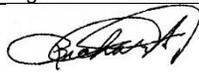


FORM A

Federal Reserve Bank of Atlanta

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

Reporting Status (Check Appropriate Box)	<input type="checkbox"/> Incumbent <input type="checkbox"/> New Filer <input type="checkbox"/> Termination Filer	Calendar Year Covered By Report 2017 Revised	Date of Employment June 5, 2017	Termination Date <i>(if applicable)</i>	<h3 style="text-align: center;">Reporting Periods</h3> <p>Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Schedule D where you must also include the filing year up to the date you file.</p> <p>Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination.</p> <p>New Filers: Schedule A-The reporting period is the preceding calendar year and the current calendar year up to the date of filing.</p> <p>Schedule B-Not applicable.</p> <p>Schedule C, Part I (Liabilities)-The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date filing.</p> <p>Schedule C, Part II (Agreement or Arrangement)-Show any agreement or arrangement as of the date of filing.</p> <p>Schedule D-The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.</p>
Last Name BOSTIC		First Name and Middle Initial RAPHAEL			
Position PRESIDENT AND CHIEF EXECUTIVE OFFICER			Telephone No. <i>(Include area Code)</i> 404-498-8501		
Certification	Signature of Reporting Individual		Date		
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.			10/14/22		
Ethics Officer's Review	Signature of Ethics Officer		Date		
I certify that I have reviewed the information contained in this report.			10/14/22		
Comments of Ethics Officer <i>(If additional space is required, use the reverse side of this sheet)</i>					
(Check box if comments are continued on the reverse side) <input type="checkbox"/>					

Reporting Individual's Name		SCHEDULE A											Calendar Year Covered		Page Number												
RAPHAEL BOSTIC													2017		1 of 16												
Assets and Income			Value of Assets at close of reporting period					Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that time.																			
BLOCK A			BLOCK B					BLOCK C																			
Identify each asset held for the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period. See the instructions for special rule for reporting an interest in a depository institution and other entities regardless of value. Identify each asset or source of income which generated over \$200 in income during the reporting period. None <input type="checkbox"/>			OWNER	None (or less than \$1,000)	\$1,001 - \$50,000	\$50,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Type						Amount					Date (Mo., Day, Yr.) Only if Honoraria						
										Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than \$201)	\$201 - \$1,000	\$1,001 - \$25,000		\$25,001 - \$150,000	\$150,001 - \$500,000	Over \$500,000			
Examples:	Central Airlines Common	S		X						X																	
	Don Jones & Smith, Hometown, USA	E																									
	Kempstone Equity Fund	E			X							X															
A.	Inherited IRA																										
A1.	AYBPX Allianzgi High Yld Bond			X								X															
A2.	APDQX Artisan Mid Cap Value Adv.			X								X															
A3.	MADVX Blackrock Equity Dividend			X								X															
A4.	BPRIX Blackrock Inflat. Protected Bond			X								X															
A5.	BFMSX Blackrock Low Duration Bond Inv.			X								X															
A6.	CAMSX Cambiar Small Cap Inv.			X								X															
A7.	HAINX Harbor International Inst				X							X															
A8.	IYGIX Ivy Large Cap Growth			X								X															
A9.	IYMIX Ivy Mid Cap Growth			X								X															

Reporting Individual's Name		SCHEDULE A											Calendar Year Covered		Page Number												
RAPHAEL BOSTIC													2017		2 of 16												
Assets and Income			Value of Assets at close of reporting period					Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that time.																			
BLOCK A			BLOCK B					BLOCK C																			
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										Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than \$201)	\$201 - \$1,000	\$1,001 - \$25,000		\$25,001 - \$150,000	\$150,001 - \$500,000	Over \$500,000			
Examples:	Central Airlines Common	S		X						X																	
	Don Jones & Smith, Hometown, USA	E																									
	Kempstone Equity Fund	E			X																						
A10.	LADFX Lord Abbett Dev. Growth Fund			X																							
A11.	MJFOX Matthews Asian Japan Inv.			X																							
A12.	MWTIX Metropolitan West Tot Ret Bd.			X																							
A13.	OAKMX Oakmark I			X																							
A14.	PTSPX Pimco Short Term			X																							
A15.	PTTPX Pimco Total Return			X																							
A16.	CFSIX Touchstone Sands Cap Sel			X																							
A17.	EMGNX Wells Fargo Emerg Mkts Eq Inst			X																							
A18.	Morgan Stanley Private Bank (cash)		X																								

Reporting Individual's Name		SCHEDULE A											Calendar Year Covered		Page Number											
RAPHAEL BOSTIC													2017		4 of 16											
Assets and Income			Value of Assets at close of reporting period						Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that time.																	
BLOCK A			BLOCK B						BLOCK C																	
Identify each asset held for the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period. See the instructions for special rule for reporting an interest in a depository institution and other entities regardless of value. Identify each asset or source of income which generated over \$200 in income during the reporting period. None <input type="checkbox"/>									Type						Amount					Date (Mo., Day, Yr.) Only if Honoraria						
									None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$25,000	\$25,001 - \$150,000	\$150,001 - \$500,000	Over \$500,000	Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund			Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than (\$201)	\$201 - \$1,000
OWN	FR																									
Examples:	Central Airlines Common	S		X					X																	
	Don Jones & Smith, Hometown, USA	E												Law Partnership Income				X								
	Kempstone Equity Fund	E			X						X						X									
B9.	Vanguard Mid Cap Index				X						X					X										
C.	Roth IRA																									
C1.	FDSAX AIG Focused Div. Strategy A			X							X					X										
C2.	Morgan Stanley Private Bank (cash)		X										X			X										

Reporting Individual's Name		SCHEDULE A											Calendar Year Covered		Page Number											
RAPHAEL BOSTIC													2017		6 of 16											
Assets and Income			Value of Assets at close of reporting period					Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that time.																		
BLOCK A			BLOCK B					BLOCK C																		
Identify each asset held for the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period. See the instructions for special rule for reporting an interest in a depository institution and other entities regardless of value. Identify each asset or source of income which generated over \$200 in income during the reporting period. None <input type="checkbox"/>			O W N E R	None (or less than \$1,000)	\$1,001 - \$50,000	\$50,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Type						Amount					Date (Mo., Day, Yr.) Only if Honoraria					
										Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than (\$201)	\$201 - \$1,000	\$1,001 - \$25,000		\$25,001 - \$150,000	\$150,001 - \$500,000	Over \$500,000		
Examples:	Central Airlines Common	S		X						X																
	Don Jones & Smith, Hometown, USA	E																								
	Kempstone Equity Fund	E			X								X													
D9.	HACAX Harbor Cap Appreciation Fund			X									X													
D10.	HFMIX Hartford Midcap Fund			X									X													
D11.	MEIIX MFS Value Fund			X									X													
D12.	MEDIX MFS Emerging Mkts Debt Fund		X										X													
D13.	WOBDX JP Morgan Core Bond Fund			X									X													
D14.	POSIX Principal Funds Global Real Estate		X										X													
D15.	OAYBX Oakmark Equity and Fund Advisor			X									X													
D16.	TRREX T Rowe Price Real Estate		X										X													
D17.	HIEMX Virtus Vontobel Emerg Mkts Opptys Fund		X										X													

Reporting Individual's Name		SCHEDULE A											Calendar Year Covered		Page Number												
RAPHAEL BOSTIC													2017		8 of 16												
Assets and Income			Value of Assets at close of reporting period					Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that time.																			
BLOCK A			BLOCK B					BLOCK C																			
Identify each asset held for the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period. See the instructions for special rule for reporting an interest in a depository institution and other entities regardless of value. Identify each asset or source of income which generated over \$200 in income during the reporting period. None <input type="checkbox"/>			OWNER	None (or less than \$1,000)	\$1,001 - \$50,000	\$50,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Type						Amount					Date (Mo., Day, Yr.) Only if Honoraria						
										Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than \$201)	\$201 - \$1,000	\$1,001 - \$25,000		\$25,001 - \$150,000	\$150,001 - \$500,000	Over \$500,000			
Examples:	Central Airlines Common	S		X					X																		
	Don Jones & Smith, Hometown, USA	E																									
	Kempstone Equity Fund	E			X							X															
E.	Income, other assets																										
E1.	University of Southern California																										
E2.	Freddie Mac																										
E3.	USC Federal Credit Union (cash)				X																						
E4.	Wells Fargo (cash)				X																						
E5.	Bank of America (cash)				X																						
E6.	Commercial rental property: St. Thomas VI				X						X																
E7.	Residential rental property: Los Angeles CA							X			X																
E8.	Residential rental property: Pasadena CA							X			X																

Reporting Individual's Name RAPHAEL BOSTIC	New Filer (Schedule Not Applicable) <input type="checkbox"/>	SCHEDULE B	Calendar Year Covered 2017	Page Number 12 of 16
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Part I: Transactions None

Report any purchase, sale or exchange by you, your spouse or dependent child during the reporting period of any real estate, stocks, bonds, commodity futures and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.

Do not report a transaction involving real estate used solely as your personal residence (unless rented out), or a transaction solely between you, your spouse or dependent child. Check the "Required divestiture" block to indicate sales made pursuant to a divestiture required by the Bank.

Identification of Assets		O W N E R	Transaction Type (x)			Date (Mo., Day, Yr.)	Amount Transaction (x)					Required divestiture
			Purchase	Sale	Exchange		\$1,001-\$50,000	\$50,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	Over \$1,000,000	
Example:	Central Airlines Common	S	x			2/1/93	x					
C.	Non-retirement funds											
C1.	RRGIX Deutsche Global Real Estate			X		8/28/2017	X					
C2.	EIBIX Eaton Vance Income Fund Boston I			X		8/28/2017	X					
C3.	FARCX Nuveen Real Estate Secs Fund			X		8/28/2017	X					
C4.	ORIYX Invest Mgrs Oak Ridge Small Cap Growth I			X		8/28/2017	X					
C5.	BSFIX Baron Inves Funds Small Cap Fund Inst I		X			8/28/2017	X					
C6.	MEIIX MFS Ser Tr Value I		X			8/28/2017	X					
C7.	POSIX Principal Global Real Estate Secs Fund Inst		X			8/28/2017	X					
C8.	ABEMX Aberdeen Emerg Mkts Fund			X		10/17/2017	X					
C9.	TWGIX American Century Growth Fund I			X		10/17/2017	X					
C10.	BSFIX Baron Inves Funds Small Cap Fund Inst I			X		10/17/2017	X					
C11.	DODFX Dodge & Cox Intl Stock Fund			X		10/17/2017	X					
C12.	EIBIX Eaton Vance Income Fund Boston I			X		10/17/2017	X					
C13.	SGOIX First Eagle Sogen Overseas Fund I			X		10/17/2017	X					
C14.	HACAX Harbor Cap Appreciation Fund			X		10/17/2017	X					
C15.	OAKBX Harris Oakmark Equity and Income Fund			X		10/17/2017	X					
C16.	HFMIX Hartford Midcap Fund I			X		10/17/2017	X					
C17.	MEIIX MFS Ser Tr Value I			X		10/17/2017	X					
C18.	MEDIX MFS Emerg Mkts Debt Fund I			X		10/17/2017	X					

Reporting Individual's Name RAPHAEL BOSTIC	New Filer (Schedule Not Applicable) <input type="checkbox"/>	SCHEDULE B	Calendar Year Covered 2017	Page Number 14 of 16
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Part II: Gifts

To the extent not previously reported in writing, report the source, a brief description, and the value of any gifts, as defined in the instructions, received by you, your spouse or dependent child from one source and totaling \$250 or more.

Exclude gifts from relatives, gifts valued at \$100 or less when aggregating gifts for the total from one source, and gifts received by your spouse or dependent child that were given totally independent of the relationship to you. See the instructions for further exclusions.

None

Source (Name and Address)		Brief Description	Value
1.	NONE		
2.			

Reporting Individual's Name RAPHAEL BOSTIC	SCHEDULE C	Calendar Year Covered 2017	Page Number 15 of 16
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Part I: Liabilities			None <input type="checkbox"/>						Category of Amount of Value (x)						
															Creditor (Name and Address)
Report any liability owed during the reporting period to any of the following by you, your spouse or dependent child: a bank, credit union, savings and loan association, savings bank, trust company, bank			holding company, thrift holding company, an affiliate or subsidiary of any of the foregoing, and any entity which, to your knowledge, does or seeks to do business with the Bank. See the instructions for certain exclusions.												
Example:	First District Bank, Washington, DC		Mortgage on rental property, Delaware			J				x					
1.	Ethos Lending LLC, San Francisco, CA		Mortgage on rental property, California									X			
2.	Wasatch Peaks Credit Union, Ogden UT		Mortgage on rental property, Utah								X				
3.	Provident Funding, Santa Rosa CA		Mortgage on rental property, California								X				

To your knowledge, were any of the foregoing extensions of credit made on terms more favorable than offered to a person not employed by the Bank? Yes No If so, explain.

Part II: Agreements or Arrangements			Report any agreement or arrangement for future employment, leave of absence from or continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan.						This part applies only to the person filing the report. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.					
			None <input type="checkbox"/>											

Status and Terms of any Agreement or Arrangement			Parties						Date					
Example:	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 11/93 and retained pension benefits (independently managed, fully funded, defined contribution plan)		Doe Jones & Smith, Hometown, USA						7/85					
1.	NONE													

Reporting Individual's Name RAPHAEL BOSTIC	SCHEDULE D	Calendar Year Covered 2017	Page Number 16 of 16
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Part I: Positions Held Outside the Federal Reserve Bank

None

Report any position held by you during the reporting period, whether compensated or not. A position includes but is not limited to employee, officer, owner, director, trustee, partner, advisor or consultant of any corporation, firm, partnership or other business enterprise, or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal or political entities, and those solely of an honorary nature.

Also report any position held by your spouse, a child, parent, or sibling with a bank, credit union, savings and loan association, savings bank, trust company, bank holding company, thrift holding company, primary government securities dealer, an affiliate or subsidiary of any of the foregoing, and any entity which, to your knowledge, does or seeks to do business with the Bank.

	Organization (Name and Address)	Holder	Type of Organization	Position	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Mo. Bar Assoc., Jefferson City, MO	E	Professional	Director	9/93	Present
	ABC Bank, Hometown, USA	Brother	Bank	Loan Officer	7/85	Present
1.	Lincoln Institute of Land Policy, Cambridge MA and Phoenix AZ	E	Non-profit Policy	Director	6/20/2013	Present
2.	Association of Public Policy & Management, Washington DC	E	Non-Profit Association	Vice President	1/2017	Present
3.	Metro Atlanta Chamber of Commerce, Atlanta GA	E	Non-Profit Policy	Director	12/2017	Present
4.	Midtown Alliance, Atlanta GA	E	Civic	Director	12/2017	Present

Part II: Other Situations

Describe any other relationship or circumstances that you believe might constitute an actual or apparent conflict of interest or violation of law or Bank policy. Provide all relevant information.

NONE

