823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

2939305129024 EXTENDED TO MAY 15, 2020 **Exempt Organization Business Income Tax Return** `990-T OMB No 1545-0687 (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning JUL~1 , ~2018~ , and ending ~JUN~30 , ► Go to www.irs gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Open to Public Inspection to 501(c)(3) Organizations Only Check box if Name of organization (Check box if name changed and see instructions.) mployer identification number (Employees' trust, see address changed B Exempt under section Print GEORGIA SCHOOL BOARDS ASSOCIATION, INC. 58-1077259 X 501(c)53Unrelated business activity code Number, street, and room or suite no. If a P O. box, see instructions. Type (See instructions) 408(e)]220(e) 5120 SUGARLOAF PARKWAY 408A 1530(a) City or town, state or province, country, and ZIP or foreign postal code 7529(a) LAWRENCEVILLE, GA 30043 561000 C Book value of all assets F Group exemption number (See instructions.) 5,917,839. 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. I 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. J The books are in care of
CHARLTON CALHOUN Telephone number $\triangleright 770-962-2985$ Part le Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 102,792. Supplied the state of the state 1 a Gross receipts or sales 102,792. b Less returns and allowances c Balance 1c 102,792. 法制造法 维护的 桌 2 Cost of goods sold (Schedule A, line 7) 2 Gross profit. Subtract line 2 from line 1c 3 计中国部 建氯甲甲基 4a Capital gain net income (attach Schedule D) 4a and Marie Marie y b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c 国際学者がプラ Income (loss) from a partnership or an S corporation (attach statement) 5 据域的2000年9月 Rent income (Schedule C) 6 7 Unrelated debt-financed income (Schedule E) 27,350. 70,016 42,666. 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) q Exploited exempt activity income (Schedule I) 10 33,600. 40,206. Advertising income (Schedule J) 11 -6,606. い。調整にきることの数 Other income (See instructions, attach schedule) 12 103,616. Total. Combine lines 3 through 12 13 67,556. 36,060. Part: II Deductions Not Taken Elsewhere (See instructions for Junitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) RECEIVED 14 Compensation of officers, directors, and trustees (Schedule K) 14 Salaries and wages 15 15 RS-080 16 Repairs and maintenance 16 MAY 26 2020 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 18 19 19 Taxes and licenses CODEN Charitable contributions (See instructions for limitation rules) 20 20 21 Depreciation (attach Form 4562) 1172 21 22 Less depreciation claimed on Schedule A and elsewhere on return 22a 22b 23 23 24 Contributions to deferred compensation plans 24 25 Employee benefit programs 25 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 Other deductions (attach schedule) 28 28 ñ. 29 Total deductions. Add lines 14 through 28 29 36,060. Mirelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 36,060. Unrelated business taxable income. Subtract line 31 from line 30 32

Form **990-T** (2018)

Form 990-T	GEORGIA SCHOOL BOARDS ASSOCIATION, INC,	58-107725 <u>9</u>	Pag
	Total Unrelated Business Taxable Income	•	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	36,060
		34	
34	Amounts paid for disallowed fringes Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) ST		32,264
35	Deduction for fiel obergaing loss arising in tax years beginning better earliers. If as is feed members,		,
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	A 0	3,796
	lines 33 and 34	(n)	1,000
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	(30) 31	1,000
38	Ugrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,	1160	
	enter the smaller of zero or line 36	1 (221 38	2,796
Part /	V Tax Computation	16	
39'	Orbanizations Taxable as Corporations Multiply line 38 by 21% (0 21)	(40)► 39 L	587
40	Trusts 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	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
	Agual Add lines 41, 42, and 43 to line 39 or 40, whichever applies	7 (13) 44	587.
	Tax and Payments	~ ~~~	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a	1 1	
	Other credits (see instructions) 45b	——————————————————————————————————————	
	General business credit. Attach Form 3800		
	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d		
	Total credits Add lines 45a through 45d		
46	Subtract line 45e from line 44	450	587.
47		46	567.
		tach schedule) 47	FOR
48	Total tax, Add lines 46 and 47 (see instructions)	49)49	587.
49	2018 net 965 tax hability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	. 49	0.
	Payments A 2017 overpayment credited to 2018 . 50a		
	2018 estimated tax payments 50b		
	Tax deposited with Form 8868 50c		
	Foreign organizations Tax paid or withheld at source (see instructions) . 50d		
	Backup withholding (see instructions) 50e		
	Credit for small employer health insurance premiums (attach Form 8941) Sof		
g	Other credits, adjustments, and payments Form 2439		
	Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	5	
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	8-53 \$	25.
53	Tax due If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	\$	612.
1 54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	→ /st	
Part V	Enter the amount of line 54 you want. Credited to 2019 estimated tax	ded ▶ 55	
56	Statements Regarding Certain Activities and Other Information (see instruction)	ons)	
30	At any 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		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		
57			X_
3,	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	n trust?	X
58	If "Yes," see instructions for other forms the organization may have to file		
	Enter the amount of tax-exempt interest received or accrued during the tax year \$\infty\$ \$\] Under penalties of perior, I declare that I have examine a threat the state of th		
Sign	Under penalties of purjury, I declare that I have examined this return, including accompanying schedules and statements, and to the treorroct and couplete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	rest of my knowledge and belief	it is true.
Here	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	May the IRS discuss	this return with
	Signature of officer 120 EXECUTIVE DIRECT	ron the preparer shown b	
	Print/Type preparer's name Preparer's signature Data Lou	instructions)? X	Yes No
Det-1	Printrype preparer's name Preparer's signature Date Che	ck if PIIN	
Paid	arer MARY JO ALEXANDER MARY JO ALEXANDER 05/11/20	- employed	
Prep	Firm's name MAIII.DIN C TENVING LIG	P0000	
Use	200 GALLERIA PKWY SE STE 1700	m's EIN ▶ 58-06	92043
	Hum's address ► ATT. ANTA CA 20220 FOAC		
823711 0		one no 770-955-	
· · ·	1-10-19	Form	990-T (2018)

Schedule A - Cost of Good	s Sold. Enter	method of invent	ory valuation N/	A			
1 Inventory at beginning of year	1	0.	6 Inventory at end of y	/ear		6	0.
2 Purchases	2		7 Cost of goods sold.	Subtract	line 6		
3 Cost of labor	3	···	from line 5. Enter he	Part I,	1		
4a Additional section 263A costs			line 2			7	102,792.
(attach schedule)	4a		8 Do the rules of secti	on 263A (with respect to		Yes No
,	* 4b	102,792.			d for resale) apply to		
5 Total. Add lines 1 through 4b	5	102,792.	the organization?		- · · · · · · · · · · · · · · · · · · ·		X
Schedule C - Rent Income	(From Real			v Leas	ed With Real Pro	operty	
(see instructions)	`		·				,
1. Description of property							
(1)		*					
(2)							•
(3)		•	· ·				
(4)	•						
	2. Rent receiv	ed or accrued					
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	of rent for pe	d personal property (if the percersonal property exceeds 50% or is based on profit or income)	entage r if	3(a) Deductions direct columns 2(a)	ly connecte and 2(b) (at	ed with the income in tach schedule)
(1)							<u> </u>
(2)							
(3)		Î					
(4)							
Total	0.	Total		0.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter		0.	(b) Total deductions. Enter here and on page 1, Part I, tine 6, column (B)	•	0.
Schedule E - Unrelated Del	ot-Financed	I Income (see in	nstructions)				
		,	2. Gross income from		3. Deductions directly co to debt-finar		
1. Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	'	b) Other deductions (attach schedule)
(1)							
(2)						i	
(3)				1			
(4)				1			
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illiocable to nced property n schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		Allocable deductions lumn 6 x total of columns 3(a) and 3(b))
(1)			%				
(2)			%	ĺ	-		
(3)			%				
(4)			%				
					nter here and on page 1, Part I, line 7, column (A)		er here and on page 1, rt I, line 7, column (B)
Totals			•	•	0		0.
Total dividends-received deductions in	cluded in column	8	•		•	-	0.
							Form 990-T (2018)

Schedule F - Interest,	7 11111 1111				Controlled O				13 (366 1113	····	
1. Name of controlled organization	ation	2. Emplidentifica	ition	3. Net un	related income e instructions)	4. то	ital of specified ments made	includ	rt of column 4 t led in the contr cation's gross i	olling	6. Deductions directly connected with income in column 5
(1) EBOARDSOLUTIO	ONS,		•					_			
(2) INC		58-061	9059								
(3)				-							
(4)	·										
Nonexempt Controlled Organ	izations	•				•					-
7. Taxable Income		inrelated income see instructions)	(loss)	9. Total	of specified pays made	ments	10. Part of column the controlling gross		nization's	with	ductions directly connected income in column 10
(1)		· · · · ·			· · · · · ·						
(2)	1				70,	016.		70	,016.		27,350.
(3)											
(4)											
							Add colum Enter here and line 8, c	on page olumn (e 1, Part I, A)	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals						>		70	,016.		27,350.
Schedule G - Investme (see inst	ent Inco	me of a S	ection	501(c)((7), (9), or	(17) Oi					
1. Des	cription of inco	ome			2. Amount of	ıncome	3. Deduction directly conne	cted	4. Set-a		5. Total deductions and set-asides
/1)	·						(attach sched	utej	`		(col 3 plus col 4)
(1)					 						
(2)											
(3)											
Totals				•	Enter here and o Part I, line 9, co	0 •	2,9 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				Part I, line 9, column (8)
Schedule I - Exploited (see instr	-	Activity	Incom	e, Othe			ing Income	•			- 1·*
1. Description of exploited activity	unrelated incom	oross business e from business	3. Exp directly co with pro of unre business	onnected duction plated	4. Net incom from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a cols 5	5. Gross inco from activity the is not unrelate business inco	hat ∋d	6. Expe attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	1										
(2)											
(3)											
(4)	Enter her page 1 line 10,	col (A)	Enter here page 1, line 10,	Part I, col (B)	The state of the s	\$1.76 \$2.76 \$3.76		8°+2° 3° - 2°°			Enter here and on page 1, Part II, line 26
Totals	 	0.		<u> </u>	1 to 1 to 1	55'5 \$	At pu No.	1,5	ः । वर्षः १५७	<i>/</i>	0.
Schedule J - Advertisi					1:	Dasia					
Part I Income From	Periodic	als Repo	rtea or	a Con	solidated	basis					
1. Name of periodical		2. Gross advertising income		Direct	4. Adverti or (loss) (co col 3) If a ga cols 5 th	l 2 minus in, comput	5. Circulati income	on	6. Reader costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					J. 7 T	1	·]			
(2)						·**	•				
(3)						• • •	<u> </u>				
(4)					1,2 8 2,1	<u> </u>	:1				y Finit main
Totals (carry to Part II, line (5))	•	0		0	•						0.

Form 990-T (2018) GEORGIA SCHOOL BOARDS ASSOCIATION, INC, 58-10772

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) AGENDA		33,600.	40,206.	-6,606.			
(2)							
(3)							
(4)		_					~
Totals from Part I	▶	0.	0.	Total Sale of a 150	9/11 × 3/34	*'4 · 3 # 15# # #	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)	▶	33,600.	40,206.				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)		%	
otal. Enter here and on page 1, Part II, line 14		>	0

Form **990-T** (2018)

FORM 990-T	DESCRIPTION O	F ORGANIZATION BUSINESS ACT		RY UNRELATED	STATEMENT	1
	OF MANAGEMENT AND	SUPPORT SER	VICES TO N	ON-EXEMPT CONT	rolled enti	ГY
FORM 990-T	NET	OPERATING LO	OSS DEDUCT	ION	STATEMENT	2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED		LOSS MAINING	AVAILABLE THIS YEAR	
06/30/13 06/30/14 06/30/15 06/30/16	22,218. 25,203. 30,855. 32,332.	22,23 25,20 30,85	03.	0. 0. 0. 32,264.	Ó	0.
NOL CARRYO	VER AVAILABLE THIS	YEAR		32,264.	32,264.	
FORM 990-T	COST	OF GOODS SOLI	D - OTHER	COSTS	STATEMENT	3
DESCRIPTION	N				AMOUNT	
CUSTOMER SE	- ERVICE, PRODUCT DE	VELOPMENT, OV	VERHEAD, P	ERSONNEL	102,79	2.
TOTAL TO FO	ORM 990-T, SCHEDUL	E A, LINE 4B			102,79	2.
FORM 990-T	SCHEDULE F - DE: DIRECTLY C	DUCTIONS OF CONNECTED WITH			STATEMENT	4
-			ACTIVITY			
DESCRIPTION	1		NUMBER	AMOUNT	TOTAL	
EQUIPMENT F	- RENTAL EPAIRS AND MAINTEN AX DN	ANCE		2,478. 3,167. 2,928. 1,883. 10,066. 6,828.	TOTAL	
EQUIPMENT F BUILDING RE UTILITIES PROPERTY TA DEPRECIATIO	- RENTAL EPAIRS AND MAINTEN AX DN EXPENSE	ANCE - SUBTOTAL -		2,478. 3,167. 2,928. 1,883. 10,066.	TOTAL 27,35	0.