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Form . 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2009

Open to Public Inspection

613 17

				04/01	/00	0.3	/21/1	^	- 		,
<u>A</u>		Diversi	ear, or tax year beginning	04/01			/31/1	<u> </u>	, .		
	Check if applica	use IRS	T		he Eastern	star, (Franc		` 	Emplo	yer identification number
	Address chang	e label or		apter or	Georgia	<u> </u>					0074540
	Name change	print or	Doing Business As				 1				0374542
	Initial return	type. See	Number and street (or P O box ii		red to street address)			Room/su	ite E		one number
\Box	Termination	Specific	P. O. Box 5820				1		—— —		-475-8448
$\overline{}$		Instruc-	City or town, state or count	ry, and ZIP + 4	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				G	Gross recei	pts \$ 2,243,26
Ц	Amended return		Alpharetta		GA 30023	-5820					
	Application per	nding F Nam	e and address of principal office	r					"		a group return for
									l H	affiliate (b) Are all	affiliates -
										ınclude	
_) (O) 4(If "No,"	attach a list (see instructions)
<u> </u>	Tax-exempt		501(c) (8) ∢ (inse		4947(a)(1) or	527					100
	Website: ▶		georgiaoes.org						4.0		exemption number > 129
77171	Type of organi		rporation Trust X Associ	ation Othe	er 🚩			ear of form	nation 19	01	M State of legal domicile G
	1	Summa									
	1	-	he organization's mission or	•			0				
9	S	tate or	ganization for C	narıtabı	e and Membe	rsnıp	Suppor	t.			
Jan											
& Governance			<u>_</u>								
Š	2 Che	ck this box	If the organization dis-	continued its	operations or dispos	sed of more	e than 25%	of its ne	et assets		
∞ ಶ	3 Num	nber of voting	members of the governing	body (Part V	l, line 1a)					3	705
es B	4 Num	nber of indep	endent voting members of the	he governing	body (Part VI, line 1	b)				4	705
Ϋ́	5 Tota	al number of	employees (Part V, line 2a)							5	7
Activities	6 Tota	al number of	volunteers (estimate if neces	ssary)						6	
٩			lated business revenue from		lumn (C), line 12					7a	
		-	siness taxable income from							7b	
			FCFIVED				[Prior Year		Current Year
	8 Con	tributio ns an	d grants (Part VIII, Tine 1)				L		130	714	103,905
Ž	9 Prog	gram service	revenue (Part VIII, line 39)						58,	616	51,151
Revenue	10 Inve	strien incon	ne (Part VIII Peolemn (A) in	es 3, 4, and 7	' d)		Ī		100		85,540
œ	11 Othe	er revenue (F	Part VIII, column (A), Intes 5,	6d, 8c, 9c, 1	0c, and 11e)		Ī		4	910	-6,613
			add lines & through 11 (mos			12)	Ì		294		233,983
	13 Gran	nts and simili	ar-amounts-pard-(Part IX, co	lumn (A), line	s 1–3)					050	8,190
	ľ		or for members (Part IX, colu		•		Ī			800	70,400
-	1	· · ·	ompensation, employee ben		-	–10)	Ī			930	35,580
enses			draising fees (Part IX, colum			,	İ				30/300
듄			expenses (Part IX, column				Ì				
Ĕ	1		(Part IX, column (A), lines 1				Ī		109	051	111,845
	I	•	Add lines 13-17 (must equa	•	•		f		217		226,015
		•	, ,	,	inin (A), iine 25)		ŀ			028	7,968
- S	19 1/64	enue less ex	penses Subtract line 18 from	111 IIIIE_1Z				Beginni	ng of Current		End of Year
ets	20 Tota	al assets (Par	rt X. line 16)				Ī		2,612,		2,620,502
Ass	21 Tota	•	art X, line 26)				Ī			162	1,043
Net Assets or Fund Balances	22 Net	•	nd balances Subtract line 21	from line 20			ŀ		2,611,		2,619,459
	art II		re Block		· · · · · · · · · · · · · · · · · · ·						
	<u></u>		ties of perjury, I declare that I ha	ve evamined th	ne return uncluding acc	ompanying (echodulos an	d stateme	ante and to	the best of	my knowledge
			is true, correct, and complete [
Sig	ın İ	(La Constitution	()						1.0	-10-10
He			to current								770 , -
пе			re of officer Cullifer				Grand	Т~о	201120	Date -	
							Grand	IIe	asure	<u>r</u>	
_		r ⊤ iype or	r print name and title	-		т		1			Departs double as a section
Pai	id	Preparer's	241	cono.	cl 1	ا ، م .	Date	. 1	Check if self-	<u></u>	Preparer's identifying number (see instructions)
,	parer's	signature	Delenda		Elrath,	CYA	8/10	اه//	employed	<u>▶</u> ∐	<u> </u>
>	•	Firm's name			ath & Comp		LLC	1		EIN ►	58-236822
. US()	e Only	f self-emplo	* A 1120F	Elkins	Road, Sui	te F-	1A			Phone	
)		address, and	• •	1, GA	30076				_ [770-664-363
May	the IRS di	scuss this re	turn with the preparer show	n above? (se	e instructions)						X Yes N
For	Privacy A	ct and Pape	rwork Reduction Act Notic	ce, see the s	eparate instruction	ıs.			/ 15	7 \	
DAA									(1)	, i	

_Pa	ert IV - Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	1	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
•	Schedule C, Part II	4		
_				
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	5		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	3		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			x
_	complete Schedule D, Part I	6	-	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		1	v
_	complete Schedule D, Part III	_ 8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			77
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			v
	quasi-endowments? If "Yes," complete Schedule D, Part V	_10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			x
	VII, VIII, IX, or X as applicable	11		
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		ı	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
46	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		I	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	,,		х
	Schedule D, Parts XI, XII, and XIII	12		
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
40		4.	Ī	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	44.		v
45	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		x
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Λ.
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	امد		x
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	ا جد		x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		v
20	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

Part IV Checklist of Required Schedules (continued)

		[Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		·	
	in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than]	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	.		37
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	-	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С		ایرا		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25.		
.	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Ь	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	255		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	.		
	If "Yes," complete Schedule L, Part III	27		X
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)		ŧ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a		- 1	
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1		
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		- 1	v
22	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		
34	III, IV, and V, line 1	24		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	+	
JJ	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33		
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			- -
-	19? Note . All Form 990 filers are required to complete Schedule O	38		X
			200	

	11 V , Statements Regarding Other INS Fillings and Tax Compliance				_	
				F	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		0			
L	U.S. Information Returns Enter -0- if not applicable	1a 1b	0	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and report			-		
С	gaming (gambling) winnings to prize winners?	lable		40	x	İ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		1c	^	
2a	Statements, filed for the calendar year ending with or within the year covered by this return	2a	7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	x	-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	v				
	this return?	,		3a	1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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 auti	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial					
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ık				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?		5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regards	ng				
	Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1		
	organization solicit any contributions that were not tax deductible?			6a		<u> </u>
þ	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).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	ds		_	1	
	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7.		
d	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7a		7c		
6	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers					
٠	benefit contract?	oriai		7e	1	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	,		7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	i				
	required?			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8_	l I	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter					
а	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					
а	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 10	1 1		12a	1	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>		. aan	<u> </u>
						(0000)

Form 990 (2009) Order of the Eastern Star, Grand 58-0374542 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 705 Enter the number of voting members of the governing body 705 b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 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 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X X Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b ts 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X Does the organization have local chapters, branches, or affiliates? 10a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, X affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 14 Does the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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? X 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure GA 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Own website | Another's website | X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19

policy, and financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the

P. O. Box 5820

20

Form 990 (2009)

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

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

K Check this box if the organization did not compensate any current officer, director, or trustee (A) (B) (C) (D) (E) (F) Name and Title Average Position (check all that apply) Reportable Reportable Estimated hours per compensation compensation amount of Individual to or director Highest compensated employee Institutional week from from related other the organizations compensation employee (W-2/1099-MISC) organization from the (W-2/1099-MISC) l trustee organization trustee and related organizations Annelle W. Hammond 5.00 X 0 0 Worthy G. Matron 0 Steve Kirk 5.00 0 Worthy G. Patron X 0 0 Beverly Klenke 0 5.00 X 0 Assoc. G. Matron 0 Earnest Green X 0 0 5.00 Assoc. G. Patron 0 George M. Looney 40.00 0 0 Grand Sec. X 0 J. Montine Mize 0 40.00 X 0 Former Grand Sec. 0 Jo Cullifer 0 0 Grand Treas. 15.00 X 0 Mary Jo Quinn 0 15.00 X 0 Former Grand Treas. 0 Lynn Marie Jones 5.00 0 0 Grand Cond. X 0 Jeannine B. Ganotle Assoc. G.C. 5.00 X 0 0 0 Sara L. Crow 5.00 X 0 0 Grd. Chapln. 0 June Mathews 5.00 X 0 0 Grd. Lecture 0 Becky Scott X 0 5.00 0 Grd. Marshal 0 K. Sue Winn 0 5.00 X 0 0 Grd. Organ. Elaine Wallace 0 Grd. Adah 5.00 X 0 0 Ossie G. Parrott Grd. Ruth 5.00 0 X 0 0 Joyce A. Royal 5.00 0 0 Grand Esther

	services rendered to the organization? If Tes, complete Schedule 31	or such person	
Sec	tion B. Independent Contractors		
1	Complete this table for your five highest compensated independent co compensation from the organization	entractors that received more than \$100,000 of	
	(A) Name and business address	(B) Description of services	(C) Compensation
		-	
2	Total number of independent contractors (including but not limited to the	nose listed above) who received	
DAA	more than \$100,000 in compensation from the organization ▶		Form 990 (2009)

Pa	rt V	III Statement of Reve	nue						
	•					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(0.40	4-	Fodorated composition	4-	<u> </u>			revenue		512, 513, or 514
ants	1a	Federated campaigns	1a			1			
ge	D	Membership dues	1b	<u> </u>		1			
ifts, r ai	C	Fundraising events	1c			1			
n.e	a	Related organizations	1d			1			
Sir	• •	Government grants (contributions)	1e			1			
Contributions, gifts, grants and other similar amounts	T	All other contributions, gifts, grants, and similar amounts not included above	 1f		103,905	1			
護	_			\$ \$	103,303	1			
ac	9	Noncash contributions included in lines 1a- Total. Add lines 1a-1f	11	Φ		103,905			
-	11	Total. Add lines Ta-11			Buan Cada	103,903			
Program Service Revenue	20	Duna 6 3			Busn. Code	36,015	36,015		
ě	2a b					9,746	9,746		
9			sessi	ment		4,510	4,510	·	
Ž.	c d	Grand Session Fees				880	880		
пŠ	ū	Paraphernalia & Proc	ceear	ngs		880			****
grar	£	All other program conver reverse							***
P.		All other program service rever Total. Add lines 2a–2f	iue			51,151			
	<u>g</u> 3	Investment income (including d	nudona	de untoron		31,131			
	3	other similar amounts)	ividend	is, interes	ı, anu	95,034	1		95,034
	4	Income from investment of tax-	ovomn	t bond or	Socodo	95,054			95,034
	5	Royalties	exemp	it bond pri	ceeus				
	3	(i) Real		(n) F	Personal				
	6a	Gross Rents		(1.)	CIBONIA	Ī			
		Less rental exps				1			
	C	_				Į.			
	d	Net rental income or (loss)		L	•	Ť		;	
		Gross amount from (i) Securities		(n)	Other				
		sales of assets other than inventory 1,979		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	1			
	h	Less cost or other							
	_	basis & sales exps 1,988	498						
-	С		494						
		Net gain or (loss)		·	•	-9,494	-4,908		-4,586
		Gross income from fundraising ever	ıts						-74-4
enι		(not including \$	-	i	İ				
Other Reven		of contributions reported on line 1c)							
8		See Part IV, line 18	а		l				
the	ь	Less direct expenses	b						
0		Net income or (loss) from fundr	aising	events	•	Ţ]	·	
		Gross income from gaming activities	- 1						
		See Part IV, line 19	а			1			
	b	Less direct expenses	b						
	С	Net income or (loss) from gamil	ng acti	vities	•		T		
	10a	Gross sales of inventory, less							
		returns and allowances	а		13,844				
	b	Less cost of goods sold	b		20,779				
į	C	Net income or (loss) from sales	of inv	entory	•	-6,935			-6,935
		Miscellaneous Revenue			Busn. Code				
	11a	Miscellaneous Income				322			322
	b								
	c								
	d	All other revenue							
	е	Total. Add lines 11a-11d			▶	322			
	12	Total Revenue. See instruction	ıs		•	233,983	46,243	0	83,835

Part IX Statement of Functional Expenses

Form 990 (2009)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

_	All other organizations must o	(A)	re not required to comple (B)	(C))). , (D)
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	8,190	8,190		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	70,400	70,400		
5	Compensation of current officers, directors,	·			
	trustees, and key employees	21,184		21,184	
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	11,250	11,250		
8	Pension plan contributions (include section 401(k)			· -	
•	and section 403(b) employer contributions)	•			
9	Other employee benefits				
10	Payroll taxes	3,146	1,525	1,621	
11	Fees for services (non-employees)	-,-10		= , -==	
a	Management				
a b	Legal				
c	Accounting	7,750		7,750	
d	-	.,,		,,,,,,,	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	11,246	· · · · · · · · · · · · · · · · · · ·	11,246	
	Other	22/210		11,210	
g 12	Advertising and promotion				
13	Office expenses	25,398	25,398		
	Information technology	192	192	· · · · · · - · · · · · · · · · · · · ·	
14	~~ <u>~</u>	152	132		
15	Royalties	20,084	20,084		
16	Occupancy	2,300	2,300		
17	Travel	2,300	2,300		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	16,260	16,260		
19	Conferences, conventions, and meetings	10,200	10,200		
20	Interest	12,073	12,073		
21	Payments to affiliates	12,073	12,013		
22	Depreciation, depletion, and amortization	750	750		
23	Insurance	/50	/50		
		1			
24	Other expenses Itemize expenses not	1		‡	
	covered above (Expenses grouped together	1		1	
	and labeled miscellaneous may not exceed	1			
	5% of total expenses shown on line 25 below)				
а	Benevolent. Proj.	7,910	7,910		
b	Project Supplies	5,015	5,015		
C	Grd. Matron & Patron Jwl.	2,750	2,750		
d	Miscellaneous Expenses	117	117		
е					<u>.</u>
f	All other expenses				
25	Total functional expenses.Add lines 1 through 24f	226,015	184,214	41,801	
26					
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				
DAA					Form 990 (2009

			(A) Beginning of year		(B) End of year
-T-	Oak and alexanders		4,000		
1	Cash—non-interest bearing		177,810	1 2	2,824 224,109
2	Savings and temporary cash investments		177,810		224,103
3	Pledges and grants receivable, net			3	_
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors, tr				
	employees, and highest compensated employees. Compl	ete Part II of	1	ا ۔	
	Schedule L	1 1		5	
6	Receivables from other disqualified persons (as defined u			1	
	4958(f)(1)) and persons described in section 4958(c)(3)(E	3) Complete	i i	_	
<u>ဖ</u> ြ	Part II of Schedule L			6	
1 8	Notes and loans receivable, net			7	
Assets 8 8	Inventories for sale or use			8	
` 9	Prepaid expenses and deferred charges	1 1		9	
10a	Land, buildings, and equipment cost or			1	
	other basis Complete Part VI of Schedule D	10a	 -	#	
	Less accumulated depreciation	10b	0 400 551	10c	0 000 560
11	Investments—publicly traded securities		2,430,771	11	2,393,569
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		0.610.501	15	0 600 500
16	Total assets. Add lines 1 through 15 (must equal line 34)		2,612,581	16	2,620,502
17	Accounts payable and accrued expenses		1,162	17	1,043
18	Grants payable			18	
19	Deferred revenue			19	-
20	Tax-exempt bond liabilities			20	
Liabilities 22	Escrow or custodial account liability Complete Part IV of			21	
≣ 22	Payables to current and former officers, directors, trustees			1	
ස	employees, highest compensated employees, and disqua	lified	•	ı	
=	persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third			23	
24	Unsecured notes and loans payable to unrelated third par	ties		24	
25	Other liabilities Complete Part X of Schedule D		1 1 60	25	
26	Total liabilities. Add lines 17 through 25	1	1,162	26	1,043
န္မ	Organizations that follow SFAS 117, check here ▶	and		1	
일	complete lines 27 through 29, and lines 33 and 34.			ŧ	
R 27	Unrestricted net assets			27	
<u>m</u> 28	Temporanly restricted net assets			28	.
Net Assets or Fund Balances 22 28 29 33 33 34 34 35 36 36 36 37 37 38 38 38 38 38 38 38 38 38 38 38 38 38	Permanently restricted net assets	. 🖼		29	
죠	Organizations that do not follow SFAS 117, check her	e ▶ X		1	
9	and complete lines 30 through 34.			ŧ	0 60= 600
<u>v</u> 30	Capital stock or trust principal, or current funds		2,600,960	30	2,607,628
g 31	Paid-in or capital surplus, or land, building, or equipment f			31	
8 32	Retained earnings, endowment, accumulated income, or	other funds	10,459	32	11,831
<u>a</u> 33	Total net assets or fund balances		2,611,419		2,619,459
Z 34	Total liabilities and net assets/fund balances_		2,612,581	34	2,620,502

Form **990** (2009)

orm	1990 (2009) Order of the Eastern Star, Grand 58-0374542		Pa	ge 12
Pa	ert XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X 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?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

SCHEDULE I (Form 990) Department of the Treasury

Grants and Governments

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

							TOTACHET !	11011
Name of the organization Order of the Eastern Chapter of Georgia	rn Star,	Grand			Employer 58-03	Employer identification number ちRL೧374542	- a	
Part I General Information on Grants and Assistance	and Assistance							
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 	te the amount of the g stance? monitoring the use of	grants or ass	stance, the grantees' in the United States	ts or assistance, the grantees' eligibility for the grants or assistance, and nt funds in the United States	s or assistance, and	- B	Yes	% X
l est	Governments anny recipient that re 1990) if additional	nd Organi eceived n space is I	zations in the Ur nore than \$5,000 needed	ited States. Com . Check this box i	plete if the org if no one recipi	janization ansv ent received n	vered "Yes" to nore than \$5,000. L	Jse 📗
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	ŧ
							,	
						<u> </u>		
2 Enter total number of section 501(c)(3) and government organizations	ent organizations						•	

3 Enter total number of other organizations
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

DAA

Schedule I (Form 990) 2009

58-0374542 Schedule I (Form 990) 2009 Order of the Eastern Star, Grand

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) T	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, EAMY correction of non-cash assistance
		recipients	cash grant	non-cash assistance	riviv, appraisar, omer)	
Scholars	Scholarships - Georgia	9	4,600			
Religion	Religious Training Award	2	1,600			
Rainbow	Rainbow Scholarship - Ga.	4	1,990			
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	provide the informati	on required in Part I,	line 2, and any other addi	tional information.

Organization receives application for scholarships; which are formally

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

approved by each committee; and scholarship checks are issued directly to

the college or technical school on behalf of the recepient.

Schedule I (Form 990) 2009

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Order of the Eastern Star, Grand Chapter of Georgia

Employer identification number 58-0374542

Form 990, Part III, Line 4d - All Other Achievements Grant given for September 2009 Flood in Georgia (2).

Form 990, Part VI, Line 7a - Election of Members and Their Rights

Members must be a past Worthy Matron or past Worthy Patron of a subordiante chapter.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Decisions are approved at annual meeting.

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters

There is a statewide Manual and Code for the Grand Chapter of Georgia,

Order of the Eastern Star.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Order of the Eastern Star Georgia Grand Chapter FEI 58-0374542

Subordinate Chapters 3-31-2010

Revenue Proc. 80-27		Code 2	
Chapter Name	No.	Mailing Address	FEI TAX NUMBER
Rockmart	321	165 Tillery Road, Aragon, GA 30104	23-7110371
Cochran	400	223 Bardlwy Purser Road, Cochran, GA 31014	23-7115076
Jeff Davis	402	26 Libby Avenue, Hazelhurst, GA 31539	23-7115078
Mount Yonah	405	185 Fieldstone Road, Cleveland, GA 30528	23-7115070
Carroll	406	1363 N. Highway 113, Carrollton, GA 30117	23-7115081
Tucker	407	913 Old Thompson Mill Rd., Winder, GA 30680	23-7115082
Starlight	421	3230 Bonway Dr., Decatur, GA 30032	23-7115087
Douglasville	423	5886 S. Bear Drive, Douglasville, GA 30135	23-7115089
Tompkins	424	164 Norton Trail, Ringgold, GA 30736	23-7115099
Norcross	426	750 Brand South Trail, Lawrenceville, GA 30045	
Turin	429		23-7115091
Osceola	431	434 Shaw Raod, Sharpsburg, GA 30277	23-7115093
Summerville	434	208 N. Beech Street, Ocilla, GA 31774 51 Martin Street, Summerville, GA 30747	23-7115095
· · ·		· · · · · · · · · · · · · · · · · · ·	23-7115096
Hill Patrick	441	116 Teal Court, Locust Grove, GA 30248	23-7115102
Riverdale	446	611 North Central Avenue, Hapeville, GA 30354	23-7115106
Marble Hill	448	11947 Highway East, Marble Hill, GA 30148	23-7115107
Worth	454	538 W. Madison Avenue, Ashburn, GA 31714	23-7115111
Ducktown	460	210 Della Smith Lane, Canton, GA 30115	23-7115113
Richmond	463	2110 Mims Road, Hephzibah, GA 30815	23-7115116
Martinez	464	978 Shadwell Drive, Evans, GA 30809	23-7115117
Hickory Flat	466	150 Spring Creek Court, Canton, GA 30115	23-7115119
Notla	471	5975 Johnson Drive, Blairsville, GA 30512	23-7115122
Unity	549	5886 S. Bear Drive, Douglasville, GA 30135	23-7115123
Okefenokee	474	5859 Chaney Road, Blackshear, GA 31516	23-7115124
Electa	6	827 Hillary Court, NW, Lawrenceville, GA 30043	23-7115127
Blanche	8	165 Waterloo, Chula, GA 31733	23-7115128
Central City	28	103 Graycreek Court, Macon, GA 31211	23-7115131
Etowah	30	118 Sagewood Drive, Rome, GA 30165	23-7115133
Miriam	32	475 Edgewood Ave., LaGrange, GA 30241	23-7115134
Thomasville	46	109 Fontaine Drive, Thomasville, GA 31792	23-7115138
Laurel	51	1511 Buckingham Way, Savannah, GA 31406	23-7115140
Dalton	65	610 Hill Road, Dalton, GA 30720	23-7115143
Frances Bell	75	P. O. Box 958, Harlem, GA 30814	23-7115144
Areme	101	299 S. Anita Street, Waycross, GA 31503	23-7115148
Kıngsland	146	P. O. Box 544, Kingsland, GA 31548	23-7115158
Decatur	148	429 Cochester Drive, Stone Mountain, GA 30088	23-7115159
Neptune	153	3120 Wisteria Avenue, Brunswick, GA 31520	23-7115160
Lakewood	162	130 Courtyard Lane, Fayetteville, GA 30215	23-7115161
Rabun	164	P. O. Box 991, Clayton, GA 30525	23-7115162
Pocahontas	165	514 Claire Street, Rossville, GA 30741	23-7115163
Dublin	175	106 Kenneth Drive, Dublin, GA 31021	23-7115165
Marthada	190	338 Carolyn Drive, Chickamauga, GA 30707	23-7115170
Marietta	208	165 Trafalgar Court, Kennesaw, GA 30144	23-7115173
Macon	'345	2570 Kensigton Road, Macon, GA 31211	23-7115174
Blairsville	304	P O. Box 523, Blairsville, GA 30514	23-7115175

Order of the Eastern Star Georgia Grand Chapter FEI 58-0374542

Subordinate Chapters 3-31-2010

Revenue Proc. 80-27		Code 2	
Chapter Name	No.	Mailing Address	FEI TAX NUMBER
Sandersville	307	78 King Road, Harrison, GA 31035	23-7115177
Bremen	309	458 Lee Williams Road, Carrollton, GA 30117	23-7115178
Alpharetta	311	4536 Shiloh Road, Cumming, GA 30040	23-7115179
Austell	314	4460 Parkview Drive, Lithia Springs, GA 30122	23-7115181
Buford	317	4585 Forest Green Drive, Buford, GA 30519	23-7115182
Telfair	323	18 Liberty Street, McRae, GA 31055	23-7115185
Richard T. Turner	332	P O. Box 64, Pooler, GA 31302	23-7115189
Blue Mountain	333	625 Arrendale Road, Dahlonega, GA 30533	23-7115190
Nashville	334	721 E Patten Avenue, Lakeland, GA 31635	23-7115191
Madison	335	1071 Whispering Lakes, Madison, GA 30650	23-7115192
Winder	336	836 Pleasant Hill Church Road, Winder, GA 30680	23-7115193
Ellijay	340	640 Timber Ridge Lane, Ellijay, GA 30540	23-7115197
Cumming	346	4455 Longmont Drive, Cumming, GA 30028	23-7115199
Gleaner	347	1830 Francis Road, Conyers, GA 30094	23-7115200
Bald Mountain	349	234 Crane Road, Young Harris, GA 30582	23-7115202
Martha Berry	351	102 Echo Lane, Warner Robins, GA 30188	23-7115204
Baxley	363	P. O. Box 883, Baxley, GA 31513	23-7115209
White Star	367	24 Washington Avenue, Savannah, GA 31405	23-7115211
Sardis	382	217 Jenkins Cemetery Road, Sardis, GA 30456	23-7115218
Houston	383	103 Bayview Drive, Perry, GA 31069	23-7115219
Smyrna	387	6905 Beechwood Drive, Acworth, GA 30102	23-7115221
Lizella	390	4965 Nisbet Drive, Macon, GA 31206	23-7115223
Morganton	394	P. O. Box 176. Morganton, GA 30560	23-7115225
Jasper	479	2270 Amicalola Church Rd., Dawsonville, GA 30534	23-7115229
Habersham	480	180 Eden Wood, Clarkesville, GA 30523	23-7115230
Alice Warren	483	313 Glen Skye Court, Augusta, GA 30907	23-7115231
Powder Springs	493	P. O. Box 2483, Powder Springs, GA 30127	23-7115241
Santa Maria	496	163 Eighth Street, St. Mary's, GA 31558	23-7115244
Button Gwinnett	497	177 Haven Road, Midway, GA 31320	23-7115245
Snellville	513	1480 Holy Manor Drive, Loganville, GA 30052	23-7115251
Anne Winn	203	3911 Pine Gorge Court, Dacula, GA 30019	23-7115981
Stone Mountain	205	1185 Chandler Ridge Dr., Lawrenceville, GA 30045	23-7116035
Cedartown	213	472 Lovvorn Road, Cedartown, GA 30125	23-7116036
Leland	235	6630 Starling Place, Mableton, GA 30126	23-7116041
Cleopatra	241	P. O. Box 47, Carmak, GA 30807	23-7116042
Marshes of Glynn	243	109 Riverway, Brunswick, GA 31520	23-7116043
Valdosta	244	1306 Thornwall Drive, Valdosta, GA 31602	23-7116044
Button Gwinnett	245	138 Heritage Place, Ringgold, GA 30736	23-7116045
Palestine	249	P. O. Box 2214, Tybee Island, GA 31328	23-7116046
Barnesville	251	110 Redbud Drive, Barnesville, GA 30204	23-7116047
	261	269 Carver Road, Cataula, GA 31804	23-7116047
Columbus			23-7116051
Lindale	265	203 Hooper Avenue, Lindale, GA 30147	23-7116054
Athens	268	140 Dove Valley Drive, Athens, GA 30606	
Milledgeville	272	106 Crestwood Drive, Gordon, GA 31031	23-7116057 23-7116061

Order of the Eastern Star Georgia Grand Chapter FEI 58-0374542

Subordinate Chapters 3-31-2010

Revenue Proc. 80-27 Chapter Name	No.	Code 2 Mailing Address	FEI TAX NUMBER
Forest Park	290	3870 Montglenn Court, Cumming, GA 30041	23-7116067
Toccoa	294	8139 Cherokee Road, Toccoa, GA 30577	23-7116071
Redwine	297	4244 Fuller Road, Talmo, GA 30575	23-7116074
Ben Gibbs	299	P. O. Box 1454, Jesup, GA 31545	23-7116076
Martha Washington	300	2966 Barnard Road, Glennville, GA.30427	23-7116077
William T. Flynt	303	5250 Hwy. 93, Pelham, GA 31779	23-7116079
Fort Benning	278	6925 Marina Cove Court, Columbus, GA 31805	23-7116914
Beulah	21	330 Colton Road, McCaysville, GA 30555	23-7120216
Oglethorpe	122	575 Spender Trace, Atlanta, GA 30350	23-7120219
Edith Cavell	193	P. O. Box 1085, Millen, GA 30442	23-7120222
Bethlehem	269	121 Riverside Drive, Savannah, GA 31410	23-7120226
Roberta	275	2069 Ga. Hwy. 11, Monroe, GA 30656	23-7120227
Hiawassee	305	1821 Shook Road, Hiawassee, GA 30546	23-7120228
Statham	316	1202 Walter Sams Road, Winterville, GA 30683	23-7120231
Douglas	325	407 E. Jefferson Street, Douglas, GA 31533	23-7120232
Cartersville	329	4196 Terrace Drive, Acworth, GA 30101	23-7120234
Toombs	546	1135 Rakettown Road, Lyons, GA 30436	23-7120236
Nancy Hart	398	P. O. Box 1353, Hartwell, GA 30643	23-7120244
Coosa	412	P. O. Box 926, Shannon, GA 30172	23-7120245
Kennesaw	414	1401 Rampley Trail, Canton, GA 30114	23-7120247
Red Hill	417	303 Pueblo Trail, Martin, GA 30557	23-7120248
Dallas	492	434 Hillcrest Circle, Hiram, GA 30141	23-7120254
Samuel S. Lawrence	500	6905 Beechwood Drive, Acworth, GA 30102	23-7120255
East Floyd	501	258 Gill Road, Kingston, GA 30145	23-7120256
Hampton	522	876 Simpson Mill Road, Locust Grove, GA 30248	23-7235094
Mountain Park	524	4188 Suzanne Lane, Duluth, GA 30096	23-7418465
Crape Myrtle	163	2724 Ledo Road, V-20, Albany, GA 31707	23-7627670
Tilton	525	3535 Hwy. 225 South, Chatworth, GA 30705	51-0170928
Loganville	528	521 Crane Drive, Lawrenceville, GA 30045	51-0206281
Morrow	531	3251 Lake Jodeco Road, Jonesboro, GA 30236	51-0214953
Homer Legg	535	3241 Double Branches Road, Lincolnton, GA 30817	52-1266167
Danielsville	537	260 Mimosa Drive, Colbert, GA 30628	58-1514194
Clarissa Pike	539	991 Short Cut Road, Molena, GA 30258	58-1763918
Phi Delta	542	153 Sheridan Drive, Maysville, GA 30558	58-1763919
Savannah	52	7 Tower Drive, Savannah, GA 31405	58-6034001
Grace	551	194 Collis Circle, N., Eatonton, GA 31024	90-0025050
Little River	548	6312 Bargeron Road, Blackshear, GA 31516	91-1895774
Rose M. Ashby	550	1031 Sunset Drive, Elberton, GA 30635	91-2122101
March 31, 2010 - 129 Chapters			