

# STATE OF GEORGIA UNCLAIMED PROPERTY ANNUAL FILING REPORT REPORT YEAR 2024



**ONLINE REPORTING NOW AVAILABLE**

**HOLDER REPORTING PORTAL LOCATED AT:**

<https://gareporting.unclaimedproperty.com/>

**IF REPORTING OVER 25 ACCOUNTS, HOLDERS ARE REQUIRED TO SUBMIT REPORTS THROUGH GEORGIA'S HOLDER REPORTING PORTAL. ALL OTHER HOLDERS ARE STRONGLY ENCOURAGED TO DO SO. REPORTING THROUGH THE PORTAL ELIMINATES THE NEED TO SUBMIT ANY FORMS. ONLINE SUBMISSIONS MUST BE IN THE NATIONAL ASSOCIATION OF UNCLAIMED PROPERTY ADMINISTRATORS (NAUPA) FORMAT.**

**FOR MORE INFORMATION EMAIL US AT**

[UCP.REPORTING@DOR.GA.GOV](mailto:UCP.REPORTING@DOR.GA.GOV)

**PHONE: (855) 329-9863**

# UNCLAIMED PROPERTY

## INTRODUCTION

The Disposition of Unclaimed Property Act, O.C.G.A. Section 44-12-190 et. seq., (the "Act") protects the rights of owners of abandoned property and relieves those holding the property of the continuing responsibility to account for such property. Under the Act, when someone ("holder") holds property that belongs to some-one else ("owner") but has lost contact with that owner for a specified period of time ("dormancy period"), that holder must turn over ("remit") the property to the state. The remittance must be accompanied by a report describing the property and contain certain information that will help the state advertise the property and take other steps to return the property to the rightful owner. The state serves as custodian for any property remitted under the Act, allowing the owners or their heirs an opportunity to claim their property in the future.

This booklet contains reporting forms and instructions to help holders comply with the Act. See the table of contents for the appropriate form for your entity.

Please note that some holders may need to submit more than one report type. Each individual report should be accompanied by a separate NAUPA file and remittance.

**EXAMPLE:** A bank reporting cash, safe deposit box contents and securities  
Should file three (3) separate reports, CD's and remittances.  
(see forms and instructions)

Entities with no property to remit are required to file a negative report. Please see table of contents for these forms and instructions.

## WHO MUST REPORT

Anyone that has abandoned property must remit it to the state if they have held the property for longer than the dormancy period. The Unclaimed Property Act applies to both for-profit and non-profit businesses as well as governmental entities. Holders incorporated in Georgia must report to this state any unclaimed property of owners having a Georgia address, or an incomplete, unknown or foreign address. Holders not incorporated in Georgia must remit unclaimed property belonging to an owner having a Georgia address.

## Unclaimed Property Time Line

### ALL HOLDERS (EXCEPT INSURANCE COMPANIES)

July 1, 2023 - June 30, 2024 (Report items reaching dormancy during this time)	July 1, 2024 - September 1, 2024 (no less than 60 days, no more than 120 days)	November 1, 2024
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REPORTING PERIOD

  
HOLDER TRY TO LOCATE OWNER  
(NOTIFICATION PERIOD)

  
REPORT & REMITTANCE DUE

### INSURANCE COMPANIES

January 1, 2024 - December 31, 2024	January 1, 2025 - March 1, 2025 (no less than 60 days, no more than 120 days)	May 1, 2025
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**If you are filing for the first time, the report should include all property dated prior to June 30, 2019.**

**STEPS FOR FILING YOUR ANNUAL UNCLAIMED PROPERTY REPORT**

**STEP 1: IDENTIFY THE UNCLAIMED PROPERTY** required to be remitted to the Georgia Department of Revenue, Unclaimed Property Program. Examples of property to be remitted to the state as unclaimed property include savings and checking accounts, unclaimed wages, dividends, credit balances and outstanding checks. For a complete listing of the types of property that must be remitted under the Act, refer to Page 3.

**STEP 2: ATTEMPT TO LOCATE THE OWNERS OF THE UNCLAIMED PROPERTY IDENTIFIED IN STEP 1.** This process is defined as “due diligence.” If an account has a value of \$50 or more, the law requires that holders must make an effort to communicate with an owner prior to remitting the property to the state. You can do this by sending a first class letter to the owner’s last known address at least 60 days, but no more than 120 days, before remitting the owner’s property to the state. A sample due diligence letter can be found on Page 5.

**STEP 3: SEND YOUR REPORT AND CHECK PAYABLE TO** the Georgia Department of Revenue, Unclaimed Property Program. Insurers must file by May 1. All other holders must file by November 1.

**SECURITIES:** Securities must be transferred to Georgia’s custodial account with Well Fargo Advisors, DTC Number 0141, Account Number 7888-0087. DTC Transfer Form UP-3S must accompany the Holder Summary Report. See table of contents for forms and instructions for remitting securities.

**Example Property Types**

See Page 3 for complete list.

HOLDER TYPE	PROPERTY TYPE	DORMANCY PERIOD	REPORTING PERIOD	LAST ACTIVITY DATE	NOTIFICATION PERIOD	REPORT & REMIT DUE
Corporation	Unclaimed Wages	1 Year	7/1/23- 6/30/24	7/1/22 - 6/30/23	7/1/24 - 9/1/24	11/1/24
Insurance Company	Unc. Matured Policy Benefits	5 Years	1/1/24 - 12/31/24	1/1/19 - 12/31/19	1/1/25 - 3/1/25	5/1/25
Banks	Savings Accounts	5 Years	7/1/23 - 6/30/24	7/1/18 - 6/30/19	7/1/24 - 9/1/24	11/1/24
Corporation	Uncashed Travelers Cks.	15 Years	7/1/23 - 6/30/24	7/1/08 - 6/30/09	N/A	11/1/24

**EXAMPLE (A)**

If you are a corporation and have identified uncashed payroll checks dated 7/1/22 - 6/30/23, you should report them as unclaimed property for the reporting period 7/1/23 - 6/30/24. You should attempt to notify the payee of the check at the last known address between 7/1/24 and 9/1/24. If these attempts fail, you must remit the face amount of each unclaimed payroll check with the report you file by 11/1/24.

**EXAMPLE (B)**

If you are an insurer and have identified uncollected matured policy benefits dated 1/1/19 - 12/31/19 you should report them as unclaimed property for the reporting period 1/1/24 - 12/31/24. You should attempt to notify the insured/beneficiary at the last known address between 1/1/25 and 3/1/25. If these attempts fail, you must remit the policy value with the report you file by 5/1/25.

# PROPERTY CODES WITH DORMANCY PERIODS

CODE	YEARS	CODE	YEARS
<b>Account Balances</b>		<b>Mineral Proceeds</b>	
AC01	5	MI01	5
AC02	5	MI02	5
AC03	5	MI03	5
AC04	5	MI04	5
AC05	5	MI05	5
AC06	5	MI06	5
AC07	5	MI07	5
AC08	5	MI08	5
AC99	5	MI09	5
		MI99	5
<b>Official Checks</b>		<b>Safe Deposit/Safekeeping</b>	
CK01	5	SD01	2
CK02	5	SD07	2
CK04	5		
CK05	5	<b>Miscellaneous</b>	
CK06	5	MS01	1
CK07	7	MS02	1
CK08	15	MS03	5
CK09	5	MS04	5
CK10	5	MS05	5
CK11	5	MS06	5
CK12	5	MS07	5
CK13	5	MS08	5
CK14	5	MS09	5
CK15	5	MS10	5
CK16	5	MS11	5
CK99	5	MS12	5
<b>Educational Savings Accounts (includes Coverdell Educational Savings Accounts and College Savings Plans)</b>		MS13	5
CS01	5	MS14	5
CS02	5	MS15	1
CS03	5	MS16	5
CS04	5	MS17	5
		MS18	5
		MS99	5
<b>Court Funds</b>		<b>Securities</b>	
CT01	5	SC01	5
CT02	5	SC02	5
CT03	5	SC03	5
CT04	5	SC04	5
CT05	5	SC05	5
CT99	5	SC06	5
		SC07	5
		SC08	5
		SC09	5
		SC10	5
		SC11	5
		SC12	5
		SC13	5
		SC14	5
		SC15	5
		SC16	5
		SC17	5
		SC18	5
		SC19	5
		SC20	5
		SC21	5
		SC99	5
<b>Health Savings Plans</b>		<b>Trust Property</b>	
HS01	5	TR01	5
HS02	5	TR02	5
		TR03	5
		TR04	5
		TR05	5
		TR99	5
<b>Insurance</b>		<b>Utilities</b>	
IN01	5	UT01	5
IN02	5	UT02	5
IN03	5	UT03	5
IN04	5	UT99	5
IN05	5		
IN06	5	<b>All Other Property</b>	
IN07	5	ZZZZ	5
IN08	5		
IN09	2		
IN99	5		
<b>Traditional IRA, SEP IRA, SARSEP IRA and SIMPLE IRA</b>			
IR01	5		
IR02	5		
IR03	5		
IR04	5		
<b>Roth IRA</b>			
IR05	5		
IR06	5		
IR07	5		
IR08	5		

## OWNER RELATIONSHIP CODES

RELATIONTYPECODE	RELATIONTYPECODE
AD	Administrator
AF	Attorney For
AG	Agent For
AN	And
AO	And/Or
BF	Beneficiary
CC	Co-Conservator
CF	Custodian For
CN	Conservator
EX	Executor or Executrix
FB	For Benefit Of
GR	Guardian For
IN	Insured
JC	Joint Tenants in Common
JT	Joint Tenants with Right of Survivorship
OR	Or
P	Primary Owner
PA	Payee
PO	Power of Attorney
RE	Remitter
SO	Sole Owner
TE	As Trustee For
UG	Uniform Gift to Minors Act (UGMA)

# SAMPLE LETTER FOR OWNER NOTIFICATION (Due Diligence)

July 1, YEAR

Ray Smith (Owner Name  
4321 Right Ave.  
City Name, State 98765

RE: (Description of Property

Dear Mr. Smith:

Our records indicate that we are holding the following property due to you:

Owner Name	Identifying #	Description

Please complete the statement at the bottom of this letter to indicate your understanding of this property and mail to:

HOLDER NAME  
CONTACT PERSON OR DEPARTMENT  
HOLDER ADDRESS  
CONTACT PHONE NUMBER (OPTIONAL

You must return this letter by (DATE. If you fail to do so, we will deliver your property to the Georgia Department of Revenue, Unclaimed Property Program as required by law. After this date, any attempts to reclaim your property will need to be directed to the Georgia Department of Revenue.

Sincerely,  
Unclaimed Accounts

STATEMENT

\_\_\_ This property belongs to me.

\_\_\_ This property does not belong to me.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE