

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2023** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ATLANTA POLICE FOUNDATION, INC.		D Employer identification number 11-3655936
	Doing business as		E Telephone number (404) 586-0180
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	191 PEACHTREE ST NE #191		G Gross receipts \$ 4,399,376.
	City or town, state or province, country, and ZIP or foreign postal code ATLANTA, GA 30303		
F Name and address of principal officer: W. DAVID WILKINSON SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	

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

J Website: **WWW.ATLANTAPOLICEFOUNDATION.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **2002** **M** State of legal domicile: **GA**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE ATLANTA POLICE FOUNDATION IS TO MAKE ATLANTA THE SAFEST AND MOST		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	57
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	56
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	64
	6 Total number of volunteers (estimate if necessary)	6	126
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	921,204.	3,068,289.
	9 Program service revenue (Part VIII, line 2g)	1,920,482.	1,272,185.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	963.	49,190.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-510,575.	-762,414.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,332,074.	3,627,250.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,843,397.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,448,595.	2,585,886.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) 345,931.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,785,556.	11,134,259.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,077,548.	13,791,808.	
19 Revenue less expenses. Subtract line 18 from line 12	-11,745,474.	-10,164,558.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 31,615,218.	End of Year 54,968,857.
	21 Total liabilities (Part X, line 26)	32,995,729.	66,979,288.
	22 Net assets or fund balances. Subtract line 21 from line 20	-1,380,511.	-12,010,431.

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	W. DAVID WILKINSON , PRESIDENT & CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MEGAN RANDOLPH	Preparer's signature 	Date 11/14/24	Check if self-employed <input type="checkbox"/>	PTIN P00989558
	Firm's name WARREN AVERETT, LLC	Firm's EIN 45-4084437	Phone no. 205-979-4100		
Firm's address 2500 ACTON ROAD BIRMINGHAM , AL 35243					

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF THE ATLANTA POLICE FOUNDATION IS TO MAKE ATLANTA THE SAFEST AND MOST INVITING CITY FOR ALL ITS RESIDENTS, WORKERS AND VISITORS.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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

4a (Code:) (Expenses \$ 3,635,702. including grants of \$ 0.) (Revenue \$ 1,265,300.) *SECURE NEIGHBORHOODS*

COMMUNITY POLICING IS A CORE PRINCIPLE OF THE ATLANTA POLICE DEPARTMENT AND TO BE MOST EFFECTIVE IT SHOULD BE LED BY OFFICERS WHO LIVE WITHIN THE COMMUNITIES THEY SERVE. APF'S SECURE NEIGHBORHOODS PROGRAM IS AIMED AT PROVIDING PATHWAYS FOR ATLANTA POLICE OFFICERS TO ACHIEVE AFFORDABLE IN-CITY RESIDENCY FROM THE EARLIEST POINT IN THEIR CAREER. THROUGH STRATEGIC PARTNERSHIPS, THE PROGRAM OFFERS BELOW MARKET APARTMENT LIVING FOR POLICE RECRUITS, SUBSIDIZED OFFICER RENTAL UNITS, COURTESY OFFICER POSITIONS AND FOR-PURCHASE SINGLE FAMILY HOMES IN CRIME CHALLENGED NEIGHBORHOODS. ALL PARTICIPANTS ARE REQUIRED TO ACTIVELY ENGAGE WITHIN THE COMMUNITY THROUGH A VARIETY OF MEANS SUCH AS YOUTH

4b (Code:) (Expenses \$ 4,495,755. including grants of \$ 0.) (Revenue \$ 0.) *AT-PROMISE*

APF'S AT-PROMISE INITIATIVE ENTERED ITS SIXTH YEAR OF OPERATIONS IN 2023. THE PROGRAM'S MISSION IS TO DIVERT YOUTH FROM CRIMINAL ACTIVITY TOWARDS A PRODUCTIVE LIFE OUTSIDE OF THE CRIMINAL JUSTICE SYSTEM. YOUTH WHO ARE REFERRED TO THE PROGRAM RECEIVE A CUSTOMIZED PLAN OF WRAP-AROUND SERVICES DESIGNED SPECIFICALLY FOR THE YOUTH. THESE INDIVIDUALIZED PROGRAMS ARE DEVELOPED FOLLOWING A COMPREHENSIVE THERAPEUTIC ASSESSMENT WHICH IS PERFORMED ON EVERYONE WHO ENTERS THE PROGRAM.

4c (Code:) (Expenses \$ 1,179,205. including grants of \$ 71,663.) (Revenue \$ 0.) *OFFICER SUPPORT PROGRAMS*

NO PROGRAM IS MORE IMPERATIVE TO APD'S SUCCESS THAN THOSE OFFERED THROUGH APF'S OFFICER SUPPORT PROGRAMS. APD'S PROFESSIONALISM, REPUTATION AND STAFFING DIRECTLY BENEFIT FROM THE EFFORT AND FUNDS GENERATED BY THESE PROGRAMS. IN 2023, ATLANTA CONTINUED TO WORK ON THE POLICE ATTRITION AND HIRING ISSUES AFFECTING LAW ENFORCEMENT AGENCIES THROUGHOUT THE COUNTRY. APF'S PROGRAMS ARE DESIGNED TO RECRUIT NEW TALENT, WHILE MAINTAINING THE DEDICATED AND WELL QUALIFIED POLICE PROFESSIONALS WHO WORK FOR THE AGENCY TODAY.

A. ATLANTA POLICE LEADERSHIP INSTITUTE

4d Other program services (Describe on Schedule O.) (Expenses \$ 3,090,777. including grants of \$ 0.) (Revenue \$ 8,482.)

4e Total program service expenses 12,401,439.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (57), 1b (56), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed GA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
ALECIA GRIMES - (404) 586-0180
191 PEACHTREE ST NE #191, ATLANTA, GA 30303

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, 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 the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) W. DAVID WILKINSON CEO AND PRESIDENT	51.00 0.00	X		X				517,871.	0.	12,000.
(2) ALECIA GRIMES VP FINANCE & ADMINISTRATION	50.00 0.00			X				183,200.	0.	5,250.
(3) GREGORY MCNIFF COO	50.00 0.00					X		179,657.	0.	7,440.
(4) LAKEISHA WALKER VP YOUTH INITIATIVES	50.00 0.00					X		160,700.	0.	11,943.
(5) ROBIN LOUDERMILK CHAIRMAN	51.00 0.00	X		X				0.	0.	0.
(6) BOB PETERSON VICE CHAIR/SECRETARY	1.00 0.00	X		X				0.	0.	0.
(7) TYE DARLAND TREASURER	1.00 0.00	X		X				0.	0.	0.
(8) SIMON BLOOM DIRECTOR	1.00 0.00	X						0.	0.	0.
(9) DAVID DANTZLER DIRECTOR	1.00 0.00	X						0.	0.	0.
(10) BRYAN DAVIS DIRECTOR	1.00 0.00	X						0.	0.	0.
(11) WALT EHMER DIRECTOR	1.00 0.00	X						0.	0.	0.
(12) DR. DEEPAK RAGHAVAN DIRECTOR	1.00 0.00	X						0.	0.	0.
(13) MARK F. GIULIANO DIRECTOR	1.00 0.00	X						0.	0.	0.
(14) JULIA HOUSTON DIRECTOR	1.00 0.00	X						0.	0.	0.
(15) JOSH KAMIN DIRECTOR	1.00 0.00	X						0.	0.	0.
(16) JIM SHELTON DIRECTOR	1.00 0.00	X						0.	0.	0.
(17) ANDRE ANDERSON DIRECTOR	0.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) AMBRISH BAISIWALA DIRECTOR	0.00 0.00	X						0.	0.	0.
(19) ANDY BERG DIRECTOR	0.00 0.00	X						0.	0.	0.
(20) LEONTE BENTON DIRECTOR	0.00 0.00	X						0.	0.	0.
(21) NORM BROTHERS DIRECTOR	0.00 0.00	X						0.	0.	0.
(22) PAUL BROWN DIRECTOR	0.00 0.00	X						0.	0.	0.
(23) LEE BURROWS DIRECTOR	0.00 0.00	X						0.	0.	0.
(24) CHRIS CARLOS DIRECTOR	0.00 0.00	X						0.	0.	0.
(25) LARRY CONNOLLY DIRECTOR	0.00 0.00	X						0.	0.	0.
(26) CAROL COOKERLY DIRECTOR	0.00 0.00	X						0.	0.	0.
1b Subtotal								1,041,428.	0.	36,633.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,041,428.	0.	36,633.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 4

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MJV PROPERTIES, LLC PO BOX 776, ALPHARETTA, GA 30009	HOME CONSTRUCTION	1,052,361.
ADS SECURITY, LLC 582 TERRY ST, ATLANTA, GA 30312	SECURITY SERVICE	903,050.
BANYAN STREET GAP PO BOX 947473, ATLANTA, GA 30394	OFFICE RENOVATION	441,212.
TACTICAL PROTECTIVE SERVICES, LLC 16700 US-280, STE. A-355, CHELSEA, AL 35043	SECURITY SERVICE	429,100.
BLOOM PARHAM LLP 977 PONCE DE LEON AVE, ATLANTA, GA 30306	LEGAL SERVICES	235,318.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 6

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) PAUL CORLEY DIRECTOR	0.00 0.00	X						0.	0.	0.
(28) DAN ELDRIDGE DIRECTOR	0.00 0.00	X						0.	0.	0.
(29) JIMMY ETHEREDGE DIRECTOR	0.00 0.00	X						0.	0.	0.
(30) STEWART GANTT DIRECTOR	0.00 0.00	X						0.	0.	0.
(31) W. DUNCAN GIBBS DIRECTOR	0.00 0.00	X						0.	0.	0.
(32) DEREK GOSHAY DIRECTOR	0.00 0.00	X						0.	0.	0.
(33) MITCH GRAUL DIRECTOR	0.00 0.00	X						0.	0.	0.
(34) ERNEST L. GREER DIRECTOR	0.00 0.00	X						0.	0.	0.
(35) DANIEL GRIDER DIRECTOR	0.00 0.00	X						0.	0.	0.
(36) VENESSA HARRISON DIRECTOR	0.00 0.00	X						0.	0.	0.
(37) KAREN J. HOLCOM DIRECTOR	0.00 0.00	X						0.	0.	0.
(38) TAD HUTCHESON DIRECTOR	0.00 0.00	X						0.	0.	0.
(39) WILLIAM J. JORDAN DIRECTOR	0.00 0.00	X						0.	0.	0.
(40) ALLAN KAMENSKY DIRECTOR	0.00 0.00	X						0.	0.	0.
(41) STEVE KOONIN DIRECTOR	0.00 0.00	X						0.	0.	0.
(42) NATHAN B. KNOWLES DIRECTOR	0.00 0.00	X						0.	0.	0.
(43) BETH LOWRY DIRECTOR	0.00 0.00	X						0.	0.	0.
(44) DOUGLAS A. MURPHY DIRECTOR	0.00 0.00	X						0.	0.	0.
(45) CHUCK PALMER DIRECTOR	0.00 0.00	X						0.	0.	0.
(46) FRANK PATTERSON DIRECTOR	0.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) JENNY PRUITT DIRECTOR	0.00 0.00	X						0.	0.	0.
(48) JUSTIN RANNICK DIRECTOR	0.00 0.00	X						0.	0.	0.
(49) JOHN RICHERT DIRECTOR	0.00 0.00	X						0.	0.	0.
(50) NAPOLEON RUTLEDGE DIRECTOR	0.00 0.00	X						0.	0.	0.
(51) ERIC SCHIMPF DIRECTOR	0.00 0.00	X						0.	0.	0.
(52) SACHIN SHAILENDRA DIRECTOR	0.00 0.00	X						0.	0.	0.
(53) LISA SMITH DIRECTOR	0.00 0.00	X						0.	0.	0.
(54) JOHN STEGEMAN DIRECTOR	0.00 0.00	X						0.	0.	0.
(55) MARK D. WASSERMAN DIRECTOR	0.00 0.00	X						0.	0.	0.
(56) TOM E. WATSON DIRECTOR	0.00 0.00	X						0.	0.	0.
(57) KEN D. WELCH DIRECTOR	0.00 0.00	X						0.	0.	0.
(58) JOE WHITLEY DIRECTOR	0.00 0.00	X						0.	0.	0.
(59) THOMAS WORTHY DIRECTOR	0.00 0.00	X						0.	0.	0.
(60) MARK B. RILEY DIRECTOR	0.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,320,000.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	748,289.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 485,778.				
	h Total. Add lines 1a-1f			3,068,289.			
Program Service Revenue	2 a HOME SALES	Business Code					
		531390	1,146,351.	1,146,351.			
	b SECURE NEIGHBORHOODS	531390	118,949.	118,949.			
	c ADMINISTRATIVE FEES	900099	6,885.	6,885.			
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			1,272,185.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		53,935.			53,935.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other	3,370.			
	b Less: cost or other basis and sales expenses	7b	8,115.				
	c Gain or (loss)	7c	-4,745.				
	d Net gain or (loss)			-4,745.		-4,745.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b	764,011.					
c Net income or (loss) from fundraising events			-764,011.		-764,011.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS INCOME	Business Code					
		900099	1,597.	1,597.			
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d			1,597.				
12 Total revenue. See instructions			3,627,250.	1,273,782.	0.	-714,821.	

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	28,907.	28,907.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	42,756.	42,756.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	719,001.	588,370.	68,753.	61,878.
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	1,520,506.	1,236,940.	149,245.	134,321.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	40,652.	16,021.	22,756.	1,875.
9 Other employee benefits	159,087.	88,842.	38,386.	31,859.
10 Payroll taxes	146,640.	83,407.	41,732.	21,501.
11 Fees for services (nonemployees):				
a Management				
b Legal	869.		869.	
c Accounting	32,662.		32,662.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	4,110,860.	4,059,521.	35,000.	16,339.
12 Advertising and promotion	149,377.	103,330.	12,365.	33,682.
13 Office expenses	269,712.	214,155.	48,615.	6,942.
14 Information technology	723,863.	620,479.	74,853.	28,531.
15 Royalties				
16 Occupancy	352,087.	278,688.	67,664.	5,735.
17 Travel	102,336.	87,747.	14,589.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	69,378.	54,826.	12,024.	2,528.
20 Interest	198,333.		198,333.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	831,416.	776,794.	54,622.	
23 Insurance	129,262.	116,875.	12,387.	
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.)				
a OFFICER HOMES	1,321,234.	1,321,234.		
b CAMERAS	664,551.	664,551.		
c CONNECTIVITY	451,778.	451,778.		
d REPAIRS & MAINTENANCE	351,697.	350,834.	667.	196.
e All other expenses _____	1,374,844.	1,215,384.	158,916.	544.
25 Total functional expenses. Add lines 1 through 24e	13,791,808.	12,401,439.	1,044,438.	345,931.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	471,729.	1	104,604.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	3,363,334.	3	
	4 Accounts receivable, net	884.	4	24,928.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,032,760.	9	630,118.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 52,743,875.		
	b Less: accumulated depreciation	10b 2,356,603.	10c	50,387,272.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	1,782,164.	13	2,603,072.
	14 Intangible assets	31,289.	14	24,767.
	15 Other assets. See Part IV, line 11	1,067,371.	15	1,194,096.
16 Total assets. Add lines 1 through 15 (must equal line 33)	31,615,218.	16	54,968,857.	
Liabilities	17 Accounts payable and accrued expenses	691,446.	17	4,450,070.
	18 Grants payable		18	
	19 Deferred revenue	16,646.	19	11,687.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	11,436,190.	23	11,516,923.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	20,851,447.	25	51,000,608.
	26 Total liabilities. Add lines 17 through 25	32,995,729.	26	66,979,288.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-23,613,896.	27	-12,010,431.
	28 Net assets with donor restrictions	22,233,385.	28	0.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	-1,380,511.	32	-12,010,431.
	33 Total liabilities and net assets/fund balances	31,615,218.	33	54,968,857.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,627,250.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,791,808.
3	Revenue less expenses. Subtract line 2 from line 1	3	-10,164,558.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-1,380,511.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-465,362.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	-12,010,431.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- 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

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

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **ATLANTA POLICE FOUNDATION, INC.** Employer identification number **11-3655936**

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **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: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8717297.	2830023.	1730605.	921,204.	3068289.	17267418.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge	224,668.	244,000.	118,583.	216,940.	263,493.	1067684.
4 Total. Add lines 1 through 3	8941965.	3074023.	1849188.	1138144.	3331782.	18335102.
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)						3468628.
6 Public support. Subtract line 5 from line 4.						14866474.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	8941965.	3074023.	1849188.	1138144.	3331782.	18335102.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	63,693.	26,970.	6,599.	963.	53,935.	152,160.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			8,133.	14,697.	1,597.	24,427.
11 Total support. Add lines 7 through 10						18511689.
12 Gross receipts from related activities, etc. (see instructions)					12	6,682,372.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	80.31	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	54.91	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. 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			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. 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			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Part VI

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

SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:

DESCRIPTION: CASH

DATE: 04/23/21 AMOUNT: 10000000.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization ATLANTA POLICE FOUNDATION, INC. Employer identification number 11-3655936

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, and non-certified historic structures), and questions about monitoring, expenses, and reporting requirements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting requirements for art and historical treasures, and a table for revenue and assets included.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		97,252.		97,252.
b Buildings		18,805,304.	1,635,522.	17,169,782.
c Leasehold improvements		528,532.	26,427.	502,105.
d Equipment		313,012.	261,770.	51,242.
e Other		32,999,775.	432,884.	32,566,891.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				50,387,272.

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO AFP SUPPORT	49,743,972.
(3) LEASE LIABILITY	1,256,636.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	51,000,608.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information

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

PART X, LINE 2:

THE ORGANIZATION RECOGNIZES THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITY, BASED ON THE TECHNICAL MERITS OF THE POSITION. AS OF DECEMBER 31, 2022 AND 2021, THERE ARE NO KNOWN ITEMS WHICH WOULD RESULT IN A MATERIAL ACCRUAL RELATED TO WHERE THE ORGANIZATION HAS FEDERAL OR STATE ATTRIBUTABLE TAX POSITIONS. GENERALLY, TAXING AUTHORITIES HAVE FROM THE LATER OF THE TAXING FILING OR EXTENDED DUE DATE TO EXAMINE A TAX FILING.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ATLANTA POLICE FOUNDATION, INC.

Part I General Information on Grants and Assistance

Employer identification number
11-3655936

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
COLUMBUS STATE UNIVERSITY 4225 UNIVERSITY AVE COLUMBUS, GA 31907	58-6011208	115	28,907.	0.	N/A	N/A	OFFICER TUITION

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **1**
- 3** Enter total number of other organizations listed in the line 1 table **0**

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

Schedule I (Form 990) 2023

Part III

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	29	42,756.	0.	N/A	N/A

Part IV

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

PART I, LINE 2:

THE TUITION REIMBURSEMENTS ALLOW OFFICERS TO OBTAIN UNDERGRADUATE AND GRADUATE DEGREES IN A VARIETY OF DISCIPLINES, STRENGTHENING THE PROFESSIONALISM AND KNOWLEDGE OF APD OFFICERS. TUITION REIMBURSEMENT PARTICIPANTS AGREE TO EXTEND THEIR EMPLOYMENT COMMITMENTS WITH APD FOR AN ADDITIONAL THREE YEARS FOR THIS SCHOLARSHIP AWARD. THIS PROGRAM IS A KEY ELEMENT IN THE IMPROVEMENT OF ATTRITION NUMBERS AND STRENGTHENS THE RANKS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ATLANTA POLICE FOUNDATION, INC.

Employer identification number

11-3655936

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **ATLANTA POLICE FOUNDATION, INC.** Employer identification number **11-3655936**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	1	14,000.	FAIR MARKET VALUE
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other	X	3	147,100.	FAIR MARKET VALUE
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (GIFT CARDS)	X	3	209,150.	FAIR MARKET VALUE
26 Other (TICKETS)	X	7	83,038.	FAIR MARKET VALUE
27 Other (FURNISHINGS)	X	1	13,300.	FAIR MARKET VALUE
28 Other (FOOD/DRINK)	X	11	12,737.	FAIR MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **1**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

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

PART I, OTHER TYPES OF PROPERTY:

MISCELLANEOUS ITEMS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 11

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 6453.

(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE

SCHEDULE M, PART I, COLUMN (B):

COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ATLANTA POLICE FOUNDATION, INC.

Employer identification number

11-3655936

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

INVITING CITY FOR ALL ITS RESIDENTS, WORKERS AND VISITORS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

MENTORSHIP, EXTRA SECURITY PATROLLING, COMMUNITY SERVICE ENGAGEMENT AS WELL AS NEIGHBORHOOD MEETING ATTENDANCE. THESE ENGAGEMENTS ARE DESIGNED TO ENCOURAGE MUTUAL SUPPORT AND UNDERSTANDING, IMPROVE DEPARTMENT CULTURE AND REDUCE CRIME. IN 2023 APF CONSTRUCTED AND SOLD AN ADDITIONAL 4 HOMES TO WELL QUALIFIED POLICE OFFICERS IN AN EFFORT TO REDUCE CRIME AND BUILD RELATONSHIPS IN STRATEGIC NEIGHBORHOODS. THAT EFFORT WAS BOLSTERED BY AN APARTMENT RENTAL PROGRAM AIMED AT ACHIEVING THE SAME GOALS. MORE THAN 75 OFFICERS PARTICIPATED IN THAT PROGRAM IN 2023, EXPANDING THE PROGRAM TO ITS HIGHEST LEVEL OF PARTICIPATION YET.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

APPROPRIATE PROFESSIONAL EXPERTISE TO EACH INDIVIDUAL CASE, ENSURING RELEVANCE AND A PERSONALIZED APPROACH.

THE WESTSIDE AT-PROMISE CENTER HAS BEEN IN OPERATION SINCE AUGUST 2017, SERVING MORE THAN 2,100 YOUTH. THE SERVICES PROVIDED INCLUDE INDIVIDUAL, GROUP AND FAMILY THERAPY, EDUCATIONAL ASSISTANCE SUCH AS TUTORING, GED CLASSES, STEAM INSTRUCTIONS AND HOMEWORK ASSISTANCE, WORKFORCE DEVELOPMENT, MUSIC, DIGITAL MEDIA, AND RECREATIONAL ACTIVITIES.

IN 2020, APF OPENED ITS SECOND AT-PROMISE CENTER, LOCATED ON

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

Schedule O (Form 990) 2023

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
---	--

METROPOLITAN PARKWAY ON THE SOUTHSIDE OF ATLANTA, AND OPENED ITS THIRD AT-PROMISE CENTER IN MARCH 2022, ON THE CAMPUS OF THE ANDREW AND WALTER YOUNG FAMILY YMCA ON CAMPBELLTON ROAD IN SOUTHWEST ATLANTA.

AT-PROMISE STATISTICS

RECIDIVISM RATE: 8.9%

NUMBER OF HIGH SCHOOL SENIORS WHO GRADUATED IN 2023: 100%

NUMBER OF YOUTH WHO RECEIVED A GED IN 2023: 13

NUMBER OF YOUTH WHO RECEIVED A JOB IN 2023: 89% (OF THOSE WHO APPLIED)

THERE WERE 126 VOLUNTEERS AT FIELD DAY IN 2023.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THE ATLANTA POLICE LEADERSHIP INSTITUTE PROVIDES ONGOING EDUCATION FOR APD OFFICERS WHO SEEK PROMOTION TO HIGHER LEADERSHIP POSITIONS WITHIN THE DEPARTMENT. ALL APD RECRUITS MUST COMPLETE TIER I OF THE PROGRAM. TIERS II-V ARE REQUIRED COMPONENTS OF APD'S PROMOTIONAL PROCESS, WITH THE FINAL TIER BEING DEDICATED TO ONLY THOSE WHO DEMONSTRATE THE CAPACITY OF BECOMING A POLICE CHIEF. THE PROGRAM HAS A DEDICATED AND SCHOLARLY TEAM WHOSE FOCUS IS TO ENSURE THAT THE TRAINING OFFERED IS BEST IN CLASS AND FOCUSED ON LEADERSHIP. IN 2023, APLI LEAD INITIATIVES AND DELIVERED TRAINING TO OVER 350 LAW ENFORCEMENT PERSONNEL BOTH SWORN AND NOT TO INCLUDE 1,000 HOURS OF LEADERSHIP TRAINING, 30 HOURS OF COMMUNITY ENGAGEMENT, AND 24 HOURS OF OFFICER RESILIENCY TRAINING.

B. SCHOLARSHIPS

IN 2023, APF PROVIDED FINANCIAL AID TO MORE THAN 20 APD OFFICERS AND

Name of the organization

ATLANTA POLICE FOUNDATION, INC.

Employer identification number

11-3655936

CIVILIAN EMPLOYEES BY WAY OF TUITION REIMBURSEMENTS AND ADVANCED LEADERSHIP TRAINING. THESE REIMBURSEMENTS ALLOW OFFICERS TO OBTAIN UNDERGRADUATE AND GRADUATE DEGREES IN A VARIETY OF DISCIPLINES, STRENGTHENING THE PROFESSIONALISM AND KNOWLEDGE OF APD OFFICERS. TUITION REIMBURSEMENT PARTICIPANTS AGREE TO EXTEND THEIR EMPLOYMENT COMMITMENTS WITH APD FOR AN ADDITIONAL THREE YEARS FOR THIS SCHOLARSHIP AWARD. THIS PROGRAM IS A KEY ELEMENT IN THE IMPROVEMENT OF ATTRITION NUMBERS AND STRENGTHENS THE RANKS.

C. RECRUITMENT

IN 2023, APD ADDED 196 TO THE RANKS MOVING CLOSER TO THE GOAL OF HIRING 250 OFFICERS PER YEAR. THE APF "BUILD THE FORCE" CAMPAIGN, LAUNCHED IN 2022 TO SUPPORT APD'S HIRING INITIATIVE, CONTINUES TO BE INSTRUMENTAL IN THE GROWTH OF HIRING TOP CANDIDATES FOR APD.

D. LIFE INSURANCE

THANKS TO THE PHILANTHROPY OF THE CONGREGATION OF PEACHTREE PRESBYTERIAN CHURCH, EVERY APD OFFICER, ATLANTA FIRE RESCUE OFFICER, AND FULTON COUNTY SHERIFF IS COVERED BY A \$100,000 LIFE INSURANCE POLICY IN THE EVENT OF LOSS OF LIFE IN THE LINE OF DUTY. THIS PROGRAM IS A KEY EXAMPLE OF COMMUNITY SUPPORT APF CONTINUES TO UNCOVER FOR THE MEN AND WOMEN WHO PUT THEIR LIVES ON THE LINE FOR ALL OF US. THIS HAS BEEN A LONG-STANDING OFFERING MADE CONSISTENTLY POSSIBLE BY THE GENEROUS SUPPORT OF THE CHURCH'S LEADERSHIP AND CONGREGATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
---	--

OPERATION SHIELD & CONNECT ATLANTA

OPERATION SHIELD HAS BECOME THE ESSENTIAL FRAMEWORK SUPPORTING APD'S REAL-TIME CRIME INTELLIGENCE CENTER. THE DEVICE GRID IS COMPRISED OF THOUSANDS OF VIDEO CAMERAS, LICENSE PLATE READERS, AND GUNSHOT DETECTION DEVICES, AND IS MONITORED AROUND THE CLOCK BY A DEDICATED TEAM OF SWORN OFFICERS AND CIVILIAN PERSONNEL. THESE TECHNOLOGIES REMAIN CRITICAL TO APD'S INVESTIGATIVE AND INTERDICTION EFFORTS.

IN 2023, OPERATION SHIELD GREW BY AN ADDITIONAL 78 CITY-OWNED DEVICES TO MORE EQUAL MORE THAN 1,562 CAMERAS AND MORE THAN 692 LICENSE PLATE READERS. WITH THE RELATIVELY NEW CAPABILITY TO INGEST PRIVATE SECORT DEVICES VIA THE FUSUS PLATFORM, THE CONNECT ATLANTA/OPERATION SHIELD FOOTPRINT NOW EXTENDS TO 19,865 CAMERAS ACROSS ATLANTA.

THE CONNECT PROGRAM INCLUDES A HANDHELD RADIO COMPONENT THAT FACILITATES DIRECT COMMUNICATION BETWEEN PRIVATE SECTOR SECURITY PERSONNEL AND ATLANTA 911. THIRTY-FIVE NEW USERS JOINED THE PROGRAM IN 2023, INCREASING THE TOTAL TO 250 PARTICIPANTS. THESE PROGRAMS ARE VITAL TO ATLANTA'S CRIME REDUCTION STRATEGY AND DEMONSTRATE THE VALUE OF PUBLIC/PRIVATE PARTNERSHIPS.

CRIME STOPPERS OF GREATER ATLANTA

CRIME STOPPERS OF GREATER ATLANTA (CSGA) CONTINUES TO BE THE LARGEST CRIME STOPPERS PROGRAM WITHIN THE SOUTHEASTERN UNITED STATES. THE ATLANTA POLICE FOUNDATION (APF) MANAGES THE METRO WIDE PROGRAM, UNDER THE SUPERVISION OF AN APD SGT. THEY WORK COLLABORATIVELY WITH OVER 100

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
---	--

LAW ENFORCEMENT JURISDICTIONS SPANNING OVER 70 COUNTIES; WHILE SIMULTANEOUSLY WORKING WITH A DIVERSE SUBCOMMITTEE OF APF BOARD MEMBERS, WHOSE FOCUS IS TO ENSURE OVERSIGHT AND GOVERNANCE OF THE PROGRAM. IN 2023, THERE WAS APPROXIMATELY 5,000 ANONYMOUS TIPS PROCESSED, AND OVER 7,500 TIP FOLLOW UPS; MANY OF WHICH LED TO THE ARREST OF VIOLENT OFFENDERS, AND THE RECOVERY OF APPROXIMATELY \$200,000 IN PROPERTY, DRUGS, GUNS, AND CASH. CRIMES AGAINST PERSONS FELL BY 18% IN ATLANTA IN 2023, AND CSGA WAS A CONTRIBUTING FACTOR TO THAT REDUCTION. MORE THAN \$66,000 IN REWARD PAYMENTS WERE APPROVED IN 2023 BY THE PROGRAM, LEADING TO THE ARREST OF APPROXIMATELY 62 CRIMINALS. AGGRAVATED ASSAULT MADE UP THE BULK OF THE ARRESTS BY THE PROGRAM, FOLLOWED BY DRUGS, ROBBERY, AND MURDER.

REPEAT OFFENDERS

THE COMMISSION FORMULATED THE REPEAT OFFENDER TRACKING UNIT (ROTU) IN 2022 TO EXECUTE THE COMMISSION'S STRATEGIC OBJECTIVES WHILE CREATING AN ATMOSPHERE OF COLLABORATION. ROTU ENABLES OFFICIALS OF THE RELEVANT CITY, COUNTY, STATE, AND FEDERAL AGENCIES TO WORK IN CLOSER COORDINATION, SHARE RELEVANT INFORMATION IN REAL TIME. BUILDING ON THE SUCCESS FROM 2022, THE INITIATIVE EXPANDED ITS PARTNERSHIPS AND EFFORTS TO IMPROVE THE SYSTEM IN 2023.

IN 2021 REPEAT OFFENDERS MADE UP 30% OF APD FELONY ARREST, IN 2022 THIS NUMBER DROPPED TO 26%, AND IN 2023 DOWN TO 24%. LED BY APD, THE TRACKING UNIT IDENTIFIED 1,021 INDIVIDUAL REPEAT OFFENDERS IN 2023, WHO IN TOTAL ACCOUNTED FOR 1,195 NEW CRIMINAL CASES. THE UNIT'S WORK HAS INCREASED THE PREVALENCE OF THESE REPEAT OFFENDERS BEING HELD WITHOUT

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
---	--

BOND BY 4% IN 2023 AS COMPARED TO THE PREVIOUS YEAR. THE COMMISSION FORMULATED NEW PARTNERSHIPS CREATING A COALITION OF OVER 30 DIFFERENT ORGANIZATIONS, TO INCLUDE THE FULTON COUNTY ACCOUNTABILITY COURT, AND US ATTORNEY'S OFFICE.

THE TRACKING UNIT WAS ABLE TO REFER OVER 300 OFFENDERS TO THE FULTON COUNTY ACCOUNTABILITY COURT REHABILITATION PROGRAM AND HAD A 57% ACCEPTANCE RATE FOR THE FEDERAL CASE ADOPTION FOR VIOLENT REPEAT OFFENDERS. THE ROTU PLAYED A MAJOR ROLE IN THE CITIES CRIMES AGAINST PERSONS DROP OF 18% IN 2023, AND IS CONTINUING TO CREATE ENHANCEMENT, AND SOLUTIONS FOR THE MULTIJURISDICTIONAL CRIMINAL JUSTICE SYSTEM. THE UNIT IS STAFFED BY MEMBERS OF THE ATLANTA POLICE FOUNDATION (APF), ATLANTA POLICE DEPARTMENT, FULTON COUNTY SHERIFF, FULTON COUNTY DISTRICT ATTORNEY, AND STATE OFFICE OF COMMUNITY SUPERVISION. SEVERAL OTHER STATE, COUNTY AND FEDERAL PARTNERS REGULARLY ATTEND MONTHLY WORKING GROUP MEETINGS HOSTED BY THE REPEAT OFFENDER TRACKING UNIT TO ENSURE THE EFFORT IS COMPREHENSIVE AND HOLISTIC. PRELIMINARY WORK IS BEING CONDUCTED TO INTRODUCE GPS TRACKING TECHNOLOGY TO THE PROGRAM. IN 2023 THE TRACKING UNIT CONDUCTED A PILOT TO TEST NEW TRACKING TECHNOLOGY IN AN EFFORT TO IMPROVE ELECTRONIC MONITORING. THE COMMISSION HAS MADE A RECOMMENDATION TO HAVE STRICTER MONITORING OF REPEAT OFFENDERS PRETRIAL. THE GOAL OF THIS IS TO ACHIEVE DETERRENCE THROUGH LIVE MONITORING OF THESE OFFENDERS. THIS ABILITY COMES AS A BENEFIT OF THE INFRASTRUCTURE INVESTMENT MADE BY APF IN 2021 TO IMPROVE APD'S REAL TIME CRIME CENTER.

EXPENSES \$ 3,090,777. INCLUDING GRANTS OF \$ 0. REVENUE \$ 8,482.

FORM 990, PART VI, SECTION B, LINE 11B:

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
---	--

A DRAFT OF THE FORM 990 IS CIRCULATED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

NO DIRECTOR OR OFFICER OF THE CORPORATION, OR ANY FAMILY MEMBER OF SUCH DIRECTOR OR OFFICER, OR ANY CORPORATION, PARTNERSHIP, ASSOCIATION, TRUST, OR OTHER ENTITY IN WHICH SUCH DIRECTOR OR OFFICER, OR FAMILY MEMBER OF SUCH DIRECTOR OR OFFICER, SERVES AS A DIRECTOR, OFFICER, PARTNER OR TRUSTEE, OR HAS A FINANCIAL INTEREST, SHALL BE PERMITTED TO ENTER INTO ANY CONTRACT OR TRANSACTION WITH THE CORPORATION UNLESS:

(A) SUCH DIRECTOR OR OFFICER DISCLOSES TO THE BOARD OF DIRECTORS OF THE CORPORATION THE MATERIAL FACTS AS TO HIS OR HER OR HIS OR HER FAMILY MEMBER'S RELATIONSHIP WITH OR INTEREST IN THE ENTITY PROPOSING TO ENTER INTO THE CONTRACT OR TRANSACTION WITH THE CORPORATION, AND THE BOARD OF DIRECTORS AUTHORIZES THE CONTRACT OR TRANSACTION BY THE AFFIRMATIVE VOTE OF A MAJORITY OF THE DISINTERESTED DIRECTORS (EVEN THOUGH THE DISINTERESTED DIRECTORS MAY CONSTITUTE LESS THAN A QUORUM); AND (B) THE CONTRACT OR TRANSACTION IS FAIR TO THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE APPROVES THE CEO SALARY AND COMPARES TO MARKET DATA.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. THE FINANCIAL STATEMENTS ARE POSTED TO THE ORGANIZATION'S WEBSITE.

Name of the organization ATLANTA POLICE FOUNDATION, INC.	Employer identification number 11-3655936
--	---

FORM 990, PART VIII, LINE 8A:

THE FUNDRAISING INCOME FROM THE FUNDRAISING EVENTS ARE REPORTED ON THE FORM 990 FOR APF SUPPORT, INC., A RELATED 501(C)(3) ORGANIZATION.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OUTSIDE SERVICES :

PROGRAM SERVICE EXPENSES	4,059,521.
MANAGEMENT AND GENERAL EXPENSES	35,000.
FUNDRAISING EXPENSES	16,339.
TOTAL EXPENSES	4,110,860.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	4,110,860.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT OR SELECTION PROCESS.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ATLANTA POLICE FOUNDATION, INC.

Employer identification number
11-3655936

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
APF PROPERTIES, LLC 191 PEACHTREE ST NE #191 ATLANTA, GA 30303	HOLDS PROGRAM RELATED REAL ESTATE	GEORGIA	0.	0.	ATLANTA POLICE FOUNDATION, INC.

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?		
						Yes	No	
APF SUPPORT, INC. - 84-2208967 191 PEACHTREE ST NE #191 ATLANTA, GA 30303	SUPPORT ATLANTA POLICE FOUNDATION, INC.	GEORGIA	501(C)(3)	LINE 12A, I N/A				X

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

Schedule R (Form 990) 2023

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

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

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

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

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	APF SUPPORT, INC.	E	29,542,944.FMV	
(2)				
(3)				
(4)				
(5)				
(6)				

