

EXTENDED TO NOVEMBER 15, 2024

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

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

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

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

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning		and ending	
B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization GEORGIA ASSOCIATION OF REALTORS, INC.		D Employer identification number 58-0836843
	Doing business as		E Telephone number 770-451-1831
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 6065 BARFIELD ROAD, SUITE 200		
	City or town, state or province, country, and ZIP or foreign postal code ATLANTA, GA 30328		
	F Name and address of principal officer: BRAD MOCK SAME AS C ABOVE		G Gross receipts \$ 9,809,588.
I Tax-exempt status: 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) 4947(a)(1) or 527		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No	
J Website: WWW.GAREALTOR.COM		H(b) Are all subordinates included? Yes No	
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other		H(c) Group exemption number	
L Year of formation: 1951		M State of legal domicile: GA	

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROFESSIONAL MEMBERSHIP ASSOCIATION FOR THE GEORGIA REAL ESTATE INDUSTRY.			
	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	402	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	402	
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	33	
	6 Total number of volunteers (estimate if necessary)	6	402	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	36,200.	
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.		
Revenue			Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	8	0.	0.
	9 Program service revenue (Part VIII, line 2g)	9	8,339,336.	8,400,424.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	1,491.	245,415.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	21,550.	-138,395.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	8,362,377.	8,507,444.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	344,803.	351,997.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	14	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	2,968,249.	3,193,937.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	b	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	4,341,541.	4,790,782.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	7,654,593.	8,336,716.
19 Revenue less expenses. Subtract line 18 from line 12	19	707,784.	170,728.	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	20	18,971,289.	18,322,324.
	21 Total liabilities (Part X, line 26)	21	4,296,751.	3,250,403.
22 Net assets or fund balances. Subtract line 21 from line 20	22	14,674,538.	15,071,921.	

Part II Signature Block					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.					
Sign Here	Signature of officer				Date
	BRAD MOCK, CEO				
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date	Check if self-employed
	TIFFANY T. ORR, CPA		TIFFANY T. ORR, CPA	11/06/24	<input type="checkbox"/>
	Firm's name			Firm's EIN	
	CARR, RIGGS & INGRAM, LLC			72-1396621	
	Firm's address			Phone no.	
	4004 SUMMIT BLVD NE, SUITE 800 ATLANTA, GA 30319			770.394.8000	

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE GEORGIA ASSOCIATION OF REALTORS WORKS TO ADVANCE THE REAL ESTATE INDUSTRY THROUGH THE PROTECTION OF PRIVATE PROPERTY RIGHTS, THE CONTINUING EDUCATION OF ITS MEMBERS, AND BY ACTING AS FACILITATORS OF THE AMERICAN DREAM OF HOMEOWNERSHIP.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,666,663. including grants of \$) (Revenue \$ 1,039,988.)

THE ASSOCIATION'S ANNUAL MEETINGS AND EDUCATIONAL PROGRAMS - THE ASSOCIATION HOSTS BUSINESS MEETINGS AND CONFERENCES ANNUALLY.

4b (Code:) (Expenses \$ 141,288. including grants of \$) (Revenue \$)

PUBLICATIONS OF GEORGIA REALTOR MAGAZINE - THE ASSOCIATION'S JOURNAL MADE AVAILABLE TO ALL MEMBERS WHICH PROVIDES EDUCATIONAL AND INFORMATIVE MATERIAL. A TOTAL OF 188,218 MAGAZINES WERE MAILED IN 2023.

4c (Code:) (Expenses \$ 5,528,765. including grants of \$ 351,997.) (Revenue \$ 7,324,236.)

OTHER ACTIVITIES RELATED TO THE ADVANCEMENT OF THE REAL ESTATE PROFESSION IN GEORGIA.

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 8,336,716.Form **990** (2023)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	52
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	33
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	X
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

☒ X

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	402			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent		402		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?				X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6 Did the organization have members or stockholders?			X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			X	
b Each committee with authority to act on behalf of the governing body?			X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O				X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	X	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed GA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
BRAD MOCK - 770-451-1831
6065 BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LISA M. SCULLY PRESIDENT	1.00	X		X				0.	0.	0.
(2) STEPHEN WALKER FIRST VICE PRESIDENT	1.00	X		X				0.	0.	0.
(3) JIM BARNER PRESIDENT - ELECT	1.00	X		X				0.	0.	0.
(4) JOEY TUCKER IMMEDIATE PAST PRESIDENT	1.00	X		X				0.	0.	0.
(5) MICHAEL BLACKBURN CHAIR	1.00	X		X				0.	0.	0.
(6) WENDY GRAVLIN CHAMBERS VICE CHAIR	1.00	X		X				0.	0.	0.
(7) DONNA DAVIS VICE PRESIDENT - GOVERNMENT	1.00	X		X				0.	0.	0.
(8) BIKEL FRENELLE VICE PRESIDENT - MEMBER &	1.00	X		X				0.	0.	0.
(9) ANN FOSTER VICE PRESIDENT - PROF. DEV	1.00	X		X				0.	0.	0.
(10) MICHAEL FAULKNER ADVISORY COUNCIL REPRESENT	1.00	X		X				0.	0.	0.
(11) CAREN ACHESON MEMBER	1.00	X						0.	0.	0.
(12) MARY ADDLETON MEMBER	1.00	X						0.	0.	0.
(13) CHRISTOPHER AHRENKIEL MEMBER	1.00	X						0.	0.	0.
(14) ERICA ALLEN MEMBER	1.00	X						0.	0.	0.
(15) LAWANDA ALLEN MEMBER	1.00	X						0.	0.	0.
(16) DANNY AMBERSON MEMBER	1.00	X						0.	0.	0.
(17) KARREN AMIDON MEMBER	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HEATHER ANDERSON MEMBER	1.00	X						0.	0.	0.
(19) REGENIA ANDREWS MEMBER	1.00	X						0.	0.	0.
(20) ENNIS ANTOINE MEMBER	1.00	X						0.	0.	0.
(21) ALICIA APPLING MEMBER	1.00	X						0.	0.	0.
(22) FRANCIS ARNAU MEMBER	1.00	X						0.	0.	0.
(23) DEIRDRE ARROWOOD MEMBER	1.00	X						0.	0.	0.
(24) MINDY ATTAWAY MEMBER	1.00	X						0.	0.	0.
(25) MICHELLE BAIRD MEMBER	1.00	X						0.	0.	0.
(26) JAN BAKER MEMBER	1.00	X						0.	0.	0.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,275,271.	0.	114,033.
d Total (add lines 1b and 1c)								1,275,271.	0.	114,033.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

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3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NOVA COMMERCIAL INTERIORS INC 1190 SHALLOWFORD RD, MARIETTA, GA 30066	CONSTRUCTION	409,082.
COX MEDIA GROUP PO BOX 83191, CHICAGO, IL 60691	ADVERTISING	150,000.
QUAD GRAPHICS PO BOX 845858, BOSTON, MA 02284	PRINTING	118,383.
WEISSMAN, 3500 LENOX RD ONE ALLIANCE, 4TH FL, ATLANTA, GA 30326	REAL ESTATE/LEGAL SERVICES	110,544.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

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SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) CHRISTY BARNARD MEMBER	1.00	X						0.	0.	0.
(28) ANGELA BARNER MEMBER	1.00	X						0.	0.	0.
(29) ANNE BARNES MEMBER	1.00	X						0.	0.	0.
(30) REBECCA BATES MEMBER	1.00	X						0.	0.	0.
(31) DANA BAUGUSS MEMBER	1.00	X						0.	0.	0.
(32) ARIEL BAVERMAN MEMBER	1.00	X						0.	0.	0.
(33) TOM BECKER MEMBER	1.00	X						0.	0.	0.
(34) SHEILA BELCHER MEMBER	1.00	X						0.	0.	0.
(35) PATRICK BELL MEMBER	1.00	X						0.	0.	0.
(36) SHELLEY BELL MEMBER	1.00	X						0.	0.	0.
(37) KELLY BERRY MEMBER	1.00	X						0.	0.	0.
(38) SHARON BEVINS MEMBER	1.00	X						0.	0.	0.
(39) KEITH BIGGS MEMBER	1.00	X						0.	0.	0.
(40) BILL BOATMAN MEMBER	1.00	X						0.	0.	0.
(41) DEASHA BOND MEMBER	1.00	X						0.	0.	0.
(42) HEATHER BONTRAGER MEMBER	1.00	X						0.	0.	0.
(43) JOI BOSTIC MEMBER	1.00	X						0.	0.	0.
(44) DOT BOSWORTH MEMBER	1.00	X						0.	0.	0.
(45) PATRICIA BOWER MEMBER	1.00	X						0.	0.	0.
(46) LAWRENCE BOWERS MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) ANDREA BOWLES MEMBER	1.00	X						0.	0.	0.
(48) MARVETTA BOZEMAN MEMBER	1.00	X						0.	0.	0.
(49) PATRICIA BRADFORD MEMBER	1.00	X						0.	0.	0.
(50) KIM BRAGG MEMBER	1.00	X						0.	0.	0.
(51) RONALD BRANCH MEMBER	1.00	X						0.	0.	0.
(52) SANDRA BRANCH MEMBER	1.00	X						0.	0.	0.
(53) TICE BRASHEAR MEMBER	1.00	X						0.	0.	0.
(54) RYAN BRASHEAR MEMBER	1.00	X						0.	0.	0.
(55) TERRI BRASWELL MEMBER	1.00	X						0.	0.	0.
(56) TOD BRINEGAR MEMBER	1.00	X						0.	0.	0.
(57) JENICE BRINKLEY MEMBER	1.00	X						0.	0.	0.
(58) PERCY BRINKLEY MEMBER	1.00	X						0.	0.	0.
(59) MARY BROCK MEMBER	1.00	X						0.	0.	0.
(60) MELISSA BROCK MEMBER	1.00	X						0.	0.	0.
(61) NAKIA BROOKS MEMBER	1.00	X						0.	0.	0.
(62) SHEILA BROWER MEMBER	1.00	X						0.	0.	0.
(63) CYNTHIA BROWN MEMBER	1.00	X						0.	0.	0.
(64) KATHRYN BROWN MEMBER	1.00	X						0.	0.	0.
(65) SARALEE BROWN MEMBER	1.00	X						0.	0.	0.
(66) BETTY BRYANT MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) ANGIE BUFFINGTON MEMBER	1.00	X						0.	0.	0.
(68) MISTY BUNDRUM MEMBER	1.00	X						0.	0.	0.
(69) JOHN BUNN MEMBER	1.00	X						0.	0.	0.
(70) STEPHANIE BURDETT MEMBER	1.00	X						0.	0.	0.
(71) CHRISTOPHER BURELL MEMBER	1.00	X						0.	0.	0.
(72) ELLEN BUSH MEMBER	1.00	X						0.	0.	0.
(73) FRANK BUTCHER MEMBER	1.00	X						0.	0.	0.
(74) IVA REBECCA BUTLER MEMBER	1.00	X						0.	0.	0.
(75) DONNA CADE MEMBER	1.00	X						0.	0.	0.
(76) JACKIE CAMPBELL MEMBER	1.00	X						0.	0.	0.
(77) MARBIN CAMPOS MEMBER	1.00	X						0.	0.	0.
(78) MICHAEL CANOVA MEMBER	1.00	X						0.	0.	0.
(79) MANDY CHAMBERS MEMBER	1.00	X						0.	0.	0.
(80) SHANNON CHAMBERS MEMBER	1.00	X						0.	0.	0.
(81) CODY CHEMBARS MEMBER	1.00	X						0.	0.	0.
(82) ALEX CHIANG MEMBER	1.00	X						0.	0.	0.
(83) JUDY CHIN MEMBER	1.00	X						0.	0.	0.
(84) EDWINA CLANTON MEMBER	1.00	X						0.	0.	0.
(85) BOB CLARK MEMBER	1.00	X						0.	0.	0.
(86) HOLLI CLEM MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(87) RANDY CLEMENTS MEMBER	1.00	X						0.	0.	0.
(88) ROZANNE COLLINS MEMBER	1.00	X						0.	0.	0.
(89) VICTOR COLLINS MEMBER	1.00	X						0.	0.	0.
(90) JOY COOPER MEMBER	1.00	X						0.	0.	0.
(91) MIKE CORBITT MEMBER	1.00	X						0.	0.	0.
(92) BRAD COWART MEMBER	1.00	X						0.	0.	0.
(93) CYNTHIA CRAWFORD MEMBER	1.00	X						0.	0.	0.
(94) ERIC CRAWFORD MEMBER	1.00	X						0.	0.	0.
(95) ANGEL CRAYTON MEMBER	1.00	X						0.	0.	0.
(96) JOHNATHAN CREGO MEMBER	1.00	X						0.	0.	0.
(97) CARMEN CRIBBS MEMBER	1.00	X						0.	0.	0.
(98) WILL CURRY MEMBER	1.00	X						0.	0.	0.
(99) JANKEN DANIELS MEMBER	1.00	X						0.	0.	0.
(100) ARLENE DAVIS MEMBER	1.00	X						0.	0.	0.
(101) CYNTHIA DAVIS MEMBER	1.00	X						0.	0.	0.
(102) STEVEN DAVIS MEMBER	1.00	X						0.	0.	0.
(103) TRACY DEAN MEMBER	1.00	X						0.	0.	0.
(104) KAREN DEVONSHIRE MEMBER	1.00	X						0.	0.	0.
(105) KIM DILDY MEMBER	1.00	X						0.	0.	0.
(106) SHEILA DONEY MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(107) CHRISSY DONOVAN MEMBER	1.00	X						0.	0.	0.
(108) ADRIENNE DOWDY MEMBER	1.00	X						0.	0.	0.
(109) ADRIANE DRAGOMIRESCU MEMBER	1.00	X						0.	0.	0.
(110) BRIANNE DRAKE MEMBER	1.00	X						0.	0.	0.
(111) CHARLES DUNCAN MEMBER	1.00	X						0.	0.	0.
(112) KEVIN DUNCAN MEMBER	1.00	X						0.	0.	0.
(113) BARBARA DYER MEMBER	1.00	X						0.	0.	0.
(114) KIMBERLY EASTHOPE MEMBER	1.00	X						0.	0.	0.
(115) LORRI EDWARDS MEMBER	1.00	X						0.	0.	0.
(116) GEORGE EICHLER MEMBER	1.00	X						0.	0.	0.
(117) ARCHIE EMERSON MEMBER	1.00	X						0.	0.	0.
(118) TODD EMERSON MEMBER	1.00	X						0.	0.	0.
(119) KINSER EULER MEMBER	1.00	X						0.	0.	0.
(120) FAYE EVANS MEMBER	1.00	X						0.	0.	0.
(121) JAMES FAIN MEMBER	1.00	X						0.	0.	0.
(122) MICHAEL FISCHER MEMBER	1.00	X						0.	0.	0.
(123) STEVEN FISCHER MEMBER	1.00	X						0.	0.	0.
(124) KIMBERLY FRESHWATER MEMBER	1.00	X						0.	0.	0.
(125) TRACI FULLER MEMBER	1.00	X						0.	0.	0.
(126) CAMILLE GARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(127) RENE' GARLAND MEMBER	1.00	X						0.	0.	0.
(128) BRANDY GARNT0 MEMBER	1.00	X						0.	0.	0.
(129) CAROLYN GARRETT MEMBER	1.00	X						0.	0.	0.
(130) KELLY GATES MEMBER	1.00	X						0.	0.	0.
(131) MICHELLE GIBBONS MEMBER	1.00	X						0.	0.	0.
(132) SHERRY GIBBS MEMBER	1.00	X						0.	0.	0.
(133) MICHELLE GIBSON MEMBER	1.00	X						0.	0.	0.
(134) JOHN GILBERT MEMBER	1.00	X						0.	0.	0.
(135) THOMAS GILLETT MEMBER	1.00	X						0.	0.	0.
(136) PATRICIA GOODWIN MEMBER	1.00	X						0.	0.	0.
(137) SAUNDRA GREEN MEMBER	1.00	X						0.	0.	0.
(138) JANE GREENWAY MEMBER	1.00	X						0.	0.	0.
(139) MICHELLE GRIFFIN MEMBER	1.00	X						0.	0.	0.
(140) SHCOBY GRIFFIN MEMBER	1.00	X						0.	0.	0.
(141) PAIGE GROVE MEMBER	1.00	X						0.	0.	0.
(142) KIMBERLY GULLATT MEMBER	1.00	X						0.	0.	0.
(143) AMY GUTTING MEMBER	1.00	X						0.	0.	0.
(144) MICHELE GUTTING MEMBER	1.00	X						0.	0.	0.
(145) KATHY HADDOCK MEMBER	1.00	X						0.	0.	0.
(146) KATIE HALL MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(147) HUGH HAMBY MEMBER	1.00	X						0.	0.	0.
(148) JAMES HAMBY MEMBER	1.00	X						0.	0.	0.
(149) EMILY HAMIL MEMBER	1.00	X						0.	0.	0.
(150) BOB HAMILTON MEMBER	1.00	X						0.	0.	0.
(151) REGINA HARRISON MEMBER	1.00	X						0.	0.	0.
(152) KAREN HATCHER MEMBER	1.00	X						0.	0.	0.
(153) LINDA HAWK MEMBER	1.00	X						0.	0.	0.
(154) TERESA HAWK MEMBER	1.00	X						0.	0.	0.
(155) DEXTER HAYNES MEMBER	1.00	X						0.	0.	0.
(156) BERRY HENDERSON MEMBER	1.00	X						0.	0.	0.
(157) JAMES LEE HERNDON MEMBER	1.00	X						0.	0.	0.
(158) R. KAREN HEWITT MEMBER	1.00	X						0.	0.	0.
(159) DWAYNE HICKS MEMBER	1.00	X						0.	0.	0.
(160) JACKIE HICKS MEMBER	1.00	X						0.	0.	0.
(161) AMELIA HIDY MEMBER	1.00	X						0.	0.	0.
(162) JACQUELINE HILL MEMBER	1.00	X						0.	0.	0.
(163) FREDERICK HOGAN MEMBER	1.00	X						0.	0.	0.
(164) STEVE HOLCOMB MEMBER	1.00	X						0.	0.	0.
(165) GEORGE HOLTZMAN MEMBER	1.00	X						0.	0.	0.
(166) JIM HOOD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(167) AL HOOKER MEMBER	1.00	X						0.	0.	0.
(168) DIANNA HORNES MEMBER	1.00	X						0.	0.	0.
(169) SANDRA HOUSTON MEMBER	1.00	X						0.	0.	0.
(170) DEANGELA HUDSON MEMBER	1.00	X						0.	0.	0.
(171) LAVETTA HUDSON MEMBER	1.00	X						0.	0.	0.
(172) EARL HUGGINS MEMBER	1.00	X						0.	0.	0.
(173) VICTORIA HUGHES MEMBER	1.00	X						0.	0.	0.
(174) JACKIE HUMPHREY MEMBER	1.00	X						0.	0.	0.
(175) VIVIAN HUTHWAITE MEMBER	1.00	X						0.	0.	0.
(176) ETHAN HUTTEN MEMBER	1.00	X						0.	0.	0.
(177) JOSEPH IANNAcone MEMBER	1.00	X						0.	0.	0.
(178) KIMBERLY ILER-MORGAN MEMBER	1.00	X						0.	0.	0.
(179) LINDA JACKSON MEMBER	1.00	X						0.	0.	0.
(180) MARTHA JACKSON MEMBER	1.00	X						0.	0.	0.
(181) R. NEAL JACKSON MEMBER	1.00	X						0.	0.	0.
(182) DOUG JEFcoat MEMBER	1.00	X						0.	0.	0.
(183) KYRIA JEFFERIES MEMBER	1.00	X						0.	0.	0.
(184) TERRENCE JENKINS MEMBER	1.00	X						0.	0.	0.
(185) RICHARD JOHNS MEMBER	1.00	X						0.	0.	0.
(186) KELLY JOHNSON MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(187) SANDY JOHNSON-GRIMES MEMBER	1.00	X						0.	0.	0.
(188) DENNIS JONES MEMBER	1.00	X						0.	0.	0.
(189) KIMBERLY JONES MEMBER	1.00	X						0.	0.	0.
(190) LATONIA JONES MEMBER	1.00	X						0.	0.	0.
(191) SUSAN JONES MEMBER	1.00	X						0.	0.	0.
(192) WILLIAM JONES MEMBER	1.00	X						0.	0.	0.
(193) EVERETT KENNEDY MEMBER	1.00	X						0.	0.	0.
(194) JENEA KENNEDY MEMBER	1.00	X						0.	0.	0.
(195) NORMAN KENNEDY MEMBER	1.00	X						0.	0.	0.
(196) WHITNEY KENNEDY MEMBER	1.00	X						0.	0.	0.
(197) JO KENNEY MEMBER	1.00	X						0.	0.	0.
(198) BARBARA KENNON MEMBER	1.00	X						0.	0.	0.
(199) EBONI KILLIAN MEMBER	1.00	X						0.	0.	0.
(200) YOUNG JA KIM MEMBER	1.00	X						0.	0.	0.
(201) FARON W KING MEMBER	1.00	X						0.	0.	0.
(202) ROBERT KOZLOWSKI MEMBER	1.00	X						0.	0.	0.
(203) KAREN KURTZ MEMBER	1.00	X						0.	0.	0.
(204) MARY BETH LAKE MEMBER	1.00	X						0.	0.	0.
(205) MATTHEW LAMARSH MEMBER	1.00	X						0.	0.	0.
(206) KAREN LANCE MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(207) ROBIN LANCE MEMBER	1.00	X						0.	0.	0.
(208) ASHLEY LANGFORD MEMBER	1.00	X						0.	0.	0.
(209) TREVOR LARISCY MEMBER	1.00	X						0.	0.	0.
(210) SHANDA LAWS MEMBER	1.00	X						0.	0.	0.
(211) DAVID LECRAW MEMBER	1.00	X						0.	0.	0.
(212) PAMELA LIGHTSEY MEMBER	1.00	X						0.	0.	0.
(213) TRISTA LINDSEY MEMBER	1.00	X						0.	0.	0.
(214) CYNTHIA LIPPERT MEMBER	1.00	X						0.	0.	0.
(215) DENISE LO MEMBER	1.00	X						0.	0.	0.
(216) GAIL LONG MEMBER	1.00	X						0.	0.	0.
(217) DORRIE LOVE MEMBER	1.00	X						0.	0.	0.
(218) MARY LUSTER MEMBER	1.00	X						0.	0.	0.
(219) CLAUDIA LYLE MEMBER	1.00	X						0.	0.	0.
(220) JANICE MACMILLAN MEMBER	1.00	X						0.	0.	0.
(221) KIMBERLY MAGEE MEMBER	1.00	X						0.	0.	0.
(222) JENNIFER MANSFIELD MEMBER	1.00	X						0.	0.	0.
(223) MURRAY MARSHALL MEMBER	1.00	X						0.	0.	0.
(224) LANE MARTIN MEMBER	1.00	X						0.	0.	0.
(225) MARK MARTIN MEMBER	1.00	X						0.	0.	0.
(226) JESSICA MASON MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(227) CHRISTOPHER MATOS-ROGERS MEMBER	1.00	X						0.	0.	0.
(228) LA FONYA MAYFIELD MEMBER	1.00	X						0.	0.	0.
(229) JOHN MAZZA MEMBER	1.00	X						0.	0.	0.
(230) CHRISTOPHER MCCALL MEMBER	1.00	X						0.	0.	0.
(231) ROSHEATA MCCLAIN MEMBER	1.00	X						0.	0.	0.
(232) STEPHANIE MCCLUSKY MEMBER	1.00	X						0.	0.	0.
(233) LANE MCCORMACK MEMBER	1.00	X						0.	0.	0.
(234) LATESHA MCCOY MEMBER	1.00	X						0.	0.	0.
(235) CASSANDRA MCCRORY MEMBER	1.00	X						0.	0.	0.
(236) HEATHER MCELROY MEMBER	1.00	X						0.	0.	0.
(237) KRISTEN MCMURRAY MEMBER	1.00	X						0.	0.	0.
(238) SHAWN MCNEELY MEMBER	1.00	X						0.	0.	0.
(239) TOMECA MCPHERSON MEMBER	1.00	X						0.	0.	0.
(240) SHAWN MECK MEMBER	1.00	X						0.	0.	0.
(241) JACQUALINE MEEKS MEMBER	1.00	X						0.	0.	0.
(242) JAMIE MERTZ MEMBER	1.00	X						0.	0.	0.
(243) ED MEYBOHM MEMBER	1.00	X						0.	0.	0.
(244) DONNA MIDDLEBROOKS MEMBER	1.00	X						0.	0.	0.
(245) NEEL MIDHA MEMBER	1.00	X						0.	0.	0.
(246) DENISE MIKELL MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(247) MICHELE MILLER MEMBER	1.00	X						0.	0.	0.
(248) KIMBERLY MILTIADES MEMBER	1.00	X						0.	0.	0.
(249) TYEASHA MINOR MEMBER	1.00	X						0.	0.	0.
(250) MELANIE MITCHELL MEMBER	1.00	X						0.	0.	0.
(251) PATRICK MITCHELL MEMBER	1.00	X						0.	0.	0.
(252) RIKI MITCHELL MEMBER	1.00	X						0.	0.	0.
(253) SUZANNE MONTGOMERY MEMBER	1.00	X						0.	0.	0.
(254) DON MOORE MEMBER	1.00	X						0.	0.	0.
(255) HARRICE MOORE MEMBER	1.00	X						0.	0.	0.
(256) LEATRICE MORGAN MEMBER	1.00	X						0.	0.	0.
(257) RAYMOND MORRIS MEMBER	1.00	X						0.	0.	0.
(258) CAROL MOSON MEMBER	1.00	X						0.	0.	0.
(259) TYLER MOUCHET MEMBER	1.00	X						0.	0.	0.
(260) DONNA MURPHY MEMBER	1.00	X						0.	0.	0.
(261) PAT MURPHY MEMBER	1.00	X						0.	0.	0.
(262) BILL MURRAY MEMBER	1.00	X						0.	0.	0.
(263) MAURA NEILL MEMBER	1.00	X						0.	0.	0.
(264) JESSIE NELMS MEMBER	1.00	X						0.	0.	0.
(265) CAITLIN NEWSOME MEMBER	1.00	X						0.	0.	0.
(266) JANICE NHARE MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(267) JESSICA ODEN MEMBER	1.00	X						0.	0.	0.
(268) LISA ODEN MEMBER	1.00	X						0.	0.	0.
(269) EDWIN O'NEAL MEMBER	1.00	X						0.	0.	0.
(270) AMBER ORR MEMBER	1.00	X						0.	0.	0.
(271) CECI OSBURN MEMBER	1.00	X						0.	0.	0.
(272) YVONNE OTTS MEMBER	1.00	X						0.	0.	0.
(273) CARLY OXENREIDER MEMBER	1.00	X						0.	0.	0.
(274) GRETCHEN OZBURN MEMBER	1.00	X						0.	0.	0.
(275) DAWN PARADISE MEMBER	1.00	X						0.	0.	0.
(276) DAN PARKER MEMBER	1.00	X						0.	0.	0.
(277) PETRA PARKER MEMBER	1.00	X						0.	0.	0.
(278) SUSAN PATTERSON MEMBER	1.00	X						0.	0.	0.
(279) BEAU PATTON MEMBER	1.00	X						0.	0.	0.
(280) EDWARD PATTON MEMBER	1.00	X						0.	0.	0.
(281) KRISTY W. PENNINGTON MEMBER	1.00	X						0.	0.	0.
(282) MICHAEL PENNINGTON MEMBER	1.00	X						0.	0.	0.
(283) RONNIE PERRY MEMBER	1.00	X						0.	0.	0.
(284) KARMEN PHARRIS MEMBER	1.00	X						0.	0.	0.
(285) KELLI PHILLIPS MEMBER	1.00	X						0.	0.	0.
(286) DARRYL PIERCE MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(287) JENNIFER PINO MEMBER	1.00	X						0.	0.	0.
(288) TAMMY PLAMONDON MEMBER	1.00	X						0.	0.	0.
(289) KIMBERLY POND MEMBER	1.00	X						0.	0.	0.
(290) DEBORAH POOLE MEMBER	1.00	X						0.	0.	0.
(291) LINDA PORTERFIELD MEMBER	1.00	X						0.	0.	0.
(292) DEBORAH PRANGE MEMBER	1.00	X						0.	0.	0.
(293) JUDY PRESLEY MEMBER	1.00	X						0.	0.	0.
(294) JOY PURVIS MEMBER	1.00	X						0.	0.	0.
(295) JULIE QUIGLEY MEMBER	1.00	X						0.	0.	0.
(296) DENISE QUINLAN MEMBER	1.00	X						0.	0.	0.
(297) PENNY RAFFERTY MEMBER	1.00	X						0.	0.	0.
(298) JEFFREY RAINES MEMBER	1.00	X						0.	0.	0.
(299) CINDY RAMPLEY MEMBER	1.00	X						0.	0.	0.
(300) BRADLEY RANDALL MEMBER	1.00	X						0.	0.	0.
(301) BILL RAWLINGS MEMBER	1.00	X						0.	0.	0.
(302) RODNEY RAWLS MEMBER	1.00	X						0.	0.	0.
(303) JULIE RAY MEMBER	1.00	X						0.	0.	0.
(304) NICOLE READDICK MEMBER	1.00	X						0.	0.	0.
(305) MANUEL RECINOS MEMBER	1.00	X						0.	0.	0.
(306) FAITH REID MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(307) JEAN RICKETTS MEMBER	1.00	X						0.	0.	0.
(308) LAURA RITTENBERG MEMBER	1.00	X						0.	0.	0.
(309) VALERY RIVERA MEMBER	1.00	X						0.	0.	0.
(310) WANDA ROACH MEMBER	1.00	X						0.	0.	0.
(311) DEBORAH ROBINSON MEMBER	1.00	X						0.	0.	0.
(312) SHANNON ROCHE MEMBER	1.00	X						0.	0.	0.
(313) ROBIN ROGERS MEMBER	1.00	X						0.	0.	0.
(314) DOUGLAS ROTH MEMBER	1.00	X						0.	0.	0.
(315) WILLIAM ROUTH, III MEMBER	1.00	X						0.	0.	0.
(316) SHERRY SANDERS MEMBER	1.00	X						0.	0.	0.
(317) CARL SCHULTZ MEMBER	1.00	X						0.	0.	0.
(318) CHERI SCRANAGE MEMBER	1.00	X						0.	0.	0.
(319) JENNIFER SCROGGS MEMBER	1.00	X						0.	0.	0.
(320) JONATHON SEARCY MEMBER	1.00	X						0.	0.	0.
(321) CLINT SETSER MEMBER	1.00	X						0.	0.	0.
(322) JOAN SHANKS MEMBER	1.00	X						0.	0.	0.
(323) BILAL SHAREEF MEMBER	1.00	X						0.	0.	0.
(324) MIDI SHAW MEMBER	1.00	X						0.	0.	0.
(325) JOE SILVA MEMBER	1.00	X						0.	0.	0.
(326) CHRIS SIMMONS MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(327) GLEN SLAPPEY MEMBER	1.00	X						0.	0.	0.
(328) BEKKI SMITH MEMBER	1.00	X						0.	0.	0.
(329) DIANE SMITH MEMBER	1.00	X						0.	0.	0.
(330) JIM SMITH MEMBER	1.00	X						0.	0.	0.
(331) KIRBI SMITH MEMBER	1.00	X						0.	0.	0.
(332) LAURA SMITH MEMBER	1.00	X						0.	0.	0.
(333) T. DALLAS SMITH MEMBER	1.00	X						0.	0.	0.
(334) FATIMA SOLTERO MEMBER	1.00	X						0.	0.	0.
(335) MONICA SPILLANE CERRONE MEMBER	1.00	X						0.	0.	0.
(336) JENNIFER SPRALDING MEMBER	1.00	X						0.	0.	0.
(337) TYNA STEVENSON MEMBER	1.00	X						0.	0.	0.
(338) MIKE STOTT MEMBER	1.00	X						0.	0.	0.
(339) KRISTEN STOUFFER MEMBER	1.00	X						0.	0.	0.
(340) SARAH STOVALL MEMBER	1.00	X						0.	0.	0.
(341) CAMMY STRICKLAND MEMBER	1.00	X						0.	0.	0.
(342) MICHELLE STROTT MEMBER	1.00	X						0.	0.	0.
(343) BRANDY SUTTON MEMBER	1.00	X						0.	0.	0.
(344) KERRI SWEARINGEN MEMBER	1.00	X						0.	0.	0.
(345) ANGELA TAYLOR MEMBER	1.00	X						0.	0.	0.
(346) JESSICA TAYLOR MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(347) WILLIAM TEMPLE MEMBER	1.00	X						0.	0.	0.
(348) TAYLOR THANOS MEMBER	1.00	X						0.	0.	0.
(349) STACEY THIBODEAUX MEMBER	1.00	X						0.	0.	0.
(350) KAREN THOMAS MEMBER	1.00	X						0.	0.	0.
(351) KEVIN THOMAS MEMBER	1.00	X						0.	0.	0.
(352) MELINDA THOMAS MEMBER	1.00	X						0.	0.	0.
(353) JUDY THOMASON MEMBER	1.00	X						0.	0.	0.
(354) BRENDA THOMPSON MEMBER	1.00	X						0.	0.	0.
(355) KATHERINE THOMPSON MEMBER	1.00	X						0.	0.	0.
(356) SCOTTIE THOMPSON MEMBER	1.00	X						0.	0.	0.
(357) VALERIE THOMPSON MEMBER	1.00	X						0.	0.	0.
(358) KELLY THRASH MEMBER	1.00	X						0.	0.	0.
(359) CHANNON THURMOND MEMBER	1.00	X						0.	0.	0.
(360) VIKKI TRAYWICK MEMBER	1.00	X						0.	0.	0.
(361) GLORIA TREADWAY MEMBER	1.00	X						0.	0.	0.
(362) JULIE TRESSLER MEMBER	1.00	X						0.	0.	0.
(363) TODD TUCKER MEMBER	1.00	X						0.	0.	0.
(364) DANA TUCKER-HILL MEMBER	1.00	X						0.	0.	0.
(365) ERIN VAUGHN MEMBER	1.00	X						0.	0.	0.
(366) JUSTIN VICKERY MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(367) JESSICA VICTORIA MEMBER	1.00	X						0.	0.	0.
(368) GREG WADDELL MEMBER	1.00	X						0.	0.	0.
(369) JESSICA WADE MEMBER	1.00	X						0.	0.	0.
(370) DOLORES WAHL MEMBER	1.00	X						0.	0.	0.
(371) LIONEL WALKER MEMBER	1.00	X						0.	0.	0.
(372) SHANNON WATKINS MEMBER	1.00	X						0.	0.	0.
(373) APRIL WEAVER MEMBER	1.00	X						0.	0.	0.
(374) CYNTHIA WEISER MEMBER	1.00	X						0.	0.	0.
(375) JANICE WESTER MEMBER	1.00	X						0.	0.	0.
(376) VANESSA WESTFALL MEMBER	1.00	X						0.	0.	0.
(377) BUDDY WESTON MEMBER	1.00	X						0.	0.	0.
(378) SIERRA WESTRICK MEMBER	1.00	X						0.	0.	0.
(379) JAMES WHALEY MEMBER	1.00	X						0.	0.	0.
(380) SCOTT WHELCHER MEMBER	1.00	X						0.	0.	0.
(381) B. WHITE MEMBER	1.00	X						0.	0.	0.
(382) JENNIFER WHITE MEMBER	1.00	X						0.	0.	0.
(383) ANGELA WHITMIRE MEMBER	1.00	X						0.	0.	0.
(384) DEREK WHITNER MEMBER	1.00	X						0.	0.	0.
(385) LAVENIA WHITNER MEMBER	1.00	X						0.	0.	0.
(386) TANGELA WILLIAMS MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(387) ASHLEY WILSON MEMBER	1.00	X						0.	0.	0.
(388) WINFORD WILSON MEMBER	1.00	X						0.	0.	0.
(389) CHRISTY WRIGHT MEMBER	1.00	X						0.	0.	0.
(390) DIANA WRIGHT MEMBER	1.00	X						0.	0.	0.
(391) KATHERINE WRIGHT MEMBER	1.00	X						0.	0.	0.
(392) MICHAEL WRIGHT MEMBER	1.00	X						0.	0.	0.
(393) SONNY WRIGHT MEMBER	1.00	X						0.	0.	0.
(394) VICKI YAWN MEMBER	1.00	X						0.	0.	0.
(395) MISTY YEARGAN MEMBER	1.00	X						0.	0.	0.
(396) ANGELA YODER MEMBER	1.00	X						0.	0.	0.
(397) SHAUNETTE YOUNG ADAMS MEMBER	1.00	X						0.	0.	0.
(398) LILI YOUNGBLOOD MEMBER	1.00	X						0.	0.	0.
(399) DARCY ZABEL MEMBER	1.00	X						0.	0.	0.
(400) CARISSA ZEDAKER MEMBER	1.00	X						0.	0.	0.
(401) JUSTIN ZIEGLER MEMBER	1.00	X						0.	0.	0.
(402) SHEA ZIMMERMAN MEMBER	1.00	X						0.	0.	0.
(403) DEBRA S. JUNKIN CHIEF EXECUTIVE OFFICER	40.00 1.00			X				402,719.	0.	26,163.
(404) CHARRISSE BUTLER FINANCIAL DIRECTOR	40.00 1.00			X				119,950.	0.	10,272.
(405) MICHAEL MOCK SR. DIRECTOR OF GOVT. AFFA	40.00					X		173,136.	0.	13,328.
(406) JEFFREY LEDFORD CHIEF ADVOCACY OFFICER	40.00					X		166,157.	0.	27,110.
Total to Part VII, Section A, line 1c										

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f				
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f					
Program Service Revenue	2 a	MEMBERSHIP DUES	Business Code	900099	5,039,855.	5,039,855.	
	b	FORMS LICENSES		513190	1,516,507.	1,516,507.	
	c	MEETINGS & CONFERENCES		900099	1,039,988.	1,039,988.	
	d	REALTOR ISSUE ACTION COMMITTEE		900099	648,667.	648,667.	
	e	MANAGEMENT FEES		900099	84,500.	84,500.	
	f	All other program service revenue		513190	70,907.	34,707.	36,200.
	g	Total. Add lines 2a-2f			8,400,424.		
	3	Investment income (including dividends, interest, and other similar amounts)			198,983.		198,983.
4	Income from investment of tax-exempt bond proceeds						
5	Royalties						
Other Revenue	6 a	Gross rents	(i) Real	215,180.			
	b	Less: rental expenses ...	(ii) Personal	353,575.			
	c	Rental income or (loss)		-138,395.			
	d	Net rental income or (loss)			-138,395.		-138,395.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	995,001.			
	b	Less: cost or other basis and sales expenses	(ii) Other	948,569.			
	c	Gain or (loss)		46,432.			
	d	Net gain or (loss)			46,432.		46,432.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18					
	b	Less: direct expenses					
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19					
	b	Less: direct expenses					
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances						
b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a		Business Code				
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total revenue. See instructions			8,507,444.	8,364,224.	36,200.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	351,997.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	522,669.			
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,203,241.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	64,539.			
9 Other employee benefits	206,175.			
10 Payroll taxes	197,313.			
11 Fees for services (nonemployees):				
a Management				
b Legal	86,116.			
c Accounting	86,171.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	7,504.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	183,517.			
12 Advertising and promotion	237,061.			
13 Office expenses	173,895.			
14 Information technology	219,170.			
15 Royalties				
16 Occupancy	368,491.			
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,666,663.			
20 Interest	71,955.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	326,088.			
23 Insurance	18,473.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FUND EXPENSES	204,390.			
b PUBLICATION EXPENSES	141,288.			
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	8,336,716.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	536.	1	170.
	2 Savings and temporary cash investments	9,575,654.	2	9,033,187.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	254,473.	4	292,726.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	101,717.	9	123,433.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,980,210.		
	b Less: accumulated depreciation	10b 1,764,981.	10c	7,215,229.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	1,990,190.	12	1,657,579.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	18,971,289.	16	18,322,324.	
Liabilities	17 Accounts payable and accrued expenses	361,310.	17	283,494.
	18 Grants payable		18	
	19 Deferred revenue	1,596,447.	19	1,609,263.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	2,300,000.	23	1,218,544.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	38,994.	25	139,102.
	26 Total liabilities. Add lines 17 through 25	4,296,751.	26	3,250,403.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	14,654,361.	27	15,051,744.
	28 Net assets with donor restrictions	20,177.	28	20,177.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	14,674,538.	32	15,071,921.
	33 Total liabilities and net assets/fund balances	18,971,289.	33	18,322,324.

Form 990 (2023)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,507,444.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,336,716.
3	Revenue less expenses. Subtract line 2 from line 1	3	170,728.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,674,538.
5	Net unrealized gains (losses) on investments	5	226,655.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,071,921.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2023)

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures \$

3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
not over \$500,000,	20% of the amount on line 1e.		
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
over \$17,000,000,	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No
4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	5,039,855.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	204,390.
b Carryover from last year	2b	
c Total	2c	204,390.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	290,800.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	-86,410.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

FORM 990, SCHEDULE C, PART III-B, LINE 3:

THE PORTION OF DUES PAID THAT IS SPENT TO LOBBY THE STATE AND FEDERAL GOVERNMENTS IS NOT DEDUCTIBLE FOR INCOME TAX PURPOSES AND THE IRS REQUIRES THAT ALL DUES STATEMENTS DISCLOSE THIS INFORMATION. GAR, INC. HAS ESTIMATED THAT \$8.15 (8.38%) IS THE NONDEDUCTIBLE PORTION OF 2023 GAR, INC. DUES. THE DISCLOSURE MUST INCLUDE THE WORDS "NOT DEDUCTIBLE FOR

Part IV Supplemental Information *(continued)*

INCOME TAX" AND MUST BE ON THE INVOICE IN THE SAME SIZE TYPE AS OTHER
INFORMATION. OMITTING THIS REQUIRED DISCLOSURE COULD RESULT IN LIABILITY
FOR A PROXY TAX.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II

Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,418,400.		1,418,400.
b Buildings		5,484,222.	762,439.	4,721,783.
c Leasehold improvements		1,381,203.	536,994.	844,209.
d Equipment		696,385.	465,548.	230,837.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				7,215,229.

Schedule D (Form 990) 2023

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENTS- NW, GS, MS	1,657,579.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	1,657,579.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO ACCOUNTS	133,432.
(3) OTHER LIABILITIES	5,670.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	139,102.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) 2023

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	9,080,170.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	226,655.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	353,575.
e	Add lines 2a through 2d	2e	580,230.
3	Subtract line 2e from line 1	3	8,499,940.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,504.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	7,504.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	8,507,444.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	8,682,787.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	353,575.
e	Add lines 2a through 2d	2e	353,575.
3	Subtract line 2e from line 1	3	8,329,212.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,504.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	7,504.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	8,336,716.

Part XIII Supplemental Information

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

PART X, LINE 2:

UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE, THE ASSOCIATION IS EXEMPT FROM TAXES ON INCOME OTHER THAN UNRELATED BUSINESS INCOME.

UNRELATED BUSINESS INCOME RESULTS FROM RENT.

THE ASSOCIATION UTILIZES THE ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME TAXES. USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN

Part XIII Supplemental Information (continued)

INTERIM PERIODS, DISCLOSURE AND TRANSITION. AS OF DECEMBER 31, 2023, THE ASSOCIATION HAS NO UNCERTAIN TAX PROVISIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES RELATED TO RENTAL REVENUE 353,575.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES RELATED TO RENTAL REVENUE 353,575.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **GEORGIA ASSOCIATION OF REALTORS, INC.** Employer identification number **58-0836843**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ATHENS BOARD OF REALTORS 1720 MERIWEATHER DR WATKINSVILLE, GA 30677	58-1411342	501(C)(6)	13,800.	0.			FINANCIAL ASSISTANCE
CHEROKEE ASSOCIATION OF REALTORS 1600 RIVER PARK BLVD STE 104 WOODSTOCK, GA 30188	58-1446278	501(C)(6)	5,850.	0.			FINANCIAL ASSISTANCE
COBB ASSOCIATION OF REALTORS 444 MANGET ST SE STE 100 MARIETTA, GA 30060	58-1107549	501(C)(6)	11,000.	0.			FINANCIAL ASSISTANCE
COLUMBUS BOARD OF REALTORS 2512 WARM SPRINGS RD. COLUMBUS, GA 31904	58-0955618	501(C)(6)	8,959.	0.			FINANCIAL ASSISTANCE
DEKALB ASSOCIATION OF REALTORS 1414 MONTREAL RD TUCKER, GA 30084	58-0703060	501(C)(6)	10,000.	0.			FINANCIAL ASSISTANCE
FAYETTE COUNTY BOARD OF REALTORS 101 DEVANT STREET, SUITE 705 FAYETTEVILLE, GA 30214	58-1356781	501(C)(6)	7,500.	0.			FINANCIAL ASSISTANCE

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **5.**
- 3** Enter total number of other organizations listed in the line 1 table **15.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIA ASSOCIATION OF REALTORS DISASTER RELIEF - 6065 BARFIELD RD STE 200 - ATLANTA, GA 30328	20-3255676	501(C)(3)	51,907.	0.			FINANCIAL ASSISTANCE
GEORGIA ASSOCIATION OF REALTORS SCHOLARSHIP FOUNDATION - 6065 BARFIELD RD STE 200 - ATLANTA, GA 30328	58-1627007	501(C)(3)	55,106.	0.			FINANCIAL ASSISTANCE
GEORGIA ECONOMIC DEVELOPERS ASSOCIATION, INC. - 75 5TH STREET NW, STE 1200 - ATLANTA, GA 30308	58-1265989	501(C)(6)	10,500.	0.			FINANCIAL ASSISTANCE
GEORGIA PUBLIC POLICY FOUNDATION INC - 3200 COBB GALLERIA PKWY STE 214 - ATLANTA, GA 30339	58-1943161	501(C)(3)	10,000.	0.			FINANCIAL ASSISTANCE
GOLDEN ISLES ASSOCIATION OF REALTORS - 1801 GLOUCESTER ST - BRUNSWICK, GA 31520	58-1410315	501(C)(6)	10,000.	0.			FINANCIAL ASSISTANCE
MIDDLE GEORGIA ASSOCIATION OF REALTORS - 3263 VINEVILLE AVE - MACON, GA 31204	58-6035601	501(C)(6)	6,000.	0.			FINANCIAL ASSISTANCE
NEWNAN-COWETA BOARD OF REALTORS 41 FARMER ST STE 101 NEWNAN, GA 30263	23-7263053	501(C)(6)	13,500.	0.			FINANCIAL ASSISTANCE
NORTHWEST METRO ASSOCIATION OF REALTORS - 5784 LAKE FORREST DR - ATLANTA, GA 30328	58-1655025	501(C)(6)	10,900.	0.			FINANCIAL ASSICTANCE
SAVANNAH REAL ESTATE BOARD 7015 HODGSON MEMORIAL DR. SAVANNAH, GA 31406	58-0418380	501(C)(6)	45,000.	0.			FINANCIAL ASSISTANCE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHEASTERN LEGAL FOUNDATION 560 W. CROSSVILLE RD, STE 104 ROSWELL, GA 30075	58-1247027	501(C)(3)	35,000.	0.			FINANCIAL ASSISTANCE
UGA FOUNDATION 1 PRESS PL #101 ATHENS, GA 30601	58-6033837	501(C)(3)	15,000.	0.			FINANCIAL ASSISTANCE
VALDOSTA BOARD OF REALTORS 604 BAYTREE RD VALDOSTA, GA 31602	58-1491247	501(C)(6)	12,000.	0.			FINANCIAL ASSISTANCE
WALTON-BARROW BOARD OF REALTORS PO BOX 1123 MONROE, GA 30655	58-1878731	501(C)(6)	10,000.	0.			FINANCIAL ASSISTANCE
WEST GEORGIA BOARD OF REALTORS PO BOX 1993 DOUGLASVILLE, GA 30133	58-1462777	501(C)(6)	9,975.	0.			FINANCIAL ASSISTANCE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION MAINTAINS RECORDS TO SUBSTANTIATE ALL GRANTS AND ASSISTANCE, BASED ON SELECTED CRITERIA ESTABLISHED BY THE ORGANIZATION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

	Yes	No
1b	X	

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

2	X	
----------	---	--

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

4a		X
4b		X
4c		X

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

5a		
5b		

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

6a		
6b		

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

7		
----------	--	--

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

8		
----------	--	--

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9		
----------	--	--

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DEBRA S. JUNKIN CHIEF EXECUTIVE OFFICER	(i)	314,736.	87,983.	0.	9,150.	17,013.	428,882.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHAEL MOCK SR. DIRECTOR OF GOVT. AFFA	(i)	166,025.	7,111.	0.	4,550.	8,778.	186,464.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFFREY LEDFORD CHIEF ADVOCACY OFFICER	(i)	158,417.	7,740.	0.	4,805.	22,305.	193,267.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CHRISTINA EATON SR. DIRECTOR OF LEGAL AFFA	(i)	147,195.	5,418.	0.	4,436.	8,469.	165,518.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BRANDIE MINER CHIEF COMMUNICATIONS OFFIC	(i)	146,616.	3,554.	0.	4,456.	8,787.	163,413.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THE ASSOCIATION PAYS TRAVEL COSTS FOR SPOUSE TO ASSOCIATION RELATED TRAVEL.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

FORM 990, PART VI, SECTION A, LINE 2:

IN ANY BOARD OF DIRECTORS THIS SIZE, FAMILIAL RELATIONSHIPS MAY EXIST
BETWEEN MEMBERS. GIVEN THE NATURE OF THE REAL ESTATE INDUSTRY, BROKERS AND
AGENTS SERVING ON THE BOARD MAY HAVE BUSINESS RELATIONSHIPS, AS WELL.
HOWEVER, THE NUMBER OF SUCH RELATIONSHIPS IS SMALL, AND THE SIZE OF THE
BOARD PREVENTS ANY GROUP FROM EXERTING UNDUE INFLUENCE OVER THE
ORGANIZATION'S ACTIVITIES.

FORM 990, PART VI, SECTION A, LINE 6:

ENTITY IS A MEMBERSHIP DRIVEN ORGANIZATION, WHEREBY MEMBERS PAY DUES
ANNUALLY.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF DIRECTORS IS MADE UP OF THE PRESIDENT AND ANY ADDITIONAL
REPRESENTATIVES FROM EACH LOCAL BOARD. EACH LOCAL BOARD MAY BE ALLOWED TO
ELECT THOSE POSITIONS, PER THEIR BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE AUDITED FINANCIAL STATEMENTS ARE PROVIDED TO THE BOARD FOR REVIEW AND
APPROVED BY THE AUDIT COMMITTEE. THE 990 IS REVIEWED BY THE EXECUTIVE
COMMITTEE (HAVING THE AUTHORITY TO ACT BETWEEN BOARD OF DIRECTOR MEETINGS)
AND CEO PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

EVERY YEAR COMMITTEE MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST
POLICY AND DISCLOSURE CONSENT.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

FORM 990, PART VI, SECTION B, LINE 15:

THE PRESIDENT, THE PRESIDENT-ELECT AND THE IMMEDIATE PAST PRESIDENT SHALL CONDUCT A PERFORMANCE EVALUATION OF THE CHIEF EXECUTIVE OFFICER BETWEEN THE CLOSE OF THE GAR ANNUAL CONFERENCE AND EXPO AND THE START OF THE NAR ANNUAL CONVENTION. SUCH PERFORMANCE EVALUATION SHALL BE COMPLETED ON AN APPROPRIATE PERFORMANCE EVALUATION FORM.

ALL OTHER EMPLOYEES HAVE THEIR COMPENSATION LEVEL RECOMMENDED BY THE CEO AND APPROVED BY THE ADMINISTRATIONS AND OPERATIONS COMMITTEE.

THE PROCESSES REGARDING COMPENSATION ARE DOCUMENTED AND BASED UPON INDEPENDENT COMPENSATION WEBSITES FOR COMPARABILITY. STUDIES ARE DONE BASED OFF OF COMPENSATION REVIEWS OF SIMILAR POSITIONS, INCLUDING INDEPENDENT INFORMATION BASED ON LONGEVITY, SENIORITY, AND RELATED BENCHMARKS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACTED SERVICES	33,514.
SERVICE FEES	150,003.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	183,517.

FORM 990, PART XII, LINE 2C:

THE ASSOCIATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number

58-0836843

OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNTANT.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC.

Employer identification number
58-0836843

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
GEORGIA REALTORS POLITICAL ACTION COMMITTEE, INC. - 58-1288715, 6065 BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328	POLITICAL ACTION COMMITTEE	GEORGIA	527	N/A	N/A		X
GEORGIA ASSOCIATION OF REALTORS SCHOLARSHIP FOUNDATION, INC. - 58-1627007, 6065 BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328	THE AWARDED OF SCHOLARSHIPS FOR THE STUDY OF REAL ESTATE SUBJECTS.	GEORGIA	501(C)(3)	TYPE II SUPPORTING	N/A		X
GEORGIA ASSOCIATION OF REALTORS DISASTER RELIEF FUND, INC. - 20-3255676, 6065 BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328	TO PROVIDE RELIEF TO INDIVIDUALS WHO SUSTAIN DISASTER DAMAGE.	GEORGIA	501(C)(3)	170(B)(1)(A)(VI)	N/A		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

[illegible]

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
GEORGIA ASSOCIATION OF REALTORS DISASTER (1) RELIEF FUND, INC.	B	51,907.	FMV
GEORGIA ASSOCIATION OF REALTORS DISASTER (2) RELIEF FUND, INC.	S	51,907.	FMV
GEORGIA ASSOCIATION OF REALTORS (3) SCHOLARSHIP FOUNDATION, INC.	B	55,106.	FMV
GEORGIA ASSOCIATION OF REALTORS (4) SCHOLARSHIP FOUNDATION, INC.	L	18,000.	FMV
GEORGIA ASSOCIATION OF REALTORS (5) SCHOLARSHIP FOUNDATION, INC.	R	18,672.	FMV
GEORGIA ASSOCIATION OF REALTORS (6) SCHOLARSHIP FOUNDATION, INC.	S	91,424.	FMV

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) GEORGIA REALTORS POLITICAL ACTION COMMITTEE INC.	R	167,334.	FMV
(8) GEORGIA REALTORS POLITICAL ACTION COMMITTEE INC.	S	394,795.	FMV
(9) GEORGIA REALTORS POLITICAL ACTION COMMITTEE, INC.	L	40,000.	FMV
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

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

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

[illegible]

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

Type and Entity: PRE-2018 NOL FED

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation

Section 382 Carryover

	Year Originated	Original Carryover Amount		Total Amount Used	Amount Used for		Amount Used for		Amount Used for		Amount Used for		Amount Used for		Amount Used for		Amount Used for	
					_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
A	2008	205,483.																
B	2009	13,817.																
C	2010	17,740.																
D	2011	120.																
E	2012	43,541.																
F	2013	30,090.																
G	2014	38,005.																
H	2015	52,938.																
I	2016	83,864.																
J	2017	91,266.																
K																		
L																		
M																		
N																		
O																		
P																		
Q																		
R																		
S																		
T																		
U																		
V																		
W																		
	Detail Type	E S B C	Amount Used for		Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A																		
B																		
C																		
D																		
E																		
F																		
G																		
H																		
I																		
J																		
K																		
L																		
M																		
N																		
O																		
P																		
Q																		
R																		
S																		
T																		
U																		
V																		
W																		

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2023Department of the Treasury
Internal Revenue Service

For calendar year 2023 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)	D Employer identification number
B Exempt under section <input checked="" type="checkbox"/> 501(c)(6) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A		GEORGIA ASSOCIATION OF REALTORS, INC.	58-0836843
		Number, street, and room or suite no. If a P.O. box, see instructions. 6065 BARFIELD ROAD, SUITE 200	E Group exemption number (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code ATLANTA, GA 30328	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year	18,322,324.
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417(d)(1)(A) Applicable entity			

H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>
J Enter the number of attached Schedules A (Form 990-T) 1
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation
L The books are in care of BRAD MOCK Telephone number 770-451-1831

Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) ...	1	0.
2	Reserved	2	
3	Add lines 1 and 2	3	
4	Charitable contributions (see instructions for limitation rules)	4	0.
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6	Deduction for net operating loss. See instructions	6	0.
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	
8	Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9	Trusts. Section 199A deduction. See instructions	9	
10	Total deductions. Add lines 8 and 9	10	1,000.
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation

1	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3	Proxy tax. See instructions	3	
4	Other tax amounts. See instructions	4	
5	Alternative minimum tax	5	
6	Tax on noncompliant facility income. See instructions	6	
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior-year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2	0.	
3a	Amount due from Form 4255	3a		
b	Amount due from Form 8611	3b		
c	Amount due from Form 8697	3c		
d	Amount due from Form 8866	3d		
e	Other amounts due (see instructions)	3e		
f	Total amounts due. Add lines 3a through 3e	3f	0.	
4	Total tax. Add lines 2 and 3f (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	0.	
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5	0.	

Part III Tax and Payments (continued)

6 a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	Total payments. Add lines 6a through 6j	7		
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax Refunded	11		

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.		
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	Enter available pre-2018 NOL carryovers here \$ 576,864. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
	513190	\$ 531,110.	
		\$	
		\$	
		\$	
6 a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here	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.			
	Signature of officer	Date	CEO	Title
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	TIFFANY T. ORR, CPA	TIFFANY T. ORR, CPA	11/06/24	
	Firm's name	Firm's EIN		PTIN
	CARR, RIGGS & INGRAM, LLC	72-1396621		P01559485
	Firm's address	Phone no.		
	4004 SUMMIT BLVD NE, SUITE 800 ATLANTA, GA 30319	770.394.8000		

Form **990-T** (2023)

FORM 990-T

PRE-2018 NET OPERATING LOSS DEDUCTION

STATEMENT 1

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/08	205,483.	0.	205,483.	205,483.
12/31/09	13,817.	0.	13,817.	13,817.
12/31/10	17,740.	0.	17,740.	17,740.
12/31/11	120.	0.	120.	120.
12/31/12	43,541.	0.	43,541.	43,541.
12/31/13	30,090.	0.	30,090.	30,090.
12/31/14	38,005.	0.	38,005.	38,005.
12/31/15	52,938.	0.	52,938.	52,938.
12/31/16	83,864.	0.	83,864.	83,864.
12/31/17	91,266.	0.	91,266.	91,266.
NOL CARRYOVER AVAILABLE THIS YEAR			576,864.	576,864.

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1
OMB No. 1545-0047

2023

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization GEORGIA ASSOCIATION OF REALTORS, INC.	B Employer identification number 58-0836843
C Unrelated business activity code (see instructions) 513190	D Sequence: 1 of 1

E Describe the unrelated trade or business **SALE OF ADVERTISING IN THE GEORGIA REALTOR'S**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance	1c		
2 Cost of goods sold (Part III, line 8)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions		4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement)		5		
6 Rent income (Part IV)		6		
7 Unrelated debt-financed income (Part V)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)		8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		9		
10 Exploited exempt activity income (Part VIII)		10		
11 Advertising income (Part IX)		11 36,200.	141,288.	-105,088.
12 Other income (see instructions; attach statement)		12		
13 Total. Combine lines 3 through 12		13 36,200.	141,288.	-105,088.

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)	1	
2 Salaries and wages	2	
3 Repairs and maintenance	3	
4 Bad debts	4	
5 Interest (attach statement). See instructions	5	
6 Taxes and licenses	6	
7 Depreciation (attach Form 4562). See instructions	7	
8 Less depreciation claimed in Part III and elsewhere on return	8a	8b
9 Depletion	9	
10 Contributions to deferred compensation plans	10	
11 Employee benefit programs	11	
12 Excess exempt expenses (Part VIII)	12	
13 Excess readership costs (Part IX)	13	
14 Other deductions (attach statement)	14	
15 Total deductions. Add lines 1 through 14	15	0.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16	-105,088.
17 Deduction for net operating loss. See instructions	17	0.
18 Unrelated business taxable income. Subtract line 17 from line 16	18	-105,088.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Rent received or accrued	A	B	C	D
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)	0.			
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)	0.			

Part V Unrelated Debt-Financed Income (see instructions)

1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Gross income from or allocable to debt-financed property	A	B	C	D
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0.			
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11	Total dividends-received deductions included in line 10	0.			

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7. Taxable Income		8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)						
(2)						
(3)						
(4)						
				Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).	
Totals				0.	0.	

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
	Add amounts in column 2. Enter here and on Part I, line 9, column (A).			Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Totals	0.			0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) _____	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) _____	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 _____	4	
5	Gross income from activity that is not unrelated business income _____	5	
6	Expenses attributable to income entered on line 5 _____	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 _____	7	

Schedule A (Form 990-T) 2023

2023.05000 GEORGIA ASSOCIATION OF RE 60-01511

FORM 990-T SCHEDULE A	DESCRIPTION OF ORGANIZATION'S BUSINESS ACTIVITY	UNRELATED STATEMENT 2
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SALE OF ADVERTISING IN THE GEORGIA REALTOR'S MAGAZINE

TO FORM 990-T, SCHEDULE A, LINE E

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION	STATEMENT 3
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TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	96,537.	0.	96,537.	96,537.
12/31/19	95,381.	0.	95,381.	95,381.
12/31/20	124,513.	0.	124,513.	124,513.
12/31/21	87,345.	0.	87,345.	87,345.
12/31/22	127,334.	0.	127,334.	127,334.
NOL CARRYOVER AVAILABLE THIS YEAR			531,110.	531,110.