(Rev. January 2020)

SCANNED JUL 1 6 2021

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

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Open to Public Inspection

A	For the	2019 calend	dar year, or tax year beginning January 1st , 2019, and ending	g Decembe	er 31st	<b>, 20</b> 19	
В	Check if	applicable	C Name of organization <u>USA Track &amp; Field Georgia</u> , Inc.		D Empl	oyer identification number	
X	Address	change	Doing business as			58-1875148	
	Name ch	nange	Number and street (or P O. box if mail is not delivered to street address)	oom/suite	E Telephone number		
	Initial ret	um	5 Concourse Parkway	3000		404-936-2846	
	Final retu	ım/terminated	City or town, state or province, country, and ZIP or foreign postal code				
	Amende	d return	Atlanta, GA 30328		G Gross	receipts \$ 163,618	
	Applicat	on pending	F Name and address of principal officer Charles Muhammad	H(a) Is this a gro	up return f	or subordinates?  Yes  No	
			3732 Laramie Road Ellenwood, GA 30294	H(b) Are all su	bordinat	es included? Yes No	
ī	Tax-exe	mpt status.		<b>り</b> If "No," a	ittach a li	st. (see instructions)	
J	Website	: www.us	atfga.org	H(c) Group ex	emption	number ▶	
K	Form of	organization 🗹	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of forma	tion. 1998	M State	of legal domicile. GA	
P	art I	Summa	ry				
	1	Briefly des	cribe the organization's mission or most significant activities: This ass	sociation acts as	the gov	erning body for	
9		track and fie	eld for the state of Georgia Our purpose is to develop interest in the sport, pror	mote track & field	by con	ducting	
Governance		competitions	s and events, and generating public awareness, appreciation, and support to c	reate opportuniti	es for a	thletes	
, E	2	Check this	box ▶ ☐ if the organization discontinued its operations or disposed	of more than 2	25% of	its net assets.	
Ĝ	3	Number of	voting members of the governing body (Part VI, line 1a)		3	15	
∞5	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	15	
ties	5	Total numb	per of individuals employed in calendar year 2019 (Part V, line 2a) .		5	0	
Activities &	6	Total numb	per of volunteers (estimate if necessary)		6	15	
Ą	7a	Total unrela	ated business revenue from Part VIII, column (C), line 12		7a	0	
	b	Net unrelat	ed business taxable income from Form 990-T, line 39		7b	0	
				Prior Year	•	Current Year	
Revenue	8	Contributio	ons and grants (Part VIII, line 1h) [		64,060	55,445	
	9	Program se	ervice revenue (Part VIII, Inne 2g)	1	57,361	104,858	
Š	10	Investment	income (Part VIII, column (A), lines 3, 4, and RICE IVED		101	2,215	
	11	Other rever	nue (Part VIII, column (A), lines 5, 6d, 8¢, 9c, 10c, and Tie		0	0	
	12	Total reven	ue-add lines 8 through 11 (must equal Par VIII, column (A), line 12) 💆	2	21,522	162,518	
	13	Grants and	l sımilar amounts paid (Part IX, column 🙉 lines 🛱 है) 🏖 🙎 🙎 👢 🗎		15,793	5,905	
	14	Benefits pa	aid to or for members (Part IX, column (A), (ne.4)	٤	0	0	
S	15	Salaries, of	her compensation, employee benefits (Part IX, 😋 🕡 🕽 😿 🙀 es [5] 📆 🗍	1	0	0	
Expenses	16a		al fundraising fees (Part IX, column (A), <del>lline 11e)</del>		0	0	
ĝ	Ь	Total fundr	aising expenses (Part IX, column (D), line 25) ▶				
ш	17	Other expe	nses (Part IX, column (A), lines 11a-11d, 11f-24e)	1	86,277	140,447	
	18	Total exper	nses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2	02,070	146,352	
	19	Revenue le	ss expenses. Subtract line 18 from line 12		19,452	17,266	
5 8				Beginning of Curre	nt Year	End of Year	
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16) [	1	60,693	177,959	
A P	21	Total liabilit	ties (Part X, line 26) . . . . . . . . . . . .		0	0	
ž	22	Net assets	or fund balances. Subtract line 21 from line 20	1	60,693	177,959	
P	art II	Signatu	re Block	·-·			
Ur	der pena	ties of perjury,	I declare that I have examined this return, including accompanying schedules and state	ments, and to the	best of n	ny knowledge and belief, it is	
	e, correct	, and compete	e Declaration of oftender (other than officer) is based on all information of which prepare	r nas any knowled	ye 		
o:			all / / whaning				
Si	-	1! 7AT	ire of officer	Date	9-	21-2020	
He	ere	<u> </u>	aeles Muhammad President				
		Type or	r print name and trile				
Pa	id	PrintyType		ate	Check ]	PTIN	
	epare	r Char	es Muhammad Charles Makaram 1	9.21.2020	self-emf	loyed	
	e Onl	F	ne ▶	Firm's	EIN ►		
		Firm's add		Phone	no.		
Ma	y the IR	S discuss t	his return with the preparer shown above? (see instructions)			. <b>⊠</b> Yes □ No	

Form 990 (2019)

Cat. No. 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

Part	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: USA Track & Field drives competitive excellence and popular engagement in the sport in a safe environment for all
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.  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 \$ 98,768 including grants of \$ 5,700 ) (Revenue \$ 89,326 )  Hosted Championship meets and sanctioning for the following events:  USATF Georgia Association Junior Olympic Track & Field Preliminaries  USATF Georgia Association Open, Masters, Racewalking and Long Distance Running Championships
	USATF Georgia Association Junior Olympics Track & Field Championships USATF Georgia Association Junior Olympics Cross Country Championships USATF Georgia Association Meet of Champions Cross Country Showcase
4b	(Code:) (Expenses \$24,172 including grants of \$0 ) (Revenue \$0 )
-14/	Host Georgia Association Annual Meeting and attended USAT Annual Meeting/Convention
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4c	(Code: ) (Expenses \$ 9,714 including grants of \$ 0 ) (Revenue \$ 74,291 ) Office Operations and Board Meetings
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 146,352



Part	IV Checklist of Required Schedules		1	
			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_	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
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		,
4	<b>Section 501(c)(3) organizations.</b> 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		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	_	_	_
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
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, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		~
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~

Part	Checklist of Required Schedules (continued)		,	,
00	Did the annual setting was at more than \$5,000 of annual an other appropriate or for demants individuals an		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		~
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		~
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 24b	ļ	7
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240	-	<b>-</b>
	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		,
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		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		v
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	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		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	~
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line</i> 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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	V	
Part				
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10		-

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			$\vdash$
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			<u> </u>
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	- <u></u> -		~
3a		_		-
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	<u> </u>	<del> </del>
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		1
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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	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		1
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).	- 05		1.
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<del></del>		-
_	and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		├—
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		١.
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
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.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			1
11	Section 501(c)(12) organizations. Enter:			1
	Gross income from members or shareholders			ĺ
a				l
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40.	against amounts due or received from them.)	<del></del>		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			ĺ
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	ļ	İ	
C	Enter the amount of reserves on hand	į		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
	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	- [	V
	If "Yes," see instructions and file Form 4720, Schedule N.	<del></del>		
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
	ii 100, complete i citii 4720, concediic C.	ŀ		1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management	<u> </u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   15			' ''
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent .    15	4		
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		-
3	Did the organization delegate control over management duties customarily performed by or under the direct			l .
	supervision of officers, directors, trustees, or key employees to a management company or other person?.	3		<i>'</i>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		7
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?.  Did the organization have members or stockholders?	6	~	<del>-</del>
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint	۳		
<i>i</i> a	one or more members of the governing body?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7b	~	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		•	· waterso
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
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 on Schedule O	9		,
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
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		~
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	<u>¥</u>		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-	ŀ	
40	describe in Schedule O how this was done	12C		~
13 14	Did the organization have a written whistleblower policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by	'-		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		~
b	Other officers or key employees of the organization	15b		~
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1	-
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		7
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1
	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		
Secti	on C. Disclosure	TOD	l	
17	List the states with which a copy of this Form 990 is required to be filed ▶ Georgia			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	Γ (Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Very only of the control of the con	,		- (-/
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or	f inter	est n	olicy
13			oor b	JUy,
20	and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and re-			

	<u> </u>		
Part VII	<b>Compensation of Officers, Directors</b>	, 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.

- 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 employees."
- 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. 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)	(B)			(e Pos	C) sition	•		(D)	(E)	(F)
Name and title	(do n		(do not check more than of box, unless person is both					Reportable	Reportable	Estimated amount
	hours	hours officer and a director/truste			compensation	compensation	of other			
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Charles Muhammad	18		<u> </u>		T					
President	<b></b>	1		~				0	0	0
(2) Dexter McCloud	2									
Executive Vice President	†	1		~				o	0	0
(3) Shanika Asher	2									
Treasurer		1		~			ŀ	0	0	0
(4) Matthew Chestnut	8									
Vice President of Communications				~				0	0	0
(5) Arlena Epps	2									
Vice President of Sponsorship				~				0	0	0
(6) Eric Merriweather	2									
Secretary				~				0	0	0
(7) Lamar Grant	5									
Youth Athletics Chair		L		~				0	0	0
(8) Tina Klein	2									
Masters Athletics Chair				>				0	0	0
(9) Gwendolyn Johnson	2									
Track & Field Chair				~				0	0	
(10) Euleen Josiah-Tanner	3									
Long Distance Running Chair				~				0	0	0
(11) Ron Williams	1									
Coaches Advisory Chair				٧				0	0	0
(12) Cindy Slayton	2									
Officials Chair				~				0	0	0
(13) Latesha Jordan	5									
Membership Chair				~				0	0	0
(14) Kenya Pringle	5									
Sanctions Chair				~			L	0	0	0

Part	VII Section A. Officers, Directors,	Trustees,	Key l	Em	plo	yee	s, an	d F	lighest Compe	nsated Emplo	yees (continue	d)
					(6	C)						
	(A) (B)					ition			(D)	(E)	(F)	
	Name and title	Average					than o		Reportable	Reportable	Estimated amount	t
		hours					or/trus		compensation	compensation	of other	
		per week (list any	익	l <sub>l</sub> g	\2	8	a F	Fo	from the organization	from related organizations	compensation from the	
		hours for	Individual trustee or director	Institutional	Officer	Key employee	ples	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and	
		related	cto	§	,	를	e c	7			related organization	15
		organizations below	7 🚡	<u>a</u>	1	) ye	ğ					
		dotted line)	tee	truste		"	ens:	1				
		1		8			Highest compensated employee					
(15)	Kellie Crawford	1				t					<del>                                     </del>	_
	alking Chair	†	1		1				0	0		0
	Shaykara Waajid	1										_
	t & Finance Chair	+			1				0	0	ļ	0
	nez Finch	1			1	╁						_
	resident	<b>†</b>			<b>,</b>				0	o		0
(18)			·			<b></b>	ļ					-
X::7/												
(19)	······································				<del> </del>	<b> </b>	ļ					-
X		<b>†</b>	1									
(20)												_
37.77		†	1			1						
(21)				<u> </u>	<u> </u>	H	<u> </u>	<u> </u>				_
37.7		<b>†</b>							1			
(22)						t						_
<u> </u>		<b>†</b>	i		-	-	ļ		1			
(23)							<u> </u>			-	-	
<u> </u>		<del> </del>	ł		,							
(24)		L			<b></b>	<del> </del>						-
<u> </u>			1									
(25)												—
(20)			ł									
1b	Subtotal	1	L	I	J	.l	l		0	0		0
C	Total from continuation sheets to Part		 n Δ	•	•	•	•	•	0	0	<del> </del>	0
d				•	•	•	•		0	0	1	<u></u>
	Total number of individuals (including but				· liet	ed.	ahove	- N	ho received mor	e than \$100 000	l of	<del>-</del>
2	reportable compensation from the organi		100	1030	, 1131	icu .	above	., <b>v</b> v	0	ε παπ <b>ψ</b> 100,000	, 01	
	, sportable of participation and a game										Yes No	_
3	Did the organization list any former of	officer dure	ector	tru	eta	ما ه	-AV A	mnl	lovee or highes	t compensated	<del> </del>	1
	employee on line 1a? If "Yes," complete s	•					•			it compensated	3 1	,—1
4	For any individual listed on line 1a, is the							n a	nd other compe	neation from the	<del>                                     </del>	$\neg$
7	organization and related organizations											-
	individual							-, 			4 4	
5	Did any person listed on line 1a receive of	r accrue co	mne	neat	tion	froi	n anv	un	related organizat	ion or individua		7
•	for services rendered to the organization										5 /	
Secti	on B. Independent Contractors									<u> </u>		_
1	Complete this table for your five high	est compe	ensate	ed	ınde	ener	ndent	CO	entractors that r	eceived more	than \$100,000	of
•	compensation from the organization. Rep											
	(A)							7-	(B)		(C)	-
	Name and business add	ress							Description of serv	rices	Compensation	
•								ļ				-
								<del>                                     </del>				_
												_
								<del>                                     </del>				_
	· · · · · · · · · · · · · · · · · · ·	<del></del>						$\vdash$				_
2	Total number of independent contractor	rs (includir	na bi	ıt n	ot 1	lmit	ed to	) th	inse listed above	e) who	· ···	7
_	received more than \$100,000 of compens								0	-,		

# Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spor	se or note to an	y line in this Pa	rt VIII		🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
र र	1a	Federated campaign	ns .		1a	0				1
Contributions, Gifts, Grants and Other Similar Amounts	b	<del>-</del>			1b	55,284				<b>^</b>
حَ ۾	С	Fundraising events			1c	0				
fts.	d	Related organization	ns .		1d	1,100			,	
<u>≅</u> ≅	е	Government grants	(cont	ributions)	1e	0				1
Sir	f	All other contribution	ns, gif	fts, grants,						
er i		and similar amounts no			1f	161			· 3	
년 본	g	Noncash contribution	ons in	cluded in			:			. ]
ig it		lines 1a-1f			1g	\$ 0		· .	-	
ğ ğ	h	Total. Add lines 1a-	-1f .			<u></u> ▶	56,545	-		
						Business Code				
Program Service Revenue	2a	Meet Entry Fees				711320	65,913	65,913	0	0
e S	b	Sanctions				711320	13,757	13,757	0	0
gram Ser Revenue	С	Meet Gate Revenue				711320	17,587	17,587	0	0
le a	d	Meet Vendor/Merchan		Sales		711320	5,826	5,826	0	0
g	е	Official Certification Fe				711320	1,775	1,775	0	0
4	f	All other program se					0	0	0	0
	g	Total. Add lines 2a-					104,858			1
	3	Investment income		•			0.045	2 245	0	,
		other similar amoun					2,215 0	2,215 0	0	0
	4	Income from investment of tax-exempt bon Royalties					0	0	0	0
	5	Hoyanies	<u> </u>	(i) Rea		(ii) Personal	0	<u> </u>	•	,
	60	Gross rents	6.	(i) Nea	. 0	<del>  ``  </del>				
	6a	Less rental expenses	6a 6b		0		ı			
	b	Rental income or (loss)								
	c d	Net rental income o		<u> </u>			0	0	0	0
		1	1 (103.	(i) Secunt	· ·	(ii) Other				1
	7a	Gross amount from sales of assets		<u>``</u>						
		other than inventory	7a		0	0				
a	b	Less: cost or other basis								
Revenue	_	and sales expenses .	7b		0	l o				
ě	С	Gain or (loss)	7c		0	0				
	d	Net gain or (loss)					0	0	0	0
Other	8a	Gross income from								
Ò		events (not including	\$	0						
		of contributions rep								
		1c). See Part IV, line			8a	0				, ,
	b	Less: direct expense			8b	0				-
	С	Net income or (loss)			g eve	nts <b>&gt;</b>	0		0	0
	9a	Gross income f								
	_	activities. See Part I			9a	0			۵.	- ' 1
		Less: direct expense			9b	0	0		0	
	C	Net income or (loss)			CTIVITIE	es <b>&gt;</b>		0	<u>_</u>	<u> </u>
	10a	Gross sales of in			40-	ا ا	v n	<b>.</b>	•	d w
		returns and allowan			10a 10b					-
		Less: cost of goods Net income or (loss)					0	0	0	
	С	ivet income or (loss)	HOIII	Sales Of III	ivenii	Business Code				
Miscellaneous Revenue	11a					Dudinicas Code				
scellaneo Revenue	b	***************************************		<b></b>		<del>-</del>	<del></del>			
ella Ver	7			·		<del>  </del>				
Sce	d	All other revenue								
Ξ		Total. Add lines 11a			•	<b>&gt;</b>	0			1
		Total revenue See				· · · · ·	163.618	107.073	0	0

### 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 .		[

	of include amounts reported on lines 6b, 7b, o, 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	5,700	5,700		3
2	Grants and other assistance to domestic individuals. See Part IV, line 22	205	205		
3	Grants and other assistance to foreign organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members	0	0	0	0
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	0	0	0	0
7 8	Other salaries and wages	0	0	0	0
9	Other employee benefits	0	0	- 0	0
10	Payroll taxes	0	0	0.	0
11	Fees for services (nonemployees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column	•		•	
9	(A) amount, list line 11g expenses on Schedule O.)	o	o	o	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	8,898	0	8,898	0
14	Information technology	816	0	816	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	18,375	18,375	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	14,815	14,815	0	0
20	Interest	0	0	0	0
21 22	Payments to affiliates	0	0	0	0
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	Championship Mosts	92.863	92,863	0	
a b		32,003	32,003		
c					
ď					
е	All other expenses	4,680	4,680	0	0
25	Total functional expenses. Add lines 1 through 24e	146,352	136,638	9,714	. 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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				000 000

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	38,663	1	13,714
	2	Savings and temporary cash investments	122,030	2	87,239
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	3,167	4	0
	5	Loans and other receivables from any current or former officer, director,	11 191 1 1 1	•	• जम ≅ ० ६ ु° पी
	}	trustee, key employee, creator or founder, substantial contributor, or 35%	. 4 .		e * \
	ļ	controlled entity or family member of any of these persons	0	5	0
	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).	0	6	0 - 7 - 1
s	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
As	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other		<u> </u>	
		basis. Complete Part VI of Schedule D   10a   0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	0	11	77,006
	12	Investments—other securities. See Part IV, line 11	_	12	0
	13	Investments—program-related. See Part IV, line 11		13	0
	14	Intangible assets	-	14	0
	15	Other assets. See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	163,860	16	177,959
i	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0		0
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
t)	<u>22</u>	Loans and other payables to any current or formor officer, director,	1 4 12 4 12 W		. But I """ " " " " " " " " " " " " " " " "
ij		trustee, key employee, creator or founder, substantial contributor, or 35%	-8 .		
Liabilit es		controlled entity or family member of any of these persons	0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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		05	•
	26	Total liabilities. Add lines 17 through 25	0	25 26	0
(A)	20			20	4
Se		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	163,860	27	100,953
Ва	28	Net assets with donor restrictions	0	28	77,006
מ		Organizations that do not follow FASB ASC 958, check here ▶ □			1
교		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds	0	29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
SS	31	Retained earnings, endowment, accumulated income, or other funds	0	31	0
) t	32	Total net assets or fund balances	163,860	32	177,959
ž	33	Total liabilities and net assets/fund balances	163,860	33	177,959

_	4	
Page	1	2

Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Prior period adjustments  Net assets or fund balances (explain on Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  Part XII   Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  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.  Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  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  Were the organization's financial statements and selection of 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   Both consolidated and separate basis  C if "Yes," to line 2 a 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 ch	Part	XI Reconciliation of Net Assets							
Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 3 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses subtract line 2 from line 1 Revenue less expenses subtract line 2 from line 1 Revenue less expenses subtract line 2 from line 3 from line		Check if Schedule O contains a response or note to any line in this Part XI							
Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Net unrealized gains (losses) on investments  Donated services and use of facilities  Prior period adjustments  Prior period adjustments  Net assets or fund balances (explain on Schedule O)  Net assets or fund balances (explain on Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  Part XIII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  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.  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  Both consolidated and separate basis  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 ☐ Both consolidated and separate basis  Both consolidated and separate basis  Consolidated basis ☐ Both consolidated and separate basis  The view of the organization 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 on Schedule O.  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?  If "Yes," did the organization undergo the required audit or audits? If	1	Total revenue (must equal Part VIII, column (A), line 12)			16	3,618			
Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)							
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7   0   0   0   0   0   0   0   0   0	3								
6 Donated services and use of facilities	4								
7   10   10   178,582   10   10   10   178,582   10   10   10   178,582   10   10   10   178,582   10   10   10   10   10   10   10   1	5								
8 Prior period adjustments	6	Donated services and use of facilities				0			
9 Other changes in net assets or fund balances (explain on Schedule O)	7	Investment expenses							
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990:  Cash   Accrual   Other   The organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  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   Consolidated basis   bas	8	<u> </u>			(3	3,167)			
32, column (B))   178,582	9	Other changes in net assets or fund balances (explain on Schedule O)				0			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
Check if Schedule O contains a response or note to any line in this Part XII		32, column (B))			17	8,582			
Accounting method used to prepare the Form 990:		· · ·				_			
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?		Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	• •	• •				
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?			г		Yes	No			
Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1		_		}				
Were the organization's financial statements compiled or reviewed by an independent accountant?			in						
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  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  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 on 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 on Schedule O and describe any steps taken to undergo such audits.  3b	_		-			لبـــ			
reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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  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 on 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 on Schedule O and describe any steps taken to undergo such audits.	2a	, , , ,	-	2a		~			
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		·		Form	990	(2019)			

#### SCHEDULE A (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

Employer identification number

2019

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection

USA Track & Field Georgia, Inc 58-1875148						75148			
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.								
The o	organization is not a pri					-	•		
1	A church, conventi							$\sim$ 1	
2	A school described			·			• •	UI	
3	A hospital or a coo	•	•						
4	, , , , , , , , , , , , , , , , , , ,								
_	hospital's name, ci	-							
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 7	<ul> <li>□ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</li> <li>☑ 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.)</li> </ul>								
8				•	Part II.)				
9	<ul> <li>☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> <li>☐ An agricultural research organization described in section 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:</li> </ul>								
10	An organization that normally receives: (1) more than 33½% 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 33½% 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 org	anized and	operated exclu	sively to test for publi	c safety.	See sect	ion 509(a)(4).		
12	<ul> <li>☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</li> <li>☐ 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).</li> <li>Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</li> </ul>								
а			_	d, supervised, or conti		_	•		
_	the supported of	organization	(s) the power to	regularly appoint or e ete Part IV, Sections	elect a ma	ajority of t			
b	control or mana	gement of	the supporting o	sed or controlled in co organization vested in IV, Sections A and C	the same				
С				ting organization oper				ally integrated with,	
đ	its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  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.								
е				a written determination				e II, Type III	
f	Enter the number of	supported o	organizations .						
g	Provide the following	ınformatıor	about the supp	oorted organization(s).					
	(i) Name of supported organ	ization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No	1		
(A)									
(B)									
(C)									
(D)									
(E)									
Total					1	1			

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 fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support								
Calen	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	555555	73,174	56,586	64,060	55,445	249,265		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		0	0	0	0	0		
3	The value of services or facilities furnished by a governmental unit to the organization without charge		0	0	0	0	0		
4	Total. Add lines 1 through 3	-	73,174	56,586	64,060	55,445	249,265		
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)						0		
6	Public support. Subtract line 5 from line 4		-				249,265		
	on B. Total Support		<u></u>	<u> </u>					
	dar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
7	Amounts from line 4		73,174	56,586	64,060	55,445	249,265		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		143	136	101	2,215	2,595		
9	Net income from unrelated business activities, whether or not the business is regularly carried on		0	0	0	0	0		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		95,539	125,308	157,361	104,858	483,066		
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop here.	e organization	-	d, third, fourth,	, or fifth tax ye				
Secti	on C. Computation of Public Suppor						<u>-</u>		
14 15 16a	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)								
	box and <b>stop here.</b> 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 distructions	d not check a	box on line 13,	16a, 16b, 17a	, or 17b, checl	k this box and	see		

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service
Name of the organization

### 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.

OMB No 1545-0047 2019

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

**Employer identification number** 

USA Track & Field Georgia, Inc 58-1875148 Part IV, Line 6: Did the organization have members or stockholders? We have over 5,000 members, not stockholders. They range from youth members, adult members, coaches, officials and volunteers Part VI, Line 7a: Did the organization have members who had the power to elect or appoint one or more members of the governing body? Every two years at our annual meeting, members over the age of 18 have the power to elect the board of directors Part VI, Line 7b: Are any governance decisions of the organization reserved to members other than the governing body? Governance is reserved for the board of directors, with the exception of bylaw changes or other directed items presented by the board of directors.