

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

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

C Name of organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
592 TENTH STREET NW
City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 303185776
F Name and address of principal officer:
STEPHEN PRUITT
592 TENTH STREET NW
ATLANTA, GA 303185776
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527
J Website: WWW.SREB.ORG
K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other COMPACT
L Year of formation: 1948
M State of legal domicile: GA

D Employer identification number
58-0566141
E Telephone number
(404) 875-9211
G Gross receipts \$ 20,309,774
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

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION SHALL BE DEVOTED TO THE TASK OF ASSISTING STATES, INSTITUTIONS AND AGENCIES CONCERNED WITH HIGHER EDUCATION IN THEIR EFFORTS TO ADVANCE KNOWLEDGE AND TO IMPROVE THE SOCIAL AND ECONOMIC LEVEL OF THE SOUTHERN REGION. IN AIDING SUCH STATES, INSTITUTIONS AND AGENCIES, THE BOARD SHALL EXPLORE FULLY, RECOMMEND WHERE DESIRABLE, AND DEVELOP WHERE NEEDED, INTERSTATE COLLABORATION IN THE SUPPORT, EXPANSION OR ESTABLISHMENT OF REGIONAL SERVICES OR SCHOOLS FOR GRADUATE, PROFESSIONAL AND TECHNICAL EDUCATION.		
	2 Check this box <input type="checkbox"/> 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	80
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	80
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	150
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 39	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	235,336	211,660
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,783,716	16,839,671
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	833,813	705,509
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	0
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	24,852,865	17,756,840
	14 Benefits paid to or for members (Part IX, column (A), line 4)	392,624	146,584
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	13,221,484	13,056,018
	b Total fundraising expenses (Part IX, column (D), line 25) 0	0	0
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	10,687,997	6,785,067
	19 Revenue less expenses. Subtract line 18 from line 12	24,302,105	19,987,669
		550,760	-2,230,829
		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	36,893,306	36,783,041
	21 Total liabilities (Part X, line 26)	8,955,036	10,770,953
	22 Net assets or fund balances. Subtract line 21 from line 20	27,938,270	26,012,088

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

BARBARA CHANNELL DIRECTOR FINANCE & FACILITIES

2020-10-19

Date

Paid Preparer Use Only

Print/Type preparer's name

Firm's name WARREN AVERETT LLC

Firm's address SIX CONCOURSE PARKWAY SUITE 600
ATLANTA, GA 30328

Preparer's signature

Firm's EIN 45-4084437

Phone no. (770) 396-1100

Date 2020-10-19

Check ☐ if self-employed

PTIN P00846200

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

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:

THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION SHALL BE DEVOTED TO THE TASK OF ASSISTING STATES, INSTITUTIONS AND AGENCIES CONCERNED WITH HIGHER EDUCATION IN THEIR EFFORTS TO ADVANCE KNOWLEDGE AND TO IMPROVE THE SOCIAL AND ECONOMIC LEVEL OF THE SOUTHERN REGION. IN AIDING SUCH STATES, INSTITUTIONS AND AGENCIES, THE BOARD SHALL EXPLORE FULLY, RECOMMEND WHERE DESIRABLE, AND DEVELOP WHERE NEEDED, INTERSTATE COLLABORATION IN THE SUPPORT, EXPANSION OR ESTABLISHMENT OF REGIONAL SERVICES OR SCHOOLS FOR GRADUATE, PROFESSIONAL AND TECHNICAL EDUCATION.

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 \$ 1,566,450 including grants of \$ 146,584) (Revenue \$ 1,566,450)
BMGF3:THE SUBSTANTIAL FIVE-YEAR GRANT WITH THE BILL AND MELINDA GATES FOUNDATION CAME TO AN END IN JUNE 2019. HOWEVER, THE FOUNDATION SET ASIDE \$3.3 MILLION FOR THE CREATION OF A NETWORK OF SCHOOL IMPROVEMENT. UNDER THIS GRANT, SREB ESTABLISHED AN URBAN NETWORK FOR SCHOOL IMPROVEMENT IN JEFFERSON COUNTY, ALABAMA AND A RURAL NETWORK IN THREE COUNTIES IN NORTH CAROLINA. THE NORTH CAROLINA RURAL NETWORK (NCRN) RECEIVED MOU AND DATA COLLECTING AGREEMENTS WITH THREE RURAL SCHOOL DISTRICTS IN NC: BEAUFORT, BLADEN AND STANLY COUNTY. THE NORTH CAROLINA RURAL NETWORK (NCRN) COMPLETED CURRICULUM AND INSTRUCTIONAL REVIEWS IN THE 13 SCHOOLS THAT ARE PARTICIPATING IN THE NETWORK. THESE REVIEWS FOCUSED ON: INSTRUCTION, CURRICULUM, CAREER PATHWAYS, SUPPORT FOR STUDENTS AND A CULTURE OF CONTINUOUS IMPROVEMENT. INSTRUCTIONAL REVIEW TEAMS CONSISTED OF DISTRICT STAFF, SCHOOL STAFF AND LED BY SREB COACHES. A DEBRIEF WAS HELD WITH EACH SCHOOL TEAM AROUND THE FINDINGS AND A WRITTEN REPORT WAS SHARED WITH THEM. SREB STAFF LED SCHOOL TEAMS (PRINCIPAL, COUNSELOR AND LEAD TEACHERS) THROUGH THE PROCESS OF REVIEWING THE DATA IN THE REPORT, CONNECTING THE DATA TO THE GOALS OF THE GRANT AND IDENTIFYING ROOT CAUSES OF SELECTED AREAS OF GROWTH. THE GOALS FOR THIS MEETING WERE: 1. BUILD AN UNDERSTANDING OF THE PURPOSE OF GRANT: WORK IS CENTERED ON EQUITABLE OUTCOMES FOR BLACK, LATINX, AND LOW-INCOME STUDENTS. 2. USE THE CIR REPORT TO UNDERSTAND THE SYSTEMS AND PROCESSES IMPACTING STUDENT LEARNING. 3. PRIORITIZE THE OBSTACLES THAT IMPEDE STUDENT ACHIEVEMENT. 4. ANALYZE ROOT CAUSES TO GAIN GREATER INSIGHTS TO THE PROBLEM. DISTRICT LEADERS FROM EACH DISTRICT COLLABORATED ON THE RESULTS OF THE PREVIOUS MEETINGS AND DEVELOPED A COMMON AIM FOR THE ENTIRE NETWORK. THE NCRN FIRST CONVENING WAS HELD ON AUGUST 13, 2019. SREB LED SCHOOL TEAMS THROUGH THE PROCESS OF CREATING A DRIVER DIAGRAM FOR THEIR AIM STATEMENT. THE GOALS OF THIS MEETING WERE: 1. BUILD FUNDAMENTAL UNDERSTANDING OF IMPROVEMENT SCIENCE AND CORE PARAMETERS 2. BUILD AN OPERATIONAL THEORY OF IMPROVEMENT 3. DETERMINE THE PRIMARY AND SECONDARY DRIVERS OF THE AIM 4. DEVELOP CHANGE IDEAS. TWO ADDITIONAL CONVENING WERE HELD DURING THE SCHOOL YEAR, NOVEMBER AND FEBRUARY, TO CONTINUE THE WORK AND NETWORK AROUND SCHOOL AND DISTRICT CHANGE IDEAS. DURING THE MONTHS OF SEPTEMBER THROUGH MARCH SREB LEADERSHIP AND INSTRUCTIONAL COACHES HAVE BEEN SUPPORTING EACH SCHOOL THROUGH THE PDSA PROCESS. DURING THESE MONTHLY MEETINGS WE HAVE: PROVIDED RESEARCH AND RESOURCES, MET WITH TEACHERS DURING THEIR PLANNING TIME TO HELP THEM REFLECT ON THE PROCESS, PROVIDE WHOLE SCHOOL PROFESSIONAL LEARNING (FOCUSED ON THEIR DRIVERS: RIGOR AND STUDENT ENGAGEMENT) AND DEBRIEF EACH VISIT WITH DISTRICT LEADERS. ONCE THE PDSA PROCESSES GOT UNDERWAY THE SREB TEAM IMPLEMENTED THE INNOVATION CONFIGURATION MAP PROCESS IN EACH OF THE SCHOOLS TO HELP STANDARDIZED AND SPREAD THE SCHOOL'S CHANGE IDEAS. TEACHERS HAD TO DEFINE STUDENT ENGAGEMENT AND THEN DESCRIBE WHAT IT LOOKS LIKE IN THE CLASSROOM. THROUGH THIS PROCESS WE HAVE LEARNED THAT WE NEED TO BE PRECISE IN OUR LANGUAGE AND HAVE AGREEMENT ON WHAT THAT WOULD LOOK LIKE IN THE CLASSROOM. GETTING INPUT FROM EVERYONE INVOLVED IN THE PROGRAM WAS ONE OF THE MOST VALUABLE ASPECTS OF THIS PROCESS. BY HELPING TO DEFINE HIGH-QUALITY STUDENT ENGAGEMENT, THE STAFF GAINED A SENSE OF OWNERSHIP FOR WHAT WAS EXPECTED OF THEM. IN THE NCRN THE SCHOOL STAFF USED THEIR IC MAPS TO GUIDE AND FOCUS THEIR ACTIONS AS THEY DEVELOPED COMPETENCE WITH THEIR CHANGE IDEA. THE MAP ALSO MADE IT EASY FOR STAFF TO FOCUS ON ONE COMPONENT AT A TIME, WHICH MADE IMPLEMENTATION LESS OVERWHELMING. SCHOOL LEADERS USED THE IC MAP TO EVALUATE THE IMPLEMENTATION OF THE STUDENT ENGAGEMENT STRATEGIES THAT THE TEACHERS DEVELOPED. THE TOOL PROVIDED LEADERS WITH DATA THAT INFORMED DECISIONS ABOUT THE NEED FOR ADDITIONAL SUPPORT. PRIOR TO COVID THERE WAS A PLAN TO REVIEW THE IC MAP, COMPARING THEIR IMPLEMENTATION TO EXPECTATIONS AND REVISING THE MAP AS NEEDED. UNFORTUNATELY, WITH CLOSINGS DUE TO COVID, THAT PART OF THE PROCESS HAS NOT BEEN ACCOMPLISHED. TO ENSURE A CONTINUAL FOCUS ON THE NIC AIM THE GOAL FOR THE SCHOOL YEAR 2020 WILL BE TO UNDERSTAND THE PROBLEMS BOTH TEACHERS AND STUDENTS ARE FACING IN TERMS OF STUDENTS MEETING GRADE LEVEL STANDARDS THROUGH VIRTUAL, IN-PERSON, OR BLENDED MODEL OF INSTRUCTION. WHAT IS A MAIN PROBLEM THAT THE SCHOOLS ARE CURRENTLY FACING? WHAT IS A REASONABLE GOAL FOR THE SCHOOLS THIS YEAR FOR IMPROVING THAT PROBLEM? HOW ARE THE STUDENT ENGAGEMENT AND RIGOR DRIVERS INFLUENCED BY THE CURRENT SCHOOL STRUCTURES? WHAT ARE THE ROOT CAUSES FOR PROBLEMS UNCOVERED?TO GATHER INITIAL DATA, THE SREB TEAM HAS DEVELOPED TEACHER AND STUDENT SURVEYS, A VIRTUAL CLASSROOM OBSERVATION RUBRIC AND WILL GATHER STUDENT PARTICIPATION DATA FROM THE SCHOOLS USING THE INFORMATION FROM THEIR LEARNING MANAGEMENT SYSTEMS. ONCE THIS INFORMATION IS GATHERED SREB WILL LEAD THE SCHOOL TEAMS IN CREATING A CHANGE IDEA.WE HAVE ENGAGED OUTSIDE CONSULTANTS: SUSAN ALLRED.	

4b	(Code:) (Expenses \$ 1,000,387 including grants of \$) (Revenue \$ 1,144,153)
CFDINST:FOR 26 YEARS, THE INSTITUTE ON TEACHING AND MENTORING (INSTITUTE), HOSTED BY THE SREB-STATE DOCTORAL SCHOLARS PROGRAM, HAS HELPED PREPARE UNDERREPRESENTED MINORITY SCHOLARS TO EARN THE PH.D. AND BECOME COLLEGE AND UNIVERSITY PROFESSORS.THE INSTITUTE HAS PARTNERED WITH PROGRAMS WITH SIMILAR GOALS (THE ALFRED P. SLOAN FOUNDATION, GATES MILLENNIUM SCHOLARS PROGRAM, THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION (NASA), NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES BRIDGES TO THE PROFESSORiate, THE NATIONAL SCIENCE FOUNDATION ALLIANCES FOR GRADUATE EDUCATION AND THE PROFESSORiate, RONALD E. MCNAIR POSTBACCALAUREATE ACHIEVEMENT PROGRAM, THE SOUTHERN REGIONAL EDUCATION BOARD AND THE WESTERN INTERSTATE COMMISSION FOR HIGHER EDUCATION) TO ACHIEVE THE GOAL OF DIVERSIFYING THE NATION'S COLLEGE AND UNIVERSITY FACULTY. EVERY FALL, UNDERREPRESENTED MINORITY DOCTORAL SCHOLARS AND THEIR MENTORS REPRESENTING MORE THAN FORTY STATES, THE DISTRICT OF COLUMBIA, PUERTO RICO, AND MORE THAN 100 ACADEMIC DISCIPLINES CONVENE AT THE INSTITUTE TO LEARN FROM EXPERTS, TO NETWORK WITH PEERS AND DEVELOP SKILLS TO EVENTUALLY TEACH AND CONDUCT RESEARCH IN POSTSECONDARY INSTITUTIONS. THE INSTITUTE STRIVES TO MOTIVATE, INFORM AND INSPIRE THESE SCHOLARS TO USE THEIR KNOWLEDGE AND SKILLS TO CONDUCT THE RESEARCH AND TEACH NEW GENERATIONS OF STUDENTS THAT CAN RESULT IN BUILDING A BETTER, MORE INCLUSIVE COMMUNITY AND WORKFORCE.THE 2019 INSTITUTE ON TEACHING AND MENTORING CONTINUED THE TREND OF THE LARGEST GATHERING OF MINORITY DOCTORAL PH.D. STUDENTS IN THE NATION WITH 1240 ATTENDEES. OTHER FACTS ABOUT INSTITUTE ATTENDANCE INCLUDE: 41 STATES (INCLUDING PUERTO RICO AND DC) REPRESENTED 294 INSTITUTIONS REPRESENTED 98 UNIVERSITIES RECRUITED & 193 RECRUITER REPRESENTATIVES GENDER: MALE 37%, FEMALE 61%, DID NOT IDENTIFY 1.9%, TRANSGENDER, 0.1% 137 DISCIPLINES REPRESENTED (52% IN STEM) 40 CONCURRENT SESSIONS AND 5 PLENARIESTHE OVERALL INSTITUTE EVALUATION RATED 4.5 ON A 5.0 SCALE--CONTINUING A RATING TREND OF 4.5 OR HIGHER 23 OF THE LAST 25 YEARS.OVER THE LAST 26 YEARS, THE INSTITUTE HAS SERVED ALMOST 20,000 ATTENDEES AND MORE THAN 13,000 INDIVIDUAL UNDERREPRESENTED MINORITY DOCTORAL SCHOLARS; 80% OF WHOM GO ON TO FIND EMPLOYMENT ON CAMPUSES AS FACULTY, ADMINISTRATORS, OR POSTDOCTORAL RESEARCHERS.	

4c	(Code:) (Expenses \$ 1,040,821 including grants of \$) (Revenue \$ 723,797)
VOCEDSP:FROM JULY 10-13, 2019, SREB OFFERED ITS ANNUAL MAKING SCHOOLS WORK CONFERENCE THE NATION'S PREMIER PROFESSIONAL LEARNING EVENT FOR IMPROVING INSTRUCTION AND INCREASING K-12 STUDENT ACHIEVEMENT IN BALTIMORE, MD. MAKING SCHOOLS WORK CONFERENCE KEYNOTES, PROMISING PRACTICE SESSIONS, DEEP-DIVES, TABLE TALKS AND FLASH TALKS BROUGHT ATTENDEES TOGETHER TO SHARE STRATEGIES FOR CREATING CULTURES OF EXCELLENCE, ENCOURAGEMENT AND SUCCESS IN THEIR K-12 CLASSROOMS, SCHOOLS OR TECHNOLOGY CENTERS.A TOTAL OF 2,603 EDUCATORS, REPRESENTING 37 STATES, REGISTERED FOR THE CONFERENCE. ATTENDEES ATTENDED TWO GENERAL SESSIONS, AND THEY COULD CHOOSE FROM 466 BREAKOUT SESSIONS OR GENERAL SESSIONS. THE SESSIONS ADDRESSED ONE OR MORE OF FIVE OBJECTIVES.1. ENGAGING INSTRUCTION ENGAGE EACH STUDENT IN EVERY CLASSROOM THROUGH HIGH-QUALITY INSTRUCTION THAT INCORPORATES POWERFUL LITERACY AND MATHEMATICS PRACTICES AND PROJECT-BASED ASSIGNMENTS.2. ALIGNED CURRICULUM ENSURE EACH STUDENT HAS EQUITABLE ACCESS TO CHALLENGING ACADEMIC AND TECHNICAL CURRICULA THAT ALIGN INSTRUCTION, ASSIGNMENTS AND ASSESSMENTS WITH GRADE-LEVEL READINESS STANDARDS.3. CAREER PATHWAYS OFFER EACH STUDENT ACCESS TO CAREER PATHWAYS AND PROGRAMS OF STUDY THAT ALIGN WITH WORKFORCE NEEDS AND INCLUDE OPPORTUNITIES TO EARN INDUSTRY OR POSTSECONDARY CREDENTIALS AND PARTICIPATE IN WORK-BASED LEARNING.4. SYSTEMS OF SUPPORT PROVIDE EACH STUDENT WITH THE PERSONALIZED CAREER GUIDANCE, ADVISEMENT, SOCIAL AND EMOTIONAL SUPPORTS, AND EXTRA HELP AND ACCELERATED LEARNING OPPORTUNITIES NEEDED TO GRADUATE READY FOR COLLEGE AND CAREERS.5. LEADERSHIP FOR CONTINUOUS IMPROVEMENT ENGAGE THE WHOLE SCHOOL COMMUNITY IN PROMOTING A CULTURE OF HIGH EXPECTATIONS AND CONTINUOUSLY USING DATA TO IDENTIFY PROBLEMS OF PRACTICE AND DEVELOP ACTION PLANS TO SOLVE THOSE PROBLEMS.THROUGHOUT THE CONFERENCE, SREB STAFF ATTENDED MANY OF THE BREAKOUT SESSIONS AND WROTE REPORTS ABOUT THE INFORMATION PRESENTED. THESE REPORTS WERE DEVELOPED INTO PROMISING PRACTICES NEWSLETTERS THAT WERE DISTRIBUTED PERIODICALLY THROUGHOUT THE 2019-2020 ACADEMIC YEAR. EDUCATORS CAN LEARN ABOUT PROMISING PRACTICES BY READING THE ARTICLES IN THE NEWSLETTERS.THE EXPENSES IN THE AMOUNT OF \$1,040,821 INCLUDE \$117,919 OF TRANSFER FUNDS FROM VOCEDSP TO NSDP FOR THE SALARIES OF SCHOOL IMPROVEMENT LEADERSHIP AND SUPPORT STAFF DURING THE WEEK OF THE 2019 MSW CONFERENCE.	













	(Code:) (Expenses \$ 12,283,304 including grants of \$) (Revenue \$ 13,405,271)
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4d	Other program services (Describe in Schedule O.) (Expenses \$ 12,283,304 including grants of \$) (Revenue \$ 13,405,271)
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4e	Total program service expenses ► 15,890,962
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Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> 	1 Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	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? <i>If "Yes," complete Schedule C, Part II</i>	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	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? <i>If "Yes," complete Schedule D, Part VII</i> 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 	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? <i>If "Yes," complete Schedule D, Part IX</i> 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	11e	No
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)?	11f	No
12a <i>If "Yes" to any line on Schedule D, Part X, complete Schedule D, Parts XI and XII</i> 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	No

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	No
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?	26	No
27	If "Yes," complete Schedule L, Part II. 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 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 lines 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	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30	No
31	If "Yes," complete Schedule M. 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?	33	No
34	If "Yes," complete Schedule R, Part I. 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	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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 in 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		<input type="checkbox"/>	
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	160
b	Enter the number of Forms W-2G included in 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	

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 150			
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		No
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		No
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		
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		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		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		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		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 If "Yes," enter the amount of net investment income on which the organization is subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		No

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.	80	
1b	Enter the number of voting members included in line 1a, above, who are independent	80	
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	Yes
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	Yes
7b	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:		
8a	a The governing body?	8a	Yes
8b	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	No
10b	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	
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
11b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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?		
15a	a The organization's CEO, Executive Director, or top management official	15a	Yes
15b	b Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	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

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (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:
BARBARA CHANNELL 592 TENTH STREET NW ATLANTA, GA 30318 (404) 875-9211

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 instructions for definition of "key employee."
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, 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 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN BAKER BOARD MEMBER	0.00	X						0	0	0
(2) ANDY BESHEAR BOARD MEMBER	0.00	X						0	0	0
(3) ASA HUTCHINSON BOARD CHAIR	0.00	X		X				0	0	0
(4) BETH GORIN COX BOARD MEMBER	0.00	X						0	0	0
(5) BILL GOSSAGE BOARD MEMBER	0.00	X						0	0	0
(6) BILL LEE BOARD MEMBER	0.00	X						0	0	0
(7) BRIAN KEMP BOARD MEMBER	0.00	X						0	0	0
(8) CHAD CALDWELL BOARD MEMBER	0.00	X						0	0	0
(9) CYNTHIA HEDGE-MORRELL BOARD MEMBER	0.00	X						0	0	0
(10) DARRYL M SCOTT BOARD MEMBER	0.00	X						0	0	0
(11) DAVID MCFADDEN BOARD MEMBER	0.00	X						0	0	0
(12) DAVID P SOKOLA BOARD MEMBER	0.00	X						0	0	0
(13) EDDIE SMITH BOARD MEMBER	0.00	X						0	0	0
(14) ELEASE FREDERICK BOARD MEMBER	0.00	X						0	0	0
(15) ERIC MACKEY BOARD MEMBER	0.00	X						0	0	0
(16) FRAN MILLAR BOARD MEMBER	0.00	X						0	0	0
(17) FRANCIS C THOMPSON BOARD MEMBER	0.00	X						0	0	0

Part VII

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GAIL H BATES BOARD MEMBER	0.00	X						0	0	0
(19) GLEN D JOHNSON VICE CHAIR	0.00	X		X				0	0	0
(20) GLENDA R SCALES BOARD MEMBER	0.00	X						0	0	0
(21) GRAIG R MEYER BOARD MEMBER	0.00	X						0	0	0
(22) GREG ABBOTT BOARD MEMBER	0.00	X						0	0	0
(23) HARRISON KELLER BOARD MEMBER	0.00	X						0	0	0
(24) HENRY MCMASTER BOARD MEMBER	0.00	X						0	0	0
(25) JAMES D FIELDER BOARD MEMBER	0.00	X						0	0	0
(26) JANET D HOWELL BOARD MEMBER	0.00	X						0	0	0
(27) JENNIFER MONIES BOARD MEMBER	0.00	X						0	0	0
(28) JIM JUSTICE BOARD MEMBER	0.00	X						0	0	0
(29) JOE H PICKENS BOARD MEMBER	0.00	X						0	0	0
(30) JOHN BAM CARNEY BOARD CHAIR	0.00	X						0	0	0
(31) JOHN BEL EDWARDS BOARD MEMBER	0.00	X						0	0	0
(32) JOHN C CARNEY JR BOARD MEMBER	0.00	X						0	0	0
(33) JOHN C WHITE BOARD MEMBER	0.00	X						0	0	0
(34) JOHN D JACK BAILEY BOARD MEMBER	0.00	X						0	0	0
(35) JOYCE ELLIOTT BOARD MEMBER	0.00	X						0	0	0
(36) KARIN HOFFMAN BOARD MEMBER	0.00	X						0	0	0
(37) KAY IVEY BOARD MEMBER	0.00	X						0	0	0
(38) KEVIN STITT BOARD MEMBER	0.00	X						0	0	0
(39) L ANTHONY WISE BOARD MEMBER	0.00	X						0	0	0
(40) LARRY HOGAN BOARD MEMBER	0.00	X						0	0	0
(41) LARRY TAYLOR BOARD MEMBER	0.00	X						0	0	0
(42) LAURA ARNOLD BOARD MEMBER	0.00	X						0	0	0
(43) LEANNA BLEVINS BOARD MEMBER	0.00	X						0	0	0

(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(44) LORI GRIFFIN BOARD MEMBER	0.00	X						0	0	0
(45) MARK DIXON BOARD MEMBER	0.00	X						0	0	0
(46) MARK WHITE BOARD MEMBER	0.00	X						0	0	0
(47) MATT ARTHUR BOARD MEMBER	0.00	X						0	0	0
(48) MELANIE BARTON BOARD MEMBER	0.00	X						0	0	0
(49) MIKE MORATH BOARD MEMBER	0.00	X						0	0	0
(50) MIMMO PARISI BOARD MEMBER	0.00	X						0	0	0
(51) MOLLY SPEARMAN BOARD MEMBER	0.00	X						0	0	0
(52) MONTY SULLIVAN BOARD MEMBER	0.00	X						0	0	0
(53) NANCY TATE BOARD MEMBER	0.00	X						0	0	0
(54) NIKKI G SETZLER BOARD MEMBER	0.00	X						0	0	0
(55) PAT ROSS BOARD MEMBER	0.00	X						0	0	0
(56) PEDRO MARTINEZ BOARD MEMBER	0.00	X						0	0	0
(57) R EDWARD EDD HOUCK BOARD MEMBER	0.00	X						0	0	0
(58) RALPH NORTHAM BOARD MEMBER	0.00	X						0	0	0
(59) RENE PLASENCIA BOARD MEMBER	0.00	X						0	0	0
(60) RITA ALLISON BOARD MEMBER	0.00	X						0	0	0
(61) ROBERT H PLYMALE TREASURER	0.00	X		X				0	0	0
(62) ROBERT W RESCIGNO BOARD MEMBER	0.00	X						0	0	0
(63) ROMAN W PREZIOSO JR BOARD MEMBER	0.00	X						0	0	0
(64) RON DESANTIS BOARD MEMBER	0.00	X						0	0	0
(65) ROY COOPER BOARD MEMBER	0.00	X						0	0	0
(66) SARAH ARMSTRONG TUCKER BOARD MEMBER	0.00	X						0	0	0
(67) SHIRLEY PRINCE BOARD MEMBER	0.00	X						0	0	0
(68) SUSAN S BUNTING BOARD MEMBER	0.00	X						0	0	0
(69) T PATTERSON MANEY BOARD MEMBER	0.00	X						0	0	0
(70) TAMARA BARRINGER BOARD MEMBER	0.00	X						0	0	0
(71) TATE REEVES BOARD MEMBER	0.00	X						0	0	0

(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(72) TERESA INMAN BOARD MEMBER	0.00	X						0	0	0
(73) TERRI COLLINS BOARD MEMBER	0.00	X						0	0	0
(74) TERRY C BURTON BOARD MEMBER	0.00	X						0	0	0
(75) TERRY ENGLAND BOARD MEMBER	0.00	X						0	0	0
(76) THOMAS W CAMPBELL BOARD MEMBER	0.00	X						0	0	0
(77) TOM FRIEDEMANN BOARD MEMBER	0.00	X						0	0	0
(78) VIDET CARMICHAEL BOARD MEMBER	0.00	X						0	0	0
(79) BARBARA CHANNELL CFO	36.25			X				122,335	0	19,487
(80) BETH DAY VP-COMMUNICATIONS	36.25			X				107,689	0	24,466
(81) CHERYL BLANCO VP-POST-SECONDARY EDUCATION	32.00			X				100,000	0	9,500
(82) HARRY D WINKLER SENIOR VICE PRESIDENT	36.25			X				155,775	0	20,917
(83) JOHN MICHAEL LEE JR VP - DEVELOPMENT AND POLICY RESEARCH	36.25			X				37,652	0	4,908
(84) LAUREN BAUS HR DIRECTOR	36.25			X				94,104	0	19,991
(85) LEE POSEY VP-STATE SERVICES	36.25			X				123,012	0	22,564
(86) STEPHEN PRUITT PRESIDENT	36.25			X				278,438	0	43,236
(87) STEVIE L LAWRENCE II VP-POSTSECONDARY EDUCATION	36.25			X				33,889	0	1,044
(88) AIMEE WYATT DIRECTOR, STATE & DISTRICT PARTNERSHIPS	36.25					X		133,776	0	13,813
(89) JAMES SILER DIRECTOR, STATEWIDE INITIA	36.25					X		140,951	0	14,521
(90) MARY ALLYSON MORGAN DIRECTOR, STATE & DISTRICT PARTNERSHIPS	36.25					X		130,650	0	13,504
(91) ROBERT SCOTT WARREN DIRECTOR, STATE INITIATIVE	36.25					X		158,891	0	16,300
(92) STEVE K BROOME DIRECTOR, STATE DEVELOPMEN	36.25					X		170,850	0	22,530
1b Sub-Total ➤										
c Total from continuation sheets to Part VII, Section A ➤										
d Total (add lines 1b and 1c) ➤								1,788,012	0	246,781

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 ➤ **15**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
SCHOOL IMPROVEMENT LEADER EMERITUS INC 320 LAKESIDE TRACE CANTON, GA 30115	CONSULTING	114,286
LESLIE TEXAS CONSULTING LLC 2430 TRADITION CIRCLE LOUISVILLE, KY 40245	CONSULTING	112,500

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 ▶ 2

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 Other Similar Amounts

1a	Federated campaigns . . .	1a		
b	Membership dues . . .	1b		
c	Fundraising events . . .	1c		
d	Related organizations	1d		
e	Government grants (contributions)	1e		
f	All other contributions, gifts, grants, and similar amounts not included above	1f	211,660	
g	Noncash contributions included in lines 1a - 1f:\$	1g		
h Total. Add lines 1a-1f			211,660	

Program Service Revenue

2a	CONTRACT REVENUE	Business Code				
		900099	10,927,336	10,927,336		
b	APPROPRIATIONS BY STATES	900099	3,333,047	3,333,047		
c	REGISTRATION FEES	900099	2,072,145	2,072,145		
d	MEMBERSHIP DUES	900099	390,195	390,195		
e	ASSESSMENTS	900099	90,658	90,658		
			26,290	26,290		
f	All other program service revenue.					
9	Total. Add lines 2a-2f.		16,839,671			

Other Revenue

3	Investment income (including dividends, interest, and other similar amounts)		688,980			688,980
4	Income from investment of tax-exempt bond proceeds					
5	Royalties					
6a	Gross rents	(i) Real	(ii) Personal			
b	Less: rental expenses					
c	Rental income or (loss)					
d	Net rental income or (loss)					
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		2,569,463				
b	Less: cost or other basis and sales expenses	2,533,839	19,095			
c	Gain or (loss)	35,624	-19,095			
d	Net gain or (loss)		16,529			16,529
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					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions		17,756,840	16,839,671	0	705,509

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	146,584	146,584		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,331,097	272,208	1,058,889	
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	9,567,699	8,253,560	1,314,139	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	826,069	691,931	134,138	
9 Other employee benefits	557,775	482,196	75,579	
10 Payroll taxes	773,378	586,439	186,939	
11 Fees for services (non-employees):				
a Management				
b Legal	19,942	19,942		
c Accounting	54,675	54,675		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	53,661		53,661	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,462,206	1,016,000	446,206	
12 Advertising and promotion				
13 Office expenses	95,946	74,357	21,589	
14 Information technology	285,776	164,872	120,904	
15 Royalties				
16 Occupancy	342,645	197,657	144,988	
17 Travel	1,639,649	1,639,649		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,294,597	2,034,043	260,554	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	93,827		93,827	
23 Insurance	76,903	76,903		
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 OTHER ADMIN EXPENSES	185,294		185,294	
b DUES AND SUBSCRIPTIONS	134,578	134,578		
c TUITION/STAFF DEVELOPME	45,108	45,108		
d F&E EXPENSE FOR PROGRAM	260	260		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	19,987,669	15,890,962	4,096,707	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance 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		3,254,421	1	3,902,907	
	2	Savings and temporary cash investments		15,437,020	2	17,249,632	
	3	Pledges and grants receivable, net		1,814,160	3	1,240,958	
	4	Accounts receivable, net			4		
	5	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			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		778,055	9	591,611	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,466,452			
	b	Less: accumulated depreciation	10b	2,678,246	901,129	10c	788,206
	11	Investments—publicly traded securities		14,708,521	11	13,009,727	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 34)		36,893,306	16	36,783,041		
Liabilities	17	Accounts payable and accrued expenses		2,504,982	17	5,057,322	
	18	Grants payable		2,210,901	18	2,705,354	
	19	Deferred revenue		4,239,153	19	3,008,277	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			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			25		
	26	Total liabilities. Add lines 17 through 25		8,955,036	26	10,770,953	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		5,702,068	27	6,108,443	
	28	Net assets with donor restrictions		22,236,202	28	19,903,645	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		27,938,270	32	26,012,088	
	33	Total liabilities and net assets/fund balances		36,893,306	33	36,783,041	

Part XI

Reconciliation 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	17,756,840
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,987,669
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,230,829
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	27,938,270
5	Net unrealized gains (losses) on investments	5	304,647
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	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (A))	10	26,012,088

Part XII

Financial Statements and Reporting

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

- 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 in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☒ 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?
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?
- 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.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

2019
Open to Public Inspection

Department of the Treasury

Internal Revenue Service
Name of the organization
BOARD OF CONTROL FOR SOUTHERN
REGIONAL EDUCATION

Employer identification number
58-0566141

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 or 990-EZ).)
- 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 33⅓% 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 33⅓% 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 in 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
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						
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) . . .						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.) . .						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions)12

13 First five 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 2019 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	

16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	3,863,629	3,735,205	3,687,814	3,927,665	4,025,560	19,239,873
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	27,695,676	29,266,729	23,199,208	20,091,387	13,025,771	113,278,771
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	31,559,305	33,001,934	26,887,022	24,019,052	17,051,331	132,518,644
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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.	16,644,809	18,451,867	13,440,598	9,789,920	4,533,178	62,860,372
c Add lines 7a and 7b. .	16,644,809	18,451,867	13,440,598	9,789,920	4,533,178	62,860,372
8 Public support. (Subtract line 7c from line 6.)						69,658,272

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .	31,559,305	33,001,934	26,887,022	24,019,052	17,051,331	132,518,644
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .	325,247	432,967	502,553	771,732	688,980	2,721,479
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.	325,247	432,967	502,553	771,732	688,980	2,721,479
11 Net income from unrelated business activities not included in 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.). .	31,884,552	33,434,901	27,389,575	24,790,784	17,740,311	135,240,123
14 First five 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. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	51.510 %
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	50.090 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	2.010 %
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	1.670 %

19a 33 1/3% support tests—2019. 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—2018. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 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.		
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).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If “Yes,” answer (b) and (c) below.		
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.		
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.		
4a Was any supported organization not organized in the United States (“foreign supported organization”)? If “Yes” and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
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.		
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.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If “Yes,” answer (b) and (c) 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).		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization’s control?		
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 .		
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 or 990-EZ) .		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).		
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 .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If “Yes,” provide detail in Part VI .		
c Did a disqualified person (as defined in 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 .		
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.		
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).		

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 in (b) and (c) below, the governing body of a supported organization?		
	11a		
b	A family member of a person described in (a) above?		
	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
	11c		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the 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? <i>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.</i>		
	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? <i>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.</i>		
	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)? <i>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).</i>		
	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2		
3	By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	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	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)			
2	Activities Test. Answer (a) and (b) below.			
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? <i>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.</i>			
	2a			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>			
	2b			
3	Parent of Supported Organizations. Answer (a) and (b) 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? <i>Provide details in Part VI.</i>			
	3a			
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
	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 1-1/2% 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 .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		
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3 Administrative expenses paid to accomplish exempt purposes of supported organizations		
4 Amounts paid to acquire exempt-use assets		
5 Qualified set-aside amounts (prior IRS approval required)		
6 Other distributions (describe in Part VI). See instructions		
7 Total annual distributions. Add lines 1 through 6.		
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions		
9 Distributable amount for 2019 from Section C, line 6		
10 Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D

(Form 990)

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

2019

Open to Public Inspection

Name of the organization

BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Employer identification number

58-0566141

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

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

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 SFAS 116 (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 SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i)

Revenue included on Form 990, Part VIII, line 1

► \$

(ii)

Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat. No. 52283D

Schedule D (Form 990) 2019

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

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

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

☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	25,154	25,143	25,133	25,122	25,112
b Contributions					
c Net investment earnings, gains, and losses	10	11	10	11	10
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	25,164	25,154	25,143	25,133	25,122

2

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

a

Board designated or quasi-endowment ▶ 16.510 %

b

Permanent endowment ▶ 83.490 %

c

Temporarily restricted endowment ▶

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

3a

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

(i) unrelated organizations

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		No
3a(ii)		No
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		1,625,000	1,105,000	520,000
c Leasehold improvements		1,043,987	816,907	227,080
d Equipment		797,465	756,339	41,126
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				788,206

Schedule D (Form 990) 2019

Part VII

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

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
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
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
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
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.

(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.)	
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 <input type="checkbox"/>	

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	18,026,921
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	304,647
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	304,647
3	Subtract line 2e from line 1	3	17,722,274
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	53,661
b	Other (Describe in Part XIII.)	4b	-19,095
c	Add lines 4a and 4b	4c	34,566
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	17,756,840

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	19,953,103
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	19,095
e	Add lines 2a through 2d	2e	19,095
3	Subtract line 2e from line 1	3	19,934,008
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	53,661
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	53,661
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	19,987,669

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 V, LINE 4:	THE INCOME EARNED FROM THE ENDOWMENT FUNDS ARE USED TO AWARD OUTSTANDING EDUCATORS IN THE SREB MEMBER STATES.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	LOSS ON DISPOSAL OF EQUIPMENT -19,095.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	LOSS ON DISPOSAL OF EQUIPMENT 19,095.

Additional Data

Return to Form

Software ID:

Software Version:

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

2019

Open to Public Inspection

Name of the organization
BOARD OF CONTROL FOR SOUTHERN
REGIONAL EDUCATION

Employer identification number
58-0566141

Part I Questions Regarding Compensation

	Yes	No
1a		
<div>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</div> <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</div></div>		
1b		
<div>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</div>		
2		
<div>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?</div>		
3		
<div>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.</div> <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4		
<div>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:</div> <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		
4a		No
4b		No
4c		No
<div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div>		
5		
<div>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:</div> <div><div>a The organization?</div><div>b Any related organization?</div></div> <div>If "Yes," on line 5a or 5b, describe in Part III.</div>		
5a		No
5b		No
6		
<div>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:</div> <div><div>a The organization?</div><div>b Any related organization?</div></div> <div>If "Yes," on line 6a or 6b, describe in Part III.</div>		
6a		No
6b		No
7		No
<div>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.</div>		
8		No
<div>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</div>		
9		
<div>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>		

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 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1HARRY D WINKLER SENIOR VICE PRESIDENT	(i)	155,775	0	0	14,930	5,987	176,692	0
	(ii)	0	0	0	0	0	0	0
2STEPHEN PRUITT PRESIDENT	(i)	278,438	0	0	27,033	16,203	321,674	0
	(ii)	0	0	0	0	0	0	0
3JAMES SILER DIRECTOR, STATEWIDE INITIA	(i)	140,951	0	0	13,466	1,055	155,472	0
	(ii)	0	0	0	0	0	0	0
4ROBERT SCOTT WARREN DIRECTOR, STATE INITIATIVE	(i)	158,891	0	0	15,237	1,063	175,191	0
	(ii)	0	0	0	0	0	0	0
5STEVE K BROOME DIRECTOR, STATE DEVELOPMEN	(i)	170,850	0	0	16,418	6,112	193,380	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
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Additional Data

Return to Form

Software ID:
Software Version:

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Board of the Organization
BOARD OF CONTROL FOR SOUTHERN
REGIONAL EDUCATION

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
2019
Open to Public Inspection

Name of the organization

Employer identification number

58-0566141

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE GOVERNING BOARD OF THE SOUTHERN REGIONAL EDUCATION BOARD IS MADE UP OF 80 INDEPENDENT MEMBERS. TO EXPEDITE DECISION-MAKING, THE BOARD HAS ASSIGNED AUTHORITY TO AN EXECUTIVE COMMITTEE COMPOSED OF 18-20 MEMBERS, ALL OF WHOM ARE GOVERNING BOARD MEMBERS, TO ACT FULLY ON ITS BEHALF DURING THE FISCAL YEAR. THE FULL BOARD DOES, HOWEVER, MEETING ANNUALLY AND IS RESPONSIBLE FOR COMPLIANCE WITH ALL SREB POLICIES.
FORM 990, PART VI, SECTION A, LINE 6	THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION WAS CREATED IN 1948 AS AN INTERSTATE COMPACT COMPRISED OF MEMBER STATES. CURRENTLY THERE ARE SIXTEEN STATES WHOSE GOVERNORS SERVE AS MEMBERS OF THE GOVERNING BOARD. EACH GOVERNOR APPOINTS FOUR ADDITIONAL MEMBERS OF THE GOVERNING BOARD. ALL BOARD MEMBERS HAVE EQUAL VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A	GOVERNORS OF EACH MEMBER STATE APPOINT FOUR MEMBERS OF THE GOVERNING BOARD. THE GOVERNORS AND THEIR APPOINTEES HAVE EQUAL VOTING RIGHTS.
FORM 990, PART VI, SECTION B, LINE 11B	THE CFO REVIEWS THE FORM 990- ANY ISSUES ARE DISCUSSED AND RESOLVED WITH APPROPRIATE PERSONNEL. ONCE ALL ISSUES ARE RESOLVED, A COPY OF THE 990 IS PROVIDED TO THE EXECUTIVE COMMITTEE WHO ARE EMPOWERED TO ACT ON BEHALF OF THE ENTIRE BOARD. THE EXECUTIVE COMMITTEE MAY DIRECT ANY QUESTIONS/ISSUES TO THE PRESIDENT/CFO FOR RESOLUTION. ONCE THE EXECUTIVE COMMITTEE APPROVES THE 990, A COPY OF THE FINAL TAX FORM IS SENT TO ALL BOARD MEMBERS BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE PROVIDED COPIES OF THE CONFLICT OF INTEREST POLICY AND A DISCLOSURE QUESTIONNAIRE WHICH THEY COMPLETE AND SIGN, INDICATING THAT THEY HAVE READ AND UNDERSTAND THE POLICY AND THAT THEIR ANSWERS ARE COMPLETE AND ACCURATE. QUESTIONNAIRES ARE COMPLETED AND SUBMITTED ANNUALLY; HOWEVER, SREB REQUIRES DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST ON A CONTINUOUS BASIS. THE BOARD/EXECUTIVE COMMITTEE DECIDES IF A CONFLICT OF INTEREST EXISTS AND, IF SO, APPOINTS A DISINTERESTED PERSON/COMMITTEE TO INVESTIGATE ALTERNATIVES. THE BOARD DETERMINES APPROPRIATE DISCIPLINARY/CORRECTIVE ACTION FOR ANY VIOLATIONS OF THE POLICY. A WHISTLEBLOWER POLICY PROVIDES A MECHANISM FOR REPORTING OF ANY SUSPECTED VIOLATIONS.
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION OF THE PRESIDENT. THE EXECUTIVE COMMITTEE, ACTING ON BEHALF OF THE BOARD, REVIEWS COMPENSATION BENCHMARKING ANALYSES (INCLUDING GOVERNMENT, EDUCATION TESTING, COMPETITIVE NONPROFITS AND OTHER LIKE ORGANIZATIONS) FOR SIMILAR POSITIONS AND MAKES RECOMMENDATIONS AS APPROPRIATE, ENSURING THEY ARE WELL JUSTIFIED, REASONABLE AND DOCUMENTED. THE PRESIDENT HAS NOT RECEIVED A PAY RAISE SINCE 2005. COMPENSATION FOR EXECUTIVE STAFF/KEY EMPLOYEES IS DETERMINED BY THE EXECUTIVE COMMITTEE BASED ON AN ANNUAL PERFORMANCE REVIEW AND RECOMMENDATIONS BY THE PRESIDENT, INCLUDING ATTAINMENT OF PERFORMANCE GOALS AND EXPECTATIONS. LAST DATE OF PAY RAISES ARE: SENIOR VP (2016); VP FOR POST-SECONDARY EDUCATION (2016); VP FOR EDUCATIONAL POLICIES (9/2017); VP FOR EDUCATOR EFFECTIVENESS (2016); CFO (9/2017); VP FOR STATE SERVICES (3/2017); DIRECTOR OF HUMAN RESOURCES (9/2017); VP OF COMMUNICATIONS (9/2017).
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE AVAILABLE ON AN AS REQUESTED BASIS.

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