





September 9, 2019

Georgia Association of Realtors, Inc. 6065 Barfield Road, Suite 200 Atlanta, GA 30328 Attention: Ms. Jennifer Lundy, CFO

Dear Ms. Lundy:

A copy of the return for public disclosure is provided. Any confidential information regarding large donors has been removed.

We prepared returns from information you furnished us. Upon examination of the returns by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax returns.

Copies of all the returns are enclosed for your files. We suggest that you retain these copies indefinitely.

Very truly yours,

Carr, Riggs & Ingram, LLC

## \*\* PUBLIC DISCLOSURE COPY \*\*

**Return of Organization Exempt From Income Tax** 

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

Department of the Treasury Internal Revenue Service

▶ 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. and ending

Α	For the	2018 calendar year, or tax year beginning and end	ding						
	Check if applicable:	C Name of organization		D Employer ide	entific	cation number			
	Address change	GEORGIA ASSOCIATION OF REALTORS, INC.							
	Name change	Doing business as		58	3-08	836843			
	Initial return	,	om/suite	•					
	Final return/	6065 BARFIELD ROAD, SUITE 200		7:	70-4	451-1831			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 7,426,823					
	Amende return	AILANIA, GA 30326		H(a) Is this a gro	oup re				
	Applica- tion pending	F Name and address of principal officer. DEDICA 5. CONKIN		for subordi	nates'	? Yes X No			
_		SAME AS C ABOVE		<b>H(b)</b> Are all subording	nates in	cluded? Yes No			
		mpt status: $501(c)(3)$ $\times$ $501(c)(6)$ $(6)$ (insert no.) 4947(a)(1) or	527	· ·		list. (see instructions)			
		e: ► WWW.GAREALTOR.COM		H(c) Group exer					
K	Form of o	organization: X Corporation Trust Association Other	<b>L</b> Year o	of formation: 195	)   N	1 State of legal domicile: GA			
Р		Summary	I C T O I T	AT MEMBER	a T T T	- D			
ď	1 5	Briefly describe the organization's mission or most significant activities: PROFES	STON	AL MEMBER	SHI	LP			
Activities & Governance		ASSOCIATION FOR THE GEORGIA REAL ESTATE INI							
ern	2 (	Check this box if the organization discontinued its operations or disposed			1 1				
Ş	3 1				4	407 407			
æ	' 4 N	Number of independent voting members of the governing body (Part VI, line 1b)			5	21			
<u></u>	5 7	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			6	407			
₹	6 7	Total number of volunteers (estimate if necessary)			7a	34,328.			
Ą	a l	otal unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, line 38			7a 7b	-96,537.			
_	61	Net unrelated business taxable income from Form 990-1, line 36		Prior Year	176	Current Year			
	8 0	Contributions and grants (Part VIII, line 1h)		FIIOI Teal	0.	0.			
9	9 F			5,573,00	-	5,864,236.			
Revenue	10	Program service revenue (Part VIII, line 2g)  nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		49,69		117,795.			
B	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		65,90		114,220.			
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,688,60		6,096,251.			
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		12,75		10,214.			
		Benefits paid to or for members (Part IX, column (A), line 4)			0.				
,,	145 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,607,81	0. 9.	1,908,600.			
Fxpenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		· ·	0.	0.			
ā	<u>Б</u> в⊤		) <b>.</b>						
й	ا ا	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	2,515,33	32.	2,991,405.			
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,135,90		4,910,219.			
	19 F	Revenue less expenses. Subtract line 18 from line 12		1,552,69	95.	1,186,032.			
<u>ا</u>	Se		Beg	ginning of Current	/ear	End of Year			
sets	<b>20</b> T	otal assets (Part X, line 16)		12,251,59		12,070,077.			
Ass	∄ <b>21</b> T	otal liabilities (Part X, line 26)		3,138,88	32.	1,912,261.			
Net Assets or	<b>22</b> N	Net assets or fund balances. Subtract line 21 from line 20		9,112,71	4.	10,157,816.			
Р	art II	Signature Block							
Und	der penalt	ties of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best	of my	knowledge and belief, it is			
true	e, correct,	, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer l	has any knowledge.					
Sig	ın	Signature of officer		Date					
He	re	DEBRA S. JUNKIN, CEO Type or print name and title							
_			Ιn	lata or		DTIN			
<b>.</b> .		Print/Type preparer's name  Preparer's signature		ote ch		PTIN			
Pai	_	STANLEY M SMITH II STANLEY M SMITH I	<u> </u>	9/09/19					
		Firm's name ► CARR, RIGGS & INGRAM, LLC Firm's address ► 4004 SUMMIT BLVD NE, SUITE 800		Firm's EI	IV 🕨	72-1396621			
บริเ	Only	ATLANTA, GA 30319		Dhana	.77	0.394.8000			
N/a	v tha ID	S discuss this return with the preparer shown above? (see instructions)		I Priorie no	). / /				
ivid	y ule IK	o discuss this return with the preparer shown above? (see instructions)				X Yes No			

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  THE CEODETA ACCOLLATION OF DEALTONE MODES TO ADVANCE THE DEAL ESTATE
	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?
	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?
_	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 \$1,689,301. including grants of \$) (Revenue \$940,992. )
	THE ASSOCIATION'S ANNUAL MEETINGS AND EDUCATIONAL PROGRAMS - THE
	ASSOCIATION HOSTS BUSINESS MEETINGS AND CONFERENCES ANNUALLY. IN 2018,
	592 PEOPLE ATTENDED THE ANNUAL MEETING.
	<del></del>
4b	(Code:) (Expenses \$113,981. including grants of \$) (Revenue \$)
	PUBLICATIONS OF GEORGIA REALTOR MAGAZINE - THE ASSOCIATION'S JOURNAL
	MADE AVAILABLE TO ALL MEMBERS WHICH PROVIDES EDUCATIONAL AND
	INFORMATIVE MATERIAL (154,734 MAILINGS IN 2018).
4c	(Code:) (Expenses \$ 2,040,825. including grants of \$ 10,214.) (Revenue \$ 4,917,959.)
40	(Code:) (Expenses \$ 2,040,825 or including grants of \$ 10,214 or ) (Revenue \$ 4,917,959 or )  OTHER ACTIVITIES RELATED TO THE ADVANCEMENT OF THE REAL ESTATE
	PROFESSION IN GEORGIA.
_	
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 3,844,107.
	Form 990 (2018)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
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? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b>		
8	, ,			x
•	Schedule D, Part III	8		
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?			<b>.</b>
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			.,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> X</u>
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D		12b		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Pid the approximation projection on office and because the state of the United Obstaco			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del></del>
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	المدا		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			<b>.</b>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
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? If "Yes," complete Schedule G, Part I	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b		20b		
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? If "Yes." complete Schedule I, Parts I and II	21		Х

			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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete			
	Schedule J	23	Х	
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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		$\vdash$
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? If "Yes," complete Schedule L, Part 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? If "Yes," complete	051		
	Schedule L, Part I	25b		$\vdash$
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? // "Yes,"	00		X
07	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		X
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		<u></u>	1
Da	Note. All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pal	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		 	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 37			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	N OOU	(0040

# Form 990 (2018) GEORGIA ASSOCIATION OF REALTORS, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	o d d d d d d d d d d d d d d d d d d d				Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	I	<b> </b>		162	NO			
Lu	filed for the calendar year ending with or within the year covered by this return	2a	21						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	х				
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions								
За	Did the constitution become letter the size of the constitution of			За	Х				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C	)		3b	Х				
	At any time during the calendar year, did the organization have an interest in, or a signature or other a								
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	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 Advanced in the Financi	ccount	s (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u>X</u>			
b		5b 5c		<u>X</u>					
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?									
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	Х				
р	If "Yes," did the organization include with every solicitation an express statement that such contribution		gifts	C L	х				
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(s)			6b	$\stackrel{\Delta}{\longrightarrow}$				
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices n	rovided to the payor?	7a					
b		•	Tovided to the payor:	7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
•	to file Form 8282?			7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е									
f									
g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file	e 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				9a					
b	, , , , , , , , , , , , , , , , , , , ,			9b					
10	Section 501(c)(7) organizations. Enter:	۔مد ا							
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b							
ь 11	Section 501(c)(12) organizations. Enter:	LIOD							
''	Gross income from members or shareholders	11a							
	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		,	12a					
	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.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı							
	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c		4.		v			
14a				14a		<u>X</u>			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule to the explanation which to the explanation of more than \$1,000,000 in regression.			14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			45		Х			
	excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.			15					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		X			
.5	If "Yes," complete Form 4720, Schedule O.	10011	ie?	10					
	100, Computer of the tribay Comodate C.			Form	990	(2010)			

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4	07			
	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 in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	4	07			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other				
	officer, director, trustee, or key employee?				2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the						
	of officers, directors, or trustees, or key employees to a management company or other person?			L	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		X
6	Did the organization have members or stockholders?				6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap						
	more members of the governing body?			7	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st						
	persons other than the governing body?			7	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
а	The governing body?			ε	За	Х	
b	Each committee with authority to act on behalf of the governing body?				3b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at	the				
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				
			,			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			1	0a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such ch						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			1	0b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befor	e filing the form?	· 1	1a	Х	
b	Describe in 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			1	2a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	licts?	1	2b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? # "Y	es," de	escribe				
	in Schedule O how this was done			1	2c	Х	
13	Did the organization have a written whistleblower policy?			[_1	13	Х	
14	Did the organization have a written document retention and destruction policy?			Li	14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	lependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			1	5a	Х	
b	Other officers or key employees of the organization			1	5b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent wi	th a				
	taxable entity during the year?			<u>1</u>	6a		_X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its pa	articipation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's				
	exempt status with respect to such arrangements?			1	6b		
Sec	tion 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	id 990-	Γ (Section 501(c	)(3)s on	ıly) a	ıvailab	ole
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Other (explain	n in Sch	edule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	nflict of	interest policy,	and fina	anci	al	
	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 book	oks and	records -				
	JENNIFER LUNDY - 770-451-1831						
	6065 BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328						

# Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization							sate					
(A)	(B)			(C Pos	C)			(D)	(E)	(F)		
Name and Title	Average		not c	heck	more	than c		Reportable	Reportable	Estimated		
	hours per					s both or/trust		compensation	compensation from related	amount of		
	week (list any	.o.						from the	organizations	other compensation		
	hours for	direct				, p		organization	(W-2/1099-MISC)	from the		
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** = * * * * * * * * * * * * * * * * *	organization		
	organizations	trust	nal tru		oyee	om pe				and related		
	below	Individual trustee or director	Institutional trustee	Je	Key employee	Highest compensated employee	Former			organizations		
	line)	Indi	Inst	Officer	Key	Higle	Fori					
(1) CHRIS JILES	1.00											
PRESIDENT	0.00	Х		X				0.	0.	0.		
(2) FARON KING	1.00	1								_		
PRESIDENT - ELECT	0.00	Х		Х				0.	0.	0.		
(3) MICHAEL L. FAULKNER	1.00	1								_		
IMMEDIATE PAST PRESIDENT	0.00	Х		X				0.	0.	0.		
(4) DORRIE LOVE	1.00											
VP ADMINISTRATION AND FINANCE	0.00	Х		X				0.	0.	0.		
(5) JOEY B. TUCKER	1.00											
VP GOVERNMENTAL AFFAIRS	0.00	Х		Х				0.	0.	0.		
(6) STEPHEN WALKER	1.00			l								
VP MEMBER & PUBLIC SERVICES	0.00	Х		Х				0.	0.	0.		
(7) LISA SCULLY	1.00											
VP PROFESSIONAL DEVELOPMENT	0.00	Х		Х				0.	0.	0.		
(8) DEBRA S. JUNKIN	40.00	-										
CHIEF EXECUTIVE OFFICER	1.00			Х				192,236.	0.	21,566.		
(9) JENNIFER LUNDY	40.00			l				105 040				
CHIEF FINANCIAL OFFICER	1.00			Х				126,849.	0.	3,901.		
(10) JEFFREY LEDFORD	40.00	-						111 164	•	2 005		
DIRECTOR OF GOVERNMENTAL A	0.00					X		111,164.	0.	3,805.		
		-										
		1										
		-			$\vdash$							
		1										
					$\vdash$							
		1										
		1										
		<b>-</b>		$\vdash$	$\vdash$							
		1										
		1										
		<u> </u>				<u> </u>		l		000		

Form 990 (2018)

Form 990 (2018) GEORGIA A	ASSOCIAT	'IC	N	OF	' R	REA	ĽΊ	CORS, I	NC.	58-0	8368	<u>843</u>	P	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated	d Employee	s (continued)				
(A)	(B)				C)			(0	<b>D</b> )	(E)		(F)		
Name and title	Average	(da		Pos				Repor	rtable	Reportable	,	Es	timate	∍d
	hours per	box	, unle	ss pe	rson i	than o is both	n an	comper	nsation	compensation	on	an	nount	of
	week	offi	cer ar	nd a d	irecto	or/trus	tee)	fro	om	from related	d		other	
	(list any	ctor						th	ne	organization	ns	com	pensa	ıtion
	hours for	r dire				pe		organi	zation	(W-2/1099-MI	SC)	fr	om th	е
	related	tee o	ustee			ensat		(W-2/109	9-MISC)			org	anizat	ion
	organizations	trus	lal tr		oyee	le						and	d relat	.ed
	below	Individual trustee or director	Institutional trustee	ē	Key employee	lest c	Jer					orga	anizati	ons
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former							
						_								
		-												
						$\vdash$		1						
		<u> </u>												
		1												
		1												
		_												
						$\vdash$		+						
		1												
1b Sub-total						<u> </u>		430	0,249.		0.	2.	9,2	72.
c Total from continuation sheets to Part VI									0.		0.			0.
d Total (add lines 1b and 1c)							<b>•</b>	430	0,249.		0.	2:	9,2	72.
2 Total number of individuals (including but no							o re	eceived more	than \$100,	000 of reportable	<u></u> е			
compensation from the organization										•				3
													Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee,	or	highest com	pensated er	mployee on				
line 1a? If "Yes," complete Schedule J for si												3		X
4 For any individual listed on line 1a, is the su														
and related organizations greater than \$150												4	X	
5 Did any person listed on line 1a receive or a	•				•			•				_		v
rendered to the organization? If "Yes," com Section B. Independent Contractors	<u>plete Schedule</u>	e <i>J f</i> e	or st	ıch i	oers	on .						5		X
Complete this table for your five highest contractors	mnonsatod inc	lono	ndo	nt co	ntr	acto	rc th	nat received i	more than \$	:100 000 of com	noncat	ion fro	.m	
the organization. Report compensation for t	•	•									perisai	.1011 110	,,,,	
(A)	aro caloridar y	oui c	, ran	<u>.g</u>		<u> </u>		r trio organiza	(B)	our.		(C	<u> </u>	
Name and business	address							Des	cription of s	services	С	ompei		n
KEITH HATCHER, LLC, 3553 OLD CHAMBLEE														
TUCKER ROAD, ATLANTA, GA 30340 CONSULTING SERVICES									16	7,5	00.			
							$\dashv$							

Form **990** (2018)

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2018) GEORGIA
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ည ည	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
<u>2</u> 8	c	Fundraising events						
ifts		d Related organizations						
s, Bilk		Government grants (contribution						
Sign		All other contributions, gifts, grant						
ber		similar amounts not included abov						
ÖĘ	ç	Noncash contributions included in lines 1	a-1f: \$					
Sor	r	Total. Add lines 1a-1f						
				Business Code				
ø	2 a	MEMBERSHIP DUES		900099	3,722,774.	3,722,774.		
Program Service Revenue	k	FORMS LICENSES		511120	980,045.	980,045.		
Sel	c	MEETINGS & CONFERENCES		900099	487,709.	487,709.		
an	c	EDUCATION PROGRAMS		611600	453,283.	453,283.		
oge B	e	REALTOR ISSUE ACTION CO	MMITTEE	900099	134,390.	134,390.		
P	f	All other program service rever	nue	900099	86,035.	70,125.	15,910.	
		Total. Add lines 2a-2f			5,864,236.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	93,641.			93,641.
	4	Income from investment of tax	exempt bond p	roceeds				
	5	Royalties		<b>&gt;</b>	7,346.			7,346.
			(i) Real	(ii) Personal				
	6 a	Gross rents	207,407.					
	k	Less: rental expenses	139,193.					
	c	Rental income or (loss)	68,214.					
	c	Net rental income or (loss)		<b></b>	68,214.		18,418.	49,796.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,215,533.					
	b	Less: cost or other basis						
		and sales expenses	1,191,379.					
	c	Gain or (loss)	24,154.					
		Net gain or (loss)			24,154.			24,154.
ē	8 8	a Gross income from fundraising	g events (not					
		including \$	of					
eve		contributions reported on line	1c). See					
Other Reven		Part IV, line 18	а					
チ		Less: direct expenses						
١		Net income or (loss) from fund		<b>_</b>				
	9 a	Gross income from gaming ac						
		Part IV, line 19	a					
		Less: direct expenses						
		Net income or (loss) from gami						
	10 a	Gross sales of inventory, less r						
		and allowances						
		Less: cost of goods sold		<u> </u>				
ŀ		Net income or (loss) from sales		<b>D</b>				
}		Miscellaneous Revenue	9	Business Code	20.550	20.550		
		OTHER REVENUE		900099	38,660.	38,660.		
	b							
		All other revenue			20 660			
		Total. Add lines 11a-11d		I	38,660.	E 006 006	24 200	174 027
J	12	Total revenue. See instructions		🕨 l	6,096,251.	5,886,986.	34,328.	174,937.

Secti	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										
	Check if Schedule O contains a respon	se or note to any line in t	his Part IX	(C)							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	10,214.									
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,										
3	trustees, and key employees	344,552.									
_		344,3324		+							
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
_	persons described in section 4958(c)(3)(B)	1,244,772.									
7	Other salaries and wages	1,444,114.		+							
8	Pension plan accruals and contributions (include	44,613.									
_	section 401(k) and 403(b) employer contributions)	157,052.									
9	Other employee benefits	117,611.									
10	Payroll taxes	117,011.									
11	Fees for services (non-employees):										
a	Management	61,199.									
b	Legal	31,524.									
_	Accounting	31,324.									
d	Lobbying										
e	Professional fundraising services. See Part IV, line 17										
f	Investment management fees										
g	Other. (If line 11g amount exceeds 10% of line 25,	182,263.									
40	column (A) amount, list line 11g expenses on Sch O.)	31,144.									
12	Advertising and promotion	327,650.									
13	Office expenses	321,030.									
14	Information technology										
15	Royalties	74,361.									
16	Occupancy	74,301.									
17	Payments of travel or entertainment expenses										
18	for any federal, state, or local public officials										
10	Conferences, conventions, and meetings	1,689,301.									
19 20		±,000,00±•									
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	191,021.									
23		13,942.									
23 24	Other expenses, Itemize expenses not covered	20,512.									
7	above. (List miscellaneous expenses in line 24e. If line										
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
а	FUND EXPENSES	260,419.									
b	PUBLICATION EXPENSES	113,981.									
c	SPONSORSHIPS	14,600.									
d		•									
	All other expenses	_									
25	Total functional expenses. Add lines 1 through 24e	4,910,219.									
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 if following SOP 98-2 (ASC 958-720)				000						

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			885.	1	1,715.
	2	Savings and temporary cash investments			4,527,399.	2	4,990,119.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			49,201.	4	49,569.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ited em	plovees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
S		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Description of the second seco			65,164.	9	126,733.
	10a	Land, buildings, and equipment: cost or other					
			10a	5,805,707.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	961,535.	4,930,517.	10c	4,844,172.
	11	Investments - publicly traded securities			4,930,517. 2,678,430.	11	4,844,172. 2,057,769.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			12,251,596.	16	12,070,077.
	17	Accounts payable and accrued expenses			137,994.	17	12,070,077. 171,603.
	18	Grants payable		18			
	19	Deferred revenue			1,051,116.	19	998,149.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and former					
Ě		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela			1,949,772.	23	742,509.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			3,138,882.	25	1 012 261
	26	Total liabilities. Add lines 17 through 25	·		3,130,002.	26	1,912,261.
		Organizations that follow SFAS 117 (ASC 958		k nere 🕨 🔼 and			
Ses	07	complete lines 27 through 29, and lines 33 an Unrestricted net assets			9,088,931.	27	10,137,639.
auc	27				23,783.	28	20,177.
Ba	28				25,705.	29	20,111•
힏	29	Organizations that do not follow SFAS 117 (A		)) aback hara		29	
臣		and complete lines 30 through 34.					
S 0	30	Capital stock or trust principal, or current funds			30		
set	31	Paid-in or capital surplus, or land, building, or ed				31	
As	32	Retained earnings, endowment, accumulated in				32	
Net Assets or Fund Balances	33				9,112,714.	33	10,157,816.
	34			12,251,596.	34	12,070,077.	
	, <del></del>	Total habilities and flet assets/fully balaffees			,,,	<b>U</b> T	Garage 990 (2012)

Form **990** (2018)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2018)

## **SCHEDULE C**

(Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

section 527

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

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

ıux	, (see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.		1	
Nan	ne of organization			-	oloyer identification number
	GEORGIA	ASSOCIATION OF R	EALTORS, IN	iC.	58-0836843
Pa	art I-A Complete if the org	anization is exempt unde	r section 501(c) o	or is a section 527 or	rganization.
1	Provide a description of the organiz	ation's direct and indirect politica	l campaign activities ir	n Part IV.	
2	Political campaign activity expendit	ures		<b>&gt;</b> :	\$
3	Volunteer hours for political campai				
Pa	art I-B Complete if the org	anization is exempt unde	r section 501(c)(3	3).	
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955	<b></b>	\$
	If the organization incurred a sectio				
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				1/6)
Pa	art I-C Complete if the org	anization is exempt unde	r section 501(c),	except section 501(	c)(3).
1	Enter the amount directly expended	by the filing organization for sect	ion 527 exempt functi	ion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to othe	er organizations for se	ction 527	
	exempt function activities			<b>&gt;</b>	\$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here an	d on Form 1120-POL,		
	line 17b			<b>&gt;</b>	\$
4	Did the filing organization file Form	<b>1120-POL</b> for this year?			Yes No
5	Enter the names, addresses and en	• •	•	•	• •
	made payments. For each organiza	•	0 0		•
	contributions received that were pro			•	te segregated fund or a
	political action committee (PAC). If	additional space is needed, provid	le information in Part I	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				lulius. Il florie, effici -0	delivered to a separate
					political organization.
					If none, enter -0
			1		

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018	GEORGIA ASS	OCIATION OF	REALTORS, I	NC. 58-	0836843 Page 2
Part II-A Complete if the org	anization is exe	npt under section	n 501(c)(3) and file		
section 501(h)).					
· ·	-		Part IV each affiliated	group member's nan	ne, address, EIN,
. — .	re of excess lobbying				
B Check ► if the filing organiza	tion checked box A a	nd "limited control" pro	ovisions apply.		
	ts on Lobbying Expe ditures" means amou	nditures unts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influ					
c Total lobbying expenditures (add li	-	• • • • •			
<b>d</b> Other exempt purpose expenditure					
e Total exempt purpose expenditure		1)			
f Lobbying nontaxable amount. Ente	er the amount from the				
If the amount on line 1e, column (a) o					
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
g Grassroots nontaxable amount (en	iter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	,				
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than ze		line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	•		0 " 504"		Yes No
(Some organizations t		eraging Period Under	• •	f the five columns h	elow
(Some organizations to		rate instructions for li	•	i tile live coluillis t	elow.
	<u> </u>	nditures During 4-Yea			
	Lossymig Expo				
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
<b>b</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))					

Schedule C (Form 990 or 990-EZ) 2018

## Schedule C (Form 990 or 990-EZ) 2018 GEORGIA ASSOCIATION OF REALTORS, INC. 58-08368 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		1)	,,	o)
of the lobbying activity.	Yes	No	Amo	ount
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>b</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 be not described in section 501(c)(3)?				
<b>b</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?	on 501(c)(5	), or se	ction	
501(c)(6).			Yes	No
501(c)(6).				
501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members?		1		Х
				X X
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the political campaign activity expenditures.</li> </ul>	he prior year? on 501(c)(5	2 3 5), or sec	ction	X X
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> </ul>	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	ction III-A, line	X X e 3, is
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> </ul>	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	ction III-A, line	X X e 3, is
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	ction III-A, line	X X e 3, is
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ol>	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	ction III-A, line	X X 2,774
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>Current year</li> </ul>	he prior year? on 501(c)(5 "No," OR	2 35), or see (b) Part	ction III-A, line	X X 2,774
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 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 b Carryover from last year	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	298	X X 2,774 3,808
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 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 b Carryover from last year c Total	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	298	X X 2,774 3,808
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B</li> <li>Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>Current year</li> <li>Carryover from last year</li> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ol>	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	298	X X
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 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 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the section 162(e) dues	he prior year? on 501(c)(5 "No," OR	2 3 5), or sec (b) Part	298	X X 2,774 3,808
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members 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 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure and the amount on green to carryover to the reasonable estimate of nondeductible lobbying and	he prior year? on 501(c)(5 "No," OR cical	2 35), or see (b) Part  1 2a 2b 2c 3	298	X X 2,774 3,808
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 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 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the section 162(e) dues	he prior year? on 501(c)(5 "No," OR cical	2 3 5), or sec (b) Part	298 298 3 384	X X 2,774 3,808

## **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 Open to Public Inspection

Name of the organization

GEORGIA ASSOCIATION OF REALTORS, INC. **Employer identification number** 58-0836843

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Donor advised funds	(b) Furius and other accounts
1 2	Total number at end of year		
3	Aggregate value of grants from (during year)  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 w	l writing that the assets held in donor advis	sed funds
·	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or		
	• •		
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed 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
а	Total number of conservation easements		2a
b			_
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structo	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	tion easements during the year
_	<b>&gt;</b> \$		6 M O (7 M)
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes	the organization's accounting for
Par	conservation easements. t III   Organizations Maintaining Collections of	Art Historical Treasures or Of	ther Similar Assets
	Complete if the organization answered "Yes" on Form		
12	If the organization elected, as permitted under SFAS 116 (ASC		ment and halance sheet works of art
Iu	historical treasures, or other similar assets held for public exh		•
	the text of the footnote to its financial statements that describ		ince of public service, provide, in rain Am,
h	If the organization elected, as permitted under SFAS 116 (ASC		t and halance sheet works of art historical
D	treasures, or other similar assets held for public exhibition, ed	· ·	
	relating to these items:	addition, or resourer in farther area or pa	bile service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical trea		al gain, provide
_	the following amounts required to be reported under SFAS 11		J, p. 5.1.45
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2018

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>b</b> Buildings		2,321,648.	252,943.	2,068,705.
c Leasehold improvements		1,286,113.	136,288.	1,149,825.
<b>d</b> Equipment		779,546.	572,304.	207,242.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	4,844,172.			

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 GEORGIA ASSC Part VII Investments - Other Securities.		REALTORS, I	NC. 58-083684	13 Page
Complete if the organization answered "Yes" of	on Form 990 Part IV	line 11h See Form 990	Part X line 12	
(a) Description of security or category (including name of security)	(b) Book value		valuation: Cost or end-of-year mark	et value
(4) Financial desirations	(1)		,	
(1) Financial derivatives (2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	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 mark	cet value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.	
(a) [	Description		<b>(b)</b> Boo	k value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	<i>15.</i> )		<b>&gt;</b>	
Complete if the organization answered "Yes" of	on Form 990. Part IV.	line 11e or 11f. See Form	n 990, Part X, line 25.	
1. (a) Description of liability	,	(b) Book value	, , ,	
(1) Federal income taxes				
(2)				

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)		

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES RELATED TO RENTAL REVENUE 139,193.

Schedule D (Form 990) 2018

139,193.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES INCLUDED IN RENTAL INCOME

Schedule D (Form 990) 2018	GEORGIA	ASSOCIATION	OF	REALTORS,	INC.	58-0836843	Page 5
Schedule D (Form 990) 2018 Part XIII   Supplemental Inform	mation (contin	ued)					
•	(COITIII)	<u>uea)                                    </u>					
							-
							-
							-
							-
							-

## SCHEDULE J (Form 990)

**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.

Open to Public

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

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

Inspection
Employer identification number

OMB No. 1545-0047

GEORGIA ASSOCIATION OF REALTORS, INC.

58-0836843

			Yes	No
<b>1</b> a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	X Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account 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	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 filing 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.			
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	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:			
	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			
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:			
	The organization?	6a		
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
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		1

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

Schedule J (Form 990) 2018

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.

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred benefits		(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(6)(1/(0)	reported as deferred on prior Form 990
(1) DEBRA S. JUNKIN	(i)	192,236.	0.	0.	5,811.	15,755.	213,802.	0.
CHIEF EXECUTIVE OFFICER	(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)							
	(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 CEO'S SPOUSE TRAVELS TO MEETINGS AND CONVENTIONS.

## SCHEDULE O

(Form 990 or 990-EZ)

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 990-EZ.

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. 2018
Open to Public Inspection

OMB No. 1545-0047

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. 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 FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE (HAVING THE AUTHORITY TO ACT BETWEEN BOARD MEETINGS) AND CEO BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: EVERY YEAR, COMMITTEE MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE CONSENT.

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

 $\label{eq:LHA} \mbox{ For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.}$ 

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization  GEORGIA ASSOCIATION OF REALTORS, INC.	Employer identification number 58-0836843
THE ADMINISTRATIONS AND OPERATIONS COMMITTEE, CONSISTING O	F SEVEN ELECTED,
UNPAID OFFICERS OF THE ASSOCIATION, DETERMINE AND APPROVE	THE COMPENSATION
PACKAGE FOR THE CEO.	
THE ADMINISTRATIONS AND OPERATIONS COMMITTEE, CONSISTING O	F SEVEN ELECTED,
UNPAID OFFICERS OF THE ASSOCIATION, APPROVE RECOMMENDATION	S MADE BY THE CEO
FOR COMPENSATION REGARDING OTHER OFFICERS OR KEY EMPLOYEES	•
THE PROCESSES REGARDING COMPENSATION ARE DOCUMENTED AND BA	SED UPON
INDEPENDENT COMPENSATION WEBSITES FOR COMPARABILITY. STUD	IES ARE DONE
BASED OFF OF COMPENSATION REVIEWS OF SIMILAR POSITIONS, IN	CLUDING
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, CO.	NFLICT OF
INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE	PUBLIC.
FORM 990, PART XII, LINE 2C:	
THE ASSOCIATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILIT	Y FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SEL	ECTION OF AN
INDEPENDENT ACCOUNTANT.	

## **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

GEORGIA ASSOCIATION OF REALTORS, INC.

DISASTER DAMAGE.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

58-0836843

(a)	(b)	(c)	(d)	(e)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)		I	l l	Direct controll entity	ng
Part II Identification of Related Tax-Exempt Organizations during the tax year.	cations. Complete if the organization	answered "Yes" on Form 990	), Part IV, line 34,	pecause it had one	or more related	I tax-exempt	
(a)	(b)	(c)	(d)	(e)	(f)		<b>(g)</b> n 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct cont entity	rolling co	n 512(b)(13) entrolled entity?
				501(c)(3))		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	THE AWARDING OF						
FOUNDATION, INC 58-1627007, 6065 BARFIELD	SCHOLARSHIPS FOR THE STUDY			TYPE II			
ROAD, SUITE 200, ATLANTA, GA 30328	OF REAL ESTATE SUBJECTS.	GEORGIA	501(C)(3)	SUPPORTING	N/A		X
GEORGIA ASSOCIATION OF REALTORS DISASTER	TO PROVIDE RELIEF TO						
RELIEF FUND, INC 20-3255676, 6065	INDIVIDUALS WHO SUSTAIN			170(B)(1)(A)(			

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

BARFIELD ROAD, SUITE 200, ATLANTA, GA 30328

Schedule R (Form 990) 2018

Х

GEORGIA

501(C)(3)

VI)

N/A

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)	(b)	(c)	(d)	(e)	(f)	(g)	(I	ո)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, unrelated, income end-of-year allocations? 20 of 5		allocations?		Code V-UBI amount in box 20 of Schedule	managin partner	Percentage ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	<u> </u>
		·									

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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

(3) COMMITTEE INC.

(4)

(5)

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed i	in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/					1a		X
	Gift, grant, or capital contribution to related organization(s)						1b	X	
c	Gift, grant, or capital contribution from related organization(s)						1c		X
	Loans or loan guarantees to or for related organization(s)						1d		X
	Loans or loan guarantees by related organization(s)						1e		X
f	Dividends from related organization(s)						1f		_X_
	Sale of assets to related organization(s)						1g		X
	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
ı	Performance of services or membership or fundraising solicitations for related organ						11	X	
n	n Performance of services or membership or fundraising solicitations by related organ						1m		_X_
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)					1n		X
c	Sharing of paid employees with related organization(s)						10		X
p	Reimbursement paid to related organization(s) for expenses						1p		_X
	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	Х	
2	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	is line, including covered r	elationships an	d transaction thresh	olds.			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	М	(d) lethod of determinin		lved		
	GEORGIA REALTORS POLITICAL ACTION								
(1)	COMMITTEE, INC.	L	40,000.	FMV					
<u> </u>	GEORGIA ASSOCIATION OF REALTORS		-						
(2)	SCHOLARSHIP FOUNDATION, INC.	L	18,000.	FMV					
<u> </u>	GEORGIA REALTORS POLITICAL ACTION								

S

134,390.FMV

832163 10-02-18 28

Page 4

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?		General manage partner	(k) Percentage ing ownership
								Oakaatala		

Schedule F	R (Form 990) 2018	GEORGIA	ASSOCIATION	OF REAL	TORS, INC.	58-0836843	Page <b>5</b>
Part VII	R (Form 990) 2018 Supplemental Info	rmation.					
	Provide additional infor		es to questions on Sch	edule R. See in	estructions		
	1 Tovido additional infor	manon for recipente	oo to quoditorio dii com	<u> </u>	ou double.		

EXTENDED TO NOVEMBER 15, 2019

Form	990-T	E	xempt Organization					ax Return	-	OMB N	o. 1545-0687
			(and proxy	tax unde	er sed	ction 6033(e))					040
		For ca	endar year 2018 or other tax year beginning			, and ending			_ ·	Z	018
Depar	tment of the Treasury		Go to www.irs.gov/For						-	Open to Pu	ublic Inspection for
	al Revenue Service	<b>•</b>	Do not enter SSN numbers on this fo					. , , ,			ublic Inspection for organizations Only ication number
A L	Check box if address changed		Name of organization ( Check b	oox if name cl	hanged	and see instruction	s.)		(Emp	oloyees' trus uctions.)	st, see
	xempt under section	Print	GEORGIA ASSOCIATI	ON OF	REA	LTORS, I	NC.				36843
X	] 501( <b>c</b> )( <b>6</b> )	or Type	Number, street, and room or suite no.							lated busine instructions	ess activity code s.)
	408(e) 220(e)	Type	6065 BARFIELD ROA								
			City or town, state or province, country		r foreigr	postal code			_ 1 1	100	
	529(a)		ATLANTA, GA 3032	78					211	120	
C at	end of year	77	F Group exemption number (See inst G Check organization type ► X	ructions.)	oration	F01(a) t	ruot	401(a)	trust		Other truet
H En	ter the number of the	organiza	tion's unrelated trades or businesses.		1	501(c) to		401(a)		<u>L</u>	Other trust
		-	EE STATEMENT 1					ne only (or first) uni omplete Parts I-V. I			2
	•		ce at the end of the previous sentence,	complete Pa	rts I and			•			,
	siness, then complete l	-	•	oompioto i u	rto r une	in, complete a con	oddio iv	n for odon ddditione	ii ii uuc	3 01	
			oration a subsidiary in an affiliated gro	up or a paren	nt-subsid	diary controlled gro	up?	▶ [	Y	es X	No
			ifying number of the parent corporation								
<b>J</b> Th			JENNIFER LUNDY			Т	elephor	ne number 🕨 7	70-	451-	1831
			le or Business Income			(A) Income	$\perp$	(B) Expenses			(C) Net
	Gross receipts or sale										
b	Less returns and allow				1c						
2			A, line 7)		2						
3	Gross profit. Subtract				3		-				
4a			h Schedule D)		4a 4b						
b C			art II, line 17) (attach Form 4797) ts		40 4c						
5			chip or an S corporation (attach stateme		5						
6	Rent income (Schedu		mip of all o corporation (attach statem		6						
7	,	, .	ne (Schedule E)		7	56,00	0.	37,5	82.		18,418.
8			nd rents from a controlled organization		8	•		•			
9	Investment income of	a sectio	n 501(c)(7), (9), or (17) organization (	Schedule G)	9						
10	Exploited exempt activ	vity inco	me (Schedule I)		10						
11	Advertising income (S	Schedule	J)		11	15,91	.0.	113,9	<u>81.</u>	_	<u>98,071.</u>
12			s; attach schedule)		12	=1 01					
13	Total. Combine lines				13	71,91		151,5	63.	_	79,653.
Pa			t Taken Elsewhere (See insutions, deductions must be directly					ncome )			
14	• •		rectors, and trustees (Schedule K)						14		
14 15									14 15		16,884.
16									16		10,0011
17									17		
18	Interest (attach sche	dule) (s	ee instructions)						18		
19	Taxes and licenses								19		
20	Charitable contribution	ons (Se	e instructions for limitation rules)						20		
21	Depreciation (attach	Form 48	562)			21		46,334.			
22			Schedule A and elsewhere on return					46,334.	22b		0.
23	Depletion								23		
24			mpensation plans						24		
25 26			hadula I)						25		
26 27	Excess exempt exper	nste (Sci	hedule I) nedule J)						26 27		
28			edule)						28		
29	Total deductions. A	dd lines	14 through 28						29		16,884.
30			ncome before net operating loss deduct						30		96,537.
31			oss arising in tax years beginning on o				s)		31		
32	· ·	-	ncome. Subtract line 31 from line 30			,	•		32		96,537.
82370	1 01-09-19 LHA <b>F</b> 0	r Paper	work Reduction Act Notice, see instru	ctions.						Form	990-T (2018)

Page 2

Part I	II T	Total Unrelated Business Taxable Income	,						
33	Total	of unrelated business taxable income computed from all unre	lated trades or businesses	(see instructions)		33	_ 9	6,5	<del>37.</del>
34		unts paid for disallowed fringes				34			
35	Dedu	ction for net operating loss arising in tax years beginning befo	ore January 1, 2018 (see in	nstructions) S'	гмт 2	35			0.
36		of unrelated business taxable income before specific deduction							
		33 and 34				36	.   _9	6,5	37.
37		ific deduction (Generally \$1,000, but see line 37 instructions f						1,0	
38		lated business taxable income. Subtract line 37 from line 36				<u> </u>			<del></del>
00		the smaller of zero or line 36	ŭ	•		38	0	6,5	37.
Part I		Fax Computation				00		0 7 3	<u> </u>
39		nizations Taxable as Corporations. Multiply line 38 by 21%	′n 21)			39			0.
40		s Taxable at Trust Rates. See instructions for tax computation				- 00			
40		Tax rate schedule or Schedule D (Form 1041)				- 40			
41						41			
	Altor	/ tax. See instructions							
42	Taxa	native minimum tax (trusts only)				42			
43		n Noncompliant Facility Income. See instructions  Add lines 41, 42, and 43 to line 39 or 40, whichever applies				43			0.
Part \		Tax and Payments				44			<u> </u>
	_	gn tax credit (corporations attach Form 1118; trusts attach Fo	rm 1116)	450					
	Cana	credits (see instructions)		45b		-			
C	Gene	ral business credit. Attach Form 3800		45c		_			
		t for prior year minimum tax (attach Form 8801 or 8827)							
	lotal	credits. Add lines 45a through 45d				450			
46	Subtr	ract line 45e from line 44				46			0.
47		taxes. Check if from: Form 4255 Form 8611							
48		tax. Add lines 46 and 47 (see instructions)							0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Pa		1 1		. 49			0.
		nents: A 2017 overpayment credited to 2018				_			
		estimated tax payments				_			
		eposited with Form 8868				_			
		gn organizations: Tax paid or withheld at source (see instructi				_			
е	Backı	up withholding (see instructions)		50e		_			
		t for small employer health insurance premiums (attach Form		50f		_			
g		credits, adjustments, and payments: Form 2439							
			Total						
51	Total	payments. Add lines 50a through 50g				51			
52		nated tax penalty (see instructions). Check if Form 2220 is atta				52			
53		lue. If line 51 is less than the total of lines 48, 49, and 52, ent				53			
54		payment. If line 51 is larger than the total of lines 48, 49, and	•	d		54			
55		the amount of line 54 you want: Credited to 2019 estimated			funded	<u> 55</u>			
Part \		Statements Regarding Certain Activities a							
56		y time during the 2018 calendar year, did the organization hav	ŭ		•			Yes	No
		a financial account (bank, securities, or other) in a foreign cou		•	Э				
	FinCE	N Form 114, Report of Foreign Bank and Financial Accounts.	If "Yes," enter the name of	the foreign country					
	here	<b>&gt;</b>							X
57	Durin	g the tax year, did the organization receive a distribution from	, or was it the grantor of, (	or transferor to, a fo	reign trust?				Х
	If "Ye	s," see instructions for other forms the organization may have	to file.						
58		the amount of tax-exempt interest received or accrued during							
Cian		nder penalties of perjury, I declare that I have examined this return, includi rrect, and complete. Declaration of preparer (other than taxpayer) is based				/ledge an	d belief, it is tru	ie,	
Sign Here		1			Ī	May the	IRS discuss this	s return w	vith
пеге		Observation of all forms	<u>CEO</u>				arer shown belo		_
		Signature of officer Date		<del></del>				es	No
		Print/Type preparer's name Preparer's sig	nature	Date	Check	if P	PTIN		
Paid					self- employe				
Prepa	arer	•	M SMITH II	09/09/19			P00319		
Use (		Firm's name ► CARR, RIGGS & INGRA	-		Firm's EIN	<u> </u>	72-139	662	1
	-	4004 SUMMIT BLVD	-	טט			224		
		Firm's address ► ATLANTA, GA 30319			I Phone no.	770	.394.8	000	

823711 01-09-19

Form **990-T** (2018)

Schedule A - Cost of Goods	Sold. Enter	method of inventor	ory va	aluation ► N/A					
1 Inventory at beginning of year				Inventory at end of yea			6		
2 Purchases				Cost of goods sold. Su					
3 Cost of labor	1 1			from line 5. Enter here					
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section				Yes	No
<b>b</b> Other costs (attach schedule)				property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income ( (see instructions)	From Real	Property and	Per	sonal Property L	ease	d With Real Prope	erty)		
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receive	ed or accrued							
(a) From personal property (if the perconent for personal property is more 10% but not more than 50%)	centage of than	` ' of rent for pe	rsonal	onal property (if the percentage property exceeds 50% or if ed on profit or income)	ge	<b>3(a)</b> Deductions directly columns 2(a) an	connec d 2(b) (a	ted with the income in attach schedule)	ı
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter <b>&gt;</b>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see in	nstru	ctions)					
			2	Gross income from		3. Deductions directly conr to debt-finance			
1. Description of debt-fir	nanced property			or allocable to debt- financed property	, ,	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
					S	STATEMENT 5		PATEMENT	
(1) 6065 BUILDING				207,407.		46,334	•	92,8	<u>60.</u>
(2)							_		
(3)							_		
(4)	Γ								
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	of or a debt-fina	adjusted basis illocable to nced property n schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deducti column 6 x total of co 3(a) and 3(b))	
(1) 1,009,710. (2) (3) (4)	3 ,	740,048.		27.00%		56,000		37,5	82.
(2)				%			_		
(3)				%			_		
				%					
STATEMENT 3	STAT	EMENT 4				inter here and on page 1, Part I, line 7, column (A).		Enter here and on pag Part I, line 7, column (	
Totals				<b>&gt;</b>		56,000	.	37,5	82.
Total dividends-received deductions in	cluded in column	18						-	0.

Form **990-T** (2018)

Schedule F - Interest,	Annuitie	s, Royal	ties, an					tions	(see ins	struction	s)		
4					Controlled O			  -		T	0		
Name of controlled organiza	tion	<b>2.</b> Em identifi num	cation	3. Net unr (loss) (see	related income e instructions)	<b>4.</b> Tot payn	al of specified nents made	include	t of column 4 t ed in the contr ation's gross i	olling	Deductions directly connected with income in column 5		
(1)													
(2)													
(3)													
(4)													
Nonexempt Controlled Organi	izations												
7. Taxable Income		nrelated inconsee instructions		9. Total	of specified payr made	nents	10. Part of column in the controllingross			<b>11.</b> De with	ductions directly connected n income in column 10		
(1)													
(2)													
(3)													
(4)													
	•			•			Add colun Enter here and line 8, o		1, Part I, \).		Add columns 6 and 11. er here and on page 1, Part I, line 8, column (B).		
Totals									0.		0.		
Schedule G - Investme		ne of a S	Section	501(c)(7	7), (9), or (	17) Org	ganization						
`	ructions) cription of inco	me			2 Amount of	income	3. Deductio		<b>4.</b> Set-		5. Total deductions and set-asides		
							(attach sched		(attach s	schedule)	(col. 3 plus col. 4)		
(1)													
(2) (3)													
(4)													
					Enter here and	on nage 1					Enter here and on page 1,		
					Part I, line 9, co						Part I, line 9, column (B).		
Tatala						_					0.		
Schedule I - Exploited	Exempt	Activity	Incom	e Other	Than Adv	0.  ertisin	a Income				0.		
(see instri	-	, 10 th 11 th		-,			9						
Description of exploited activity	2. G	Pross business e from business	directly of with proof un	spenses connected oduction related ss income	4. Net incon from unrelated business (co minus colum gain, comput through	I trade or Ilumn 2 n 3). If a e cols. 5	5. Gross inco from activity t is not unrelat business inco	hat ed	<b>6.</b> Exp attributa colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).		
(1)													
(1) (2) (3) (4)													
(3)													
(4)													
	Enter her page 1 line 10,	col. (A).	page '	ere and on 1, Part I, , col. (B).							Enter here and on page 1, Part II, line 26.		
Totals ► Schedule J - Advertisi	na Incom	0.	note: : **	0.							0.		
					aalidatad	Doois							
Part I Income From	Periodic	ais Rep	orted o	n a Con	sondated	Dasis							
1. Name of periodical		2. Gross advertising income	adv	3. Direct rertising costs	or (loss) (c col. 3). If a g	ising gain ol. 2 minus ain, comput arough 7.	<b>5.</b> Circulatincome		6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4).		
(1) (2) (3) (4)													
(3)													
(4)													
Totals (carry to Part II, line (5))	<b>&gt;</b>	(	0.	0	•						0 . Form <b>990-T</b> (2018)		

## Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

	•					
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) GEORGIA						
(2) REALTOR 'S						
(3) MAGAZINE	15,910.	113,981.	-98,071.	-98,071.		
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	15,910.	113,981.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form **990-T** (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

SALE OF ADVERTISING IN THE GEORGIA REALTOR'S MAGAZINE RENTAL OF PORTION OF 6065 BARFIELD PROPERTY

TO FORM 990-T, PAGE 1

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
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 CARRYO	VER AVAILABLE THIS	YEAR	576,864.	576,864.

FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ACQUISITION DEBT	INCOME	STATEMENT 3
DESCRIPTION OF DEBT-FINANCED PROPERTY 6065 BUILDING	ACTIVITY NUMBER 1	AMOUNT OF OUTSTANDING DEBT
BEGINNING FIRST MONTH BEGINNING SECOND MONTH BEGINNING THIRD MONTH BEGINNING FOURTH MONTH BEGINNING FIFTH MONTH BEGINNING SIXTH MONTH BEGINNING SEVENTH MONTH BEGINNING EIGHTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH		1,935,797 1,921,771 906,896 889,114 871,267 853,356 835,378 817,336 799,227 781,052 762,811 742,509
TOTAL OF ALL MONTHS NUMBER OF MONTHS IN YEAR		12,116,514 12
AVERAGE AQUISITION DEBT		1,009,710
FORM 990-T, SCHEDULE E, COLUMN 4  FORM 990-T  SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ADJUSTED BASIS  DESCRIPTION OF DEBT-FINANCED PROPERTY	INCOME  ACTIVITY NUMBER	STATEMENT 4
5065 BUILDING	1	- AMOUNT
	1	
AVERAGE ADJUSTED BASIS OF PROPERTY FIRST DAY OF YEAR AVERAGE ADJUSTED BASIS OF PROPERTY LAST DAY OF YEAR		3,740,048 3,740,048
AVERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR		3,740,048
TOTAL TO FORM 990-T, SCHEDULE E, COLUMN 5		

FORM 990-T SCH	EDULE E - DEPRECIA	TION DEDUCTI	ON	STATEMENT 5
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION	- SUBTOTAL -	1	46,334.	46,334.
TOTAL OF FORM 990-T, S	CHEDULE E, COLUMN	3(A)		46,334.
FORM 990-T	SCHEDULE E - OTHER	DEDUCTIONS		STATEMENT 6
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
MORTGAGE INTEREST OTHER EXPENSES PROPERTY TAXES REPAIRS UTILITIES INSURANCE ECONOMIC DEVELOPMENT MANAGEMENT FEE	- SUBTOTAL -	1	17,071. 8,081. 18,870. 21,207. 8,863. 5,192. 3,206. 10,370.	92,860.
TOTAL OF FORM 990-T, S	CHEDULE E, COLUMN	3(B)		92,860

## **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Business or activity to which this form relates

1

E-

OMB No. 1545-0172

Sequence No. 179

epartment of the Treasury Internal Revenue Service Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Identifying number GEORGIA ASSOCIATION OF REALTORS 6065 BUILDING 58-0836843 INC. Election To Expense Certain Property Under Section 179 Note; If you have any listed property, complete Part V before you complete Part I. 1,000,000. **1** Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 3 2,500,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property 6 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 **15** Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2018 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery period (business/investment use only - see instructions) (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 3-year property 19a 5-year property b 7-year property C 10-year property d 15-year property 20-year property S/L 25 yrs. 25-year property g S/L 27.5 yrs MM Residential rental property h 27.5 yrs MM S/L S/L MM 39 vrs. i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L 12-year b 30-year 30 yrs MM S/L С 40 yrs 40-vear MM S/L d Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

816251 12-26-18 LHA For Paperwork Reduction Act Notice, see separate Instructions.

23 For assets shown above and placed in service during the current year, enter the

Form 4562 (2018)

46,334.

22

23

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr

portion of the basis attributable to section 263A costs

Form 4562	(2018)
Part V	Liste

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a,

	Section A		on and Other							r limit	s for r	nassenn	er autom	nohiles )		
	a Do you have evidence to s					$\overline{}$		$\neg$					nce writt			- No
<u> 248</u>	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	ot	(d) Cost or ther basis	Ba	Yes (e) asis for depousiness/invuse or	reciatior estment	(f)	ery	() Met	g) :hod/ ention	Depre	(h) eciation uction	Ele sectio	No (i) cted on 179 ost
<u>2</u> 5	Special depreciation allo		ualified listed	property	•			•	,							
	used more than 50% in											25				
26	Property used more tha								т —	-						
		1 1		%		_			+	_						
		i i		%					+	_						
	Duamantu was al 500/ au la			<u>/</u>												
27	Property used 50% or le	i .							Т	Τ,	. /1					
		1 1		%					+		<u>5/L -</u>				-	
		1 1		% %					+		<u> </u>				-	
	A alal a mana comba in a a lormana	/b\ !:=== 0F		-		. Ii.a. 04					5/L -	100			-	
	Add amounts in column											28				
<u>29</u>	Add amounts in column	(I), IINE 26. E		on line /										29	<u> </u>	
	mplete this section for ve					u meet	an exce		o compl		this se	ection fo				
	T			1	a)		(b)		(c)		(0	-	-	е)	(1	
30	Total business/investment		•	Ver	nicle	V	<u>ehicle</u>	-	Vehicle	_	Veh	icle	Ver	nicle	Veh	icle
<b>.</b>	year (don't include commu							+		_						
	Total commuting miles of Total other personal (no driven	ncommuting	) miles													
33	Total miles driven during Add lines 30 through 32	g the year.														
34	Was the vehicle availab			Yes	No	Yes	No	Ye	s N	•	Yes	No	Yes	No	Yes	No
	during off-duty hours?	•														
35	Was the vehicle used pr															
	than 5% owner or relate	d person?														
36	Is another vehicle availa	•														
		Section C	- Questions f	or Empl	oyers V	Vho Pro	ovide Ve	hicles	for Use	by TI	heir E	mploye	es			
Ans	swer these questions to d	determine if y	ou meet an e	ception	to com	pleting	Section	B for \	ehicles	used l	by em	ployees	who a	ren't		
mo	re than 5% owners or rela	ated persons	S													
37	Do you maintain a writte	. ,	•		•			,	•		0,	, ,			Yes	No
38	employees?  Do you maintain a writte															
30	employees? See the ins		•	•						•		Jui				
30	Do you treat all use of v				_										•	
	Do you provide more that						tion from									
	the use of the vehicles,															
41	Do you meet the require															
	Note: If your answer to															
P	art VI Amortization	, , ,	,	,											<u> </u>	
	(a) Description of	f costs	Date	(b) amortization begins		(c) Amortiz amou	able		Co- sect	de		(e) Amortiza period or per	ition	A	(f) mortization or this year	
<u></u>	Amortization of costs th	at begins du	ring your 2018		ır:						1		v.			
_				<u>, ,</u>												
43	Amortization of costs th	at began bet	fore your 2018	tax yea	r								43			
	Total. Add amounts in o												44			

## **Depreciation and Amortization** (Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Attachment Sequence No. **179** 

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates Identifying number

1

RENT

	RGIA ASSOCIATION OF						TAL IN			58-0836843
Par	t I Election To Expense Certain Propert	y Under Section 17	9 Note: If yo	ou have any lis	sted pro	perty, c	omplete Part	V before	e you	
<b>1</b> N	Maximum amount (see instructions)							1	1	1,000,000.
<b>2</b> T	otal cost of section 179 property place	d in service (see i	nstructions)					2	2	
<b>3</b> T	hreshold cost of section 179 property b	pefore reduction i	n limitation							2,500,000.
4 F	Reduction in limitation. Subtract line 3 fr	rom line 2. If zero	or less, ente	er -0					-	
<b>5</b> D	ollar limitation for tax year. Subtract line 4 from line 1	. If zero or less, enter -0	0 If married filin	g separately, see in	nstruction	s		5	5	
6	(a) Description of prop	perty		(b) Cost (busin	ess use o	nly)	(c) Elected o	ost	_	
									_	
									_	
									-	
									-	
	isted property. Enter the amount from I				-	7			_	
	otal elected cost of section 179 proper									
	entative deduction. Enter the smaller									
	Carryover of disallowed deduction from								0	
	Business income limitation. Enter the sm									
	Section 179 expense deduction. Add lin				٠ . ا			1	2	
	Carryover of disallowed deduction to 20  Don't use Part II or Part III below for li				<b>-</b>	13				
Par					e listed	property	v )			
	special depreciation allowance for quality		•	•			-		Т	
	ne tax year						_	1.	,	
	Property subject to section 168(f)(1) elec									
	Other depreciation (including ACRS)	,							6	
	t III MACRS Depreciation (Don't	include listed pro	pertv. See ir	structions.)				.   1	<u> </u>	
				ection A						
17 N	MACRS deductions for assets placed in	service in tax vea	ars beginnin	a before 2018	}			1	7	
	you are electing to group any assets placed in service	•					▶ □	ï 🗖		
	Section B - Assets I	Placed in Service	e During 20	18 Tax Year l	Jsing t	he Gene	ral Depreciat	tion Sys	stem	
	(a) Classification of property	(b) Month and year placed in service	(business/ii	r depreciation nvestment use instructions)	(d) F	Recovery period	(e) Convention	(f) Metho	od	(g) Depreciation deduction
19a	3-year property									
b	5-year property	1								
С	7-year property	1								
d	10-year property	1								
е	15-year property	1								
f	20-year property									
g	25-year property				2	5 yrs.		S/L		
L	Decidential worth was a training	/			27	.5 yrs.	MM	S/L		
h	Residential rental property	/			27	.5 yrs.	MM	S/L		
	Nonresidential real property	/			20	9 yrs.	MM	S/L		
i	INCHESIGE HIGHEN DIODENV				3:	,			- 1	
		/					MM	S/L		
	Section C - Assets PI	/ aced in Service	During 2018	3 Tax Year Us						1
20a		/ aced in Service	During 2018	3 Tax Year Us						1
20a b	Section C - Assets PI Class life 12-year	aced in Service	During 2018	3 Tax Year Us	sing the	e Alterna 2 yrs.	ative Depreci	ation S S/L S/L	system	) 
b c	Section C - Assets PI Class life 12-year 30-year	aced in Service	During 2018	3 Tax Year Us	sing the	e Alterna 2 yrs. 0 yrs.	MM	S/L S/L S/L	ystem	1
b c d	Section C - Assets PI Class life 12-year 30-year 40-year	aced in Service	During 2018	3 Tax Year Us	sing the	e Alterna 2 yrs.	ative Depreci	ation S S/L S/L	ystem	1
b c d <b>Par</b>	Section C - Assets PI Class life 12-year 30-year 40-year  T IV Summary (See instructions.)	/ /	During 2018	3 Tax Year Us	sing the	e Alterna 2 yrs. 0 yrs.	MM	S/L S/L S/L S/L	ystem	
b c d <b>Par</b> 21 L	Section C - Assets PI Class life 12-year 30-year 40-year  T IV Summary (See instructions.) isted property. Enter amount from line	/ /			1: 3: 4:	2 yrs. O yrs. O yrs.	MM	S/L S/L S/L S/L	ystem	
b c d <b>Par</b> 21 L 22 T	Class life 12-year 30-year 40-year  TIV Summary (See instructions.) Listed property. Enter amount from line sotal. Add amounts from line 12, lines 1	/ / 28	es 19 and 20	) in column (g)	12 30 40 31, and li	2 yrs. 2 yrs. 2 yrs. 3 yrs. 3 yrs.	MM	S/L S/L S/L S/L S/L	ystem	
b c d Par 21 L 22 T	Class life 12-year 30-year 40-year  TIV Summary (See instructions.) Listed property. Enter amount from line total. Add amounts from line 12, lines 1 and on the appropriate lines of the second of the appropriate lines of the appropriate lines of the second of the second of the second of the appropriate lines of the second of the secon	/ / 284 through 17, line of your return. Pa	es 19 and 20	) in column (g) nd S corporat	12 30 40 31, and li	2 yrs. 2 yrs. 2 yrs. 3 yrs. 3 yrs.	MM	S/L S/L S/L S/L S/L	ystem	46,333.
b c d Par 21 L 22 T E 23 F	Class life 12-year 30-year 40-year  TIV Summary (See instructions.) Listed property. Enter amount from line sotal. Add amounts from line 12, lines 1	/ / 28	es 19 and 20	) in column (g) nd S corporat	12 30 40 31, and li	2 yrs. 2 yrs. 2 yrs. 3 yrs. 3 yrs.	MM	S/L S/L S/L S/L S/L	ystem	

Part V

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

24a Di vool have evidence to support the besinesolivestment use claimed? Yes No 249 in 11 (%), is the evidence writtent? Yes No (%) (%) (%) (%) (%) (%) (%) (%) (%) (%)		Section A -	Depreciation	on and Other I	nforma	tion (Ca	ution:	: See th	ne instru	uctio	ons for lir	nits for	passeng	er auton	nobiles.)		
(g) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	<b>24a</b> D															Yes	No
used more than 50% in a qualified business use:    Property used more than 50% in a qualified business use:		(a) Type of property	(b) Date placed in	(c) Business/ investment	ot	(d) Cost or	10	Basis for d (business/	e) epreciation investmen	on	<b>(f)</b> Recovery	Me	( <b>g)</b> thod/	Depre	( <b>h)</b> eciation	Elec sectio	(i) cted in 179
27 Property used more than 50% in a qualified business use:  28 Property used 50% or less in a qualified business use:  29 Property used 50% or less in a qualified business use:  29 Section 1 96 SAL	•	•		•		•			•		•		25				
1													25				
36   96   96   97   97   97   97   97   9	20 11	operty used more than					-			Т		I					
27 Property used 50% or less in a qualified business use:							_			+							
Property used 50% or less in a qualified business use:										+							
1	<b>27</b> Pro	operty used 50% or le										<u> </u>		ı			
96	21 11	operty asca 5070 or le								Т		S/L.					
28 Add amounts in column (h), line 26. Enter here and on line 21, page 1  29 Add amounts in column (h), line 26. Enter here and on line 7, page 1  29 Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions and for the part of							_			$\top$							
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (h), line 26. Enter here and on line 7, page 1  Section 8 — Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner." or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f) (Vehicle Vehicle Vehic										$\top$							
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1  Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year (don't include commuting miles)  31 Total commuting miles driven during the year (and to the personal (noncommuting) miles driven during the year (don't include commuting) miles driven during the year (and to the personal (noncommuting) miles driven during the year (Add lines 30 through 32 and the personal use driven during the year (Add lines 30 through 32 and the vehicle available for personal use during off-duty hours?  32 Total ories existed the vehicle available for personal use during off-duty hours?  35 Was the vehicle available for personal use during off-duty hours?  36 Is another vehicle available for personal use of vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing section B for vehicles used by employees who aren't more than 5% owner or related persons.  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you that all use of vehicles by employees as personal use?  49 Do you provide more than five vehicles to yen employees, obtain information from your employees about the use of the vehicles, and retain the information received?  40 Do you provide more than five vehicles to yen employees as personal use?  41 Do you meet the requirements concerning qualified automobile demonstration use?  42 Amortization of costs that begins during your 2018 tax year.  43 Amortization of costs that began before your 2018 tax year.	<b>28</b> Ad	dd amounts in column				and on	line 2	1 nage	. 1			•	28				
Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  10 Total business/investment miles driven during the year (don't include commuting miles)  11 Total commuting miles driven during the year  22 Total other personal (noncommuting) miles driven during the year  23 Total miles driven during the year  24 Add lines 30 through 32  25 Was the vehicle available for personal use during oftel year vehicle available for personal use during off duly hours?  26 Is another vehicle available for personal use of vehicles which available for personal use?  Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owner or related person?  27 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  28 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?  29 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?  40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  40 Do you meet the requirements concerning qualified automobile demonstration use?  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.  42 Amortization of costs that begins during your 2018 tax year:  43 Amortization of costs that begins during your 2018 tax year:														1	29		
Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year (4on't include commuting miles)  31 Total commuting miles driven during the year  32 Total other personal (noncommuting) miles driven during the year.  Add lines 30 through 32  34 Was the vehicle available for personal use during off-duty hours?  35 Was the vehicle available for personal use than 5% owner or related person?  36 Is another vehicle available for personal use?  Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners  39 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners  39 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  41 Do you meet the requirements concerning qualified automobile demonstration use?  Description of costs that begins during your 2018 tax year:  42 Amortization of costs that begins during your 2018 tax year:  43 Amortization of costs that begins during your 2018 tax year:																	
year (don't include commuting miles)  31 Total commuting miles driven during the year  32 Total other personal (noncommuting) miles driven  33 Total miles driven during the year.  Add lines 30 through 32  34 Was the vehicle available for personal use during off-duty hours?  35 Was the vehicle available for personal use during off-duty hours?  36 Is another vehicle available for personal use?  Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners  39 Do you treat all use of vehicles to your employees as personal use?  40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  41 Do you meet the requirements concerning qualified automobile demonstration use?  Note: if your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.  Part VI Amortization  42 Amortization of costs that begins during your 2018 tax year:  43 Amortization of costs that begins before your 2018 tax year:	to you	r employees, first ans	wer the ques	tions in Sectio			u meet		eption			·				(f	)
31 Total commuting miles driven during the year	<b>30</b> To	•			Vel	nicle	\	Vehicle		Ve	hicle	Vel	nicle	Vehicle		Vehicle	
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### Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print GEORGIA ASSOCIATION OF REALTORS, INC. 58-0836843 File by the Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 6065 BARFIELD ROAD, SUITE 200 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. ATLANTA, GA 30328 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Application Application Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 JENNIFER LUNDY The books are in the care of ► 6065 BARFIELD ROAD, SUITE 200 - ATLANTA, GA 30328 Telephone No. ► 770-451-1831 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2018 or tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Form 8868 (Rev. 1-2019)

0.

any nonrefundable credits. See instructions.

3b

### Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

## Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Enter filerie identificies sumber

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, visit <a href="https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits">www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits</a>.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter me	er's identifying nui	nber	
Type o	r Name of exempt organization or other filer, see instr	uctions.		Employe	r identification num	ber (EIN) or	
print	GEORGIA ASSOCIATION OF REA	T.TORS	TNC		58-08368	13	
File by the due date filing your	Number, street, and room or suite no. If a P.O. box,	see instruct		Social se	curity number (SSI		
return. Se instructio	· · · · · · · · · · · · · · · · · · ·		ress, see instructions.				
Enter t	ne Return Code for the return that this application is for (f	ile a separat	te application for each return)			0 7	
Applic	ation	Return	Application			Return	
Is For		Code	Is For			Code	
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 9	90-BL	02	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)		09		
Form 9	90-PF	04 Form 5227					
Form 9	form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069					11	
Form 9	90-T (trust other than above)	06	Form 8870			12	
• If th • If th box •	e organization does not have an office or place of busines is is for a Group Return, enter the organization's four digit	t Group Exe and atta  NOVEI ganization's	mption Number (GEN)  ich a list with the names and EINs of  MBER 15, 2019 , to file  return for:  id ending	If this is fo	r the whole group, ers the extension is npt organization ret	s for.	
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_	estimated tax payments made. Include any prior year over			3b	\$	<b>U</b> •	
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LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)

instructions.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to page size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "PageScalling" selection box in the Adobe "Print" dialog.

STATE COPY

## TAX RETURN FILING INSTRUCTIONS

GEORGIA FORM 600-T

### FOR THE YEAR ENDING

December 31, 2018

Prepared For:			
Coordia Association of Boo	altoro Ino		
Georgia Association of Rea 6065 Barfield Road, Suite 2			
Atlanta, GA 30328	200		
Atlanta, OA 30320			
Prepared By:			
Carr, Riggs & Ingram, LLC			
4004 Summit Blvd NE, Suit	te 800		
Atlanta, GA 30319			
To be Clared and Detect Day			
To be Signed and Dated By:			
The authorized individual(s	·).		
Amount of Tax:			
Total Tax	\$	0	
Less: payments and credits	<b>©</b>	0	
Plus: other amount		0	
Plus: nterest and penalties	\$	0	
No payment required	\$		
Overpayment:			
Credited to your estimated tax	\$	0	
Other amount		0 0	
Refunded to you	\$	0	
Make Check Payable To:			
Not applicable			
Mail Tax Return and Check (if applicable	) То:		
Georgia Department of Rev	venue		
P.O. Box 740397			
Atlanta, GA 30374-0397			
,			
Return Must be Mailed On or Before:			
November 15, 2019			
Special Instructions:			
- p			

# Georgia Form 600-T (Rev. 06/25/18) Exempt Organization

1901605012											

Mailing Address: Georgia Department of Revenue Processing Center PO Box 740397

Unrelated Busine Page 1	ss Income Tax Return		1901605012		At	lanta, Georgia 30	0374-0397
Amended	Amended due to IRS Audit	Address Cha	nge UET Annualization Ex	xception	attached		
For the taxable y	/ear beginning	01	_/01/2018 and endin	g 12	2/31/2	018	
Name of Organiz	zation	Name of Fiducia	ry	Fede trust	eral Emplo described in	yer ID No. (in ca section 401 (a) ar	se of employees' Id exempt under
CEORGIA A	SSOCIATION OF RE			secti	on 501 (a), ir	isert the trust's ide	entification number.)
Number and Stre		Number and Stre	eet				
				58	-0836	343	
6065 BARF	'IELD ROAD, SUITE			NAI	CS Code	Date of current	IRS code section for
City or Town		City or Town				exemption letter.	which you are exempt.
ATLANTA	ZIP Code	State	ZIP Code			letter.	are exempt.
State GA	30328	State	ZIP Code	51	1120		501C6
	000=0	l				SCHEDUL	
1. Unrelated bus	siness taxable income from Feder	al Form 990-T (att	ach copy)	1.			-96537
2. Additions				2.			
3. Total (add Lir	ne 1 and Line 2)			3.			-96537
							-96537
5. Georgia unrel	lated business taxable income (Li	ne 3 less Line 4)		5.			-90537
COMPUTATION	I OF GEORGIA UNRELATED BU	ISINESS INCOME	ETAX			SCHEDUL	E 2
1. Line 5, above	e, multiplied by 6%			1.			0
2. Less: Credits	used from Schedule 3, do not en	ter more than Line	e 1 of Schedule 2	2.			
3. Less: Paymer	nts			3.			
4. Withholding (	Credits (G2-A, G2-LP and/or G2-R	P)		4.			
5. Balance of ta	x due OR overpayment			5.			0
6. Interest due (	See Instructions)			6.			
7. Underestimat	red tax penalty			7.			
	es due (See Instructions)						
	x, interest and penalties due with						
	n overpayment, amount to be cre			2.			
Estimated <sup>-</sup>		Refunded	•				
A COPY OF THE DECLARATION: It to the best of my on all information	FEDERAL 990-T AND SUPPOR /We declare under penalty of perj /our knowledge and belief, it is tru of which the preparer has knowle ted States, free of any expense to	TING SCHEDULE ury that I/we have ue, correct, and co edge. Georgia Pub	ES (AND ANY EXTENSION) e examined this return (includi emplete. If prepared by a persolic Revenue Code Section 48	ng acco	ompanying : er than the t	schedules and s axpayer, this de	tatements) and claration is based
DEBRA S. Signature of Office			Signature of Ind	ividual	or Eirm Dros	paring Doturn	
CEO	n9/n9/	19	5 Ignature of Ind		or Firm Prep	aring netulli	

Employee ID or Social Security Number

### Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit <a href="https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits">www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits</a>.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifying	number	
Type or print	Name of exempt organization or other filer, see instru	Employe	r identification r	number (EIN) or			
	GEORGIA ASSOCIATION OF REAL	LTORS,	INC.		58-0836843		
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s 6065 BARFIELD ROAD, SUITE		ions.	Social se	curity number (	SSN)	
instructions.	City, town or post office, state, and ZIP code. For a f ATLANTA, GA 30328	oreign addı	ress, see instructions.				
Enter the	Return Code for the return that this application is for (fi	le a separat	e application for each return)			0 1	
Applicat	ion	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990	)-BL	02	Form 1041-A			08	
Form 472	20 (individual)	03	Form 4720 (other than individual)			09	
Form 990	)-PF	04	Form 5227			10	
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	O-T (trust other than above)	06	Form 8870			12	
Telepl  If the	cooks are in the care of $\blacktriangleright$ 6065 BARFIELD in one No. $\blacktriangleright$ 770-451-1831 organization does not have an office or place of busines is for a Group Return, enter the organization's four digit it is for part of the group, check this box $\blacktriangleright$	s in the Uni Group Exe	Fax No. ▶ted States, check this box	If this is fo	r the whole gro	•	
the	equest an automatic 6-month extension of time untile organization named above. The extension is for the organization named above. The extension is for the organization graphs or	ganization's	return for:	e the exem	npt organizatior ·	return for	
	his application is for Forms 990-BL, 990-PF, 990-T, 4720 y nonrefundable credits. See instructions.	), or 6069, e	enter the tentative tax, less	3a	\$	0.	
b If t	<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
est	imated tax payments made. Include any prior year over	payment all	owed as a credit.	3b	\$	0.	
c Ba	lance due. Subtract line 3b from line 3a. Include your p	ayment with	n this form, if required, by				
usi	ng EFTPS (Electronic Federal Tax Payment System). Se	e instructio	ns.	3с	\$	0.	

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)

instructions

### Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print GEORGIA ASSOCIATION OF REALTORS, INC. 58-0836843 File by the Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 6065 BARFIELD ROAD, SUITE 200 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. ATLANTA, GA 30328 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Code Is For Code Is For Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 1041-A Form 990-BL 02 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 JENNIFER LUNDY The books are in the care of ► 6065 BARFIELD ROAD, SUITE 200 - ATLANTA, GA 30328 Telephone No. ► 770-451-1831 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2018 or tax year beginning , and ending Final return If the tax year entered in line 1 is for less than 12 months, check reason: | Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Form 8868 (Rev. 1-2019)

3b

EXTENDED TO NOVEMBER 15, 2019 Form **990-T Exempt Organization Business Income Tax Return** OMB No. 1545-0687 (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Check box if Name of organization ( Check box if name changed and see instructions.) address changed **B** Exempt under section Print GEORGIA ASSOCIATION OF REALTORS, 58-0836843 E Unrelated business activity code (See instructions.) X 501(c)(6 Number, street, and room or suite no. If a P.O. box, see instructions. Type 6065 BARFIELD ROAD, SUITE 200 408(e) 220(e) ີ|408A | 7530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) ATLANTA, GA 30328 511120 C Book value of all assets F Group exemption number (See instructions.) at end of year 12,070,077. G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust **H** Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here **SEE STATEMENT** 1 \_ . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? X No If "Yes," enter the name and identifying number of the parent corporation. Telephone number  $\triangleright$  770  $\overline{-451-1831}$ J The books are in care of ► JENNIFER LUNDY Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales c Balance ..... **b** Less returns and allowances 1c Cost of goods sold (Schedule A, line 7) 2 3 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 5 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 56,000. 37,582. 18.418. 7 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 9 Exploited exempt activity income (Schedule I) 10 10 15,910. 113,981. -98,071. Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 -79,653151,563. 71,910. Total. Combine lines 3 through 12 | Part II | Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 14 16,884. 15 Salaries and wages 15 16 16 17 17 Interest (attach schedule) (see instructions) 18 18 19 Taxes and licenses 19 Charitable contributions (See instructions for limitation rules) 20 20 Depreciation (attach Form 4562) 21 21 22b 22 Less depreciation claimed on Schedule A and elsewhere on return 23 23 Contributions to deferred compensation plans 24 24 25 Employee benefit programs 25

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)
Other deductions (attach schedule)

Total deductions. Add lines 14 through 28

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

16,884.

-96,537.

-96,537.

26

27

28

29

30 31

26

27

28

29

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31

Page 2

GEORGIA ASSOCIATION OF REALTORS, INC. 58-0836843

Part I	II T	otal Unrelated Business Taxable Income				
33	Total	of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	-9	6,5	37.
34	Amou	nts paid for disallowed fringes	34			
35	Dedu	ction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35			0.
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of				
		33 and 34	36	-9	6,5	37.
37	Speci	fic deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		1,0	
38		ated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,				
		the smaller of zero or line 36	38	-9	6,5	37.
Part I	<b>V</b> 1	ax Computation			-	
39	Organ	izations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39			0.
40		Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:				
		Tax rate schedule or Schedule D (Form 1041)	40			
41	Proxy	tax. See instructions	41			
42	Altern	ative minimum tax (trusts only)	42			
43	Tax o	n Noncompliant Facility Income. See instructions	43			
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44			0.
Part \		ax and Payments				
45 a	Foreig	ın tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a				
		credits (see instructions) 45b				
С	Gener	al business credit. Attach Form 3800 45c				
d	Credit	for prior year minimum tax (attach Form 8801 or 8827) 45d				
		credits. Add lines 45a through 45d	45e			
46	Subtr	act line 45e from line 44	46			0.
47	Other	taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47			
48		tax. Add lines 46 and 47 (see instructions)	48			0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49			0.
		ents: A 2017 overpayment credited to 2018				
		estimated tax payments 50b				
		eposited with Form 8868 50c				
		n organizations: Tax paid or withheld at source (see instructions) 50d				
		p withholding (see instructions) 50e				
f	Credit	for small employer health insurance premiums (attach Form 8941) 50f				
		credits, adjustments, and payments: Form 2439				
·		Form 4136 Other Total <b>&gt; 50g</b>				
51	Total	payments. Add lines 50a through 50g	51			
52	Estim	ated tax penalty (see instructions). Check if Form 2220 is attached 🕨 🗌	52			
53		ue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53			
54	Overp	ayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54			
55		the amount of line 54 you want: Credited to 2019 estimated tax	55			
Part \	/  5	Statements Regarding Certain Activities and Other Information (see instructions)				
56	At any	$\gamma$ time during the 2018 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
	over a	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				
	FinCE	N Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				
	here					_X_
57	Durin	g 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	s," see instructions for other forms the organization may have to file.				
58		the amount of tax-exempt interest received or accrued during the tax year ▶\$				
C:		der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowle rect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	edge and b	elief, it is true	÷,	
Sign			May the IRS	3 discuss this	return w	/ith
Here			he prepare	r shown belov	w (see	_
			nstructions	s)? <b>X</b> Ye	s	No
		Print/Type preparer's name Preparer's signature Date Check	if PTI	N		
Paid		self- employed				
Prepa	arer	STANLEY M SMITH II STANLEY M SMITH II 09/09/19		00319		
Use C		Firm's name ► CARR, RIGGS & INGRAM, LLC Firm's EIN ►	· 7	2-139	662	1
	•	4004 SUMMIT BLVD NE, SUITE 800			<b>.</b>	
		Firm's address ► ATLANTA, GA 30319 Phone no. 7	770.	394.8	000	

1 the membrary at beginning of year 1	Sche	dule A - Cost of Goods	Sold. Enter	method of invent	ory v	aluation ▶ N/A					
2 Purchases 2 2 7 Cast of goods sold. Subtract line 6 from line 5. Enter here and in Part 1, line 2 7 4a Additional section 263A costs (attach schedule) 4a	1 In	ventory at beginning of year	1		6	Inventory at end of yea	ır		6		
3 Cost of labor. 3 Interest and in Part I, line 2 Interest and page 1, Part I, line 5, column (A) Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)  (see instructions)  1. Description of property  (d)  2. Rent received or accounted (b) From real and presental property (if the personal property (if the personal property in the persona											
## In Parameter Commence of Co	<b>3</b> Co										
(a) From personal property (if the personal property personal property personal property (if the personal property personal property (if the personal property personal property personal property (if the personal property personal property (if the personal property persona									7		
b Other costs (attach schedule)  S Total. Add lines 1 through 4b  S Total Add lines 1 through 4b  S TATEMENT 3  STATEMENT 4  Enter new and on page 1, Part I, line 6, column 6, 2d, 3d, 4d, 2d, 2d, 2d, 3d, 3d, 3d, 3d, 3d, 3d, 3d, 3d, 3d, 3	(a	ttach schedule)	4a		8		Yes	No			
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)  (1) (2) (3) (4)  2. Rent received or accrued (a) From personal property (in the personal property (in the personal property) (in the rent is based on profit or income) (in the rent is base						property produced or a	acquired				
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)  1. Description of property (if) (2) (3) (4)  2. Rent received or accound (a) From preasonal property (if the percentage of rent in the property of the percentage of rent in the rent is based on profit or income) (b) From real and posseoul property (if the percentage of rent in the rent is based on profit or income) (b) From preasonal property (if the percentage of rent in the rent is based on profit or income) (c) From preasonal property (if the percentage of rent in the rent is based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From preasonal property (if the percentage of rent in based on profit or income) (d) From real and property (if the percentage of rent in based on profit or income) (e) From real and profit or income) (d) From real and profit or income) (e) From	5 To	otal. Add lines 1 through 4b	5			the organization?					
(1) (2) (3) (4)  2. Rent received or accrued  (a) From personal property (if the percentage of rent for personal property (if the percentage of rent for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal property is more than 10% of the format for personal personal property is more than 10% of the format for personal personal personal property is more than 10% of the format for personal personal personal property is more than 10% of the format for personal personal personal personal property is more than 10% of the format for personal pe			From Real	Property and	Per	sonal Property L	.ease	d With Real Prope	erty		
(a) Garage property (if the percentage of rest for allocations of rest for percentage of re	1. Desc	ription of property									
(a) Garage property (if the percentage of rest for allocations of rest for percentage of re	(1)										
(a) (4) (2) (a) From personal property (if the percentage of intro personal property (if the percentage of intro personal property is inner than 50%) (b) From rest and personal property exceeds 50% or if the rent is based on profit or income)  (1) (2) (3) (4) (4) (5) (4) (4) (7) (7) (7) (8) (8) (8) (8) (8) (8) (8) (8) (9) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8											
(a) From personal property (if the percentage of rent for personal property is more than 50%)  (1) (2) (3) (4) (4) (5) (5) (6) (1) (6) (6) (1) (6) (6) (1) (6) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1											
2. Rent received or accrued  (a) From personal property (if the personal property) (if the personal property (if the personal property (if the personal property) (if the personal property) (if the personal property (if the personal property) (if the personal property (if the personal property)											
(a) Profit for content of decry will the protection of the profit of the			2. Rent receive	ed or accrued							
(2) (3) (4) Total (b) Total deductions (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part 1, line 6, column (A)  Schedule E - Unrelated Debt-Financed Income (see instructions)  1. Description of debt-financed property  2. Gross income from or allocable to debt-financed property  3. Deductions directly connected with or allocable to debt-financed property  (a) Stratgett ine depreciation (altach schedule)  STATEMENT 5  (b) Total deductions. Enter here and on page 1, First hier depreciation (altach schedule)  STATEMENT 5  STATEMENT 6  (3)  (4)  4. Amount of average acquisition debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  4. Amount of average acquisition debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Allocable deductions  6. Column 4 divided by column 5  2. Cross income from (a)  8. Allocable deductions  (column 6 x total of column 6		rent for personal property is more	centage of than	` ' of rent for pe	rsonal	property exceeds 50% or if	ge	<b>3(a)</b> Deductions directly columns 2(a) and	connec d 2(b) (	cted with the income in (attach schedule)	
(2) (3) (4) Total (b) Total deductions (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part 1, line 6, column (A)  Schedule E - Unrelated Debt-Financed Income (see instructions)  1. Description of debt-financed property  2. Gross income from or allocable to debt-financed property  3. Deductions directly connected with or allocable to debt-financed property  (a) Stratgett ine depreciation (altach schedule)  STATEMENT 5  (b) Total deductions. Enter here and on page 1, First hier depreciation (altach schedule)  STATEMENT 5  STATEMENT 6  (3)  (4)  4. Amount of average acquisition debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  4. Amount of average acquisition debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a allocable to debt-financed property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Average adjusted basis of a finite property (attach schedule)  5. Allocable deductions  6. Column 4 divided by column 5  2. Cross income from (a)  8. Allocable deductions  (column 6 x total of column 6	(1)										
(3) (4) Total (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)  Schedule E - Unrelated Debt-Financed Income (see instructions)  2. Gross income from or allocable to debt-financed property  1. Description of debt-financed property  2. Gross income from or allocable to debt-financed property  (a) STATEMENT 5  STATEMENT 6  (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)  Description of debt-financed property  (a) Straight line depreciation (attach schedule)  STATEMENT 5  STATEMENT 6  (a) STATEMENT 5  STATEMENT 6  (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)  Description of debt-financed property  (a) Straight line depreciation (a) STATEMENT 6  STATEMENT 6  STATEMENT 6  STATEMENT 6  B. Altocable deductions (column a divided by column 5 and columns 2 x column 6)  (a) Straight line depreciation (a) STATEMENT 6  STATEMENT 6  STATEMENT 6  STATEMENT 6  STATEMENT 6  STATEMENT 6  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4  Enter here and on page 1, Part I, line 7, column (B).  STATEMENT 3  STATEMENT 4											
(4)   Total   O .   Total   O .   Total   O .     (c) Total   Total   O .   (c) Total   O .   (c) Total   O .   (c) Total   Total   O .   (c) Total   O .											
Total											
Schedule E - Unrelated Debt-Financed Income (see instructions)   Schedule E - Unrelated Debt-Financed Income (see instructions)   2. Gross income from or allocable to debt-financed property   3. Deductions directly connected with or allocable to debt-financed property   3. Deductions directly connected with or allocable to debt-financed property   STATEMENT 5   STATEMENT 6			0.	Total			0.				
1. Description of debt-financed property				ter			0.	Enter here and on page 1,	<b>&gt;</b>		0.
2. Gross income from or allocable to debt-financed property   (a) Straight line depreciation (attach schedule)   (b) Other deductions (attach schedule)   STATEMENT   5   STATEMENT   6	Sche	dule E - Unrelated Deb	t-Financed	Income (see in	nstru	ctions)					
1. Description of debt-financed property financed property financed property financed property (attach schedule) STATEMENT 5 STATEMENT 6  (1) 6065 BUILDING 207,407. 46,334. 92,860.  (2) (3) (4)  4. Amount of average acquisition debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) 6. Column 4 divided by column 5 reportable (column 2 x column 6)  (1) 1,009,710. 3,740,048. 27.00% 56,000. 37,582.  (2) (3) (4)  STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A). Part I, line 7, column (B). Totals					2			to debt-finance			
(1) 6065 BUILDING (2) (3) (4)  4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) 1,009,710. (2) 8. Allocable deductions of or allocable to debt-financed property (attach schedule) (2) 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) (1) 1,009,710. (2) 9,000. (3) 9,000. (4) 9,000.  STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A). For allocable to debt-financed property (attach schedule) (attach schedule) (b) Column 4 divided by column 5 (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 4 total of columns 2 x column 6) (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 2 x column 6) (column 6 x total of columns 3(a) and 3(b)) (column 6 x total of columns 2 x column 6)  STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A).  Enter here and on page 1, Part I, line 7, column (B).  Totals		1. Description of debt-fin	anced property				` ′	(attach schedule)		` (attach schedule)	
(2) (3) (4)  4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  (1) 1,009,710							S				
(3) (4)  4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  (1) 1,009,710. 3,740,048. 27.00% 56,000. 37,582.  (2) % (3) %  (4) STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A).  Enter here and on page 1, Part I, line 7, column (B).  Totals		065 BUILDING				207,407.		46,334.	<del>!</del>	92,8	<u>60.</u>
(4)       4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)       5. Average adjusted basis of or allocable to debt-financed property (attach schedule)       6. Column 4 divided by column 5       7. Gross income reportable (column 2 x column 6)       8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))         (1)       1,009,710.       3,740,048.       27.00%       56,000.       37,582.         (2)       %         (3)       %         (4)       %       Enter here and on page 1, Part I, line 7, column (A).       Enter here and on page 1, Part I, line 7, column (B).         Totals       56,000.       37,582.											
4. Amount of average acquisition debt of average acquisition of or allocable to debt-financed property (attach schedule)  (1) 1,009,710. 3,740,048. 27.00% 56,000. 37,582. (2) % (3) (4) STATEMENT 3 STATEMENT 4  STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A). Part I, line 7, column (B). 37,582.									_		
debt on or allocable to debt-financed property (attach schedule)	(4)								-		
(2)	<b>4.</b> deb	t on or allocable to debt-financed	of or a debt-fina	allocable to nced property	6			reportable (column		(column 6 x total of col	
(2)	(1)	1,009,710.	3	,740,048.		27.00%		56,000.	,	37,58	82.
(3)	(2)			_		%					
(4)	(3)					%					
STATEMENT 3 STATEMENT 4  Enter here and on page 1, Part I, line 7, column (A).  Totals  Enter here and on page 1, Part I, line 7, column (B).  56,000.  37,582.	(4)					%					
		STATEMENT 3	STAT	EMENT 4							
	Totale					_		56.000.		37.58	82.
		ividends-received deductions in	cluded in columr	18				<b>&gt;</b>		7 -	

Form **990-T** (2018)

Schedule F - Interest, A	Annuitie	s, Royalt	ties, an	d Rents	From Co	ntrolle	d Organiza	tions	see ins	structio	ns)	
				Exempt 0	Controlled O	rganizati	ons					
1. Name of controlled organizat	tion	2. Emi identific num	cation	3. Net unre	elated income instructions)	<b>4.</b> Tot	tal of specified ments made	includ	rt of column 4 led in the cont ation's gross	rolling	connected	ctions directly d with income olumn 5
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organi	zations											
7. Taxable Income	1	inrelated incom	e (loss)	0 Total	of specified pay	ments	10. Part of colu	mn 9 tha	t is included	11 [	Deductions di	rectly connected
7. Janasia masina		see instructions		<b>3.</b> 10tar	made	nonio	in the controlli		nization's	w	ith income in	column 10
(1)												
(2)												
(3)												
(4)												
	•			•			Add colun Enter here and line 8, 0		e 1, Part I,	l	Add columns here and on line 8, colu	page 1, Part I,
Totals						_			0.			0.
Schedule G - Investme	nt Incor	no of o S	· · · · · · · · · · · · · · · · · · ·	501/a\/7	1 (0) or (	17) 0%	l renizetien		0.			0.
(see inst		ile oi a s	ecuon	301(0)(1	), ( <del>3</del> ), 01 (	17) 01	gariization					
(566 1156	- I dottorioj						3. Deductio	ne	<u> </u>		5 T	otal deductions
1. Desc	cription of inco	me			2. Amount of	income	directly conne	cted	4. Set-asides (attach schedule)		a	nd set-asides
(1)							(attach sched	iule)	,		(00	ol. 3 plus col. 4)
(1)												
(2) (3)												
(4)												
(4)					Enter here and	on nage 1					Enter he	ere and on page 1
					Part I, line 9, co	olumn (A).						ne 9, column (B).
Totals	<u></u>		<u></u>	<u>_</u>	<u></u>	0.	_					0.
Schedule I - Exploited (see instru	-	Activity	Incom	e, Other	Inan Adv	/ertisin	ig Income		,			
	,	Gross		penses	4. Net incon		5. Gross inco	ma	_		7. ∈	xcess exempt
1. Description of exploited activity	unrelated incom	I business ne from business	with pro	connected oduction related s income	business (co minus colum gain, comput through	olumn 2 n 3). If a e cols. 5	from activity to is not unrelate business income	hat ed	attribu	penses table to mn 5	6 mi but	enses (column nus column 5, not more than column 4).
(1)												
(1) (2) (3) (4)												
(3)												
(4)												
	page 1	re and on I, Part I,	page 1	re and on I, Part I,							(	iter here and on page 1,
	line 10,	col. (A).	line 10,	col. (B).							Pa	art II, line 26.
Totals Advertision		0.		<u> </u>								0.
Schedule J - Advertisi					12 .1	D '-						
Part I Income From	Periodic	ais Repo	ortea o	n a Cons	solidated	Basis						
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, comput nrough 7.			6. Read		costs (c	ess readership olumn 6 minus 5, but not more column 4).
(1)												
(1) (2) (3) (4)												
(3)												
(4)												
Totals (carry to Part II, line (5))	▶	(	).	0								0.

Form 990-T (2018) GEORGIA ASSOCIATION OF REALTORS, INC. 58-08368

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) GEORGIA						
(2) REALTOR 'S						
(3) MAGAZINE	15,910.	113,981.	-98,071.			
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	15,910.	113,981.				0.
Sahadula K Campanastia	a of Officare [	Dirootore and	Tructooc /aaa:	- 4 4 N		

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	<b>3.</b> Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form **990-T** (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

SALE OF ADVERTISING IN THE GEORGIA REALTOR'S MAGAZINE RENTAL OF PORTION OF 6065 BARFIELD PROPERTY

TO FORM 990-T, PAGE 1

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
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 CARRYO	VER AVAILABLE THIS	YEAR	576,864.	576,864.

FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANC AVERAGE ACQUISITION DEBT	CED INCOME	STATEMENT 3
DESCRIPTION OF DEBT-FINANCED PROPERTY 6065 BUILDING	ACTIVITY NUMBER 1	AMOUNT OF OUTSTANDING DEBT
BEGINNING FIRST MONTH BEGINNING SECOND MONTH BEGINNING THIRD MONTH BEGINNING FOURTH MONTH BEGINNING FIFTH MONTH BEGINNING SIXTH MONTH BEGINNING SEVENTH MONTH BEGINNING EIGHTH MONTH BEGINNING NINTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TWELFTH MONTH		1,935,797 1,921,771 906,896 889,114 871,267 853,356 835,378 817,336 799,227 781,052 762,811 742,509
TOTAL OF ALL MONTHS NUMBER OF MONTHS IN YEAR		12,116,514 12
AVERAGE AQUISITION DEBT		1,009,710
COTALS TO FORM 990-T, SCHEDULE E, COLUMN 4  CORM 990-T  SCHEDULE E - UNRELATED DEBT-FINANCE AVERAGE ADJUSTED BASIS	ACTIVITY	STATEMENT 4
OTALS TO FORM 990-T, SCHEDULE E, COLUMN 4  ORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCE		STATEMENT 4
OTALS TO FORM 990-T, SCHEDULE E, COLUMN 4  ORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCA AVERAGE ADJUSTED BASIS  ESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER 1	STATEMENT 4

FORM 990-T SCH	EDULE E - DEPRECIA	TION DEDUCTI	ON	STATEMENT 5
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION	- SUBTOTAL -	1	46,334.	46,334.
TOTAL OF FORM 990-T, S	CHEDULE E, COLUMN	3(A)		46,334.
FORM 990-T	SCHEDULE E - OTHER	DEDUCTIONS		STATEMENT 6
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
MORTGAGE INTEREST OTHER EXPENSES PROPERTY TAXES REPAIRS UTILITIES INSURANCE ECONOMIC DEVELOPMENT MANAGEMENT FEE	- SUBTOTAL -	1	17,071. 8,081. 18,870. 21,207. 8,863. 5,192. 3,206. 10,370.	92,860.
TOTAL OF FORM 990-T, S	CHEDULE E, COLUMN	3(B)		92,860

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179** Business or activity to which this form relates Identifying number

1

 $\mathbf{E}-$ 

Part II   Section To Expense Certain Property Under Section 179 Most: If you have any listed property, complete Part V before you complete Part V and Maximum amount (see instructions)	GEORGIA ASSOCIATION OF	REALTORS	S, INC.	606	55 B	UILI	DING			58-0836843
2 Total cost of section 179 property placed in service (see instructions)	Part I Election To Expense Certain Property	Under Section 17	<b>79 Note:</b> If yo	ou have any li	sted pr	operty,	complete Part	V befo	re y	ou complete Part I.
3 Treached cost of section 179 property before reduction in limitation	1 Maximum amount (see instructions)								1	1,000,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0 - If a property continuations to tay or a claimate in the form line in the second of the	2 Total cost of section 179 property placed	d in service (see	instructions)						2	
5 Doble Interscent for Year year's debed the 4 feath line 1 if zero or lose, enter -0. If manufal filing separately, see instructions:  6   (a) Discreption of property   (a) Exception of property   (b) Exception of property   (c) Stectand cost	3 Threshold cost of section 179 property b	efore reduction	in limitation						3	2,500,000.
8 total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 9 10 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 12 12 12 12 12 12 12 12 12 12 12	4 Reduction in limitation. Subtract line 3 fr	om line 2. If zero	or less, ente	er -0-					4	
7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property. Add amounts from line 28 9 Total allected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Total elected cost of section 179 property in 100 property in 100 property in 100 property in 100 property section. Add lines and 10, but don't not enter more than line 1 12	5 Dollar limitation for tax year. Subtract line 4 from line 1.	If zero or less, enter -	0 If married filin	g separately, see i	instruction	ns			5	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 110 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 13 14 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 15 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 16 Property subject to section 168(f)(1) election 15 17 Property subject to section 168(f)(1) election 15 18 Other depreciation (including ACRS) 16 19 Tent III MACRS Depreciation (Don't include listed property. See instructions.)  Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 17 18 If you are electing to group any assets placed in service during the tax year lose or increagement asset seconds, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property   (a) Classification of property   (b) Convention (i) (i) Membra and year placed (in service during the tax year lose of the service during the serv	6 (a) Description of prop									
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 110 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 13 14 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 15 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 16 Property subject to section 168(f)(1) election 15 17 Property subject to section 168(f)(1) election 15 18 Other depreciation (including ACRS) 16 19 Tent III MACRS Depreciation (Don't include listed property. See instructions.)  Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 17 18 If you are electing to group any assets placed in service during the tax year lose or increagement asset seconds, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property   (a) Classification of property   (b) Convention (i) (i) Membra and year placed (in service during the tax year lose of the service during the serv										
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 110 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 12 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 13 14 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 15 Special depreciation Allowance and Other Depreciation (Don't include listed property.) 16 Property subject to section 168(f)(1) election 15 17 Property subject to section 168(f)(1) election 15 18 Other depreciation (including ACRS) 16 19 Tent III MACRS Depreciation (Don't include listed property. See instructions.)  Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 17 18 If you are electing to group any assets placed in service during the tax year lose or increagement asset seconds, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property   (a) Classification of property   (b) Convention (i) (i) Membra and year placed (in service during the tax year lose of the service during the serv										
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9 Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 University of disallowed deduction from line 13 of your 2017 Form 4562 11 Business income (not less than zero) or line 5 11 University of disallowed deduction. Add lines 9 and 10, but don't enter more than line 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, but don't enter more than line 11 14 Special Depreciation Allowance and Other Depreciation (Don't include listed property.)  14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 15 Property subject to section 168(f)(1) election 15 Gother depreciation (and line) AGRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.)  Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018  17 MACRS deductions for assets placed in service during the tax year seeding to group any assets placed in service during the surplement of the service during the service										
10 Carryover of disallowed deduction from line 13 of your 2017 Form 4582										
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 Section 179 experies deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12  Note: Don't use Part II or Part III below for listed property. Instead, use Part V.  Part III Special Depreciation Allowance and Other Depreciation (Don't include listed property.)  14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS)  Part III MACRS Depreciation (Don't include listed property. See instructions.)  Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018  18 if you are electric to goop any assets placed in service during the tax year into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation (in) Method (in) deduction of property  b Syear property  c 7, year property  d 10-year property  f 20-year property										
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11  13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12  Note: Don't use Part II or Part III blook for listed property. Instead, use Part IV.  Part III Special Depreciation Allowance and Other Depreciation (Don't include listed property.)  14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year  15 Property subject to section 168(f)(1) election  16 Other depreciation (including ACRS)  16 Part III MACRS Depreciation (including ACRS)  17 MACRS deductions for assets placed in service in tax years beginning before 2018  18 "you are electing to group any assets placed in service during the tax years beginning before 2018  18 "you are electing to group any assets placed in service of unity are into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation deduction (charges in service)  (i) Classification of property  (ii) Classification of property  25 year property  10 10 year property  11 10 10 10 10 10 10 10 10 10 10 10 10 1										
Note: Don't use Part II or Part III below for listed property. Instead, use Part V.    Part III   Special Depreciation (Part III) below for listed property. Instead, use Part V.										
Note: Don't use Part III or Part III below for listed property. Instead, use Part V.    Part III   Special Depreciation Allowance and Other Depreciation (Don't include listed property.)   4 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year									12	
Part II   Special Depreciation Allowance and Other Depreciation (Don't include listed property.)  14   Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year						13				
14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year  15 Property subject to section 168(f)(1) election  16 Other depreciation (including ACRS)  17 MACRS Depreciation (Don't include listed property. See instructions.)  Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018  18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property  (b) Method (g) Depreciation deduction electron) (g) Method (g) Depreciation deduction electron) (g) Period (g)	D 111				la liatar	d propo	orts ( )			
the tax year  15 Property subject to section 168(f)(1) election  16 Other depreciation (including ACRS)    Part III   MACRS Depreciation (Don't include listed property. See instructions.)    Section A   17   MACRS Depreciation (Don't include listed property. See instructions.)    Section A   17   MACRS deductions for assets placed in service in tax years beginning before 2018   17   18   If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here    Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System   (a) Classification of property   (b) Month and Price Part (c) Basils for depreciation (c) Pacrovery (e) Convention (f) Method (g) Depreciation deduction of the service period (e) Convention (f) Method (g) Depreciation deduction of the service period (e) Convention (f) Method (g) Depreciation deduction of the service of the serv	Operation 2 optionation 7 the Wall		•	•						
15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS)  Part III MACRS Depreciation (Don't include listed property. See instructions.)  Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property  (b) Month and Prince Property  (c) Convention (I) Method (g) Depreciation deduction in service or representation period (e) Convention (I) Method (g) Depreciation deduction or 7-year property  (c) 7-year property  (d) 10-year property  (e) Convention (I) Method (g) Depreciation deduction (I) Method (g							-		11	
16 Other depreciation (including ACRS)  Part III MACRS Depreciation (Don't include listed property. See instructions.)  Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018  If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property  (b) Easter of depreciation (classification of property  (c) Annual Part Placed in service  (d) Recovery period  (e) Convention (f) Method  (g) Depreciation deduction  (g) Percention (g) Perc	•							—		
Part III    MACRS Depreciation (Don't include listed property. See instructions.)										
Section A  17 MACRS deductions for assets placed in service in tax years beginning before 2018  18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here  Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property  (b) Month and year placed in service during the tax year unit one or more general asset accounts, check here  (c) Basis for depreciation group any depreciation (b) Recovery period  (d) Recovery period  (e) Convention  (f) Method  (g) Depreciation deduction  (g) Depreciation  (g) Depreciation  (g) Depreciation  (g)									10	
18   If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here    Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System   (a) Classification of property   (b) Month and (c) Basis for depreciation   (c) Basis for depreciation   (d) Recovery period   (e) Convention   (f) Method   (g) Depreciation deduction   (g) Depreciation   (g) Depreci	imiterio 2 opriociation (2 ori t									
18   If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here    Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System   (a) Classification of property   (b) Month and (c) Basis for depreciation   (c) Basis for depreciation   (d) Recovery   (e) Convention   (f) Method   (g) Depreciation deduction   (e) System property   (e) Convention   (f) Method   (g) Depreciation deduction	17 MACRS deductions for assets placed in	service in tax ve	ars beginning	n before 2018					17	
Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System  (a) Classification of property (b) Month and year placed in service (c) Reasis for depreciation (business/investment use only - see instructions) (d) Recovery period (e) Convention (f) Method (g) Depreciation deduction (g	•	•	•	•			▶ □	¨ Γ		
(a) Classification of property    year placed in service   (business/investment use only - see instructions)   (e) Convention   (f) Method   (g) Depreciation deduction							neral Deprecia	tion S	yste	m
b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property // 27.5 yrs. MM S/L i Nonresidential real property // 27.5 yrs. MM S/L  i Nonresidential real property // 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life b 12-year 20a Class life b 12-year 20a Class life c 30-year // 30 yrs. MM S/L  Fart IV Summary (See instructions.)  21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	(a) Classification of property	year placed	(business/ir	rvestment use			(e) Convention	(f) Met	hod	(g) Depreciation deduction
b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property // 27.5 yrs. MM S/L i Nonresidential real property // 27.5 yrs. MM S/L  i Nonresidential real property // 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life b 12-year 20a Class life b 12-year 20a Class life c 30-year // 30 yrs. MM S/L  Fart IV Summary (See instructions.)  21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	19a 3-year property									
d 10-year property e 15-year property f 20-year property g 25-year property / 27.5 yrs. S/L h Residential rental property / 27.5 yrs. MM S/L i Nonresidential real property / 27.5 yrs. MM S/L  i Nonresidential real property / 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life b 12-year c 30-year / 30 yrs. S/L c 30-year / 30 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.										
e 15-year property f 20-year property g 25-year property h Residential rental property / 27.5 yrs. MM S/L  i Nonresidential real property / 27.5 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life b 12-year c 30-year / 30 yrs. MM S/L  b 12-year / 30 yrs. S/L c 30-year / 30 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	c 7-year property									
f 20-year property g 25-year property h Residential rental property f Nonresidential real pro	d 10-year property									
g 25-year property  h Residential rental property  / 27.5 yrs. MM S/L  i Nonresidential real property  / 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life  b 12-year  c 30-year  / 30 yrs. MM S/L  c 30-year  / 30 yrs. MM S/L  Depart IV Summary (See instructions.)  21 Listed property. Enter amount from line 28  22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	e 15-year property									
h Residential rental property  / 27.5 yrs. MM S/L  i Nonresidential real property  / 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life  b 12-year  c 30-year  d 40-year  / 30 yrs. MM S/L  The section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life  b 12 yrs. S/L  c 30-year  d 40-year  / 30 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28  22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	f 20-year property									
h Residential rental property / 27.5 yrs. MM S/L  i Nonresidential real property / 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life S/L  b 12-year   12 yrs. S/L  c 30-year   / 30 yrs. MM S/L  d 40-year   / 40 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28	g 25-year property				2	5 yrs.		S/	L	
i Nonresidential real property  / 39 yrs. MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life  b 12-year	h Decidential rental property				27	.5 yrs.	MM	S/	L	
i Nonresidential real property / MM S/L  Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life S/L  b 12-year 12 yrs. S/L  c 30-year / 30 yrs. MM S/L  d 40-year / 40 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28 21  22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.		/			27	'.5 yrs.	MM	S/	L	
Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System  20a Class life	Nonrecidential real property	/			3	9 yrs.	MM	S/	L	
20a         Class life         S/L           b         12-year         12 yrs.         S/L           c         30-year         /         30 yrs.         MM         S/L           d         40-year         /         40 yrs.         MM         S/L           Part IV         Summary (See instructions.)           21         Listed property. Enter amount from line 28         21           22         Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.		/								
b       12-year       12 yrs.       S/L         c       30-year       /       30 yrs.       MM       S/L         d       40-year       /       40 yrs.       MM       S/L         Part IV       Summary (See instructions.)         21       Listed property. Enter amount from line 28       21         22       Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	Section C - Assets Pla	aced in Service	During 2018	3 Tax Year U	sing th	e Alter	native Deprec	iation	Syst	em
c 30-year       /       30 yrs.       MM       S/L         d 40-year       /       40 yrs.       MM       S/L         Part IV Summary (See instructions.)         21 Listed property. Enter amount from line 28       21         22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	20a Class life							S/	L_	
d 40-year / 40 yrs. MM S/L  Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28	-									
Part IV Summary (See instructions.)  21 Listed property. Enter amount from line 28  22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	c 30-year	/			+	-		1		
21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.							1 1/11/1	1 0/	i I	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	B . D.	/			4	U yrs.	I IVIIVI	3/	_	
16.004	Part IV Summary (See instructions.)	/			4	U yrs.	IVIIVI			
Enter nere and on the appropriate lines of your return. Partnerships and S corporations - see instr 22   46,334.	Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 2									
00. For exact, the control of the co	Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 2 22 Total. Add amounts from line 12, lines 1.	4 through 17, lin	es 19 and 20	) in column (g	), and I	ine 21.			21	46 224
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 2 22 Total. Add amounts from line 12, lines 1. Enter here and on the appropriate lines of	4 through 17, lin of your return. Pa	es 19 and 20 artnerships a	) in column (g nd S corporat	), and I	ine 21.			21	46,334.

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.) Part V

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

	24b, columns (	a) till ough (c	J of Section A,	all UI St	CHOILD	, ariu	Section	i O ii a	יוושם	cable.						
	Section A -	Depreciation	on and Other I	nformat	ion (Ca	ution	: See t	he inst	ruct	tions for lir	nits for p	oasseng	er auton	nobiles.)		
24a	Do you have evidence to s	support the bu	siness/investmer	nt use cla	imed?		Yes		No	<b>24b</b> If "Y	es," is th	ne evide	nce writt	en?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	e ot	<b>(d)</b> Cost or her basis		Basis for o			(f) Recovery period	Me	<b>g)</b> thod/ ention	Depre	<b>h)</b> ciation action	Elec	(i) cted in 179 ost
 25	Special depreciation allo	owance for q	ualified listed p	roperty	placed	in ser	vice du	ring th	e ta	x year and	ĺ					
	used more than 50% in	a qualified bu	usiness use									25				
26	Property used more that	n 50% in a qı	ualified busines	ss use:												
		: :	9/	ó												
		1 1	9/	6		_										
		: :	%	- 1												
27	Property used 50% or le	ess in a qualif	ied business u	se:												
		1 1	9/			-					S/L -					
		1 1	9/								S/L -					
_			9/	-							S/L -	T				
	Add amounts in column													T		
29	Add amounts in column	(ı), line 26. E									<u></u>			29		
			S	ection E	3 - Infor	matic	on on U	se of	Veh	icles						
to y	our employees, first ans	wer the ques	tions in Sectio		ee if you a)	ı mee	t an exc (b)	ceptior	n to	completin		ection fo d)		rehicles. 	(f	)
30	Total business/investment	miles driven di	uring the		icle	,	Vehicle		٧	'ehicle	l '	nicle	-	nicle	Vehi	-
	year (don't include commu	ting miles)														
31	Total commuting miles of	driven during	the year													
32	Total other personal (no	ncommuting	) miles													
	driven															
33	Total miles driven during Add lines 30 through 32															
34	Was the vehicle available			Yes	No	Ye	s N	lo	Yes	No	Yes	No	Yes	No	Yes	No
٠.		•		100	110	1.0	<u> </u>		100	110	100	110	100	110	100	110
35	Was the vehicle used pr															
	than 5% owner or relate															
36	Is another vehicle availa	· ·														
	use?															
		Section C	- Questions fo	or Empl	oyers W	/ho P	rovide '	Vehicl	es f	or Use by	Their E	mploye	es			
Ans	swer these questions to o	determine if y	ou meet an ex	ception	to comp	oletino	g Sectio	n B fo	r ve	hicles use	d by em	ployees	who a	ren't		
mo	re than 5% owners or rela	ated persons														1
37	Do you maintain a writte employees?				•					-	-				Yes	No
38	Do you maintain a writte															
	employees? See the ins															
39	Do you treat all use of ve				•											
	Do you provide more that															
	the use of the vehicles,															
41	Do you meet the require															
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Yes	s," don't	comple	te Se	ction B	for the	е со	vered veh	icles.					
Pa	art VI Amortization															
	(a) Description of	fcosts		(b) amortization begins		Amort amo	izable			(d) Code section		(e) Amortiza period or per	ition	Ar fo	(f) mortization or this year	
42	Amortization of costs th	at begins du	•		r:											
				: :												
				: :												
43	Amortization of costs th	at began bef	ore your 2018	tax year									43			
44	Total. Add amounts in o	column (f). Se	e the instruction	ons for v	where to	repo	rt						44			

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return.

1

RENT

OMB No. 1545-0172

Attachment Sequence No. **179** 

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

Identifying number

	EORGIA ASSOCIATION						ENTAL IN		58-0836843						
Pa	Part   Election To Expense Certain Pr	operty Under Section 17	'9 Note: If yo	u have any lis	sted pro	operty,	complete Part	V before y	ou complete Part I.						
1	Maximum amount (see instructions	)						1	1,000,000.						
2	Total cost of section 179 property p														
	Threshold cost of section 179 prop								2,500,000.						
	Reduction in limitation. Subtract lin			•				4							
	Dollar limitation for tax year. Subtract line 4 fron		•					5							
6	(a) Description	of property		(b) Cost (busin	ess use o	nly)	(c) Elected	cost							
7	Listed property. Enter the amount f	rom line 29				7									
	Total elected cost of section 179 pr				_		8								
	Tentative deduction. Enter the small														
	Carryover of disallowed deduction														
	Business income limitation. Enter the														
	Section 179 expense deduction. Ad														
	Carryover of disallowed deduction					13									
	ote: Don't use Part II or Part III below				1	10									
_	Part II Special Depreciation Allo		,		e listed	prope	erty 1								
	Special depreciation allowance for		•												
'-							_	14							
15	Property subject to section 168(f)(1	) alaction													
	Other depreciation (including ACRS							16							
	Part III MACRS Depreciation (De		nerty. See in	structions )				10							
	WACITO Depreciation (De	on t moidad nated pro		ction A											
17	MACRS deductions for assets place	ad in convice in tay yo			)			17	T						
	MACRS deductions for assets place	•					<b>.</b>	ij <b>''</b>							
10					18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here										
	Gection B - Ass	(b) Month and	Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation  (b) Month and (c) Basis for depreciation												
	(a) Classification of property		(c) Basis for					tion Syste	em 						
<u> 19a</u>		year placed in service	(business/in		(d) F	Recovery			(g) Depreciation deduction						
	a 3-year property		(business/in	depreciation vestment use	(d) F	Recovery									
b			(business/in	depreciation vestment use	(d) F	Recovery									
			(business/in	depreciation vestment use	(d) F	Recovery									
	b 5-year property		(business/in	depreciation vestment use	(d) F	Recovery									
	b 5-year property c 7-year property		(business/in	depreciation vestment use	(d) F	Recovery									
	b 5-year property c 7-year property d 10-year property e 15-year property		(business/in	depreciation vestment use	(d) F	Recovery									
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property		(business/in	depreciation vestment use	(d) F	Recovery									
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property		(business/in	depreciation vestment use	(d) F	Recovery period		(f) Method							
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property		(business/in	depreciation vestment use	(d) F F 25	Recovery period	(e) Convention	(f) Method							
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property		(business/in	depreciation vestment use	25 27	5 yrs.	(e) Convention	(f) Method							
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property		(business/in	depreciation vestment use	25 27	5 yrs. 5 yrs. 5 yrs.	(e) Convention	(f) Method							
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property		(business/in only - see i	depreciation vestment use nstructions)	25 27 27	5 yrs. .5 yrs. .5 yrs. .9 yrs.	(e) Convention  MM  MM  MM  MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction						
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse	/ / / / / /	(business/in only - see i	depreciation vestment use nstructions)	25 27 27	5 yrs. .5 yrs. .5 yrs. .9 yrs.	(e) Convention  MM  MM  MM  MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse	/ / / / / /	(business/in only - see i	depreciation vestment use nstructions)	25 27 27 39	5 yrs. .5 yrs. .5 yrs. .9 yrs.	(e) Convention  MM  MM  MM  MM	S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse	/ / / / / /	(business/in only - see i	depreciation vestment use nstructions)	25 27 27 39	5 yrs. 5 yrs. 5 yrs. 9 yrs.	(e) Convention  MM  MM  MM  MM	S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year d 40-year	/ / / / / /	(business/in only - see i	depreciation vestment use nstructions)	25 27 27 39 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. e Alter	(e) Convention  MM  MM  MM  MM  MM  MM  Thative Deprec	S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year	/ / / ets Placed in Service	(business/in only - see i	depreciation vestment use nstructions)	25 27 27 39 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. 2 yrs. 2 yrs.	(e) Convention  MM  MM  MM  MM  mative Deprec	S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year d 40-year	/ // // // // // // // // // // // // /	(business/in only - see i	depreciation vestment use nstructions)  Tax Year Us	25 27 27 39 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. 2 yrs. 0 yrs.	(e) Convention  MM  MM  MM  MM  mative Deprec	S/L	(g) Depreciation deduction						
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year d 40-year eart IV Summary (See instruction	/ // // // // // // // // // // // // /	(business/in only - see i	depreciation vestment use nstructions)  Tax Year Us	25 27 27 38 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. 2 yrs. 0 yrs.	MM	S/L	(g) Depreciation deduction						
	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year d 40-year Part IV Summary (See instruction Listed property. Enter amount from	/ // // // // // // // // // // // // /	During 2018	depreciation vestment use nstructions)  Tax Year Use	25 27 27 39 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. 2 yrs. 0 yrs. 0 yrs.	MM	S/L	(g) Depreciation deduction						
C   C   C   C   C   C   C   C   C   C	b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Asse a Class life b 12-year c 30-year d 40-year Part IV Summary (See instruction Listed property. Enter amount from Total. Add amounts from line 12, line	/ // // // // // // // // // // / / /	During 2018  During 2018  es 19 and 20  artnerships ar	Tax Year Use	25 27 27 39 sing the	5 yrs. 5 yrs. 5 yrs. 9 yrs. 2 yrs. 0 yrs. 0 yrs.	MM	S/L   S/L	(g) Depreciation deduction						

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

	24b, columns (	(a) iiiiougii (c	) or section A,	all Ol O	ection b	, and o	ection o	ιι αρρι	icable.							
		-	on and Other I			ution:	See the	instruc	tions for li	mits for p	oasseng	er auton	nobiles.)			
<u>24a</u>	a Do you have evidence to s			t use cla	aimed?	<u> </u>	Yes _		24b If "Y	<u>es," is tr</u>	ne evide	nce writt	ten?	_ Yes	No	
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	(d) Cost or other basis		I (h	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention		(h) Depreciation deduction		(i) Elected section 179 cost		
<u></u>	Special depreciation allo	owance for q	ualified listed p	roperty	placed	in servi	ce durin	g the ta	ax year and	d						
	used more than 50% in	a qualified b	usiness use								25					
<u> 26</u>	Property used more tha	n 50% in a q	ualified busines	ss use:												
		: :	%	<u> </u>												
		1 1	%	6												
		: :	%													
<u>27</u>	Property used 50% or le	ess in a quali	fied business u	se:								1				
		1 1	9/			_				S/L -				-		
_		: :	%							S/L -				-		
_			%							S/L -	1			-		
	Add amounts in column															
<u>29</u>	Add amounts in column	(i), line 26. E											29			
							on Use									
Co	mplete this section for ve	hicles used	by a sole propr	ietor, pa	artner, o	r other	"more th	an 5%	owner," o	r related	person.	If you pr	rovided v	vehicles		
to y	your employees, first ans	wer the ques	tions in Section	n C to s	ee if you	u meet	an excep	otion to	completir	ng this se	ection fo	r those \	vehicles.			
						1						1				
				(	a)		(b)		(c)	(d)		(-	(e)		(f)	
30	Total business/investment miles driven during the		ı ı	Vehicle		V	Vehicle		/ehicle	Vehicle		Vehicle		Vehicle		
	year ( <b>don't</b> include commu		i i							-						
	Total commuting miles							-								
32	Total other personal (no															
	driven							-								
33	Total miles driven during															
	Add lines 30 through 32		I		T	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T	+ -	T	\ <u>,</u>			Τ	<b>.</b>		
34	Was the vehicle availab	•		Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No	
25	-	during off-duty hours?  Was the vehicle used primarily by a more											1			
33	than 5% owner or relate															
26	Is another vehicle availa								+							
30		•														
	use?		- Questions fo	r Empl	overs M	/ho Dra	wide Ve	hicles :	for Use b	, Their F	mnlove		<u> </u>			
Δno	swer these questions to o			-	-								ron't			
	ore than 5% owners or rela	•		серион	to comp	pietirig	Section	D IOI V	eriicies us	ed by em	pioyees	WIIO a	Ten t			
	Do you maintain a writte	•		hihits a	ll persor	nal use	of vehicl	es incl	uding con	nmutina	by your			Yes	No	
٠.	employees?		="						_	-				1.00	110	
38	Do you maintain a writte															
	employees? See the ins		•							0						
39	Do you treat all use of v															
	Do you provide more that															
	the use of the vehicles,	and retain th	e information r	eceived	?											
41	Do you meet the require															
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Yes	s," don'i	t comple	ete Sec	tion B fo	r the co	overed veh	nicles.						
P	art VI Amortization															
(a)			(b)			(c)		(d)		(e)			(f)			
				e amortization Amortizable begins amount					Code Amortiza section period or per					mortization or this year		
42	Amortization of costs th	at begins du	ring your 2018	tax yea	ır:											
				: :												
				: :												
43	Amortization of costs th	at began be	fore your 2018	tax yea	r							43				
44	Total. Add amounts in o	column (f) Se	ee the instruction	ons for	where to	report						44				