transfe	ers from the reporting founda	ation to a noncharitable e	xempt orga	anization of:					
(1) Ca	sh						1a(1)		_X_
(2) Ot	her assets					-	1a(2)		X
<b>b</b> Other to	ransactions:								
(1) Sa	les of assets to a noncharitat	ble exempt organization					1b(1)		<u>X</u>
• •	irchases of assets from a nor	, •	nization			:	1b(2)		X
	ental of facilities, equipment, o						1b(3)		X
• •	eimbursement arrangements						1b(4)		X
	ans or loan guarantees						1b(5)		X
	rformance of services or me						1b(6)		X
	g of facilities, equipment, mai	•		•			1c		X
	nswer to any of the above is		-			· · · · · · · · · · · · · · · · · · ·		ets,	
	rices given by the reporting for			d less than fair market value	e in any transaction	or snaring arrangement, sn	ow in		
	(b) Amount involved			exempt organization	(d) D				
(a)Line no	(b) Amount involved	<u> </u>	N/A	exempt organization	(u) Description	of transfers, transactions, and sh	aring arr	angeme	nts
			N/A						
		<u> </u>			<u></u>				
<del></del>									
		<del></del>			<b>-</b>				
				<del></del>					
	<del></del>	<del> </del>			<del></del>	<del></del>			
		-		-					
-		<u> </u>							
_									
2a is the f	foundation directly or indirect	tly affiliated with, or relate	ed to, one	or more tax-exempt organiz	zations described				
	ion 501(c) of the Code (other	•	•	· •			Yes	X	] No
	," complete the following sch					_			
	(a) Name of org			(b) Type of organization		(c) Description of relationshi	p		
	N/A								
	·								
							•		_
	nder penalties of perjury. I declare id belief, it is time, derrect, and cdr			accompanying schedules and		May	the IRS o	liscuss	this
Sign I ,	d beller, it is tiple, correct, and cor	implete peciaration of prepare	er (other than		ation of which prepare		n with the	e prepar (see ins	er tr)?
Here		<u> </u>		11/6/14	OFFICE		ີ Yes		□No
3	Signature of difficer of trustee	$\frac{1}{2}$		Date	Title				
	Print/Type preparer's na	ame Pr	eparer's si	gn <del>aturo</del>	Date	Check If PTIN			
		<u></u>			ار رو روا	self- employed			
Paid -	GREGORY W.		-2	<b>&lt;</b>	71-4-15		054		
Prepare		RE STEPHENS	TIL	LER LLC	—	Firm's EIN ► 58 – 06	735	24	
Use On			(_						
		60 SATELLIT		ULEVARD, STE	3600		_		
	DU	JLUTH, GA 30	0097			Phone no. 770-99			
						For	m <b>99</b> 0	)-PF	(2013)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the		<u>-</u>		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CHABAD INTOWN	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
928 PONCE DE LEON AVE.			PURPOSE OF THE	04 000
ATLANTA, GA 30306			RECIPIENT ORGANIZATION	84,000
CUADAD INTOUN	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
CHABAD INTOWN 928 PONCE DE LEON AVE.	NONE	501(0)(3)	PURPOSE OF THE	
			RECIPIENT ORGANIZATION	22,000
ATLANTA, GA 30306				
CHABAD	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
928 PONCE DE LEON AVE.			PURPOSE OF THE	
ATLANTA, GA 30306		ļ	RECIPIENT ORGANIZATION	2,500
CST CENTER FOR PROCESSING STUDIES	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
1325 NORTH COLLEGE AVENUE			PURPOSE OF THE	
CLAREMONT, CA 91711		<u>-</u>	RECIPIENT ORGANIZATION	16,000
GEORGIA AQUARIUM	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
225 BAKER STREET NW			PURPOSE OF THE	2 017
ATLANTA, GA 30313	-	<u> </u>	RECIPIENT ORGANIZATION	2,017
INDIANA UNIVERSITY FOUNDATION	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
425 UNIVERSITY BLVD			PURPOSE OF THE	
INDIANAPOLIS, IN 46202		-	RECIPIENT ORGANIZATION	5,000
	1			
JEWISH FEDERATION OF GREATER ATLANTA	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
1441 SPRING STREET, NW			PURPOSE OF THE	
ATLANTA, GA 30309			RECIPIENT ORGANIZATION	3,000
MARCUS AUTISM CENTER (CHILDREN'S	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
HEALTHCARE)			PURPOSE OF THE	
1687 TULLIE CIRCLE NE			RECIPIENT ORGANIZATION	
ATLANTA , GA 30329		<del></del>		1,000
	L.	E01/0\/3\	TO CUIDDODM THE EVENTS	
MARCUS AUTISM CENTER	NONE	501(C)(3)	TO SUPPORT THE EXEMPT PURPOSE OF THE	
1920 BRIARCLIFF ROAD			RECIPIENT ORGANIZATION	30,265
ATLANTA, GA 30329			3.03.12.110.1	
METOPHYSICAL SOCIETY OF AMERICA	NONE	501(C)(3)	TO SUPPORT THE EXEMPT	
502 E. BOONE AVENUE			PURPOSE OF THE	
SPOKANE, WA 99258			RECIPIENT ORGANIZATION	5,000
Total from continuation sheets				321,132

3 Grants and Contributions Paid During the	Year (Continuation)			<u></u>
Recipient	If recipient is an individual	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
PIEDMONT SCHOOL OF ATLANTA 1330 NORTH DRUID HILLS RD NE ATLANTA, GA 30319	NONE	501(C)(3)	TO SUPPORT THE EXEMPT PURPOSE OF THE RECIPIENT ORGANIZATION	140,000
		_	· · · · · · · · · · · · · · · · · · ·	
TZOHAR SEMINARY 6404 FORBES AVE. PITTSBURGH, PA 15217	NONE	501(C)(3)	TO SUPPORT THE EXEMPT PURPOSE OF THE RECIPIENT ORGANIZATION	10,000
,				· · ·
WILLIAM F BUCKLEY JR. PROGRAM 111 WHITNEY AVENUE NEW HAVEN, CT 06510-1232	NONE	501(C)(3)	TO SUPPORT THE EXEMPT PURPOSE OF THE RECIPIENT ORGANIZATION	100
WOUNDED WARRIOR PROJECT 4899 BELFORT RD. STE. 300	NONE	501(C)(3)	TO SUPPORT THE EXEMPT PURPOSE OF THE	
JACKSONVILLE, FL 32256			RECIPIENT ORGANIZATION	250
Total from continuation sheets				

FORM 990-PF INTERE	ST ON SAVI	NGS AND TE	MPOR	ARY CA	SH IN	VESTMENTS	STATEMENT	1
SOURCE		REV			ET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
INVESTMENT PORTFOLI	0	<del></del>	18	80.		180.		
TOTAL TO PART I, LI	NE 3		18	80.		180.		
FORM 990-PF	DIVIDEND	S AND INTE	EREST	FROM	SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A REVE PER B	NUE	(B) NET INVES' MENT INCO		
INVESTMENT PORTFOLIO	209,935	•	0.	209	,935.	209,93	5.	
TO PART I, LINE 4	209,935	•	0.	209	,935.	209,93	5.	
FORM 990-PF		OTHER	INCO	ME			STATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOKS		(B) ET INVEST- ENT INCOME		
OTHER INVESTMENT IN	ICOME	_		1,2	91.	1,291	•	
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =		1,2	91.	1,291	•	
FORM 990-PF	0'	THER PROFE	ESSIO	NAL FE	ES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVE NT INC		(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEME	NT FEES	39,300	).	39,	300.			0.
TO FORM 990-PF, PG	1, LN 16C	39,300	).	39,	300.			0.
	=							_

FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
EXCISE TAXES FOREIGN TAXES	38,127. 258.	0. 258.			0.
TO FORM 990-PF, PG 1, LN 18	38,385.	258.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK CHARGES OFFICE EXPENSE	25. 58.	0.			5.
TO FORM 990-PF, PG 1, LN 23	83.	0.		8	3.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND B	ALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
UNREALIZED APPRECIATION OF M	ARKETABLE SE	CURITIES		13,89	1.
	TT LINE 3			13,89	
TOTAL TO FORM 990-PF, PART I	ii, bina s				91.
FORM 990-PF	CORPORAT	E STOCK	<del>, , , , , , , , , , , , , , , , , , , </del>	STATEMENT	8
			OK VALUE		8
FORM 990-PF		ВО	OK VALUE 1,246,601.	STATEMENT FAIR MARKET	8

FORM 990-PF OT	HER INVESTMENTS	·	STATI	EMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE
OTHER INVESTMENTS	FMV	4,216,45	51. 4	,216,451.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	4,216,45	51. 4	,216,451.
	T OF OFFICERS, D FOUNDATION MANA		STAT	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
FREDERICK R MARCUS 1266 W PACES FERRY ROAD # 615 ATLANTA, GA 30327	PRESIDENT 5.00	9,000.	0.	0.
NANCY DUBOIS MARCUS 1266 W PACES FERRY ROAD # 615 ATLANTA, GA 30327	DIRECTOR 5.00	9,000.	0.	0.
DOUGLAS DINAPOLI 1266 W PACES FERRY ROAD # 615 ATLANTA, GA 30327	TREASURER 1.00	0.	0.	0.
FREDERICK SLAGLE 1266 W PACES FERRY ROAD # 615 ATLANTA, GA 30327	DIRECTOR 1.00	0.	0.	0.
SARA OGNIBENE LOFT 1266 W PACES FERRY ROAD # 615 ATLANTA, GA 30327	DIRECTOR & SEC	RETARY 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	18,000.	0.	0.

#### 990-PF PART II, LINES 10 & 13 DETAIL

#### CHESED, INC. FOR THE YEAR ENDED DECEMBER 31, 2013 EIN: 58-0231691

Security	Quántity	Price	Total Cost	Unrealized Gain/Loss	Market Value
Mutual Funds - usd					
DELAWARE CORPORATE BOND FUND INSTL CL	93,879.16	5 83	558,248	(10,933)	547,315
DOUBLELINE CORE FIXED INCOME FUND CL 1	45,643.04	10 70	510,697	(22,317)	488,381
DOUBLELINE TOTAL RETURN BOND FUND CL I	42,207.18	10 85	475,295	(20,302)	454,993
FRANKLIN FLOATING RATE DAILY ACCESS ADV CL	20,118.00	9 21	179,033	6,253	185,287
ISHARES CORE TOTAL U.S. BOND MARKET ETF	1,470.00	106 43	161,740	(5,288)	156,452
ISHARES IBOXX \$ INVT GRADE CORP BD	1,390 00	114 19	160,574	(1,852)	158,721
ISHARES U.S. PREFERRED STOCK ETF	5,600.00	36 83	212,242	(5,994)	206,248
LOOMIS SAYLES STRATEGIC INC FD CL Y	41,323.65	16 35	607,621	68,021	675,642
LORD ABBETT FLOATING RATE FUND CL F	29,798 49	9 49	268,708	14,080	282,788
PIMCO TOTAL RETURN FUND CL P	43,194 93	10 69	465,050	(3,296)	461,754
POWERSHARES PREFERRED PORTFOLIO	15,430.00	13.44	217,445	(10,065)	207,379
TEMPLETON GLBL BOND FD ADV CL	29,907.65	13.09	374,782	16,709	391,491
		•	4,191,435	25,016	4,216,451
Common Stock - usd					
ABBOTT LABS	950 00	38 33	30,945	5,469	36,414
ABBVIE INC SHS	690.00	52 81	25,630	10,809	36,439
AUTOMATIC DATA PROCESSING INC COM	440.00	80 80	29,439	6,113	35,552
BAXTER INTERNTL INC	570.00	69.55	38,556	1,088	39,644
CARDINAL HEALTH INC OHIO	590 00	66 81	25,531	13,887	39,418
CENTERPOINT ENERGY INC	1,320 00	23 18	25,680	4,918	30,598
CHEVRON CORP	360.00	124.91	37,546	7,422	44,968
CMS ENERGY CORP	390.00	26.77	9,345	1,095	10,440
CONAGRA FOODS INC	1,040 00	33 70	29,103	5,945	35,048
DDR CORP COM	1,660 00	15 37	26,173	(659)	25,514
DOMINION RES INC VA NEW COM	510.00	64.69	25,892	7,100	32,992
EDISON INTL CALIF	1,040.00	46.30	42,608	5,544	48,152
EXXON MOBIL CORP COM	620 00	101 20	51,763	10,981	62,744
JPMORGAN CHASE & CO	810 00	58 48	39,938	7,431	47,369
KELLOGG CO	720.00	61.07	38,573	5,397	43,970
KIMBERLY CLARK	390 00	104 46	30,519	10,220	40,739
MCDONALDS CORP COM	450 00	97 03	42,955		43,664
METLIFE INC COM	670 00	53 92	23,974		36,126
MICROSOFT CORP	1,240.00	37.41	37,922		46,388
MID AMERICA APT CMNTYS REIT	396.00	60.74	25,233		24,053
NEXTERA ENERGY INC SHS	660 00	85.62	39,572		56,509
NORTHEAST UTILITIES COM	760 00	42.39	31,597	619	32,216
NRG ENERGY INC	1,160.00	28.72	28,717	•	33,315
PAYCHEX INC	1,070.00	45.53	39,063	9,654	48,717
PG&E CORP	780 00	40 28	33,103	(1,684)	31,418
PPL CORPORATION	1,050 00	30 09	30,445		31,595
PROCTER & GAMBLE CO	690.00	81.41	45,130		56,173
PROLOGIS INC COM	830 00	36.95	31,304		30,669 37,810
PRUDENTIAL FINL INC COM	410 00 960 00	92 22	22,934 29,979		37,810
PUB SVC ENTERPRISE GRP	300.00	32 04			30,758
UNITED TECHS CORP COM	510.00	113.80 57 28	24,349 33,157		29,213
VENTAS INC REIT WAL-MART STORES INC	430 00	78 69	25,403		33,837
WAL-WART STORES INC	430 00	1003	1,052,078		1,246,601
TOTAL PORTFOLIO			5,243,513	219,539	5,463,052

#### Form 8868

(Rev. January 2014)

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

Type are filling for an Automatic 3-Month Extension, complete only Part I and check this box	Internal Rev	venue Service	► Information about Form 886	8 and its	instructions is at <sub>www.ir</sub> s gov/form	18868 •	]	
* 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 proving Member 100 per 10	• If you	are filing for an Aut	omatic 3-Month Extension, complet	e only Pa	rt I and check this box		<b>•</b>	X
Do not complete Part II unless. You have already been granted an automatic 3-month extension on a previously filed Form 8888 Electronically life controlled yills of the form 1890 yills of the controlled yills of the form 1890 yills of the controlled yi	-	<del>-</del>	-	_		this form).		
Electronic filling (p. figs). You can electronically file Form 8888 if you need a 3-month automatic extension of time to file (8 months for a corporation required to the Form 990-T), or an additional (not automatic) 3-month 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 Centain Personal Benefic Contracts, which must be sent to the IRS in paper format (see extructions). For more details on the electronic fling of this form, wast www in gov/leffile and click on e-file for Charless 8. Nonprofits Part I only A corporation required to the Form 990-T and requesting an automatic 6-month extension. The this box and complete Part I only At order corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time and order extertions.  Enter filer's identifying number Tippe or print Type or I only Type							m 8868	
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 980-T), or an additional (not automatic) 3-month extension of time to file any of the forms slicted in Part I or Part I with the exception of Form 890-T), information Return for Transfers Associated With Centar Revisions Benefit Contracts, which must be sent to the IRS in paper format (see enstructions). For more details on the electronic filing of this form, with the way any of the Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.  ### Automatic 3-Month Extension of Time. Only submit original (no copies needed).  ### Accorporation required to life Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.  ### Automatic 3-Month Extension of Time. Only submit original (no copies needed).  ### Accorporation required to life Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.  ### Accorporation required to life Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.  ### Accorporation required to life Form 990-T collections in the Enter I only.  ### Accorporation required to life Form 990-T collections in the Enter I only.  ### Accorporation required to life Form 990-T collections in the Enter I only.  ### Enter I dentifying number								oration
of time to file any of the forms listed in Part I for Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Banetic Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, wast twww vir.gov/diffile and click on o-file for Charines & Nonprofits    Part I								
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic liang of the form, with war vs. government of the form sent two vs. government of the form sent vs. government of the gov								
Machine   Mac								
Part I   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			·		(see mandenoms). For more details	Jii ti ic 0,000	a of the filming of this	,
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only Mill other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time fine frozenome tax returns.  Enter filter's is climbly in mumber Fine filter's common filter filter's provided filters and filter filter's provided filters and filter filter's provided filters and filters and form or other filer's see instructions.  CHBSED, INC.  Serployer identification number (EIN) or Employer identification number (ISN) or Inc.  Increased and common the more of the P.O. Down, Inc.  Increased and common the more of the Code  Increased and common the more the origination's four digit Group Exemption Number (ISN)  Increased and common the more the origination's four digit Group Exemption Number (ISN)  Increased and and common the more than the common the more of the Form 990-Tile exten					submit original (no copies nei	eded)		<del></del>
Warting comportations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time								
Application   Return   Application   Return   Application   Enter filter sidentifying number   Code   Income   Enter filter sidentifying number   Enter filter sidentifying number   Employer identification number (EIN) or CHESED, INC.   S8-0231691			e romi 990-1 and 10questing an acton	natic o-me	onth extension - check this box and	complete		. 🗀
Type or Part Private of Second East Returns.   Enter filer's identifying number (Filer) or C/O MARCUS FAMILY OFFICE, LLC   S8-0.2316.91    **The byte of C/O MARCUS FAMILY OFFICE, LLC   S6-0.2316.91    **The byte of C/O MARCUS FAMILY OFFICE, LLC   S6-0.2316.91    **The byte of C/O MARCUS FAMILY OFFICE, LLC   S6-0.2316.91    **The byte of Committee of Com		•	dia 1100 C flom) madanahan DCM	10- and t	runto munt una Form 7004 to roques	et an avtage	rion of time	<u> </u>
Name of exempt organization or other filer, see instructions.			ung 1120-C mers), parmersnips, neivi	ios, and ti	rusis musi use ronn 7004 to reques			<b></b>
CHESED, TNC.  C/O MARCUS FAMILY OFFICE, LLC  Second deserve interpretation of the protection of the pr		<del></del>						
C/O MARCUS FAMILY OFFICE, LLC   58-0231691				ctions.		Employer	identification num	Der (EIN) or
Number, street, and room or suite no. If a P.O. box, see instructions.  1266 W. PACES FERRY RD., NO. 615  Interviewed Street, which years are all provided and the street of the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for (file a separate application for each return)  Peter the Return code for the return that this application is for form 990-fle form 990-	print						E0 02216	0.1
Number, street, and room or suite not, B P.O. box, see instructions.   Social security number (SSN)	File by the							
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  ATLANTA, GA 30327  Enter the Return code for the return that this application is for (file a separate application for each return)  Application Is For Code Is For Code Form 990 or Form 990-EZ Form 990-F Form 990-	due date fo					Social sec	curity number (SSI)	<b>J</b> )
Enter the Return code for the return that this application is for (file a separate application for each return)    Application   Return   Application   Return   Application   Return   Application   Return   Separate   Se		1266 W.	PACES FERRY RD.,, N	10. 6	15			
Application   Return   Application   Return   Code   Is For	instructions	0.0, 10.11. 0. po		reign add	fress, see instructions.			
Application Is For Code Is For In Julia Is the Is In It Is For Is Set Is In It Is For Is In It Is For Is In It Is For Is It Is F		ATLANTA,	GA 30327		<del> </del>			
Application Is For Code Is For In Julia Is the Is In It Is For Is Set Is In It Is For Is In It Is For Is In It Is For Is It Is F								
ts For   Code   ts Forn 990 or Form 990 recompanies   O1   Form 990 recompanies   O2   Form 1041 recompanies   O3   Form 4720 (other than individual)   O9   Form 4720 (other than individual)   O9   Form 990 recompanies   O4   Form 5227   O5   Form 6069   O5   Form	Enter th	e Return code for th	e return that this application is for (file	a separa	te application for each return)			0 4
ts For   Code   ts Forn 990 or Form 990 recompanies   O1   Form 990 recompanies   O2   Form 1041 recompanies   O3   Form 4720 (other than individual)   O9   Form 4720 (other than individual)   O9   Form 990 recompanies   O4   Form 5227   O5   Form 6069   O5   Form								
Form 990 or Form 990-EZ  Form 990-BL  O2  Form 1041-A  O8  Form 4720 (individual)  O3  Form 4720 (individual)  O3  Form 4720 (individual)  O3  Form 6069  O4  Form 590-T (sec 401(a) or 408(a) trust)  O5  Form 6069  O6  Form 8870  O1  Telephone No. ► 1266 W PACES FERRY RD  O615 - ATLANTA, GA 30327  Telephone No. ► 404-240-7700  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 Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If the organization shore fine group, check this box  If the organization's return for the group, check this box  If the organization's return for:  AUGUST 15, 2014  Is for the organization's return for:  Image: Second organization or second fine organization required to file Form 990-T) extension of time until  AUGUST 15, 2014  Is for the organization's return for:  Image: Second organization for forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	Applica	tion		Return	Application			Return
Form 990-BL	ls For			Code	ls For			Code
Form 990-BL Form 990-BL Form 990-PF Form 5069 Form 5069 Form 8700 (sec 401(a) or 408(a) trust) Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 990-T (trust other than above)  O6 Form 8870 Form 8870  12  The books are in the care of ▶ 1266 W PACES FERRY RD Form 8870 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 Number (GEN) If it is for part of the group, check this box ▶ and attach a list with the names and Elix 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 AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ ☑ calendar year 2013 or ▶ tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	Form 99	0 or Form 990-EZ		01	Form 990-T (corporation)			07
Form 4720 (individual)  Form 990-PF  04 Form 5227  10  Form 990-T (sec 401(a) or 408(a) trust)  05 Form 6069  11  Form 990-T (trust other than above)  06 Form 8870  12  DOUGLAS P. DINAPOLT  12  The books are in the care of ▶ 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327  Telephone No. ▶ 404-240-7700  13  14 the organization does not have an office or place of business in the United States, check this box  15 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  16 If the organization of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for 1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2014  15 to the organization's return for:  16								08
Form 990-PF Form 990-T (sec 401(a) or 408(a) trust)  05 Form 6069  11 Form 990-T (trust other than above)  06 Form 8870  12  DOUGLAS P. DINAPOLT  The books are in the care of > 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327 Telephone No. > 404-240-7700  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 Number (GEN)  If it is for part of the group, check this box   and attach a list with the names and EINs of all members the extension is for 1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2014  It folls the exempt organization return for the organization named above. The extension is for the organization's return for:    X calendar year 2013 or   and ending	Form 47	20 (individual)		03	Form 4720 (other than individual)			09
Form 990-T (trust other than above)  DOUGLAS P. DINAPOLT  The books are in the care of ▶ 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327  Telephone No. ▶ 404-240-7700  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 Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box  If it is for part of the group, check this box  AUGUST 15, 2014  It office the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2013  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  Bif this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit.  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.					<del></del>			10
DOUGLAS P. DINAPOLT  The books are in the care of ▶ 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327  Telephone No.▶ 404-240-7700 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 Number (GEN) If this is for the whole group, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If this is for part of the group, check this box Image and attach a list with the names and ElNs of all members the extension is for 1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2014 Image and attach a list with the names and ElNs of all members the extension is for the organization's return for:    Trequest an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2014 Image and attach a list with the names and ElNs of all members the extension is for the organization's return for the organization named above. The extension is for the organization's return for the organization named above. The extension is for the organization return for the organization named above. The extension is for the organization return for the organization named above. The extension is for the organization and ending			108(a) trust)		1		<del></del> _	11
The books are in the care of ▶ 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327  Telephone No. ▶ 404-240-7700 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 Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for  1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ ▼ and ending , and ending , and ending  2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period  2 If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 8,600.  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 7,400.  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 3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								<del></del>
The books are in the care of ▶ 1266 W PACES FERRY RD 615 - ATLANTA, GA 30327  Telephone No. ▶ 404-240-7700 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 Number (GEN) . If this is for the whole group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  AUGUST 15, 2014 , to file the exempt organization required to file Form 990-T) extension of time until  AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2013 or  X calendar year 2013 or  If the tax year entered in line 1 is for less than 12 months, check reason:  Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	1 01111 00	o i (albot outlot alba						<del></del>
Telephone No. ▶ 404-240-7700 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 Number (GEN)  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If it is for part of the group, check this box  If the organization time until  AUGUST 15, 2014  It of lie fer exempt organization return for the organization named above. The extension is for the organization's return for:  If it is application is return for:  If it is a year entered in line 1 is for less than 12 months, check reason:  Initial return  Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	• The h	nooke are in the car			RD 615 - ATLANTA	. GA	30327	
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 Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for 1 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until								
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)				ما المطفحة	·			
and attach a list with the names and EINs of all members the extension is for  1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  □ X calendar year 2013 or  □ tax year beginning , and ending .  2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return  □ Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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  3a \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.						16 415 6	the whole serve	
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2013 or  tax year beginning , and ending  2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit.  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  3a \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								
AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:    X   Calendar year 2013   Calendar year beginning   , and ending   , and ending							ers the extension is	s for
is for the organization's return for:    X   Calendar year 2013   or	1 Ir						<b>.</b>	
tax year beginning , and ending  If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 8,600.  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit. 3b \$ 7,400.  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 3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	-			t organiza	ition return for the organization nam	ed above.	ine extension	
tax year beginning , and ending  If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 8,600.  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 7,400.  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 3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return								
Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit.  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  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	•	tax year begir	nning	, an	nd ending		<b>-</b> ·	
Change in accounting period  3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit.  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  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								
If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8968, see Form 8453-EO and Form 8879-EO for payment instructions.	2 If	<u> </u>	•	heck reas	son: LInitial return LI	Final return	1	
nonrefundable credits. See instructions  b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.							<del> </del>	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.				or 6069,	enter the tentative tax, less any	) !		
estimated tax payments made. Include any prior year overpayment allowed as a credit.  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 funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	no	onrefundable credits	s. See instructions			3a	_\$	8,600.
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  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								- 400
by using EFTPS (Electronic Federal Tax Payment System) See instructions  3c \$ 1,200.  Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	estimated tax payments made, include any prior year overpayment allowed as a credit.  3b   \$ 7,						7,400.	
Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.								
instructions.	b	using EFTPS (Elec	tronic Federal Tax Payment System)	See instru	uctions	3c	_\$	<u>1,200.</u>
LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.  Form 8868 (Rev. 1-2014) 12-31-13			make an electronic funds withdrawal	(direct de	abit) with this Form 8868, see Form	8453-EO an	nd Form 8879-EO f	or payment
TE TO I THE	LHA 323841	For Privacy Act an	d Paperwork Reduction Act Notice,	see instr	uctions.		Form 8868 (F	Rev 1-2014)

Form 8868 (Rev. 1 2014)					Page 4	
• If you are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check this	box		$\blacktriangleright$ $\mathbf{X}$	
Note. Only complete Part II if you have already been granted a				8868		
<ul> <li>If you are filing for an Automatic 3-Month Extension, comp</li> </ul>						
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origin	al (no c	opies ne	eded)	
		Enter filer's	identifyir	ng number	, see instructions	
Type or Name of exempt organization or other filer, see ins	or Name of exempt organization or other filer, see instructions			Employer identification number (EIN) or		
print CHESED, INC.	· •					
y the C/O MARCUS FAMILY OFFICE, LLC				58-0231691		
I DOV OUIT			Social se	Social security number (SSN)		
return See 1266 W. PACES FERRY RD.,,	<u>NO. 61</u>	5				
City, town or post office, state, and ZIP code For	a foreign add	fress, see instructions.				
ATLANTA, GA 30327						
Enter the Return code for the return that this application is for	(file a separa	te application for each return)	• •		0 4	
	<del></del>				<del></del>	
Application	Return	Application			Return	
is For	Code	ls For			Code	
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720 (other than individual)			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already grant		natic 3-month extension on a prev	ously file	d Form 88	368	
DOUGLAS P. DI						
• The books are in the care of ▶ 1266 W PACES	FERRY		<u>, GA</u>	30327		
Telephone No. ► <u>404-240-7700</u>	•	Fax No 🕨			. —	
<ul> <li>If the organization does not have an office or place of busin</li> </ul>					<b>&gt;</b>	
If this is for a Group Return, enter the organization's four dig						
box ▶		ach a list with the names and EINs of	all memb	ers the ext	ension is for	
4 I request an additional 3-month extension of time until	NOVEM	<u>BER 15, 2014</u>				
5 For calendar year $2013$ , or other tax year beginning		, and endin	=-			
6 If the tax year entered in line 5 is for less than 12 months	s, check reas	on L Initial return L	Final ı	etum		
Change in accounting period						
7 State in detail why you need the extension			~ >===	70077		
THE TAXPAYER IS STILL WAITIN		· · · · · · · · · · · · · · · · · · ·	S NEC	ESSAR	<u>Y 1N</u>	
ORDER TO FILE A COMPLETE AND	ACCUR	ATE RETURN				
			<del></del>	<del> </del> -		
8a If this application is for Forms 990-BL, 990-PF, 990-T, 47	20, or 6069,	enter the tentative tax, less any	1_		0 (00	
nonrefundable credits. See instructions.		<del></del>	8a	\$	8,600.	
b If this application is for Forms 990-PF, 990-T, 4720, or 60			Į	]		
tax payments made Include any prior year overpayment	allowed as a	a credit and any amount paid	- <u></u> -		0 (00	
previously with Form 8868			8b	\$	<u>8,600.</u>	
Balance due. Subtract line 8b from line 8a. Include your	. ,	th this form, if required, by using			^	
EFTPS (Electronic Federal Tax Payment System). See in:		sh be completed for Dort II a	8c	_\$	0.	
		st be completed for Part II o	-		and an and hall of	
Under penalties of perjury, I declare that I have examined this form, incit is true, correct, and complete, and that I am authorized to prepare this	inging accomp s form.	panying schedules and statements, and to	ine desi c	i my knowie	ege and belief,	
- 1 242		<b></b>	D-4-	<b>►</b> 8	12/14	
Signature Title		<u> </u>	Date		1222 122	
U				Form	18868 (Rev 1-2014)	