Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 01-01-2021 , and ending 12-31-2021

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
191 PEACHTREE STREET NE SUITE 1000

City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 30303

D Employer identification number
58-1344646

E Telephone number
(404) 688-5525

G Gross receipts $ 771,017,950

F Name and address of principal officer:
FRANK FERNANDEZ
191 PEACHTREE STREET NE SUITE 1000
ATLANTA,GA 30303

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CFGREATERATLANTA.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1951

M State of legal domicile: GA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO INSPIRE AND LEAD OUR REGION TOWARD EQUITY AND SHARED PROSPERITY FOR ALL.

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	21
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	**5**	63
6	Total number of volunteers (estimate if necessary)	**6**	104
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	754,743
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	404,314

			Prior Year	Current Year
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	138,262,181	254,131,321
	9	Program service revenue (Part VIII, line 2g)	943,821	1,053,974
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	42,799,639	97,555,401
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-47,897	18,147
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	181,957,744	352,758,843
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	184,875,911	128,784,435
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,780,193	6,242,373
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,716,239		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	7,761,982	7,986,965
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	198,418,086	143,013,773
	19	Revenue less expenses. Subtract line 18 from line 12	-16,460,342	209,745,070

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	1,073,698,933	1,342,201,584
	21	Total liabilities (Part X, line 26)	52,753,370	60,001,655
	22	Net assets or fund balances. Subtract line 21 from line 20	1,020,945,563	1,282,199,929

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date 2022-11-15

▶ FRANK FERNANDEZ PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2022-11-10		P00120748

Firm's name ▶ MAULDIN & JENKINS LLC — Firm's EIN ▶ 58-0692043

Firm's address ▶ 200 GALLERIA PKWY SE STE 1700
ATLANTA, GA 303395946 — Phone no. (770) 955-8600

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ **Yes** ☐ **No**

Part 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:

ATLANTA IS #1 FOR INCOME INEQUALITY IN THE NATION. AS SUCH, THE NEEDS IN OUR COMMUNITY ARE PRESSING AND WE NEED TO MOVE WITH THE URGENCY OF NOW TO ADDRESS THOSE NEEDS. THE COMMUNITY FOUNDATION HAS UNEQUIVOCALLY EMBRACED EQUITY AS OUR #1 PRIORITY. OUR 2022-2026 STRATEGIC PLAN, TOGETHERATL, IS A BLUEPRINT FOR HOW THE COMMUNITY FOUNDATION WILL CHAMPION EQUITY AND LEAD BOLDLY IN COLLABORATION WITH NONPROFIT PARTNERS, CIVIC LEADERS AND DONORS. TOGETHER, WE WILL WORK TO SECURE PROSPERITY FOR ALL THROUGHOUT THE REGION.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 99,602,500 including grants of $ 96,912,675) (Revenue $ 1,053,974)

PHILANTHROPIC SERVICES - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.THE COMMUNITY FOUNDATION IS OUR REGION'S STEWARD OF THE LONG-TERM PHILANTHROPIC ASSETS THAT ARE ENTRUSTED TO US FOR THE FUTURE OF GREATER ATLANTA. IN 2021, OUR TOTAL ASSETS WERE $1.3 BILLION.WE DISTRIBUTED OVER $129 MILLION IN GRANTS AND SUPPORT IN 2021. THAT REPRESENTS 11,000 GRANTS AWARDED TO OVER 3,300 NONPROFITS LOCALLY, NATIONALLY AND INTERNATIONALLY. OF THESE GRANTS, OVER 68% STAYED WITHIN OUR 23-COUNTY METRO ATLANTA REGION. GRANTS WERE MADE TO 31 ISSUE AREAS, THE TOP THREE BEING EDUCATION, ARTS/CULTURE/ HUMANITIES AND HUMAN SERVICES, FOCUSED ON MEETING NEEDS DURING THE DUAL PANDEMICS FOR HEALTH AND SOCIAL JUSTICE. OUR ORGANIZATION DISTRIBUTED 10% OF OUR TOTAL ASSETS THROUGH GRANTMAKING IN 2021.OUR GENEROUS DONORS MAKE OUR WORK POSSIBLE. WE RECEIVED MORE THAN $135 MILLION IN GIFTS IN 2021 AND ESTABLISHED 40 NEW FUNDS. OUR MOST POPULAR GIVING VEHICLE IS THE DONOR-ADVISED FUND. IN 2021, 71% OF OUR TOTAL GRANTS WERE MADE THROUGH DONOR-ADVISED FUNDS.

4b (Code:) (Expenses $ 31,009,827 including grants of $ 31,009,827) (Revenue $)

COMPETITIVE GRANTS - SEE SCHEDULE O FOR COMPLETE DESCRIPTIONTHE FOUNDATION AWARDS GRANTS THROUGH BOTH COMPETITIVE AND NON-COMPETITIVE CHANNELS. THE GREATEST NUMBER OF GRANTS ARE AWARDED THROUGH NON-COMPETITIVE CHANNELS, SUCH AS DONOR-ADVISED FUNDS, WHERE GRANT INVESTMENTS ARE RECOMMENDED BY THE DONOR OR FUND ADVISOR OFTEN WITH THE GUIDANCE OF HIS OR HER PHILANTHROPIC ADVISOR. IN 2016, THE COMMUNITY FOUNDATION BEGAN EXPLORING THE DEVELOPMENT OF A PROGRAM DESIGNED TO CLOSE THE OPPORTUNITY GAP IN THE THOMASVILLE HEIGHTS COMMUNITY IN SOUTHEAST ATLANTA. BEGUN BY OUR DONORS WHO EVENTUALLY BECAME KNOWN AS THE SPARK OPPORTUNITY GIVING CIRCLE, THEIR COLLECTIVE GRANTMAKING, EDUCATION OF THE ISSUES AND PLACE-BASED FOCUS HAS BEEN A CATALYST FOR ADDITIONAL INVESTMENTS FROM THEIR DONOR-ADVISED FUNDS. OUR IMPACT STRATEGY INCLUDES GRANTMAKING, STRATEGIC NONPROFIT PARTNERSHIPS, POLICY ADVOCACY AND THRIVE THOMASVILLE, A RESIDENT-LED COUNCIL THAT DIRECTS FUNDING TO COMMUNITY-DESIGNED PROJECTS. THRIVE BUILDS ON NEIGHBORHOOD STRENGTHS AND ENABLES COMMUNITY-LED STRATEGIES TO DEVELOP AND ADDRESS NEIGHBORHOOD NEEDS BY THE RESIDENTS WHO CALL IT HOME.IN 2021, THE PLACE-BASED GIVING FOCUS IN THOMASVILLE HEIGHTS SHIFTED TO ADDRESS THE SHORT-TERM AND IMMEDIATE NEEDS OF THE THOMASVILLE HEIGHTS COMMUNITY, SUCH AS HOUSING, FOOD INSECURITY AND EMERGENCY FUNDS. WE ALSO ANNOUNCED OUR PLANS FOR TOGETHERATL, OUR NEW STRATEGIC PLAN BEGINNING IN JANUARY OF 2022, THAT WILL MOVE PLACE-BASED STRATEGIES TO THE FOREFRONT.

4c (Code:) (Expenses $ 861,932 including grants of $ 861,932) (Revenue $)

COMMUNITY LEADERSHIP AND INITIATIVES - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.THROUGHOUT 2021, THE RIPPLE EFFECT OF COVID-19 MADE ITS WIDESPREAD IMPACT ON THE ATLANTA REGION. CHILDREN CONTINUED WITH HYBRID-AT-BEST SCHOOL OPTIONS, BUSINESSES PERMANENTLY CLOSED, LIVE PERFORMANCES WERE SHUTTERED AND WORKERS WERE BEING LAID OFF. OUR PARTNERSHIP WITH UNITED WAY OF GREATER ATLANTA CONTINUED, ULTIMATELY RAISING, COLLECTING AND DISPERSING $30 MILLION IN FUNDS FOR THE GREATER ATLANTA COVID-19 RESPONSE AND RECOVERY FUND, WHILE TAKING NO FEES FOR THE WORK. SUPPORTED BY DOLLARS FROM PHILANTHROPY, GOVERNMENT AND CORPORATE PARTNERS, THE COVID-19 FUND RECEIVED DONATIONS FROM THOUSANDS OF INDIVIDUALS, FOUNDATIONS AND CORPORATIONS. THE COMMUNITY NEEDS CONTINUED TO EVOLVE AS THE PANDEMIC ISSUED ITS TOIL. WHILE INITIAL GRANTS WERE FOCUSED ON PROVIDING CRUCIAL SERVICES AT A HIGH SCALE TO HIGH-RISK AUDIENCES INCLUDING SENIORS AND FAMILIES WITH CHILDREN.2021 EVIDENCE SHOWED SPECIFIC POPULATIONS DISPROPORTIONATELY IMPACTED BLACK, LATINX, UNDOCUMENTED AND IMMIGRANT POPULATIONS. AS THE SITUATION IN OUR COMMUNITY EVOLVED, THE FUND PIVOTED TO ADDRESS RAPIDLY CHANGING NEEDS, SUCH AS SMALL BUSINESS SUPPORT AND MENTAL HEALTH. DURING 2020 AND 2021, THE COVID-19 FUND MOBILIZED $28.2 MILLION TO BENEFIT 478 NONPROFITS IN ATLANTA. THIS PROGRAM WAS AMPLIFIED BY OUR 900+ DONORS FAMILIES, WHO GAVE IN EXCESS OF $100 MILLION TO NONPROFITS THE COMMUNITY FOUNDATION RECOMMENDED WHO WERE ON THE FRONT LINES OF THE PANDEMIC.

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

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

4e **Total program service expenses** ▶ 131,474,259

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
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		No
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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		No
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	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8	Yes	
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? *If "Yes," complete Schedule D, Part IV*	9	Yes	
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
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	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
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		No
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.* See instructions.	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
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 Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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	Yes	
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
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		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V 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
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	69		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 63			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*	**3b**	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		No
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		No
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		No
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?	**15**		No
16	Is the organization subject to section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule N.	**16**		No
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	**17**		

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . . ☑

Section 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. 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.	1a	21		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ GA,AL,AK,AZ,AR,CA,CO,FL,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶THE ORGANIZATION 191 PEACHTREE STREET NE SUITE 1000 ATLANTA,GA 30303 (404) 688-5525

Part VII **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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SUSAN GRANT BOARD CHAIR AND OFFICER	9.23 0.10	X		X				0	0	0
(2) RON ALSTON BOARD MEMBER	0.92 0.10	X						0	0	0
(3) FRANK BELL BOARD MEMBER	0.69 0.10	X						0	0	0
(4) PETER BERG BOARD MEMBER	3.46 0.10	X						0	0	0
(5) BARBARA BING BOARD MEMBER	0.92 0.10	X						0	0	0
(6) MILLARD CHOATE BOARD MEMBER	0.46 0.10	X						0	0	0
(7) BERT CLARK BOARD MEMBER	2.31 0.10	X						0	0	0
(8) RICHARD W COURTS IV BOARD MEMBER	1.15 0.10	X						0	0	0
(9) DAVID CUMMINGS BOARD MEMBER	0.46 0.10	X						0	0	0
(10) FRAN GARY BOARD MEMBER	0.46 0.10	X						0	0	0
(11) DOUGLAS HOOKER BOARD MEMBER	1.38 0.10	X						0	0	0
(12) JULIA HOUSTON BOARD MEMBER	0.69 0.10	X						0	0	0
(13) WONYA LUCAS BOARD MEMBER	0.46 0.10	X						0	0	0
(14) BRYAN RAND BOARD MEMBER	0.69 0.10	X						0	0	0
(15) DAVID ROEMER BOARD MEMBER	0.69 0.10	X						0	0	0
(16) KELLI STEWART BOARD MEMBER	1.38 0.10	X						0	0	0
(17) JEWEL BURKS SOLOMON BOARD MEMBER	0.46 0.10	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) GREGORY VAUGHN BOARD MEMBER	1.38 0.10	X						0	0	0
(19) JERRY WILKINSON BOARD MEMBER	2.31 0.10	X						0	0	0
(20) RYAN WILSON BOARD MEMBER	1.15 0.10	X						0	0	0
(21) STUDIE YOUNG BOARD MEMBER	4.62 0.10	X						0	0	0
(22) FRANK FERNANDEZ PRESIDENT	39.80 0.20			X				454,047	0	57,973
(23) DIANA CHAMP DAVIS CFO	39.00 1.00			X				356,307	0	30,355
(24) TERRY MAZANY VP PHILANTHROPY	40.00				X			272,811	0	14,666
(25) JUDITH ELYSE HAMMETT VP OF MARKETING & COMMUNICATIONS	40.00				X			180,399	0	24,366
(26) KENNETH ZEFF EXEC. DIR., LEARN4LIFE	40.00					X		237,186	0	12,384
(27) MARY CERNILLI DIRECTOR, INVESTMENTS	40.00					X		163,796	0	14,574
(28) ALISON O'CARROLL DIRECTOR, PHILANTHROPIC COUNSEL	40.00					X		159,484	0	3,194
(29) CHRISTOPHER DE LASTIC DIRECTOR, FINANCE & ACCOUNTING	40.00					X		151,187	0	24,843
(30) MARKLY CROSSWELL MANAGING DIRECTOR, SOCIAL IMPACT STRATEGY	40.00					X		146,208	0	24,449
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								2,121,425	0	206,804

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 13

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SILCHESTER 780 THIRD AVENUE 42ND FLOOR NEW YORK, NY 10017	INVESTMENT MANAGEMENT SERVICES	254,721
BROADRIDGE MATRIX TRUST COMPANY PO BOX 64322 PHOENIX, AZ 85082	INVESTMENT MANAGEMENT SERVICES	190,797
ATLANTA REGIONAL COMMISSION 229 PEACHTREE STREET NE SUITE 100 ATLANTA, GA 30303	CONSULTING SERVICES	188,650
CREWCIAL PARTNERS 810 SEVENTH AVENUE 32ND FLOOR NEW YORK, NY 10019	INVESTMENT MANAGEMENT SERVICES	183,297
LEAPFROG SERVICES INC 1190 W DRUID HILLS DRIVE NE BROOKHAVEN, GA 30029	IT/SOFTWARE SERVICE	170,341

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 12

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts	1a Federated campaigns . .	1a			
	b Membership dues . .	1b			
	c Fundraising events . .	1c			
	d Related organizations	1d	550,000		
	e Government grants (contributions)	1e	786,672		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	252,794,649		
	g Noncash contributions included in lines 1a - 1f:$	1g	188,193,480		
	h **Total.** Add lines 1a-1f . . . . . ▶		254,131,321		

Program Service Revenue

	Business Code				
2a CFGA ASSET FEES	523930	1,053,974	1,053,974		
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f. . . . . ▶	1,053,974				

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		18,778,572		754,743	18,023,829
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties . . . . . ▶					

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		
d Net rental income or (loss) . . . . . ▶			

		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a	497,035,936					
b Less: cost or other basis and sales expenses	7b	418,259,107					
c Gain or (loss)	7c	78,776,829					
d Net gain or (loss) . . . . . ▶				78,776,829			78,776,829

8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
b Less: direct expenses	8b				
c Net income or (loss) from fundraising events . . ▶					
9a Gross income from gaming activities. See Part IV, line 19 . . .	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities . . ▶					
10a Gross sales of inventory, less returns and allowances . .	10a				
b Less: cost of goods sold . .	10b				
c Net income or (loss) from sales of inventory . . ▶					

Miscellaneous Revenue	Business Code				
11a OTHER MISCELLANEOUS REVENUE	900099	18,147			18,147
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d . . . . . ▶		18,147			
12 **Total revenue.** See instructions . . . . . ▶		352,758,843	1,053,974	754,743	96,818,805

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	118,169,192	118,169,192		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	10,211,743	10,211,743		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	403,500	403,500		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,390,924	250,534	658,785	481,605
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,763,430	865,902	2,441,070	456,458
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	121,669	27,994	78,918	14,757
9 Other employee benefits	637,029	146,570	413,195	77,264
10 Payroll taxes	329,321	75,771	213,607	39,943
11 Fees for services (non-employees):				
a Management				
b Legal	74,074		74,074	
c Accounting	108,145		108,145	
d Lobbying	18,000		18,000	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	4,393,160		4,393,160	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,458,571	817,548	641,023	
12 Advertising and promotion	322,555	46,041	12,832	263,682
13 Office expenses	136,536	27,515	75,652	33,369
14 Information technology	409,080	124,585	197,418	87,077
15 Royalties				
16 Occupancy	496,615	180,657	194,227	121,731
17 Travel	33,697	29,454	4,107	136
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	89,075	11,527	66,731	10,817
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	78,424		78,424	
23 Insurance	68,888	19,204	34,477	15,207
24 Other expenses. Itemize expenses not covered 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 O.)				
a UBIT FEDERAL & STATE TA	138,708	38,667	69,421	30,620
b DUES/MEMBERSHIPS/SUBSCR	99,922	27,855	50,009	22,058
c ADVISOR AND DONOR DEVEL	61,515			61,515
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	143,013,773	131,474,259	9,823,275	1,716,239
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).				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		20,417,885	1	16,760,367
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		10,775,439	3	120,252,805
	4	Accounts receivable, net		3,718,051	4	2,793,269
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net		9,750,000	7	11,750,000
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		161,018	9	104,809
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,144,092			
	b	Less: accumulated depreciation	10b 446,146	766,439	10c	697,946
	11	Investments—publicly traded securities		706,325,484	11	868,237,542
	12	Investments—other securities. See Part IV, line 11		313,461,428	12	316,825,300
	13	Investments—program-related. See Part IV, line 11		7,513,158	13	3,943,477
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		810,031	15	836,069
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		1,073,698,933	16	1,342,201,584
Liabilities	17	Accounts payable and accrued expenses		1,682,814	17	4,669,635
	18	Grants payable		33,111,690	18	35,188,490
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		10,724,154	21	12,713,973
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		7,234,712	25	7,429,557
	26	**Total liabilities.** Add lines 17 through 25		52,753,370	26	60,001,655
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		993,993,271	27	1,251,375,412
	28	Net assets with donor restrictions		26,952,292	28	30,824,517
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		1,020,945,563	32	1,282,199,929
	33	Total liabilities and net assets/fund balances		1,073,698,933	33	1,342,201,584

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	352,758,843
2	Total expenses (must equal Part IX, column (A), line 25)	2	143,013,773
3	Revenue less expenses. Subtract line 2 from line 1	3	209,745,070
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,020,945,563
5	Net unrealized gains (losses) on investments	5	51,662,372
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-153,076
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	1,282,199,929

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	141,390,725	158,461,661	134,121,451	138,262,181	254,131,321	826,367,339
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge. .						
4 **Total.** Add lines 1 through 3	141,390,725	158,461,661	134,121,451	138,262,181	254,131,321	826,367,339
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						237,717,105
6 **Public support.** Subtract line 5 from line 4.						588,650,234

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4. .	141,390,725	158,461,661	134,121,451	138,262,181	254,131,321	826,367,339
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	15,273,710	17,528,589	17,589,343	15,131,212	18,778,572	84,301,426
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	254,711	326,121	34,105	17,061	18,147	650,145
11 **Total support.** Add lines 7 through 10						911,318,910

12 Gross receipts from related activities, etc. (see instructions) **12** 4,243,395

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) . . . . . **14** 64.590 %

15 Public support percentage for 2020 Schedule A, Part II, line 14 . . . . . **15** 69.080 %

16a **33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15
16	Public support percentage from 2020 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2021** (line 10c, column (f) divided by line 13, column (f))	17
18	Investment income percentage from **2020** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

b **33 1/3% support tests—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No", provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 *(explain in **Part VI**)*. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (*explain in detail in **Part VI***):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	**5**	
6 Other distributions (*describe in* ***Part VI***). See instructions	**6**	
7 **Total annual distributions.** Add lines 1 through 6.	**7**	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions	**8**	
9 Distributable amount for 2021 from Section C, line 6	**9**	
10 Line 8 amount divided by Line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2021**	**(iii) Distributable Amount for 2021**
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2022.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	MISC INCOME AND REFUNDS - 2017 AMOUNT: $ 254,711. 2018 AMOUNT: $ 326,121. 2019 AMOUNT: $ 34,105. 2020 AMOUNT: $ 17,061. 2021 AMOUNT: $ 18,147.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	Employer identification number
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC	58-1344646

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $

3 Volunteer hours for political campaign activities. See instructions

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	18,000	
c Total lobbying expenditures (add lines 1a and 1b)	18,000	
d Other exempt purpose expenditures	142,995,773	
e Total exempt purpose expenditures (add lines 1c and 1d)	143,013,773	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000	
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-.	0	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2018	**(b)** 2019	**(c)** 2020	**(d)** 2021	**(e)** Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	48,408	19,500	18,000	18,000	103,908
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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

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

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

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

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

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

Part IV **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

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

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	721	305
2	Aggregate value of contributions to (during year)	116,701,005	137,430,316
3	Aggregate value of grants from (during year)	91,872,915	37,555,859
4	Aggregate value at end of year	899,086,619	383,113,310

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☑ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ 1,666,832

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

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

b Assets included in Form 990, Part X ▶ $

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

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

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☑ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other .....

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

		Amount
c Beginning balance	**1c**	10,724,154
d Additions during the year	**1d**	3,037,729
e Distributions during the year	**1e**	1,047,911
f Ending balance	**1f**	12,713,972

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

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

Part V Endowment Funds.

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

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

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

- **a** Board designated or quasi-endowment ▶ .....
- **b** Permanent endowment ▶ .....
- **c** Term endowment ▶ .....

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

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

		Yes	No
(i) Unrelated organizations	**3a(i)**		
(ii) Related organizations	**3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		648,464	255,023	393,441
d Equipment		495,628	191,123	304,505
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				697,946

Part VII **Investments - Other Securities.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	4,128,506	F
(3) Other		
(A) ALTERNATIVE INVESTMENTS	312,000,794	F
(B) REAL ESTATE HOLDINGS	696,000	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	316,825,300	

Part VIII **Investments - Program Related.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX **Other Assets.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	7,429,557

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART IV, LINE 1B:	THE FOUNDATION HAS AGENCY AGREEMENTS WITH A NUMBER OF ORGANIZATIONS WHEREBY FUNDS ARE HELD AT THE FOUNDATION ON BEHALF OF THE ORGANIZATIONS. THE ORGANIZATIONS HAVE OWNERSHIP AND FULL CONTROL OVER THE USE OF THESE FUNDS. DISBURSEMENTS ARE MADE AT THE ORGANIZATIONS' DIRECTIONS.
PART X, LINE 2:	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA FOLLOWS FASB'S GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAX (ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES), WHICH CREATES A SINGLE MODEL TO ADDRESS UNCERTAIN TAX POSITIONS AND CLARIFIES THE ACCOUNTING FOR INCOME TAXES BY PRESCRIBING A "MORE LIKELY THAN NOT" MINIMUM RECOGNITION THRESHOLD THAT A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS. UNDER THE REQUIREMENTS, TAX-EXEMPT ORGANIZATIONS MAY BE REQUIRED TO RECORD AN OBLIGATION AS THE RESULT OF A TAX POSITION THEY HAVE HISTORICALLY TAKEN ON VARIOUS TAX EXPOSURE ITEMS. MANAGEMENT BELIEVES ANY LIABILITY RESULTING FROM TAXING AUTHORITIES IMPOSING ADDITIONAL INCOME TAXES FROM ACTIVITIES DEEMED TO BE UNRELATED TO THE FOUNDATION'S TAX-EXEMPT STATUS WOULD NOT HAVE A MATERIAL EFFECT ON THE FOUNDATION'S FINANCIAL STATEMENTS. AT DECEMBER 31, 2021 AND 2020, NO LIABILITIES WERE RECORDED FOR UNCERTAIN TAX POSITIONS.
SCHEDULE D, PART III, LINE 4	COLLECTIONS OF ART PRINTS THE COMMUNITY FOUNDATION FOR GREATER ATLANTA RECEIVED A GIFT OF GELATIN SILVER PRINTS IN APRIL 2014 WITH A VALUE OF $1.6M. PRESENTLY, WE DO NOT PLAN ON SELLING THE ART PRINTS BUT WILL DONATE TO A NONPROFIT IN THE FUTURE.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN	0	0	INVESTMENTS		1,506,136
(2) EUROPE	0	0	INVESTMENTS		757,350
(3) NORTH AMERICA	0	0	GRANTMAKING		15,000
(4) CENTRAL AMERICA/CARIBBEAN	0	0	GRANTMAKING		280,000
(5) EUROPE	0	0	GRANTMAKING		100,000
(6) SOUTH ASIA	0	0	GRANTMAKING		8,500
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			2,666,986
b Total from continuation sheets to Part I . . .	0	0			0
c Totals (add lines 3a and 3b)	0	0			2,666,986

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1	**(a)** Name of organization	**(b)** IRS code section and EIN (if applicable)	**(c)** Region	**(d)** Purpose of grant	**(e)** Amount of cash grant	**(f)** Manner of cash disbursement	**(g)** Amount of noncash assistance	**(h)** Description of noncash assistance	**(i)** Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 0

3 Enter total number of other organizations or entities . . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . . ☑ Yes ☐ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . . ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . . ☐ Yes ☑ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . . ☑ Yes ☐ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* . . . . . ☐ Yes ☑ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

ReturnReference	Explanation
PART I, LINE 2:	THE FOUNDATION OUTLINES ITS EXTENSIVE DUE DILIGENCE AND MONITORING PROCEDURES OVER GRANTS AND OTHER ASSISTANCE MADE OUTSIDE OF THE US IN OUR DUE DILIGENCE POLICY MANUAL. IN SUMMARY OF THIS POLICY ONCE THE DUE DILIGENCE PROCEDURES HAVE BEEN COMPLETED AND THE GRANT IS MADE WE MONITOR THE USE BY OBTAINING A WRITTEN REPORT FROM THE GRANTEE. WE PREFER TO RECEIVE SUCH REPORTS AT THE CLOSE OF EACH OF THE GRANTEES ACCOUNTING PERIODS, UNTIL THE FUNDS ARE EXPENDED. A SAMPLE REPORT IS INCLUDED IN OUR FORMAL DUE DILIGENCE POLICY MANUAL AND THIS REPORT IS PROVIDED TO THE GRANT RECIPIENT FOR THEIR COMPLETION.
PART III ACCOUNTING METHOD:	
SCHEDULE F, PART I, LINE 3	THE FOUNDATION'S FOREIGN INVESTMENTS AS OF DECEMBER 31, 2021 IN THE CAYMAN ISLANDS AMOUNTED TO $1,506,136 ; EUROPE $757,350 AND WERE VALUED AT COST.

Additional Data

Software ID:

Software Version:

Ministry of Finance, Economy and Planning
Government of Anguilla
Revenue Report for the Month of April 2025

Revenue Code	Revenue Description	Budget	Actuals	Variance	Percentage
1000	Taxes				
1001	Taxes on Income				
1002	Taxes on Property				
1003	Taxes on Goods and Services				
1004	Taxes on International Trade				
1005	Other Taxes				
1006	Social Contributions				
1007	Other Revenue				
1008	Grants				
1009	Total Revenue				
1010	Expenditure				
1011	Compensation of Employees				
1012	Use of Goods and Services				
1013	Interest				
1014	Subsidies				
1015	Grants				
1016	Social Benefits				
1017	Other Expenses				
1018	Total Expenditure				
1019	Net Operating Balance				
1020	Net Acquisition of Non-Financial Assets				
1021	Net Lending/Borrowing				
1022	Net Acquisition of Financial Assets				
1023	Net Incurrence of Liabilities				
1024	Statistical Discrepancy				
1025	Taxes on Income, Profits and Capital Gains				
1026	Taxes on Payroll and Workforce				
1027	Taxes on Property				
1028	Taxes on Goods and Services				
1029	Taxes on International Trade and Transactions				
1030	Other Taxes				
1031	Social Contributions				
1032	Other Revenue				
1033	Grants				
1034	Total Revenue				
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1036	Compensation of Employees				
1037	Use of Goods and Services				
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1040	Grants				
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1043	Total Expenditure				
1044	Net Operating Balance				
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1046	Net Lending/Borrowing				
1047	Net Acquisition of Financial Assets				
1048	Net Incurrence of Liabilities				
1049	Statistical Discrepancy				
1050	Taxes on Income, Profits and Capital Gains				
1051	Taxes on Payroll and Workforce				
1052	Taxes on Property				
1053	Taxes on Goods and Services				
1054	Taxes on International Trade and Transactions				
1055	Other Taxes				
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1099	Statistical Discrepancy				
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1103	Taxes on Goods and Services				
1104	Taxes on International Trade and Transactions				
1105	Other Taxes				
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1116	Social Benefits				
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1121	Net Lending/Borrowing				
1122	Net Acquisition of Financial Assets				
1123	Net Incurrence of Liabilities				
1124	Statistical Discrepancy				
1125	Taxes on Income, Profits and Capital Gains				
1126	Taxes on Payroll and Workforce				
1127	Taxes on Property				
1128	Taxes on Goods and Services				
1129	Taxes on International Trade and Transactions				
1130	Other Taxes				
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1763	Interest				
1764	Subsidies				
1765	Grants				
1766	Social Benefits				
1767	Other Expenses				
1768	Total Expenditure				
1769	Net Operating Balance				
1770	Net Acquisition of Non-Financial Ass

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	318	10,211,743			
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	GRANT MONITORING THE FOUNDATION CONDUCTS DUE DILIGENCE AND REVIEW PROCESSES TO DETERMINE THE ELIGIBILITY AND CAPACITY OF AGENCIES AND ORGANIZATIONS THAT APPLY FOR COMPETITIVE AND/OR DISCRETIONARY GRANT FUNDING (INCLUDING DONOR ADVISED FUNDS). DUE DILIGENCE INCLUDES AT MINIMUM, CONFIRMATION OF NONPROFIT STATUS AND STATE REGISTRATION (FOR GEORGIA-BASED ORGANIZATIONS); IT MAY ALSO INCLUDE REVIEW OF THE FINANCIAL STANDING OF THE ORGANIZATION, SITE VISITS AND REVIEW OF GRANT APPLICATIONS. REPORTING REQUIREMENTS FOR GRANTEES OF DONOR ADVISED FUNDS ARE BASED ON THE TERMS OF INDIVIDUAL GRANTS. GRANTEES RECEIVING AWARDS FROM COMPETITIVE GRANTMAKING PROGRAMS ARE REQUIRED TO SUBMIT STATUS REPORTS THROUGHOUT THEIR GRANT PERIOD, AS STIPULATED IN EACH GRANTMAKING PROGRAM'S GUIDELINES. AS A STANDARD, SUCH REPORTS INCLUDE AN INITIAL REPORT; AN INTERIM REPORT; AND AN END OF GRANT REPORT TO PROVIDE BENCHMARKING AND EVALUATION OF USE OF GRANT DOLLARS.
SCHEDULE I, PART III, LINE 1	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA MANAGES VARIOUS SCHOLARSHIP FUNDS FOR THE BENEFIT OF ELIGIBLE APPLICANTS AND BECAUSE SCHOLARSHIPS ARE A CONDUIT TO THE FULFILLMENT OF OUR VISION TO MAKE OUR REGION MORE EQUITABLE AND PROSPEROUS FOR ALL. SCHOLARSHIPS PROVIDE OUR DONORS WITH OPPORTUNITIES TO INVEST IN THE FUTURE THROUGH STUDENTS PURSUING POST-SECONDARY EDUCATION. STUDENTS BENEFIT FROM THE FINANCIAL ASSISTANCE AS WELL AS THE ACADEMIC RECOGNITION OF BEING A SCHOLARSHIP RECIPIENT. EACH OF OUR 19 DIFFERENT SCHOLARSHIP FUNDS, PROVIDING HUNDREDS OF INDIVIDUAL SCHOLARSHIPS, HAS ITS OWN SPECIFIC FOCUS, SUCH AS FIELD OF STUDY OR GEOGRAPHY, AND VARIOUS ELIGIBILITY CRITERIA, OFTEN CITED AS A MATCH TO THE PHILANTHROPIC DESIRES OF THE DONOR.

Additional Data

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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., 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**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
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.			
	☑ Compensation committee ☐ Written employment contract			
	☑ Independent compensation consultant ☑ Compensation survey or study			
	☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	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:			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	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 in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured 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**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 FRANK FERNANDEZ PRESIDENT	(i)	427,607	25,000	1,440	44,500	13,473	512,020	0
	(ii)	0	0	0	0	0	0	0
2 DIANA CHAMP DAVIS CFO	(i)	287,485	67,502	1,320	17,400	12,955	386,662	0
	(ii)	0	0	0	0	0	0	0
3 TERRY MAZANY VP PHILANTHROPY	(i)	225,591	45,000	2,220	13,535	1,131	287,477	0
	(ii)	0	0	0	0	0	0	0
4 KENNETH ZEFF EXEC. DIR., LEARN4LIFE	(i)	230,746	5,000	1,440	0	12,384	249,570	0
	(ii)	0	0	0	0	0	0	0
5 JUDITH ELYSE HAMMETT VP OF MARKETING & COMMUNICATIONS	(i)	176,767	2,000	1,632	10,909	13,457	204,765	0
	(ii)	0	0	0	0	0	0	0
6 MARY CERNILLI DIRECTOR, INVESTMENTS	(i)	160,164	2,000	1,632	1,201	13,373	178,370	0
	(ii)	0	0	0	0	0	0	0
7 CHRISTOPHER DE LASTIC DIRECTOR, FINANCE & ACCOUNTING	(i)	145,371	5,000	816	9,888	14,955	176,030	0
	(ii)	0	0	0	0	0	0	0
8 MARKLY CROSSWELL MANAGING DIRECTOR, SOCIAL IMPACT STR	(i)	142,576	2,000	1,632	9,561	14,888	170,657	0
	(ii)	0	0	0	0	0	0	0
9 ALISON O'CARROLL DIRECTOR, PHILANTHROPIC COUNSEL	(i)	155,300	2,000	2,184	1,308	1,886	162,678	0
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 3	SEE SCHEDULE O, PART VI, SECTION B, LINE 15 FOR COMPLETE DESCRIPTION.

Additional Data

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	237	188,193,480	AVG HIGH LOW MEAN
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement — **29** 2

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	**30a**		No
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	**31**	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	**32a**		No
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation

Additional Data

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

Return Reference	Explanation
FORM 990, PART I, LINE 6	VOLUNTEER APPRECIATION VOLUNTEERS, NUMBERING 104, PLAY A KEY ROLE AT THE COMMUNITY FOUNDATION FOR GREATER ATLANTA. SERVING THROUGH OUR BOARD LEADERSHIP AND THE SEVEN SUPPORTING COMMITTEES REPORTING TO THE BOARD, THESE VOLUNTEERS PROVIDE COUNSEL, INSIGHTS, EXPERTISE AND EXPERIENCE TO BETTER OUR WORK IN SERVICE TO OUR COMMUNITY. OUR VOLUNTEER GROUPS INCLUDE THE 21-PERSON BOARD OF DIRECTORS, WHO THEN ALSO SERVE AS MEMBERS OF THE BOARD'S VARIOUS COMMITTEES DRIVING STRATEGY THROUGH FOCUSED EFFORTS ON PHILANTHROPY, IMPACT INVESTING, COMMUNITY GRANTMAKING, ACCOUNTING AND FINANCE, GOVERNANCE, AND INVESTMENTS. IN ADDITION, COMMUNITY FOUNDATION STAFF SERVE AS VOLUNTEERS ON THE BOARDS OF OUR 8 SUPPORTING ORGANIZATIONS.
FORM 990, PART VI, SECTION A, LINE 1A	GOVERNING BOARD'S AUTHORITY TO EXECUTIVE COMMITTEE THE DELEGATION OF AUTHORITY FROM THE BOARD TO THE EXECUTIVE COMMITTEE IS OUTLINED IN THE EXECUTIVE COMMITTEE'S CHARTER. THE COMMITTEE IS COMPOSED OF BOARD MEMBERS WHO HOLD THE POSITIONS OF BOARD CHAIR AND COMMITTEE CHAIR OF THE FOUNDATION'S EIGHT COMMITTEES: THE EXECUTIVE COMMITTEE, THE FINANCE AND AUDIT COMMITTEE, THE COMMUNITY COMMITTEE, THE INVESTMENT COMMITTEE, THE COINVESTMENT AND GROWTH COMMITTEE, IMPACT INVESTING COMMITTEE, THE GOVERNANCE COMMITTEE, AND THE HOUSING COMMITTEE. THE COMMITTEES EXIST TO COORDINATE THE OVERSIGHT OF THE STRATEGIC AND OPERATIONAL ISSUES OF THE FOUNDATION AND TO REPORT ON THE FINDINGS OF THEIR WORK TO THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11B	COPY OF RETURN PROVIDED TO GOVERNING BODY A COPY OF THE 990 WAS REVIEWED BY THE MEMBERS OF THE FINANCE AND AUDIT COMMITTEE, BOARD, AND RELEVANT FOUNDATION SENIOR MANAGEMENT. THE COMMITTEE WAS PROVIDED WITH A COPY OF THE RETURN IN ADVANCE OF THEIR NOVEMBER 1, 2022 MEETING. DURING THE MEETING THE RETURN WAS REVIEWED AND DISCUSSED BY BOTH THE FOUNDATION'S CFO AND THE MAULDIN & JENKINS, LLC TAX TEAM. THE BOARD OF DIRECTORS WAS FURNISHED A COPY OF THE FINAL FORM 990 PRIOR TO THEIR NOVEMBER 7, 2022 MEETING.
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY: A CONFLICT OF INTEREST STATEMENT WAS ADOPTED BY THE FOUNDATION AFTER REVIEW FOR COMPLETENESS BY THE FOUNDATION'S TEAM OF EXPERTS. ANNUALLY, EACH BOARD MEMBER AND OFFICER IS REQUIRED TO REVIEW AND FILE A CONFLICT OF INTEREST STATEMENT. THE STATEMENTS ARE REVIEWED BY THE PRESIDENT OF THE FOUNDATION AND THE CFO. AT EVERY BOARD MEETING, THE BOARD MEMBERS AND OFFICERS MUST DISCLOSE ANY CONFLICT OF INTEREST WITH RESPECT TO EACH ITEM DISCUSSED. THIS PROVIDES THEM AN OPPORTUNITY TO RECUSE THEMSELVES FROM THE VOTE. THE DISCLOSURE IS REFLECTED IN THE MINUTES OF THE MEETING. NEW STAFF, BOARD MEMBERS, BOARD COMMITTEE MEMBERS AND CONSULTANTS TO THE FOUNDATION RECEIVE THE POLICY WITH ORIENTATION MATERIALS. THEY COMPLETE THE FORM ACKNOWLEDGING THEIR AGREEMENT TO COMPLY WITH THE CONFLICT OF INTEREST POLICY. THE POLICY IS REVIEWED ANNUALLY. IN ADDITION TO THE CONFLICT OF INTEREST POLICY, A THOROUGH QUESTIONNAIRE WAS SENT OUT TO ALL BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES SUBSEQUENT TO FISCAL YEAR 2021 TO CONFIRM THAT THERE WERE NO CONFLICTS. THIS QUESTIONNAIRE WAS REVIEWED BY THE FINANCE DEPARTMENT. PART VI, SECTION B, LINE 13 WHISTLEBLOWER/CONFIDENTIALITY POLICIES: THE FOUNDATION IS COMMITTED TO MAINTAINING THE HIGHEST STANDARD OF CONDUCT AND ETHICS. OUR FRAUDULENT OR DISHONEST CONDUCT AND WHISTLEBLOWER POLICY REFLECTS THIS COMMITMENT. THIS POLICY WAS FORMALLY ADOPTED IN JULY 2007. THE FOUNDATION EMPLOYS A CONFIDENTIAL SERVICE FOR WHICH EMPLOYEES MAY DIRECT CONCERNS IN A CONFIDENTIAL MANNER. USAGE REPORTS ARE AVAILABLE AT ANY TIME TO THE PRESIDENT AND BOARD CHAIR. REPORTS ARE REVIEWED BY THE FOUNDATION'S INDEPENDENT AUDITORS.
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION AND EVALUATION: ANNUALLY THERE ARE SELF-EVALUATIONS ON PERFORMANCE COMPLETED BY EACH STAFF MEMBER AND REVIEWED BY THEIR SUPERVISOR. SUPERVISORS COMPLETE A WRITTEN EVALUATION AND ASSIGN A PERFORMANCE RATING. THE PRESIDENT COMPLETES A SELF-EVALUATION THAT IS REVIEWED BY THE EXECUTIVE COMMITTEE WITH THE RESULTS COMMUNICATED BACK IN WRITING. THE INFORMATION IS USED FOR ANNUAL SALARY REVIEWS. THE CEO'S SALARY IS REVIEWED BY THE EXECUTIVE COMMITTEE AND ADOPTED BY THE BOARD. EVERY THREE YEARS A VERY THOROUGH COMPENSATION STUDY IS DONE BY AN INDEPENDENT FIRM USING RELEVANT COMPARABLES FOR EACH POSITION. THE STUDY, ALONG WITH OUR COMPENSATION POLICY, IS USED TO GUIDE ALL COMPENSATION DECISIONS. THE MOST RECENT COMPENSATION STUDY WAS CONDUCTED IN DECEMBER 2019.
FORM 990, PART VI, SECTION C, LINE 19	AVAILABILITY OF PUBLIC DOCUMENTS GOVERNING DOCUMENTS - AVAILABLE UPON REQUEST; CONFLICT OF INTEREST POLICY - AVAILABLE UPON REQUEST; AUDITED FINANCIAL STATEMENT - ON OUR WEBSITE; FORM 990 - ON OUR WEBSITE; FORM 990T - AVAILABLE UPON REQUEST; FORM 1023 - AVAILABLE UPON REQUEST.
FORM 990, PART XI, LINE 9:	SPLIT INTEREST AGREEMENT 633,596. BOOK TO TAX DIFFERENCE IN REVENUE RECOGNITION OF PPP LOAN FORGIVENESS -786,672.

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA INC

Employer identification number
58-1344646

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TCF CHARITABLE SOLUTIONS 191 PEACHTREE ST NE SUITE 1000 ATLANTA, GA 30303 58-1344646	RE-TITLE	GA	0	696,000	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)METROPOLITAN FOUNDATION OF ATLANTA INC 191 PEACHTREE STREET NE SUITE 1000 ATLANTA, GA 30303 58-6044449	HOLD PROPERTY	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(2)THE CF FOUNDATION INC 3445 PEACHTREE ROAD NE ATLANTA, GA 30326 58-1743909	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(3)THE CONLEE FAMILY SUPPORTING FOUNDATION 3050 PEACHTREE ROAD NW SUITE 460 ATLANTA, GA 30305 58-2503092	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(4)THE FT STENT FAMILY FOUNDATION INC 1846 CHARTWELL TERRACE STONE MOUNTAIN, GA 30087 58-2491275	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(5)THE WATERFALL FOUNDATION PO BOX 422223 ATLANTA, GA 30342 58-2442068	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(6)ACHIEVE ATLANTA 191 PEACHTREE STREET NE SUITE 1000 ATLANTA, GA 30303 47-2670990	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(7)EVERY STUDENT EVERY COMMUNITY 112 KROG STREET NE STE 19 ATLANTA, GA 30307 81-2554172	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(8)ROI INC 8200 ROBERTS DRIVE SUITE 600 ATLANTA, GA 30350 20-3931240	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	
(9)SHETH GLOBAL FOUNDATION 191 PEACHTREE STREET NE SUITE 1000 ATLANTA, GA 30303 83-4222626	SUPPORTING	GA	501(C)(3)	LINE 12A, I	THE COMMUNITY FOUNDATION FOR GREATER ATLANTA	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) ACHIEVE ATLANTA	B	6,120,719	CASH
(2) EVERY STUDENT EVERY COMMUNITY	B	5,034,626	CASH
(3) ROI FUND INC	C	500,000	CASH
(4) ACHIEVE ATLANTA	Q	278,515	CASH

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)	**(e)** Are all partners section 501(c)(3) organizations?		**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Disproportionate allocations?		**(i)** Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	**(j)** General or managing partner?		**(k)** Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	

Part VII Supplemental Information

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

Return Reference	Explanation

Schedule R (Form 990) 2021

Additional Data

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