

2017 Exempt Org. Return
prepared for:

SOUTHERN CENTER FOR HUMAN RIGHTS
83 POPLAR STREET, N.W.
ATLANTA, GA 30303

FULTON & KOZAK, CPA
7187 JONESBORO RD STE 100A
MORROW, GA 30260-2944

PUBLIC INSPECTION COPY

Application for Automatic Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	SOUTHERN CENTER FOR HUMAN RIGHTS	62-1025326
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions.	Social security number (SSN)
	83 POPLAR STREET, N.W. City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	ATLANTA, GA 30303	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► JULIA ROBINSON-HICKS _____

Telephone No. ► 404-688-1202 _____ Fax No. ► _____

• If the organization does not have an office or place of business in the United States, check this box _____

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 11/15, 2018, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 2017 or
- tax year beginning _____, 20____, and ending _____, 20_____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning , 2017, and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C SOUTHERN CENTER FOR HUMAN RIGHTS
83 POPLAR STREET, N.W.
ATLANTA, GA 30303

D Employer identification number 62-1025326

E Telephone number (404) 688-1202

G Gross receipts \$ 4,872,130.

F Name and address of principal officer: SAME AS C ABOVE

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes 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.SCHR.ORG **H(c)** Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1978 **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: SCHR PROVIDES LEGAL REPRESENTATION TO PEOPLE FACING THE DEATH PENALTY, CHALLENGES HUMAN RIGHTS VIOLATIONS IN PRISONS AND JAILS, SEEKS THROUGH LITIGATION AND ADVOCACY TO IMPROVE LEGAL REPRESENTATION FOR POOR PEOPLE ACCUSED OF CRIMES, AND ADVOCATES FOR CRIMINAL JUSTICE SYSTEM REFORMS.		
	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	25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	26
	6 Total number of volunteers (estimate if necessary)	6	20
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,129,145.	2,591,571.
	9 Program service revenue (Part VIII, line 2g)	32,742.	315,371.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	169,364.	284,736.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-42,169.	-27,173.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,289,082.	3,164,505.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		25,000.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,660,958.	1,764,672.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 148,329.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	673,001.	957,590.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,333,959.	2,747,262.	
19 Revenue less expenses. Subtract line 18 from line 12	-44,877.	417,243.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 7,574,370.	End of Year 8,835,111.
	21 Total liabilities (Part X, line 26)	53,719.	49,894.
	22 Net assets or fund balances. Subtract line 21 from line 20	7,520,651.	8,785,217.

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 _____

Type or print name and title _____

Paid Preparer Use Only

Print/Type preparer's name SHEILA M. KOZAK, CPA Preparer's signature *Sheila M. Kozak CPA* Date 6/14/18 Check if self-employed PTIN P00687026

Firm's name ▶ FULTON & KOZAK, CPA Firm's EIN ▶ 20-1403280

Firm's address ▶ 7187 JONESBORO RD STE 100A MORROW, GA 30260-2944 Phone no. 770-961-4200

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:

SEE SCHEDULE O

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

If 'Yes,' describe these new services on Schedule O.

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

If 'Yes,' describe these changes on Schedule O.

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 \$ 841,032. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4b (Code:) (Expenses \$ 839,947. including grants of \$) (Revenue \$ 315,371.)

CIVIL LITIGATION (IMPACT LITIGATION UNIT) - CHALLENGE DENIALS OF THE RIGHT TO COUNSEL IN COURTS IN GEORGIA THROUGH LITIGATION.

SEE THE ATTACHED LIST FOR DETAIL OF SCHR'S IMPACT LITIGATION UNIT'S ACTIVE LITIGATION FOR 2017. EACH OF THE CASES BENEFIT NOT ONLY THE PLAINTIFFS IN EACH CASE BUT ALL PEOPLE, BY SEEKING TO ESTABLISH PRECEDENT THAT PROTECTS THE CONSTITUTIONAL RIGHTS AT ISSUE IN EACH CASE.

4c (Code:) (Expenses \$ 673,030. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,354,009.

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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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	
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash 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>		
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 in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

BAA

Form 990 (2017)

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes sections for backup withholding, employee reporting, unrelated business income, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), (1), and (29) organizations.



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 in 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 Enter the number of voting members of the governing body at the end of the tax year... 25; 1b Enter the number of voting members included in line 1a, above, who are independent... 25; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X; 6 Did the organization have members or stockholders? X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X; 8b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. X

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 Did the organization have local chapters, branches, or affiliates? X; 10b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O; 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done... SEE SCHEDULE O. X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE O. X; 15b Other officers or key employees of the organization. SEE SCHEDULE O. X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed GA DC FL IL MA MD NC NY VA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in 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. SEE SCHEDULE O
20 State the name, address, and telephone number of the person who possesses the organization's books and records:
JULIA ROBINSON-HICKS 83 POPLAR STREET, NW ATLANTA GA 30303 404-688-1202

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 dotted 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)	(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			
(1) JANET DEWART BELL DIRECTOR	1 0	X						0.	0.	0.
(2) ANN FORT DIRECTOR	1 0	X						0.	0.	0.
(3) WILLIAM ABRAMS DIRECTOR	1 0	X						0.	0.	0.
(4) JAMES M. GARLAND DIRECTOR	1 0	X						0.	0.	0.
(5) MAWULI DAVIS DIRECTOR	1 0	X						0.	0.	0.
(6) RAJESH DE DIRECTOR	1 0	X						0.	0.	0.
(7) HENRY WEINSTEIN DIRECTOR	1 0	X						0.	0.	0.
(8) DONALD VERRILLI DIRECTOR	1 0	X						0.	0.	0.
(9) RONAN DOHERTY DIRECTOR	1 0	X						0.	0.	0.
(10) VIVIANNE GUEVARA, LMSW DIRECTOR	1 0	X						0.	0.	0.
(11) MARY C. KENNEDY DIRECTOR	1 0	X						0.	0.	0.
(12) KATHARINE HUFFMAN DIRECTOR	1 0	X						0.	0.	0.
(13) ELIZABETH ZITRIN DIRECTOR	1 0	X						0.	0.	0.
(14) BLAIR PERILMAN DIRECTOR	1 0	X						0.	0.	0.

BAA

TEEA0107L 08/08/17

Form 990 (2017)

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 dotted 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)	(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			
(15) ALEXANDER RUNDLET DIRECTOR	1 0	X					0.	0.	0.
(16) MICHAEL A. CAPLAN DIRECTOR	1 0	X					0.	0.	0.
(17) U. W. CLEMON DIRECTOR	1 0	X					0.	0.	0.
(18) DAVID DEBRUIN DIRECTOR	1 0	X					0.	0.	0.
(19) C. ALLEN GARRETT DIRECTOR	1 0	X					0.	0.	0.
(20) LAUREN SUDEALL LUCAS DIRECTOR	1 0	X					0.	0.	0.
(21) L. CHRIS STEWART DIRECTOR	1 0	X					0.	0.	0.
(22) L. JOESPH LOVELAND SECRETARY	1 0	X		X			0.	0.	0.
(23) JAMES KWAK VICE CHAIR	1 0	X		X			0.	0.	0.
(24) GREGORY T. CAMP TREASURER	1 0	X		X			0.	0.	0.
(25) MAUREEN F. DEL DUCA CHAIR	1 0	X		X			0.	0.	0.
1 b Sub-total							0.	0.	0.
c Total from continuation sheets to Part VII, Section A							154,519.	0.	6,181.
d Total (add lines 1b and 1c)							154,519.	0.	6,181.
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	0								

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual.</i>	3	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>	4	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>	5	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
NONE ,		

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c 431,573.				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 2,159,998.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		2,591,571.			
Program Service Revenue	2 a <u>ATTORNEY FEE INCOME</u>	Business Code	315,371.	315,371.		
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f		315,371.			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		162,618.		162,618.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1,674,306.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	1,552,188.			
		c Gain or (loss)	122,118.			
	d Net gain or (loss)		122,118.		122,118.	
	8 a Gross income from fundraising events (not including \$ 431,573. of contributions reported on line 1c). See Part IV, line 18	a	127,253.			
		b Less: direct expenses	b 155,437.			
c Net income or (loss) from fundraising events			-28,184.		-28,184.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a <u>OTHER INCOME</u>		1,011.		1,011.		
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d		1,011.				
12 Total revenue. See instructions		3,164,505.	315,371.	0.	257,563.	

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.

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	25,000.	25,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	160,700.	125,470.	17,831.	17,399.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	1,162,016.	999,258.	94,572.	68,186.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	36,980.	28,475.	5,547.	2,958.
9 Other employee benefits	313,208.	244,046.	41,724.	27,438.
10 Payroll taxes	91,768.	70,662.	13,765.	7,341.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	18,690.		18,690.	
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 Schedule O.)	7,711.	686.	6,939.	86.
12 Advertising and promotion				
13 Office expenses	199,098.	189,839.	6,427.	2,832.
14 Information technology				
15 Royalties				
16 Occupancy	33,670.	25,926.	5,050.	2,694.
17 Travel	14,186.	13,048.	569.	569.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	55,276.	44,221.	6,633.	4,422.
23 Insurance	24,608.	22,299.	1,840.	469.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LITIGATION EXPENSES	382,501.	382,501.		
b STAFF DEVELOPMENT	51,170.	50,857.	313.	
c COMPUTER CONSULTING	31,700.	31,700.		
d PUBLIC POLICY	23,791.	23,791.		
e All other expenses	115,189.	76,230.	25,024.	13,935.
25 Total functional expenses. Add lines 1 through 24e	2,747,262.	2,354,009.	244,924.	148,329.
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	286,604.	1	269,129.
	2 Savings and temporary cash investments	28,938.	2	37,701.
	3 Pledges and grants receivable, net	37,500.	3	430,000.
	4 Accounts receivable, net	17,628.	4	140,269.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	29,895.	9	10,376.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,221,343.		
	b Less: accumulated depreciation	10b 600,870.	640,140.	10c 620,473.
	11 Investments – publicly traded securities	6,533,665.	11	7,327,163.
	12 Investments – other securities. See Part IV, line 11		12	
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34).		7,574,370.	16	8,835,111.
Liabilities	17 Accounts payable and accrued expenses	53,719.	17	49,894.
	18 Grants payable		18	
	19 Deferred revenue		19	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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		25	
	26 Total liabilities. Add lines 17 through 25.		53,719.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,904,855.	27	7,266,837.
	28 Temporarily restricted net assets	1,615,796.	28	1,518,380.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,520,651.	33	8,785,217.
	34 Total liabilities and net assets/fund balances	7,574,370.	34	8,835,111.

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Form 990 (2017)

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	3,164,505.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,747,262.
3	Revenue less expenses. Subtract line 2 from line 1	3	417,243.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,520,651.
5	Net unrealized gains (losses) on investments	5	860,363.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	9	-13,040.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,785,217.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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Form 990 (2017)

SCHEDULE A
(Form 990 or 990-EZ)

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

2017

Open to Public Inspection

Name of the organization SOUTHERN CENTER FOR HUMAN RIGHTS	Employer identification number 62-1025326
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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 or 990-EZ).)
- 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 in 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
 - g Provide the following information about the supported organization(s).

(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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)						
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						
4 Total. Add lines 1 through 3.						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
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.)						
11 Total support. Add lines 7 through 10.						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five 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 2017 (line 6, column (f) divided by line 11, column (f)).	14	%
15 Public support percentage from 2016 Schedule A, Part II, line 14.	15	%
16a 33-1/3% support test—2017. 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 type="checkbox"/>		
b 33-1/3% support test—2016. 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—2017. 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—2016. 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

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	2,401,488.	3,637,707.	1,329,666.	2,129,145.	2,591,571.	12,089,577.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.	321,181.	40,366.	244,050.	32,442.	315,374.	953,413.
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
6 Total. Add lines 1 through 5.	2,722,669.	3,678,073.	1,573,716.	2,161,587.	2,906,945.	13,042,990.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
8 Public support. (Subtract line 7c from line 6.)						13,042,990.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6.	2,722,669.	3,678,073.	1,573,716.	2,161,587.	2,906,945.	13,042,990.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	178,110.	193,182.	131,955.	152,388.	162,618.	818,253.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						0.
c Add lines 10a and 10b.	178,110.	193,182.	131,955.	152,388.	162,618.	818,253.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						0.
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI	4,879.	601.	325.	750.	1,011.	7,566.
13 Total support. (Add lines 9, 10c, 11, and 12.)	2,905,658.	3,871,856.	1,705,996.	2,314,725.	3,070,574.	13,868,809.
14 First five 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

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)).	15	94.05 %
16 Public support percentage from 2016 Schedule A, Part III, line 15.	16	94.11 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)).	17	5.90 %
18 Investment income percentage from 2016 Schedule A, Part III, line 17.	18	5.82 %
19a 33-1/3% support tests—2017. 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. ▶ <input checked="" type="checkbox"/>		
b 33-1/3% support tests—2016. 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. ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 (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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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 in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
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? 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.	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)? 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).	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?	1	
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? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described in (2), 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? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	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 The organization satisfied the Activities Test. Complete line 2 below.
 - b The organization is the parent of each of its supported organizations. Complete line 3 below.
 - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
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? 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.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below. <ol style="list-style-type: none"> 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? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard. 	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 1-1/2% 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 .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 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 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2017

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

BAA

Schedule A (Form 990 or 990-EZ) 2017

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.)

PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE	2017	2016	2015	2014	2013
OTHER INCOME	\$ 1,011.	\$ 750.	\$ 325.	\$ 601.	\$ 4,879.
TOTAL	<u>\$ 1,011.</u>	<u>\$ 750.</u>	<u>\$ 325.</u>	<u>\$ 601.</u>	<u>\$ 4,879.</u>

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2017

Name of the organization

SOUTHERN CENTER FOR HUMAN RIGHTS

Employer identification number

62-1025326

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization SOUTHERN CENTER FOR HUMAN RIGHTS	Employer identification number 62-1025326
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 390,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 71,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 105,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 73,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 107,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SOUTHERN CENTER FOR HUMAN RIGHTS	Employer identification number 62-1025326
--	--

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	N/A ----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization SOUTHERN CENTER FOR HUMAN RIGHTS	Employer identification number 62-1025326
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____ *N/A*
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
N/A			

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

PUBLIC INSPECTION COPY

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2017

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Go to at www.irs.gov/Form990 for instructions and the latest information**

Open to Public Inspection

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization SOUTHERN CENTER FOR HUMAN RIGHTS	Employer identification number 62-1025326
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of 'political campaign activities')
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4 a Was a correction made? Yes No
b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying).....														
b Total lobbying expenditures to influence a legislative body (direct lobbying).....														
c Total lobbying expenditures (add lines 1a and 1b).....														
d Other exempt purpose expenditures.....														
e Total exempt purpose expenditures (add lines 1c and 1d).....														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.....														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f).....														
h Subtract line 1g from line 1a. If zero or less, enter -0-.....														
i Subtract line 1f from line 1c. If zero or less, enter -0-.....														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?.....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2 a Lobbying nontaxable amount.....					
b Lobbying ceiling amount (150% of line 2a, column (e)).....					
c Total lobbying expenditures.....					
d Grassroots nontaxable amount.....					
e Grassroots ceiling amount (150% of line 2d, column (e)).....					
f Grassroots lobbying expenditures.....					

BAA

Schedule C (Form 990 or 990-EZ) 2017

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
<i>For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
SEE PART IV			
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		40,483.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i.			40,483.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members.	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year.	2 a	
b Carryover from last year.	2 b	
c Total.	2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions).	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B - DESCRIPTION OF LOBBYING ACTIVITY

THE CENTER EMPLOYS ONE PAID STAFF MEMBER, THE PUBLIC POLICY & COMMUNICATIONS MANAGER, WHO SPENDS 20% OF HER TIME WORKING TO AFFECT STATE LEGISLATION. THE METHODS USED INCLUDE FREQUENT UPDATES TO COALITION PARTNERS DETAILING UPCOMING LEGISLATION, ORGANIZING A LOBBY DAY IN CONJUNCTION WITH GFADP AT THE CAPITOL FOR MEMBERS TO TALK WITH THEIR LEGISLATORS AND DIRECTLY CONTACTING LEGISLATORS REGARDING PERTINENT

Part IV Supplemental Information *(continued)*

PART II-B - DESCRIPTION OF LOBBYING ACTIVITY (CONTINUED)

LEGISLATION.

**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

2017

Open to Public Inspection

Name of the organization

Employer identification number

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

(ii) Assets included in Form 990, Part X. ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

b Assets included in Form 990, Part X. ▶ \$ _____

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 are a 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 programs
 - 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.

- 1 a 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 | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a 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 on 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
1 a 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 Temporarily restricted endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3 a 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**

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
1 a Land		73,335.		73,335.
b Buildings		936,048.	475,585.	460,463.
c Leasehold improvements		10,088.	10,088.	0.
d Equipment		190,358.	105,444.	84,914.
e Other		11,514.	9,753.	1,761.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				620,473.



Part VII Investments – Other Securities.

N/A

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) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		

Part VIII Investments – Program Related.

N/A

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)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

N/A

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)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)	

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. **SEE 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	4,041,843.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	860,363.	
	b Donated services and use of facilities	2b	6,000.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	10,975.	
	e Add lines 2a through 2d	2e	877,338.	
3	Subtract line 2e from line 1		3	3,164,505.
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	3,164,505.

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	2,777,277.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	6,000.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	24,015.	
	e Add lines 2a through 2d	2e	30,015.	
3	Subtract line 2e from line 1		3	2,747,262.
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	2,747,262.

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 - FIN 48 FOOTNOTE

SCHR QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, IS ONLY SUBJECT TO FEDERAL OR STATE INCOME TAXES ON SPECIFIC TYPES OF INCOME FROM ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE.

SCHR HAD NO INCOME FROM UNRELATED ACTIVITIES AND HAS NO INCOME TAXES DUE AS OF DECEMBER 31, 2017 AND 2016.

SCHR'S APPLICATION OF ASC 740 REGARDING UNCERTAIN TAX POSITIONS HAD NO EFFECT ON ITS

BAA

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

PART X - FIN 48 FOOTNOTE (CONTINUED)

FINANCIAL POSITION AS MANAGEMENT BELIEVES SCHR HAS NO MATERIAL UNRECOGNIZED INCOME TAX BENEFITS, INCLUDING ANY POTENTIAL RISK OF LOSS OF ITS NOT-FOR-PROFIT TAX STATUS. SCHR WOULD ACCOUNT FOR ANY POTENTIAL INTEREST OR PENALTIES RELATED TO POSSIBLE FUTURE LIABILITIES FOR UNRECOGNIZED INCOME TAX BENEFITS AS INCOME TAX EXPENSE. SCHR IS NO LONGER SUBJECT TO EXAMINATION BY FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR PERIODS BEFORE 2014.

**SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

GRANT PASS THROUGH	\$ 10,975.
TOTAL	<u>\$ 10,975.</u>

**SCHEDULE D, PART XII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S**

GRANT PASS THROUGH	\$ 24,015.
TOTAL	<u>\$ 24,015.</u>

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

SOUTHERN CENTER FOR HUMAN RIGHTS

Employer identification number

62-1025326

Part I Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
	FREDERICK DOUG (event type)	ATLANTA BENEFI (event type)	2 (total number)	(add column (a) through column (c))		
1	Gross receipts	374,040.	89,645.	95,141.	558,826.	
2	Less: Contributions	317,750.	68,725.	45,098.	431,573.	
3	Gross income (line 1 minus line 2)	56,290.	20,920.	50,043.	127,253.	
DIRECT EXPENSES	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	1,756.	9,520.		11,276.
	7	Food and beverages	60,305.	9,358.	29.	69,692.
	8	Entertainment	21,928.	2,900.	1,177.	26,005.
	9	Other direct expenses	23,756.	13,778.	6,027.	43,561.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				150,534.
11	Net income summary. Subtract line 10 from line 3, column (d)				-23,281.	

Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))	
	1	Gross revenue			
DIRECT EXPENSES	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If 'Yes,' explain: _____



11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If 'Yes,' enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.



**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

2017

**Open to Public
Inspection**

Name of the organization **SOUTHERN CENTER FOR HUMAN RIGHTS**

Employer identification number
62-1025326

Part I General Information on Grants and Assistance

- 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GEORGIA PUBLIC POLICY INSTITU 3200 COBB GALLERIA PARKWAY ATLANTA, GA 30339	58-1943161	501 (C) (3)	12,500.	0.			TO CULTIVATE CONSERVATIVE CHAMPIONS
(2) FAITH IN PUBLIC LIFE 1990 M STREET NW NO 740 WASHINGTON , DC 20036	20-3798596	501 (C) (3)	12,500.	0.			TO CULTIVATE FAITH LEADERS AS CHAMP
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

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

3 Enter total number of other organizations listed in the line 1 table ▶ 0

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

TEEA3901L 08/10/17

Schedule I (Form 990) (2017)

PUBLIC INSPECTION COPY

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

SOUTHERN CENTER FOR HUMAN RIGHTS

Employer identification number

62-1025326

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE SOUTHERN CENTER FOR HUMAN RIGHTS (SCHR) IS WORKING FOR EQUALITY, JUSTICE, AND DIGNITY IN OUR CRIMINAL JUSTICE SYSTEM. SCHR'S MISSION IS TO END CAPITAL PUNISHMENT, MASS INCARCERATION, AND OTHER CRIMINAL JUSTICE PRACTICES THAT ARE USED TO CONTROL THE LIVES OF POOR PEOPLE, PEOPLE OF COLOR, AND OTHER MARGINALIZED GROUPS IN THE SOUTHERN UNITED STATES. WE DO THIS THROUGH DEATH PENALTY REPRESENTATION, IMPACT LITIGATION, POLICY ADVOCACY, AND PUBLIC EDUCATION.

SCHR WAS FOUNDED IN 1976 BY MINISTERS AND ACTIVISTS IN RESPONSE TO THE UNITED STATES SUPREME COURT'S REINSTATEMENT OF THE DEATH PENALTY AND TO THE HORRENDOUS CONDITIONS IN SOUTHERN PRISONS AND JAILS. SCHR'S GROUNDBREAKING LITIGATION CHALLENGING DEBTORS' PRISON PRACTICES HAS HERALDED A NEW ERA IN THE MOVEMENT TO CHALLENGE THE USE OF COURTS AS MONEY GENERATORS AND TO HALT THE CRIMINALIZATION OF POVERTY. THROUGH SIX LAWSUITS, TWO REPORTS, AND WORK WITH A BLUE-RIBBON COMMISSION AND THE GEORGIA LEGISLATURE, SCHR HELPED BRING ABOUT THE CREATION OF A PUBLIC DEFENDER SYSTEM IN GEORGIA. SCHR LEADS CRIMINAL JUSTICE POLICY REFORM EFFORTS THROUGH A PARTNERSHIP WITH GEORGIA GOVERNOR NATHAN DEAL'S CRIMINAL JUSTICE REFORM COUNCIL THAT HAS RESULTED IN THE SUCCESSFUL PASSAGE OF SMART-ON-CRIME MEASURES AND SENTENCING REFORMS ANNUALLY FOR THE LAST EIGHT YEARS. SCHR HAS ARGUED AND WON FIVE DEATH PENALTY CASES AT THE UNITED STATES SUPREME COURT, FOUR OF WHICH DEALT WITH PROFOUND RACE DISCRIMINATION IN CAPITAL TRIALS.

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

CAPITAL LITIGATION

THE CAPITAL LITIGATION UNIT (CLU) OF THE SOUTHERN CENTER FOR HUMAN RIGHTS REPRESENTS PERSONS FACING THE DEATH PENALTY AT ALL STAGES OF THE LEGAL PROCESS IN THE DEEP

Name of the organization

SOUTHERN CENTER FOR HUMAN RIGHTS

Employer identification number

62-1025326

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

SOUTH. SCHR IS INVOLVED IN A SUBSTANTIAL NUMBER OF ALABAMA DEATH PENALTY CASES BECAUSE ALABAMA IS THE ONLY DEATH-PENALTY STATE IN THE NATION THAT DOES NOT PROVIDE REPRESENTATION TO INDIGENT DEATH-SENTENCED INMATES IN STATE POST-CONVICTION PROCEEDINGS. IN ADDITION TO PROVIDING REPRESENTATION TO PERSONS FACING THE DEATH PENALTY WHO ARE IN DESPERATE NEED OF ASSISTANCE, SCHR ALSO SEEKS TO ADDRESS THROUGH ITS CAPITAL LITIGATION CASELOAD ISSUES OF SYSTEMIC UNFAIRNESS IN THE ADMINISTRATION OF CAPITAL PUNISHMENT IN THE DEEP SOUTH: THE FAILURE OF THE STATE TO PROVIDE ADEQUATE FUNDING FOR INDIGENT DEFENSE REPRESENTATION, INCOMPETENT DEFENSE REPRESENTATION, PROSECUTORIAL MISCONDUCT, AND RACIAL DISCRIMINATION IN JURY SELECTION PRACTICES.

SEE THE ATTACHED LIST FOR DETAIL OF SCHR'S CAPITAL LITIGATION UNIT'S ACTIVE LITIGATION FOR 2017.

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

PUBLIC POLICY

SCHR PUBLISHES REPORTS AND ARTICLES ON CRIMINAL JUSTICE ISSUES INCLUDING JUDICIAL INDEPENDENCE AND THE NEED FOR MORE HUMANE AND CONSTRUCTIVE RESPONSES TO CRIME. SCHR ADVOCATES FOR POSITIVE (AND AGAINST NEGATIVE) CRIMINAL JUSTICE POLICIES AND LEGISLATION. SCHR HAS LONG RECOGNIZED THAT COALITION-BUILDING IS CRUCIAL IN ORDER TO DEEPEN THE IMPACT OF OUR WORK. SCHR LEADS A BROAD COALITION OF ATTORNEYS, CIVIL AND HUMAN RIGHTS ORGANIZATIONS, CLIENTS, AND LAWMAKERS SPANNING THE POLITICAL SPECTRUM TO PRESERVE OUR PUBLIC DEFENDER SYSTEM AND ENSURE THAT GEORGIA'S CIRCUIT PUBLIC DEFENDER OFFICES HAVE THE RESOURCES TO PROVIDE QUALITY REPRESENTATION TO POOR PEOPLE ACCUSED OF CRIMES. SCHR WORKS WITH A VARIETY OF CHILDREN'S ORGANIZATIONS AND THE JUST GEORGIA COALITION TO ADVOCATE FOR PUBLIC POLICY MEASURES TO PROTECT

Name of the organization

Employer identification number

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

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

CHILDREN AND PROMOTE PUBLIC SAFETY. SCHR ENGAGES IN STRATEGIC MEDIA CAMPAIGNS TO BUILD BROADER SUPPORT FOR OUR INITIATIVES.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 TO THE BOARD FINANCE & INVESTMENTS COMMITTEE FOR REVIEW AND APPROVAL PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS DISCUSSED ANNUALLY AT BOARD MEETINGS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

WHILE APPROVING THE ANNUAL BUDGET EACH YEAR, THE BOARD OF DIRECTORS ALSO REVIEWS THE COMPENSATION LEVEL AND BENEFITS OFFERED TO EMPLOYEES. THIS GENERALLY HAPPENS AT THE FALL BOARD MEETING.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

COMPENSATION IS MONITORED ANNUALLY AT THE BIENNIAL BOARD MEETINGS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 SPECIFICALLY FOR PUBLIC INSPECTION. THIS COPY IS AVAILABLE UPON REQUEST. THE ORGANIZATION ALSO POSTS A COPY OF FORM 990 ON THE GUIDESTAR WEBSITE AND PROVIDES A LINK TO IT ON THE SCHR WEBSITE.

**FORM 990, PART XI, LINE 9
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

PASS THROUGH CORRECTION.....	\$ -13,040.
	<u>TOTAL \$ -13,040.</u>

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
<u>AUTO / TRANSPORT EQUIPMENT</u>																
15	2008 TOYOTA COROLLA	2/11/08		14,142							14,142	14,142	S/L	5		0
16	2008 TOYOTA COROLLA	2/11/08		14,142							14,142	14,142	S/L	5		0
34	WORLD TOYOTA-2014 COROLLA	7/01/14		19,200							19,200	9,600	S/L	5		3,840
40	TOYOTA COROLLA 2015	3/30/15		18,578							18,578	6,503	S/L	5		3,716
51	2012 GREY HONDA CIVIC	4/04/16		16,490							16,490	2,474	S/L	5		3,298
52	2013 GREY HONDA CIVIC	4/04/16		16,215							16,215	2,432	S/L	5		3,243
63	2016 NISSAN SENTRA - BLAC	6/16/17		17,901							17,901		S/L	5		1,790
TOTAL AUTO / TRANSPORT EQUIP				116,668		0	0	0	0	0	116,668	49,293				15,887
<u>BUILDINGS</u>																
2	BUILDING	5/01/90		228,962							228,962	193,533	S/L	31.5		7,269
3	CAPITAL IMPROVEMENTS	8/01/98		5,455							5,455	3,332	S/L	31.5		173
4	81-81 1/2 POPLAR	5/01/99		402,593							402,593	179,636	S/L	39.5		10,192
TOTAL BUILDINGS				637,010		0	0	0	0	0	637,010	376,501				17,634
<u>FURNITURE AND FIXTURES</u>																
9	FURNITURE AND FIXTURES	11/01/87		5,791							5,791	5,791	S/L	5		0
10	CHAIRS	5/01/89		487							487	487	S/L	5		0
11	CHAIRS	6/01/89		212							212	212	S/L	5		0
17	SECURITY SYSTEM	7/08/11		5,024							5,024	2,761	S/L	10		502
TOTAL FURNITURE AND FIXTURE				11,514		0	0	0	0	0	11,514	9,251				502

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
IMPROVEMENTS																
5	CAPITAL IMPROVEMENTS	9/01/94		10,567							10,567	7,487	S/L	31.5		335
6	CAPITAL IMPROVEMENTS	7/01/99		17,807							17,807	9,890	S/L	31.5		565
7	CAPITAL IMPROVEMENTS	5/29/08		2,200							2,200	2,200	S/L	7		0
8	OFFICE IMPROVEMENTS	12/23/09		5,222					5,222		0		S/L	7		0
18	BUILDING FACADE RENO	10/11/12		206,320					27,837		178,483		S/L	31.5		5,666
22	HVAC UNITS AND INSTALL	10/11/12		67,010					28,479		38,531		S/L	10		3,853
	TOTAL IMPROVEMENTS			309,126		0	0	0	61,538	0	247,588	19,577				10,419
LAND																
1	LAND	5/01/90		73,335							73,335					0
	TOTAL LAND			73,335		0	0	0	0	0	73,335	0				0
MACHINERY AND EQUIPMENT																
12	BACKFLOW PREVENTION SYSTE	7/09/04		3,825							3,825	3,825	S/L	7		0
13	EXTERNAL STORAGE DRIVE	7/01/06		3,582							3,582	3,582	S/L	5		0
14	MAXTOR ONETOUCH 4	10/30/08	12/31/17	1,600							1,600	1,600	S/L	5		0
19	TOSHIBA PORTEGE R830-R832	8/13/12		1,368							1,368	1,210	S/L	5		158
20	SONY LAPTOP	3/01/12		1,050							1,050	1,015	S/L	5		35
21	TOS PT R830-S8322	3/07/12		1,367							1,367	1,320	S/L	5		47
23	WIRELESS INFRASTRUCTURE	7/08/13		5,580							5,580	3,906	S/L	5		1,116
24	PROTEGE Z930 COMPUTER	7/31/13		1,297							1,297	1,297	S/L	3		0
25	POWER EDGE T420 SERVER	2/05/14		4,808							4,808	2,805	S/L	5		962
26	TOSZ30 LAPTOP	3/25/14		1,402							1,402	770	S/L	5		280
27	TOSZ30 LAPTOP	3/25/14		1,402							1,402	770	S/L	5		280

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SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
28	TOSZ30 LAPTOP	3/25/14		1,402							1,402	770	S/L	5		280
29	TOSZ30 LAPTOP	3/25/14		1,401							1,401	770	S/L	5		280
30	TOSZ30 LAPTOP	3/25/14		1,401							1,401	770	S/L	5		280
31	PROTEGE LAPTOP COMPUTER	8/05/14		1,107							1,107	534	S/L	5		221
32	PROTEGE LAPTOP COMPUTER	8/05/14		1,107							1,107	534	S/L	5		221
33	PROTEGE LAPTOP COMPUTER	8/05/14		1,107							1,107	534	S/L	5		221
35	MICROSOFT SURFACE PRO 3	2/03/15		1,543							1,543	592	S/L	5		309
36	MICROSOFT SURFACE PRO 3	4/03/15		1,536							1,536	537	S/L	5		307
37	MICROSOFT SURFACE PRO 3	4/03/15		1,536							1,536	537	S/L	5		307
38	LENOVO THINKPAD YOGA	4/03/15		1,347							1,347	471	S/L	5		269
39	LENOVO THINKPAD YOGA	6/04/15		1,428							1,428	453	S/L	5		286
41	THINKPAD X1 CARBON	1/01/16		1,361							1,361	272	S/L	5		272
42	THINKPAD YOGA 12 ULTRA	1/01/16		1,268							1,268	254	S/L	5		254
43	THINKPAD YOGA 12 ULTRA	1/01/16		1,268							1,268	254	S/L	5		254
44	THINKPAD YOGA 12 ULTRA	2/01/16		1,660							1,660	304	S/L	5		332
45	THINKPAD YOGA 12 ULTRA	2/01/16		1,660							1,660	304	S/L	5		332
46	THINKPAD YOGA 12 ULTRA	2/01/16		1,660							1,660	304	S/L	5		332
47	THINKPAD YOGA 12 ULTRA	2/01/16		1,660							1,660	304	S/L	5		332
48	THINKPAD YOGA 12 ULTRA	2/01/16		1,660							1,660	304	S/L	5		332
49	MACBOOK PRO 13 INCH	10/04/16		1,295							1,295	65	S/L	5		259
50	LENOVO YOGA 900	10/28/16		1,894							1,894	63	S/L	5		379
53	DELL XPS13 MLK LAPTOP	2/06/17		1,694							1,694		S/L	5		311
54	DELL XPS13 MLK LAPTOP	2/06/17		1,694							1,694		S/L	5		311
55	DELL XPS15 LAPTOP	2/06/17		2,012							2,012		S/L	5		369
56	DELL XPS13 MLK LAPTOP	4/21/17		1,694							1,694		S/L	5		226
57	DELL XPS13 MLK LAPTOP	8/04/17		1,694							1,694		S/L	5		141
58	DELL XPS13 MLK LAPTOP	8/04/17		1,694							1,694		S/L	5		141

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62-1025326

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
59	DELL XPS13 MLK LAPTOP	8/04/17		2,012							2,012		S/L	5		168
60	DELL XPS13 MLK LAPTOP	8/22/17		1,694							1,694		S/L	5		113
61	DELL POWEREDGE T130 SERVE	11/14/17		1,866							1,866		S/L	5		62
62	DELL OPTIPLEX MICRO DESKT	11/14/17		1,654							1,654		S/L	5		55
TOTAL MACHINERY AND EQUIPME				75,290		0	0	0	0	0	75,290	31,030				10,834
TOTAL DEPRECIATION				<u>1,222,943</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>61,538</u>	<u>0</u>	<u>1,161,405</u>	<u>485,652</u>				<u>55,276</u>
GRAND TOTAL DEPRECIATION				<u>1,222,943</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>61,538</u>	<u>0</u>	<u>1,161,405</u>	<u>485,652</u>				<u>55,276</u>
DEPRECIATION ASSETS SOLD				1,600		0	0	0	0	0	1,600	1,600				0
DEPR REMAINING ASSETS				<u>1,221,343</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>61,538</u>	<u>0</u>	<u>1,159,805</u>	<u>484,052</u>				<u>55,276</u>



SUMMARY OF 2017 CASES

SCHR IMPACT LITIGATION UNIT DOCKET

The Impact Litigation Unit (ILU) of the Southern Center for Human Rights brings litigation to increase fairness, racial equality, humanity, and accountability in the criminal justice system. The following is a case-by-case review of the ILU's docket:

Calhoun v. Pennington

SCHR and other attorneys filed this case on behalf of 28 people who were detained and searched by about 48 police officers at the Atlanta Eagle bar. The case settled with a consent decree. SCHR is now monitoring the decree with Lambda Legal and attorney Dan Grossman.

Brewer v. City of LaGrange

SCHR represents people who have been threatened with termination of utility services because of unpaid municipal court debt. This case is pending in the 11th Circuit Court of Appeals.

K.A. v. Jeff Hobby, et al.

In June 2017, SCHR, along with Horsley Begnaud, LLC, brought suit on behalf of nine Worth County High School students who, like hundreds of their peers, were subjected to invasive searches of their persons by employees of the Worth County Sheriff's Office, working at the direction of Sheriff Jeff Hobby. In November 2017 a proposed settlement was reached and submitted to the court for approval.

Adams, et al. v. Sentinel Offender Services, LLC

In July 2017, SCHR filed suit on behalf of people who were sentenced to "pay-only probation" in the Atlanta Municipal Court and then required to pay illegal fees to Sentinel Offender Services ("Sentinel"), a private probation company. The parties reached a mediated settlement and moved the district court to preliminarily approve a class settlement in early 2018.

Coffee County v. City Commissioner Olivia Pearson

Olivia Pearson, a 55-year-old, African American, city commissioner in Douglas, Georgia, was prosecuted in Coffee County Superior Court for assisting a 21-year-old black voter who did not know how to work the electronic voting machine in the 2012 Obama-Romney presidential election. SCHR represented her at retrial in March 2018 where she was acquitted.

Davison v. Nicolou

SCHR represents Cindy Davison, the sister of Randall Davison. At Georgia State Prison, Mr. Davison received a tattoo which became infected. He did not receive appropriate treatment and he died of sepsis despite repeated requests for help. The case is pending in the U.S. District Court for the Southern District of Georgia.

DelGuidice v. Evans

SCHR represented Nelson DelGuidice who has challenged his years of solitary confinement in Georgia's Special Management Unit. SCHR filed a cert petition to the U.S. Supreme Court which was denied.

Gumm v. Sellers

SCHR represents Timothy Gumm who has challenged his seven years of solitary confinement in Georgia's Special Management Unit. The case, brought on behalf of a putative class of other, similarly situated persons, is pending in the U.S. District Court for the Middle District of Georgia.

Harrison v. Consolidated Gov't of Columbus

SCHR represented Cleopatra Harrison and a certified class of persons who were required to pay victim fees in the Columbus Recorder's Court. The case reached a settlement in October 2017.

Kelsey v. Withers

SCHR represents people who were adjudicated in the DeKalb Recorder's Court in a proposed class action in which plaintiffs allege that they were wrongly arrested and jailed. Class action status was denied and the matter will now proceed on behalf of the individual named plaintiffs.

King v. Consolidated Gov't of Columbus

SCHR represented two women who were jailed in violation of their constitutional rights, including the right to counsel. The case, which challenged public records law violations, was settled in May 2017.

Luse v. Sentinel Offender Services

SCHR represented Rita Sanders Luse, Marianne Ligocki, and a certified class of persons who were subject to illegal drug tests in the Probate Court of White County. A settlement was reached in January 2017.

Marshall v. Whisant

In 2001, SCHR negotiated a consent decree to remedy the unconstitutional conditions in the Madison County Jail and has since monitored the county's and sheriff's compliance.

Maynor v. Morgan

SCHR filed this case in 2001 on behalf of all people detained in the Morgan County Jail and negotiated a consent decree the same year. In 2017, SCHR filed a motion asking the federal court to hold the Sheriff in contempt for violating the consent decree. The case is pending in the U.S. District Court for the Northern District of Alabama.

N.P. v. Georgia

In January 2014, SCHR filed this proposed class action seeking declaratory and injunctive relief for the frequent absence of public defenders in juvenile court and the assembly-line processing of adults in the superior courts of the Cordele Judicial Circuit. The case settled in 2015 but monitoring and advocacy have been required in the years since.

State v. Janet Allison

SCHR represented Janet Allison in her petition for removal from the sex offender registry in White County Superior Court which was granted in 2018.

State v. James Dennard

SCHR represented James Dennard from Whitfield County. SCHR attorneys obtained Mr. Dennard's release from prison in August 2017.

State v. Roderick Denson

SCHR represented Roderick Denson in his petition for removal from the sex offender registry in Sumter County Superior Court.

State v. Christopher Dugger

SCHR represented Christopher Dugger from Spalding County. SCHR attorneys obtained Mr. Dugger's release from prison in April 2017.

State v. Anthony Gray

SCHR represented Anthony Gray from Clayton County. SCHR attorneys obtained Mr. Gray's release from prison in September 2017.

State v. Larry Nation

SCHR represented Larry Nation from Douglas County. SCHR attorneys obtained Mr. Nation's release from prison in November 2017.

State v. Marquinn Jones

SCHR represented Marquinn Jones from Cherokee County. SCHR attorneys obtained his release from prison in December 2017.

State v. Christopher Howard

SCHR represented Christopher Howard from Cobb County. SCHR attorneys obtained his release from prison in December 2017.

State v. Donald Phillips

SCHR represented Donald Phillips from Colquitt County. SCHR attorneys obtained his release from prison in February 2018.

State v. Danny Redding

SCHR represented Danny Redding from Fulton County. SCHR attorneys obtained his release from prison in February 2018.

State v. Jack Lawrence

SCHR represents Jack Lawrence of Fulton County in an effort to modify his nonparoleable sentence for a low-level drug offense.

State v. William Adams

SCHR represents William Adams of Chattooga County in an effort to modify his nonparoleable sentence for a low-level drug offense.

State v. Johnnie Jackson

SCHR represents Johnnie Jackson in an effort to modify his nonparoleable sentence for a low-level drug offense.

State v. William Robinson

SCHR represents William Robinson of in an effort to modify his life without parole sentence for a low-level drug offense.

State v. Anthony Grady

SCHR represented Anthony Grady on a petition to modify his misdemeanor probation sentence in the Douglas Municipal Court.

State v. Lawrence Huff

SCHR represented Lawrence Huff from Athens-Clarke County. SCHR attorneys obtained Mr. Huff's release from prison in June 2017.

State v. Calvin Mann

SCHR represented Calvin Mann from Fulton County. SCHR attorneys obtained Mr. Mann's release from prison in April 2017.

State v. Alva Polke

SCHR represented Alva Polke from Toombs County. SCHR attorneys obtained Mr. Polke's release from prison in March 2017.

Walker v. City of Calhoun

SCHR represents Maurice Walker in a certified class action challenging the money bail system in the City of Calhoun. The case is pending in the 11th Circuit Court of Appeals.

SCHR CAPITAL LITIGATION UNIT DOCKET

The Capital Litigation Unit (CLU) of the Southern Center for Human Rights represents individual clients facing the death penalty at all stages of the legal process in Georgia and Alabama. The following is a case-by-case review of the CLU's docket:

Nicholas Acklin (Alabama)

SCHR has represented Alabama death row inmate Nicholas Acklin in his post-conviction proceedings since 2002. SCHR will file a cert petition in the Alabama Supreme Court in May 2018.

Bobby Baker (Alabama)

SCHR and attorneys from the law firm of Covington & Burling represent Alabama death row inmate Bobby Baker in his post-conviction proceedings. The case is pending in the Circuit Court of Houston County, Alabama.

Brian Brookins (Georgia)

SCHR started representing Georgia death row inmate Brian Brookins in June 2017. The case is pending in the Georgia Supreme Court.

Janice Buttrum (Georgia)

SCHR represented Janice Buttrum in a resentencing effort. Buttrum was sentenced to death in Whitfield County, Georgia, in the 1980s and was subsequently resentenced to life in prison without parole. She was resentenced to life in May 2017. SCHR is now representing Ms. Buttrum at the Georgia Board of Pardons and Paroles.

Royheem Deeds (Georgia)

SCHR co-counsels the trial case of Royheem Deeds with attorneys from the Georgia Capital Defender. The case is pending in the Superior Court of Dodge County, Georgia.

Sheila Denton (Georgia)

SCHR is representing Sheila Denton from Ware County. A hearing on an Extraordinary Motion for a New Trial will occur in May 2018.

Dionne Eatmon (Alabama)

SCHR works with attorneys from the law firm of Reed Smith to represent Alabama death row inmate Dionne Eatmon in his post-conviction proceedings. Eatmon's case is pending in the Circuit Court of Jefferson County, Alabama.

Johnny Lee Gates (Georgia)

SCHR is representing Johnny Lee Gates with the Georgia Innocence Project. A hearing on an Extraordinary Motion for a New Trial will occur in May 2018.

Westley Harris (Alabama)

SCHR works with attorneys from the law firm of Reed Smith to represent Alabama death row inmate Westley Harris in his post-conviction proceedings. Harris's case is pending in the Circuit Court of Crenshaw County, Alabama.

Toforest Johnson (Alabama)

SCHR and the Berkeley Law School Death Penalty Clinic represent Alabama death row inmate Toforest Johnson in his post-conviction proceedings. The United States Supreme Court granted, vacated, and remanded the case to the United States District Court for the Northern District of Alabama on a habeas corpus petition. The case is now pending in the Alabama Court of Criminal Appeals.

Heather Leavell-Keaton (Alabama)

SCHR represents Alabama death row inmate Heather Leavell-Keaton in her direct appeal. The case is pending in the Alabama Court of Criminal Appeals.

Brandon Kelley (Alabama)

SCHR represents Alabama death row inmate Brandon Kelley in his direct appeal. The case is pending in the Alabama Court of Criminal Appeals.

Albert Mack (Alabama)

SCHR and the law firm of Buchanan, Ingersoll & Rooney represent Alabama death row inmate Albert Mack in his state post-conviction proceedings. The case is pending in the Circuit Court of Tuscaloosa County, Alabama.

Calvin McMillan (Alabama)

SCHR represents Alabama death row inmate Calvin McMillan in his state post-conviction proceedings. The case is pending in the Alabama Supreme Court.

James McWilliams (Alabama)

SCHR represents Alabama death row inmate James McWilliams in his federal habeas corpus proceedings. The United States Supreme Court issued a decision in June 2017 in favor of Mr. McWilliams. The case is pending in the 11th Circuit Court of Appeals.

Roy Perkins (Alabama)

SCHR represents Alabama death row inmate Roy Perkins in his federal habeas corpus proceedings. The case is now in the United States District Court for the Northern District of Alabama.

Gregory Wynn (Alabama)

SCHR represents Alabama prisoner Gregory Wynn in his state post-conviction proceedings. Wynn was initially sentenced to death, but now is serving life in prison without parole because he was a juvenile at the time of the offense.