STATE OF GEORGIA
UNCLAIMED PROPERTY
ANNUAL FILING
REPORT 2026

GOVERNMENT ENTITIES

(Rev. 06/2026)

THE DUE DILIGENCE REQUIREMENTS FOR GEORGIA HAVE CHANGED.

If an account has a value of $50 or more, holders are still required to communicate with an owner prior to remitting the property to the state. However, the form that this communication takes has changed.

Beginning July 1st, 2026, Holders must:

1) **Send notice by first-class letter to the owner's last known address if the property has a value of $50 or more but does not exceed $10,000.**

2) **Send notice by certified mail to the owner's last known address if the property is over $10,000.**

3) **If the holder maintains a valid email address for the owner and the owner has agreed to receive communications electronically, an additional notice must be sent by electronic mail.**

The cost of compliance may not be deducted from the remitted property.

ONLINE REPORTING AND PAYMENT ARE 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

PHONE: (855) 329-9863

REPORTING ELECTRONICALLY?

FREE SOFTWARE TO FILE

LOCATED AT

https://hrspro.unclaimedproperty.com/

A USER'S GUIDE FOR THIS PROGRAM IS AVAILABLE ON THE WEBSITE. THE PROGRAM HAS AN EXCEL TEMPLATE THAT ALLOWS YOU TO PLACE INFORMATION INTO AN EXCEL FILE AND THEN IMPORT IT INTO THE NATIONAL ASSOCIATION OF UNCLAIMED PROPERTY ADMINISTRATORS (NAUPA) FORMAT PROGRAM.

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GEORGIA DEPARTMENT OF REVENUE
UNCLAIMED PROPERTY REPORTING
2026
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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 someone 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 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 and remit 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 report and remit unclaimed property belonging to an owner having a Georgia address.

Unclaimed Property Timeline

ALL GOVERNMENTAL ENTITIES

July 1, 2025 - June 30, 2026 (Report items reaching dormancy during this time)	**July 1, 2026 - Sept 1, 2026** (no less than 60 days, no more than 120 days)	**November 1, 2026**
REPORTINGPERIOD	HOLDERSTRYTO LOCATE OWNER (NOTIFICATIONPERIOD)	REPORT&REMITTANCE DUE

If you are filing for the first time, the report should include all property dated prior to June 30, 2021.

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: TRY 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 try to communicate with an owner prior to remitting the property to the state.

For amounts that do not exceed $10,000 this can be done by sending a first-class letter to the owner's last known address at least 60 days, but not more than 120 days, before remitting the owner's property to the state. Amounts over $10,000 require the notice to be sent by Certified Mail. If the holder maintains a valid email address for the owner and the owner has agreed to receive communications electronically, an additional notice must be sent by electronic mail. A sample due diligence letter may be found on page 5.

STEP 3: SEND YOUR REPORT AND CHECK PAYABLE TO the Georgia Department of Revenue, Unclaimed Property Program. Government entities must file by November 1.

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
State Agency	Unclaimed Wages	1 Year	7/1/25 - 6/30/26	7/1/24 - 6/30/25	7/1/26 - 9/1/26	11/1/26
County	Customer Overpayments	5 Years	7/1/25 - 6/30/26	7/1/20 - 6/30/21	7/1/26 - 9/1/26	11/1/26

EXAMPLE (A)

If you are a government entity and have identified uncashed payroll checks dated 7/1/24 - 6/30/25, you should report them as unclaimed property for the reporting period 7/1/25 - 6/30/26. You should attempt to notify the payee of the check at the payee's last known address between 7/1/26 and 9/1/26. If these attempts fail, you must remit the face amount of each unclaimed payroll check with the report you file by 11/1/26.

EXAMPLE (B)

If you are a government entity and have identified uncashed customer refunds dated 07/1/20 - 06/30/21, you should report them as unclaimed property for the reporting period 07/1/25 - 06/30/26. You should attempt to notify the payee of the check at the last known address between 07/01/26 and 09/01/26. If these attempts fail, you must remit the face amount of each unclaimed refund check with the report you file by 11/1/26.

PROPERTY CODES WITH DORMANCY PERIODS

CODE	YEARS
Account Balances	
AC01 Checking Accounts	5
AC02 Savings Accounts	5
AC03 Matured CD or Savings Certificates	5
AC04 Christmas Club Funds	5
AC05 Deposit to Secure Funds	5
AC06 Security Deposits	5
AC07 Unidentified Deposits	5
AC08 Suspense Accounts	5
AC99 Aggregate Account Balance Due	5
Official Checks	
CK01 Cashier's Checks	5
CK02 Certified Checks	5
CK04 Treasurer's Checks	5
CK05 Drafts	5
CK06 Warrants	5
CK07 Money Orders	7
CK08 Traveler's Checks	15
CK09 Foreign Exchange Checks	5
CK10 Expense Checks	5
CK11 Pension Checks	5
CK12 Credit Checks or Memos	5
CK13 Vendor Checks	5
CK14 Checks Written Off to Income	5
CK15 Other Outstanding Official Checks	5
CK16 CD Interest Checks	5
CK99 Aggregate Uncashed Checks	5
Educational Savings Accounts (includes Coverdell Educational Savings Accounts and College Savings Plans)	
CS01 Cash	5
CS02 Mutual Funds	5
CS03 Securities	5
CS04 Reserved for Educational Savings Accounts (Code Reserved for future use)	
Court Funds	
CT01 Escrow Funds	5
CT02 Condemnation Awards	5
CT03 Missing Heirs' Funds	5
CT04 Suspense Accounts	5
CT05 Other Court or Public Authority Funds	5
CT99 Aggregate Court Deposits	5
Health Savings Plans	
HS01 Health Savings Account	5
HS02 Health Savings Account Investment	5
Insurance	
IN01 Individual Policy Benefits of Claims	5
IN02 Group Policy Benefits or Claims	5
IN03 Proceeds Due Beneficiaries	5
IN04 Proceeds from Matured Policies	5
IN05 Premium Refunds	5
IN06 Unidentified Remittances	5
IN07 Other Amounts Due Under Policy	5
IN08 Agent Credit Balances	5
IN09 Limited Age	2
IN99 Aggregate Insurance Property	5
Traditional IRA, SEP IRA, SARSEP IRA and SIMPLE IRA	
IR01 Cash	5
IR02 Mutual Funds	5
IR03 Securities	5
IR04 Reserved for Traditional IRA, SEP IRA, SARSEP IRA and SIMPLE IRA (Code reserved for future use)	
Roth IRA	
IR05 Cash	5
IR06 Mutual Funds	5
IR07 Securities	5
IR08 Reserved for Roth IRA (Code reserved for future use)	

CODE	YEARS
Mineral Proceeds	
MI01 Net Revenue Interest	5
MI02 Royalties	5
MI03 Overriding Royalties	5
MI04 Production Payments	5
MI05 Working Interests	5
MI06 Bonuses	5
MI07 Delay Rentals	5
MI08 Shut-In Royalties	5
MI09 Minimum Royalties	5
MI99 Aggregate Mineral Interests	5
Safe Deposit/Safekeeping	
SD01 Safe Deposit Box Contents	2
SD07 Wills/Trust Documents	2
Miscellaneous	
MS01 Wages, Payroll, Salary	1
MS02 Commissions	1
MS03 Workers' Compensation Benefits	5
MS04 Payment for Goods and Services	5
MS05 Customer Overpayments	5
MS06 Unidentified Remittances	5
MS07 Unrefunded Overcharges	5
MS08 Accounts Payable	5
MS09 Credit Balances/Accounts Receivable	5
MS10 Discounts Due	5
MS11 Refunds Due	5
MS12 Unredeemed Gift Certificates	5
MS13 Unclaimed Loan Collateral	5
MS14 Pension and Profit Sharing Plans	5
MS15 Dissolution or Liquidation	1
MS16 Miscellaneous Outstanding Checks	5
MS17 Miscellaneous Intangible Property	5
MS18 Suspense Liabilities	5
MS99 Aggregate Miscellaneous Property	5
Securities	
SC01 Dividends	5
SC02 Interest (Bond Coupons)	5
SC03 Principal Payments	5
SC04 Equity Payments	5
SC05 Profits	5
SC06 Funds Paid to Purchase Shares	5
SC07 Funds for Stocks of Successor	5
SC08 Shares of Stock (Returned by PO)	5
SC09 Cash for Fractional Shares	5
SC10 Unexchanged Stock of Successor	5
SC11 Other Certificates of Ownership	5
SC12 Underlying/Outstanding Shares	5
SC13 From Liquidated/Redemption of Stock	5
SC14 Debentures	5
SC15 US Government Securities	5
SC16 Mutual Fund Shares	5
SC17 Warrants (Rights)	5
SC18 Matured Bond Principal	5
SC19 Dividend Reinvestment Plans	5
SC20 Credit Balances	5
SC21 Distributions-Mutual Funds	5
SC99 Aggregate Securities-Related	5
Trust Property	
TR01 Paying Agent Accounts	5
TR02 Undelivered or Uncashed Dividends	5
TR03 Funds Held in Fiduciary Capacity	5
TR04 Escrow Accounts	5
TR05 Trust Vouchers	5
TR99 Aggregate Trust Property	5
Utilities	
UT01 Utility Deposits	5
UT02 Membership Fees	5
UT03 Refunds or Rebates	5
UT99 Aggregate Utility Property	5
All Other Property	
ZZZZ Properties Not Identified Above	5

OWNER RELATIONSHIP CODES

RELATION TYPE CODE	RELATION TYPE
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

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 _____

INSTRUCTIONS FOR FORM UP-1G

The form UP-1G must accompany all holder reports

HOLDER INFORMATION:

Please type or print your report.

ITEM 1- Enter your federal employer identification number.

ITEM 2- Enter your entity name and mailing address.

ITEM 3- Enter the name of the person completing the form.

ITEM 4- Enter the telephone number for the person completing the form.

ITEM 5- Enter the e-mail address for the person completing the form.

REPORT INFORMATION:

ITEM 6A- Enter the total number of accounts $50 or more on your owner report (Form UP-2G).

ITEM 6B- Enter the total dollar value of accounts $50 or more listed on your owner report (Form UP-2G).

ITEM 6C- Enter the total number of accounts less than $50. Accounts less than $50 may be reported in a lump sum.

ITEM 6D - Enter the total dollar value of accounts less than $50.

ITEM 6E - Enter the total dollar value of the report (6B + 6D).

NOTE: Negative reports are required. See table of contents.

VERIFICATION:

The report must be certified by a financial officer.

IF FEWER THAN 25 PROPERTIES, YOU MAY CHOOSE TO GO TO OWNER REPORT FORM (UP-2G) TO PROVIDE A DETAILED LISTING OF THE UNCLAIMED ACCOUNTS REFLECTED IN ITEM 6E. IF REPORTING 25 PROPERTIES OR MORE, YOU ARE REQUIRED TO SUBMIT REPORTS AS A NAUPA FILE THROUGH GEORGIA'S HOLDER REPORTING PORTAL.

UP-1G (Rev. 06/26)
GEORGIA DEPARTMENT OF REVENUE
UNCLAIMED PROPERTY PROGRAM

HOLDER REPORT FORM GOVERNMENT ENTITIES 2026

This form must accompany all holder reports

ARE YOU A 1ST TIME FILER? Y ☐ N ☐ DID YOU ATTACH A CD? Y ☐ N ☐

ELECTRONIC FILERS: It is not necessary to submit UP-1G if you are reporting online. NEGATIVE BALANCE REPORTS REQUIRED.

HOLDER INFORMATION

1. FEDERAL EMPLOYER ID#	2. HOLDER (Entity Name)	
ADDRESS		
CITY, STATE, ZIP CODE		
3. NAME OF CONTACT PERSON	4. TELEPHONE ( )	5. E-MAIL ADDRESS

REPORT INFORMATION

INTANGIBLE PROPERTY

6a. Total accounts $50 or more _____ 6b. Dollar Value $ _____

6c. Total accounts less than $50 _____ 6d. Dollar Value $ _____

6e. Report Total $ _____

VERIFICATION STATEMENT

I, _____, certify that I have caused to be prepared and have examined this report totaling $ _____ as to property presumed abandoned under the Disposition of Unclaimed Property Act for the year ended as stated, that I am duly authorized to execute this verification by the holder and that I believe said report to be true, correct and complete as of said date to the best of my knowledge.

_____ Signature of Responsible Officer

_____ Printed or Typed Name of Responsible Officer

_____ Title of Responsible Officer

_____ Date

FOR OFFICE USE ONLY

CD	CHECK NUMBER	CHECK DATE	CHECK AMOUNT

DATE DEPOSITED	BATCH NO.	RECEIPT NO.	REPORT ID	HOLDER NO.

INSTRUCTIONS FOR FORM UP-2G

If you are reporting twenty-five (25) properties or more, they must be reported online in NAUPA format.

Form UP-2G provides detailed information for reporting unclaimed cash property. This information is used to verify rightful ownership of person(s) attempting to claim the property.

Please type or print your report.

Enter your entity name and federal employer identification number on each page of your owner report.

List owners alphabetically by last name.

You may list one entry for accounts less than $50. (EXAMPLE: 100 accounts of $40 or less totaling $4000).

ITEM 1- Refer to the "Property Code" listing on Page 3. Enter the property code that identifies the property reported.

ITEM 2- Enter the identifying number assigned to the property by your entity (i.e. account number, check number, policy number, etc.).

ITEM 3- Enter the owner's name as listed on your entity's records. If the account has more than one owner, specify whether the joint owner is a custodian, guardian, trustee or beneficiary.

ITEM 4 - Refer to the "Relationship Type Code" listing on Page 4. Enter the relation code that properly identifies the owner relationship.

ITEM 5- Enter the social security number or tax identification number of the account owner as reflected on your entity's records.

ITEM 6- Enter the date of last transaction or the date of last contact with the owner.

ITEM 7- Enter the account balance remitted.

ITEM 8- Enter the total of the accounts detailed on the page.

Attach the owner report form (UP-2G) to the holder report form (UP-1G).

Return both forms to:

Georgia Department of Revenue
Unclaimed Property Program
4125 Welcome All Rd Suite 701
Atlanta, GA 30349

FORM UP-2G (REV 06/26)
GEORGIA DEPARTMENT OF REVENUE
UNCLAIMED PROPERTY PROGRAM

OWNER DETAIL REPORT FORM UP-2G
GOVERNMENT ENTITIES

2026

FEDERAL EMPLOYERS ID#	ENTITY NAME	PAGE_____ OF _____

When reporting twenty-five (25) properties or more, they must be reported online in NAUPA format.

PRO-PERTY CODE (1)	IDENTIFYING NUMBER (2)	OWNER'S NAME, ADDRESS, CITY, STATE AND ZIP, LIST ALPHABETICALLY BY LAST NAME, FIRST AND MIDDLE INITIAL (IF JOINT OWNER, BENEFICIARY, TRUSTEE, ETC. SPECIFY BY NAME) (3)	RELATION TYPE CODE (4)	OWNER TAX ID NUMBER (5)	DATE OF LAST TRANSACTION (6)	AMOUNT REMITTED AS DUE OWNER (7)

TOTAL FOR THIS PAGE (8)

IF THIS IS THE LAST PAGE, ENTER GRAND TOTAL

INSTRUCTIONS FOR FORM UP-1NG

NEGATIVE REPORTS ARE REQUIRED!

HOLDER INFORMATION:

This form is for holders with no unclaimed property to report.

ITEM 1- Enter your federal employer identification number.

ITEM 2- Enter your business name and mailing address.

ITEM 3- If this report is being prepared by an agent on behalf of the business, enter the agent's name and address.

ITEM 4- Enter the name of the person completing the form.

ITEM 5- Enter the telephone number for the person completing the form.

ITEM 6- Enter the e-mail address for the person completing the form.

ITEM 7- Enter the date your business was incorporated or registered.

ITEM 8- Enter primary business activity.

ITEM 9- Enter number of employees.

VERIFICATION:

The report must be certified by a CFO or entity officer.

UP-1NG (Rev. 06/2026)

NEGATIVE HOLDER REPORT FORM GOVERNMENT ENTITIES 2026

Negative reports are required!

ARE YOU A 1ST TIME FILER? Y [ ] N [ ]

HOLDER INFORMATION

1. FEDERAL EMPLOYER ID#	2. HOLDER (Business Name)
ADDRESS	
CITY, STATE, ZIP CODE	

3. IS THIS REPORT BEING PREPARED BY AN AGENT ON BEHALF OF THE HOLDER? Y [ ] N [ ] IF YES, FURNISH AGENT NAME AND ADDRESS:

4. NAME OF CONTACT PERSON	5. TELEPHONE ( )	6. E-MAIL ADDRESS

7. DATE OF ORIGIN	8. PRIMARY BUSINESS ACTIVITY	9. NUMBER OF EMPLOYEES

REPORT INFORMATION

INTANGIBLE PROPERTY - (Outstanding Checks)

a. Total accounts $50 or more 0 b. Dollar Value $ 0

c. Total accounts less than $50 0 d. Dollar Value $ 0

e. Report Total $ 0

OTHER PROPERTY (Safe deposit boxes, stocks, mutual funds)

f. Number of shares of stock or mutual fund shares 0

g. Number of safe deposit boxes/safekeeping items 0

VERIFICATION STATEMENT

I, _____ , certify that I have caused to be prepared and have examined this report totaling $ 0 as to property presumed abandoned under the Disposition of Unclaimed Property Act for the year ended as stated, that I am duly authorized to execute this verification by the holder and that I believe said report to be true, correct and complete as of said date to the best of my knowledge.

_____ Signature of Responsible Officer

_____ Printed or Typed Name of Responsible Officer

_____ Title of Responsible Officer/Agent

_____ Date

INSTRUCTIONS FOR HOLDER REIMBURSEMENT FORM

Use Form UP-15, the Holder Reimbursement Form, to reclaim funds previously delivered to the State. Funds are paid directly to the holder and holder claims are normally processed within thirty days of receipt.

ABANDONED ACCOUNT INFORMATION This section of the form requests the account information as detailed on the annual report.

ITEM 1- Enter the account name exactly as it appeared on the annual report.

ITEM 2- If there were multiple names on the account, enter the secondary account name.

ITEM 3- Enter the address as detailed on the annual report.

ITEM 4- Enter the account number as detailed on the annual report.

ITEM 5- Enter the property code as detailed on the annual report.

ITEM 6- Enter the account balance delivered to the state as detailed on the annual report.

WHO IS REQUESTING REIMBURSEMENT - The information in this section pertains to the holder requesting a reimbursement.

ITEM 7- Enter the tax identification number for the holder (government entity).

ITEM 8- Enter the name of the government entity requesting the reimbursement. It should be the same as the name listed on the annual report.

ITEM 9- Enter the mailing address for the holder. The check will be mailed to this address.

ITEM 10- Enter the year the property was reported.

ITEM 11- Enter the name of the person completing the form.

ITEM 12- Enter the page number of the annual report that provided detail of the account.

AGGREGATE VERIFICATION - Complete this section ONLY IF the account was less than $50 and submitted in a lump sum total.

ITEM 13a- Enter the report year.

ITEM 13b- Enter the total aggregate amount for the report year.

ITEM 13c- Enter the amount that is due to the owner.

ITEM 13d- Enter the owner's name.

AFFIDAVIT AND INDEMNITY AGREEMENT - This should be signed by two employees. The CFO / Financial Manager should sign in the area "Authorized Official." The person completing the form should sign in the area "Holder Representative," and provide authorization letter to claim funds, proof of account, and company photo ID.

Please note these signatures must be notarized.

UP-15 (Rev. 06/2026)
GEORGIA DEPARTMENT OF REVENUE
UNCLAIMED PROPERTY PROGRAM

GEORGIA DEPARTMENT OF REVENUE
UNCLAIMED PROPERTY PROGRAM
4125 WELCOME ALL RD SUITE 701
ATLANTA, GEORGIA 30349

HOLDER REIMBURSEMENT FORM

ABANDONED ACCOUNT INFORMATION

1. ACCOUNT NAME

2. SECONDARY ACCOUNT NAME (if applicable)

3. REPORTED ADDRESS

4. ACCOUNT NUMBER	5. PROPERTY CODE	6. ACCOUNT BALANCE REMITTED

WHO IS REQUESTING REIMBURSEMENT

7. TAX ID#	8. HOLDER NAME

9. ADDRESS	10. REPORT YEAR

11. CONTACT PERSON	CONTACT PHONE NO. ( )	12. PAGE NUMBER

AGGREGATE VERIFICATION (complete only if account is less than $50)

It is hereby verified that for report year 13a. 20_____, 13b. $_____ was remitted in an aggregate amount. Of this amount, 13c. $_____ was remitted in the name(s) of 13d. _____.

Acceptable proof has been submitted to this holder to prove rightful ownership.

AFFIDAVIT AND INDEMNITY AGREEMENT

It is hereby certified that this claim is valid, just and due. Claim has not been previously paid to the holder. Request is hereby made to the Georgia Revenue Commissioner to return to the holder the above stated account that previously was paid to owner. Upon return of this property to the holder, the Georgia Department of Revenue, Unclaimed Property Officers and Employees are indemnified and held harmless for any damages, claims or losses of any kind resulting from payment of this claim. The holder agrees to return the property to the Georgia Department of Revenue, Unclaimed Property Program if it is later determined that rightful ownership has been established by another party.

_____
SIGNATURE OF AUTHORIZED OFFICIAL

_____
SIGNATURE OF HOLDER REPRESENTATIVE

_____
TITLE OF AUTHORIZED OFFICIAL

_____
TYPED NAME OF HOLDER REPRESENTATIVE

Sworn to and subscribed before me, this _____ day of _____

_____
TYPED NAME OF NOTARY PUBLIC

_____
SIGNATURE OF NOTARY PUBLIC

ADDITIONAL INSTRUCTIONS AND INFORMATION

REPORT CHECKLIST - Before filing your report, have you?

- Sent owner notification letters / e-mails to all owners with accounts of $50 or more?
- Sent owner notification letters by Certified Mails to all owners with accounts over $10,000?
- Signed Form UP-1G statement verification? (If not reporting electronically)
- Submitted payment electronically at https://gareporting.unclaimedproperty.com/ or enclosed a check for the total amount due payable to GEORGIA DEPARTMENT OF REVENUE
- Included federal tax identification number on all pages of the report?
- Electronic filers: Uploaded NAUPA file at https://gareporting.unclaimedproperty.com/?

TO REQUEST AN EXTENSION

- Reports are due by November 1, 2026. Extensions may be granted up to 90 days.
- Email a written request to ucp.reporting@dor.ga.gov at least 30 days prior to the report due date.
- Please Provide the following:

  1) Holder Name
  2) FEIN
  3) Contact Information
  4) The reason for the extension
  5) The Expected Filing Date (up to 90 days)

NEED MORE HELP?

Georgia's Unclaimed Property staff will be glad to answer any questions regarding unclaimed property. Please contact us at:

Georgia Department of Revenue
Unclaimed Property Program
4125 Welcome All Rd Suite 701
Atlanta, GA 30349
Telephone: (855) 329-9863
Fax Line: (404) 724-7013 Email:
ucp.reporting@dor.ga.gov