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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2010

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

OMB No 1545 0047

<u>~</u> _	FOI tile Z	TIV Caletti	dar year, or tax year beginning , 2010, and end	ng		<u> </u>	
В	Check if appl	ıcable			D Employer I	Identification Nu	mber
	X Address	change	Southern Coalition for Social Justice		26-06	88375	
			1415 West Highway 54 Suite 101		E Telephone		
	Name c	-	Durham, NC 27707		•		
	Initial re	turn	barnamy no bivo		919-3	23-3380	
	Termina	ted					
	Amende	d return			G Gross rece	pts \$ 1,	938,760.
	Annicat	ion pending	F Name and address of principal officer Anita Earls	H(a) Is this	a group return fo	or affiliates?	Yes X No
		ion pending		H(b) Are all	affiliates include	ed?	Yes No
			Same As C Above	If 'No,'	attach a list (se	e instructions)	
<u></u>	Tax-exem		X 501(c)(3) 501(c) () (() 4947(a)(1) or 527	_			
J	Website	: ► WW	w.southerncoalition.org	H(c) Group	exemption numb	oer ►	
K	Form of or	ganization	X Corporation Trust Association Other ► L Year of Form	ation 200	7 M Stat	e of legal domicil	e NC _
Pa		Summai	v				
		fly descri	be the organization's mission or most significant activities. The Sou	thern C	oalition	for Soc	cial
			promotes justice by empowering minority and 1				
စ္ဆ						mir r 125 -	
Activities & Governance	_ae	reng_a	nd_advance_their_politicalsocial_and_econom	nc mar	us		
19							·
<u> </u>			$oldsymbol{ iny} lacktriangleq lacktriangle$ if the organization discontinued its operations or disposed of $oldsymbol{n}$	nore than 2		- 1	•
٠ مع			iting members of the governing body (Part VI, line 1a)		_	3	9
S	4 Nur	nber of in	dependent voting members of the governing body (Part VI, line 1b)			4	8
ij	5 Tota	al number	of individuals employed in calendar year 2010 (Part V, line 2a)		<u> </u>	5	16
흦	්ණු Tota	al number	of volunteers (estimate if necessary)			6	10
ĕ	7a Tota	al unrelate	ed business revenue from Part VIII, column (C), line 12			7a	3,900.
			business taxable income from Form 990-T, line 34			7b	- 1,769.
				P	rior Year	Curi	rent Year
	8 Cor	tributions	and grants (Part VIII, line 1h)	<u> </u>	398,55		,928,076.
<u>•</u>							7,278.
Ĕ		_	rice revenue (Part VIII, line 2g)	-	1,00		
Revenue			ncome (Part VIII, column (A), lines 3, 4, and 7d)		2,43		806.
Œ			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,56		2,600.
	12 Tota	al revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		403,55	5. 1,	,938,760.
	13 Gra	nts and s	ımılar amounts paid (Part IX, column (A), lines 1-3)		60,42	5.	
			to or for members (Part IX, column (A), line 4)				
		=	er compensation, employee benefits (Part IX, column (A), lines 5-10)		428,45	ń	585,863.
ø				-	120,13	~	303,003.
Expenses	16a Pro	fessional	fundraising fees (Part IX, column (A), line 11e)				
<u> </u>	b Tota	al fundrais	sing expenses (Part IX, column (D), line 25) ►66,300	.			
ŭ	1		ses (Part IX, column (A), lines 1 a-11d, 11 = 240 = VED		228,76	1	619,077.
							,204,940.
	I .		es Add lines 13-17 (must equal Part-IX, column-(A), line 25)		717,63		
		enue less	s expenses Subtract line 18 from line 12		<u>-314,08</u>		733,820.
t Assets or id Balances			IN MAY TO GO!! W	Beginnii	ng of Current Y	ear End	d of Year
\$ <u>ē</u>	20 Tot	al assets	(Part X, line 16)		377,03	0. 1.	, 111 <u>, 541.</u>
88	21 Tot	al liabilitie	es (Part X, line 26)		5,98	8.	9,279.
Net F					371,04		,102,262.
_			fund balances. Subtract line 21 from line 20		3/1,04	2. 1	, 102, 202.
_			re Block				
Und	ler penalties	of perjury, I o	leclare that I have examined this return, including accompanying schedules and statements, and arer (other than officer) is based on all information of which preparer has any knowledge	to the best of	my knowledge a	nd belief, it is tru	e, correct, and
	.,	- /	7. 10 0 0 0		7	' 2611	
			Medi S. Cleve		<u> </u>	<u>- 2011</u>	
Sig	gn	Signati	ure of officer	,	ate	6 /- ~	
He	re	×	Inita S. Earls, Executive Direc	tor .	,	7-15-2	DH .
		Type o	print name and title			<i></i> _	
_		Print/Type i	preparer's name Pri // // Murphy Sistrom Date		Obsert	, PTIN	
			preparer's name Murphy Sistrom Provide Date 2011 05 16 15.33 43 5/16	/11	Check	"	
Pa		11119 1	04/00	, - -	self employed	N/A	
Pr	eparer	Firm's nam	e ► MIG MURPHY SISTROM, CPA, PC		_		
Us	e Only	Firm's addr			Firm's EIN	N/A	
	•	3 000"	DURHAM, NC 27707-1469				9-1119
_		d.aa.: 11			r none no	X Y	
			nis return with the preparer shown above? (see instructions)				
	A Fau Da	nomunek E	Reduction Act Notice, see the separate instructions.	EEA0113L 12	2/21/10	Fo	orm 990 (2010)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Par	· · · · · · · · · · · · · · · · · · ·	-06883		Page 2
· u.	Check if Schedule O contains a response to any question in this Part III			X
1	Briefly describe the organization's mission:			
	See Schedule 0			
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior	_	_
	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	' Ц	Yes X	No
	If 'Yes,' describe these changes on Schedule O			
4	Describe the exempt purpose achievements for each of the organization's three largest program services by e and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allo expenses, and revenue, if any, for each program service reported	kpenses cations to	Section 50 others, th	01(c)(3) ie total
4a	(Code:) (Expenses \$ 789,695. including grants of \$) (Revenuese Schedule 0	e \$	610,	109.)
				. – – – –
				-
			-	
4 b	(Code: (Expenses \$ 114,537. including grants of \$) (Revenue)	e \$	1,	957.)
	See Schedule 0			
				 _
				. – – – –
				-
40	c (Code:) (Expenses \$ 71,479. including grants of \$ 17,008.) (Revenue Human Rights -	le \$	2,	743.)
	Worked with communities to develop community-based solutions to crim counter police harassment and intimidation.	inal a	ctivit	y_and_
_	d Other program services (Describe in Schedule O) See Schedule O			
40	d Other program services (Describe in Schedule O) (Expenses \$ 76,799. including grants of \$) (Revenue \$	51	,155.)	
	e Total program service expenses ► 1,052,510.		, 100.)	
BAA			Form 9	90 (2010)

	,		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
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? If 'Yes,' complete Schedule C, Part II	4	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? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		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? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
•	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	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? If 'Yes,' complete Schedule D, Part VII	11 b		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? If 'Yes,' complete Schedule D, Part VIII	11 c	<u> </u>	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? If 'Yes,' complete Schedule D, Part IX	11 d		<u>x</u> _
(e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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)? If 'Yes,' complete Schedule D, Part X	11 f		<u>x</u>
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		х
١	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ĺ	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16	_	х
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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		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? If 'Yes,' complete Schedule G, Part II	18	_	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	_	Х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	_	<u>X</u>
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

	1990 (2010) Southern Coalition for Social Justice 26-068837	5	P	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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>	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
ŧ	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? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
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? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
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? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
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? If 'Yes,' complete Schedule R, Part I	33		х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
ā	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R. Part V, line 2	36		X

38 BAA Х

37

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? If 'Yes,' complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

1a Enter the number reported in Box 3 of Form 1096. Enter -0 · finot applicable	Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
18 Enter the number reported in Box 3 of Form 1086. Enter -0 -fi not applicable 1a		Check in Contessite of Contesting a response to any question in this rail of		I	Yes	No.
Betiet the number of Forms W.ZG included in line 1a. Enter -0- if not applicable Del the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax State 2a 16 bit 1at least one is reported on line 2a, did the organization has all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Off the organization have unrealized business gross income of \$1,000 or more during the year? 3b If Yes' has it field a Form 990-T for this year? If Not, provide an explanation in Schedule 0 4a At any time during the catendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization of a profit organization file Form 8886-1? 5b Was the organization and party to a prohibited tax shelter transaction at any time during the tax year? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5c If Yes', to line 5a or 5b, did the organization file Form 8886-1? 5d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5d Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Organizations that may re	1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 41			
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) without sunners? 2a Enter the number of amployees reported on Form W.3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return. 2a Enter the number of amployees reported on Form W.3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year (e.g. ear introduce). 3b If Yes' has it filed a Form 990-1 for this year? If Pob, provide an explanation in Schedule O 3d At A any time during the calendary ear, did the organization have an interest in, or a singitude or other authority over, a financial account in a foreign country; such as a bank account, securities account, or other financial accounts. See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts. Sa Was the organization payer to a prohibited tax shetter transaction? or the properties of the organization that it was or is a party to a prohibited tax shelter transaction? If Yes's identity to organization that it was or is a party to a prohibited tax shelter transaction? If Yes's, identity to organization in the organization in the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 1 organizations that may receive deductible contributions under section 179(c). 2 b If Yes', identity organization sell-engage, or dinerwise dispose of tangble personal property for which it was required to file property or which it was required to file? 3 b If Yes', identity organization sell-engage, or dinerwise dispose of tangble personal property for which it was required to file? 4 b If Yes						1
28 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax State benefits, filed of the calestad year ending with or within the year covered by this return If all teast one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes' has it filled a Form 390-T for this year? If No, provide an explication in Schedule O 3b If Yes' has filled a Form 390-T for this year? If No, provide an explication in Schedule O 3b If Yes' has filled a Form 390-T for this year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for this year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for this year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for the year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for the year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for the year? If No, provide an explication in Schedule O 3c If Yes' has filled a Form 390-T for the year year premise in Yes' year of the Yes' of the organization for the Yes' of the organization for year year premise in Yes' year year year year. Yes' year year year year year year year year		Did the organization comply with backup withholding rules for reportable payments to vendo	rs and reportable gaming	1 c	х	
In It aleast one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes' has it filed a Form 990-T for this year? If You' provide an explanation in Schedule O 3b If Yes' has thilled a Form 990-T for this year? If You' provide an explanation in Schedule O 3b If Yes' enter the name of the foreign country. See instructions for filing requirements for Form TD F-90-22 I, Report of Foreign Bank and Financial Accounts Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If Yes', enter the name of the foreign country. See instructions for filing requirements for Form TD F-90-22 I, Report of Foreign Bank and Financial Accounts Sa Was the organization and the foreign country. See instructions for filing requirements for Form TD F-90-22 I, Report of Foreign Bank and Financial Accounts Sa Was the organization and the foreign country. See instructions for filing requirements for Form TD F-90-22 I, Report of Foreign Bank and Financial Accounts 5c If Yes, to line Sa or Sb, did the organization file Form 8886-fi? 5c If Yes, to line organization and pross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c If Yes, to line the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 3d If the organization tree we a payment in excess of \$75 made partly as a contribution of prossing and prossing an express provided? 3d If Yes, indicate the number of Forms 8828 filed during the year. 6d If Yes, indicate the number of Forms 8828 filed during the year. 6 Did the organization received a	2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	2a 16			
Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a	ь			2b	$\bar{\mathbf{x}}$	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? bit 'Yes' has it filed a Form 990-7 for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? See instructions for filing requirements for Form TD F 90-21 it, Report of Foreign Bank and Financial Accounts Sa Was the organization to a protification of the sing of the organization fact sheller transaction at any time during the tax year? Sa Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b Diff yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 3 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7b If Yes,' did the organization notity the donor of the value of the goods or services provided? 6b If Yes,' did the organization notity the donor of the value of the goods or services provided? 6c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If Yes indicate the number of Forms 8282 filed during the year 9 Did the organization received a contribution of qualified infellectual property, did the organization file a Form 1094 contribution of qualified infellectual property, did the organization file a Form 1094 contributions. Enter a intuitation fe	_					
b If "Yes," enter the amount of the system of the organization and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation and partity for goods and services provided to the payor? If "Yes," differ organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If "Yes," differ organization notify the donor of the value of the goods or services provided? Organizations that may receive a payment in excess of \$75 made partity as a contribution and partity for goods and services provided to the payor? If "Yes," indicate the number of Forms 8282 filed during the year If "Yes," indicate the number of Forms 8282 filed during the year If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization is a donor advised funds and section \$96(3) supporting organizations. Did the supporting organizations make any taxabile distribution of payling and payling organizations. Did the supporting organizations make a distribution to a donor, donor advised funds. If the organization make any taxabile distributions under section \$96(2) as ponsoring organizations. Did the supporting organizations make a distribution to a donor, donor advised funds. If the organization make any taxabile distributions under section \$960 but the organization make any taxabile distributions	3 a	· · · · · · · · · · · · · · · · · · ·		3a	Χ	
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9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	8	supporting organization, or a donor advised fund maintained by a sponsoring organization, h	ng organizations. Did the nave excess business	-		· ·
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b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O			130	14.		v
		* * * * * * * * * * * * * * * * * * * *	Schedule C			_^
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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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a 1 b 8 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee or key employee? 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? See Sch O 3 Х 4 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7 a governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by X 8a a The governing body? Х 8ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Does the organization have local chapters, branches, or affiliates? **b** If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Х 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Schedule O how this is done See Schedule O Х 13 Does the organization have a written whistleblower policy? 13 14 Х 14 Does the organization have a written document retention and destruction policy? 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? Х a The organization's CEO, Executive Director, or top management official See Schedule O 15a X 15b b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a X taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed - NC 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply. Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Carolyn Rhodes 1415 West Highway 54 Suite 101 Durham NC 27701 919-323-3380

Form 990 (20	010) Southern	Coalition	for :	Social	Justice	26-0688375 Pa	age 7
				s, Trust	ees, Key Emplo	yees, Highest Compensated Employees,	
	and Independen			any guest	tion 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	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	ficer, director, or trus	tee
(A)	(B)			•	C)			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	ndividual trustee or director		_	key employee	Highest compensated employee	Former	Reportable compensation from the organization (W 2/1099-MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Anita Earls	<u> </u>					<u>a</u>				
Exec Dir; Secr	50	x		Х	х	X		105,417.	0.	12,261.
(2) Jeremy Collins	30	Α.						105,417.	•	12/201.
Chair	2	Х		x				0.	0.	0.
(3) Daniella Cook		 ^		<u> </u>		-		- 0.		
Treasurer	2	X		x			i	0.	0.	0.
(4) James Ferguson		 ^``	-	-			<u> </u>		- 0.1	<u>~</u>
Director	2	x					1	0.	0.	0.
(5) Jim Grant		<u> </u>	 		T		t			
Director	2	X						0.	0.	0.
(6) Geeta Kapur	 									
Vice Chair	2	X		Х			ļ	0.	0.	0.
(7) Shannon Sayers	<u> </u>	<u> </u>				1	i –			
Director	1 2	Х		Ì		ŀ		0.	0.	0.
(8) Diane Standaert	<u> </u>	 				<u> </u>	\vdash			
Director	2	X			İ			0.	0.1	0.
(9) Barry Williams		<u> </u>							·	
Director	2	X						0.	0.	0.
(10)										
<u>(11)</u>									-	
(12)							<u> </u>			
(13)	 		-							
(14)			-							-
(15)	-									
(16)	-									
(17)	-				† -					

TEEA0107L 12/21/10

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Form 990 (2010)

Par	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
GRANTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c				
NS, GIFTS,	d Related organizations e Government grants (contributions) 1 d 1 e				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f 1, 928, 076.				
Ŝ₹	h Total. Add lines 1a-1f	1,928,076.	=		
N	Business Code	7 070			
PROGRAM SERVICE REVENUE	2a Legal fees 541100	7,278.	5,978.	1,300.	
ER VIC	¢				
M SE	d				_
GRA	f All other program service revenue				-
PRO	g Total. Add lines 2a-2f	7,278.			
	3 Investment income (including dividends, interest and other similar amounts)	806.	806.		
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties (i) Real (ii) Personal	=	, , , , , , , , , , , , , , , , , , , ,	····	
}	6a Gross Rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
EVENUE	8a Gross income from fundraising events (not including \$				
~	of contributions reported on line 1c) See Part IV, line 18				į
OTHER I	See Part IV, line 18 a b Less direct expenses b				
6	c Net income or (loss) from fundraising events				<u> </u>
	9a Gross income from gaming activities See Part IV, line 19				
	b Less: direct expenses b			. == = = = = = = = = = = = = = = = = =	
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a 1,300.				
	b Less cost of goods sold b	1 200		1 200	
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	1,300.		1,300.	
	11a Speeding ticket revenue 541100	1,300.		1,300.	<u> </u>
	b	1,000.			···
	c				
	d All other revenue.				
	e Total. Add lines 11a-11d	1,300.			
	12 Total revenue. See instructions	1,938,760.	6,784.	3,900.	0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

<u>ов,</u>	not include amounts reported on lines 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 governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	110,445.	94,449.	6,439.	9,557.
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	386,085.	326,740.	26,013.	33,332.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	26,187.	22,863.	947.	2,377.
9	Other employee benefits	25,546.	22,303.	924.	2,319.
10	Payroll taxes	37,600.	32,122.	2,232.	3,246.
	Fees for services (non-employees):			· ·	
	Management				
t	Legal	7,773.	7,585.	188.	
	: Accounting	10,991.		10,991.	
(Lobbying				· · · · · · · · · · · · · · · · · · ·
	Professional fundraising services. See Part IV, line 17 Investment management fees				
(Other	355,094.	328,515.	21,649.	4,930.
-	Advertising and promotion				•
13	Office expenses.	17,478.	14,249.	1,220.	2,009.
14	Information technology	13,840.	10,436.	1,398.	2,006.
15	Royalties				
16	Occupancy	33,187.	25,085.	3,428.	4,674.
17	Travel	143,326.	131,346.	11,880.	100.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,241.	2,648.	251.	342.
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses	5,827.		5,827.	
	of line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
	Printing and Publications	11,744.	9,719.	751.	1,274.
	Memberships and dues	7,050.	1,778.	5,272.	
	Staff_development	5,969.	2,339.	3,630.	
(Postage and Shipping	3,557.	3,325.	98.	134.
1	All other expenses .				
25		1,204,940.	1,035,502.	103,138.	66,300.
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		52,527.	1_1	42,071.
	2	Savings and temporary cash investments		162,355.	2	215,955.
	3	Pledges and grants receivable, net		150,000.	3	830,000.
	4	Accounts receivable, net		150.	4	
	5	Receivables from current and former officers, directo and highest compensated employees. Complete Part			5	
•	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contisponsoring organizations of section 501(c)(9) voluntal organizations (see instructions)	ributing employers and		6	
S	7	Notes and loans receivable, net			7	
ASSETS	8	Inventories for sale or use			8	
S	9	Prepaid expenses and deferred charges			9	8,209.
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 20,153.			
	b	Less: accumulated depreciation	10ь 6,356.	11,998.	10 c	13,797.
	11	Investments – publicly traded securities			11	
	12	Investments – other securities See Part IV, line 11			12	-
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11	I		15	1,509.
	16	Total assets. Add lines 1 through 15 (must equal line	e 34)	377,030.	16	1,111,541.
	17	Accounts payable and accrued expenses		5,988.	17	9,279.
	18	Grants payable			18	
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities			20	
Å	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21	
ABILIT:	22	Payables to current and former officers, directors, tru- highest compensated employees, and disqualified pe of Schedule L	ustees, key employees, rrsons Complete Part II		22	
E S	22	Secured mortgages and notes payable to unrelated t	hird partice		23	
5	23		·		24	
		Unsecured notes and loans payable to unrelated thire Other liabilities Complete Part X of Schedule D	a parties		25	
	25	•		5,988.	26	9,279.
N E	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ►	X and complete lines	3,366.	20	9,219.
Ť		27 through 29 and lines 33 and 34.				
A S S E	27	Unrestricted net assets		371,042.	27_	654,595.
È	28	Temporarily restricted net assets			28	447,667.
Š	29	Permanently restricted net assets	_		29	
R		Organizations that do not follow SFAS 117, check h	ere ► and complete		1 1	
Б		lines 30 through 34.			<u> </u>	
FUND	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipa	ment fund		31	
日々しくことにあ	32	Retained earnings, endowment, accumulated income			32	
Ğ	33	Total net assets or fund balances.		371,042.	33	1,102,262.
Š	34	Total liabilities and net assets/fund balances		377,030.	34	1,111,541.

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Form **990** (2010)

Forç	n 990 (2010) Southern Coalition for Social Justice	<u> 26-0688375</u>		Pa	ge 12					
Pa	rt XI Reconciliation of Net Assets	·								
	Check if Schedule O contains a response to any question in this Part XI									
		1 1								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>38,7</u> 04,9						
2										
3	Revenue less expenses Subtract line 2 from line 1	3		33,8						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	71,C						
5	Other changes in net assets or fund balances (explain in Schedule O).	5			<u>0.</u>					
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,1	04,8	62.					
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response to any question in this Part XII				\Box					
				Yes	No					
1	Accounting method used to prepare the Form 990. Cash X Accrual Other									
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O									
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X						
- 1	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>					
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	2c	х						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O									
•	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both.	issued on a								
	X Separate basis Consolidated basis Both consolidated and separate basis									
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		X					
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit	3b							
DA/			Farm	. 000	2010					

SCHEDULE A (Form 990 or 990-EZ)

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.

Employer identification number

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Sou	the	_		for Social Ju							88375	_				
Par	ŧΪ	Rea	son for Pub	lic Charity Status	(All organizations	must c	omple	te this	part.)	See ir	nstructi	ions.				
The c	orga	nızatı	on is not a priv	ate foundation because	e it is: (For lines 1 throi	ugh 11,	check o	nly one	box)							
1		A ch	urch, conventio	n of churches or assoc	ciation of churches desc	cribed in	section	170(b)((1)(A)(i).							
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)														
3		A ho	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														
	_		e, city, and stat								_					
5		170(I	b)(1)(A)(iv). (Co	omplete Part II)	f a college or university		•	-	•	nmental	unit des	scribed in sectio	n			
6	Ш	A fee	deral, state, or I	ocal government or go	overnmental unit describ	bed in s	ection 1	70(b)(1)	(A)(v).							
7	X	ın se	ction 170(b)(1)	(A)(vi). (Complete Par				vernmei	ntal unit	or from	the ger	neral public desc	ribed			
8	닏		•		'0(b)(1)(A)(vi). (Complet		•									
9		from	activities relate stment income	ed to its exempt function) more than 33-1/3% of ons – subject to certain s taxable income (less : mplete Part III.)	n except	ions, an	d (2) no	more t	han 33-	1/3% of	its support from	gross			
10		An o	rganization org	anized and operated e	xclusively to test for pu	iblic safe	ety See	section	509(a)((4).						
11		An o more desc	rganization organization organi	anized and operated e irted organizations des if supporting organizat	xclusively for the benef cribed in section 509(a ion and complete lines	fit of, to)(1) or s 11e thro	perform ection 5 ough 111	the fun 09(a)(2) n	ctions o). See s	of, or car section 5	ry out th i 09(a)(3)	out the purposes of one or 9(a)(3). Check the box that				
			Туре І	b Type II	c Type III						d \square	Type III - Othe				
е		By cl	heckina this bo	x. I certify that the org	anization is not controll than one or more publ	led direc licly sup	tly or in ported o	directly organiza	by one tions de	or more scribed	disquali in section	ified persons on 509(a)(1) or				
f			e organization r	eceived a written dete	rmination from the IRS	that is a	Type I,	Type II	or Type	e III sup	porting	organization,				
g		Since	e August 17, 20	006, has the organizati	on accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons	i?				
												Yes	No			
		(i)	A person who below, the gov	directly or indirectly co verning body of the sup	ontrols, either alone or oported organization?	together	with pe	rsons d	escribed	d in (ii) a	and (III)	11 g (i)				
		(ii)	A family mem	ber of a person descri	bed in (i) above?							11 g (ii)	<u> </u>			
		(iii)	A 35% control	led entity of a person	described in (i) or (ii) a	bove?						11 g (iii)	<u> </u>			
h		Prov	ide the followin	g information about th	e supported organization	on(s)										
			me of supported organization	(ii) EiN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		the organ	ou notify ization in n (i) of ipport?	(vi) l organiz colun organize U S	ation in	(vii) Amount of su	pport			
						Yes	No	Yes	No	Yes	No					
(A)																
νУ																
(B)	_															
(C)																
(D)																
												-				
(E)																
Tota	ı								[

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

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 Southern Coalition for Social Justice 26-0688375 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.)

<u>Sec</u>	tion A. Public Support						
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants ')		2,206.	649,046.	398,555.	1,944,233	. 2,994,040.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	0.	2,206.	649,046.	398,555.	1,944,233	. 2,994,040.
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).						2,809,433.
6	Public support. Subtract line 5 from line 4						184,607.
Sec	tion B. Total Support						
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	0.	2,206.	649,046.	398,555.	1,944,233	. 2,994,040.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			1,995.	1,019.	806	3,820.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10						2,997,860.
12	Gross receipts from related activ	rities, etc (see ins	tructions)			12	11,958.
	First five years. If the Form 990 organization, check this box and	stop here	·	nd, third, fourth, c	or fifth tax year as	a section 501(E)(3) ► X
	tion C. Computation of Pu			<u></u>			
	Public support percentage for 20	•	•	ne 11, column (f))	1	14	
15	Public support percentage from	2009 Schedule A,	Part II, line 14			15	5 %
16 a	33-1/3% support test — 2010. If and stop here. The organization	the organization of qualifies as a pul	lid not check the l blicly supported o	box on line 13, ar rganization	nd the line 14 is 3	3-1/3% or more	, check this box
b	33-1/3% support test – 2009. If and stop here. The organization				5a, and line 15 is	33-1/3% or mor	re, check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explain in P	art IV how
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiz	s' test, check this ation qualifies as	box and stop he a publicly suppo	re. Explain in P rted organization	art IV how the
18	Private foundation. If the organ	zation did not che	eck a box on line	13, 16a, 16b, 17a			
BAA					Sc	neaule A (Form	990 or 990-EZ) 2010

(Complete only if you checked the box on line 9 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.)

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	<u>(f)</u>	Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')							
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							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		y					
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
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		,					
c	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
<u>Sec</u>	tion B. Total Support	l			T			
Calen	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(1)	Total
	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support. (Add Ins 9, 10c, 11, and 12)				<u> </u>			
14	First five years. If the Form 990 organization, check this box and	is for the organization	ation's first, seco	nd, third, fourth, o	or fifth tax year as	a section 50	1(c)(3)	▶ □
	tion C. Computation of Pu							
	Public support percentage for 20			ne 13 column (f)	\		15	%
	Public support percentage from			io 15, column (I)	,		16	<u>8</u>
	tion D. Computation of Inv			<u> </u>				
					ımn (f)		17	%
17 18	Investment income percentage t	•	• • •	-	41111 (1 <i>))</i>	-	18	<u>%</u>
18 19:	investment income percentage in 33-1/3% support tests – 2010. It				and line 15 is mor	_ 1.173 than		
	is not more than 33-1/3%, check 33-1/3% support tests — 2009. It	k this box and sto	p here. The orgar	nization qualifies	as a publicly supp	orted organiz	zation	▶ [_]
•	line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	ie organization qu	ualifies as a public	ly supported	organization	~ □
_20	Private foundation. If the organi	ization did not che	ck a box on line	14, 19a, or 19b, o	check this box and	d see instruct	enoi	P

Schedule A	(Form 990 or	990-EZ) 20	10 Sout	hern Co	palition	for So	cial <u>Jus</u>	tice	26-068	38375	Page 4
Partiv	Supplemer Part II, line (See ınstru	ntal Inform 17a or 1 ctions).	nation. Co 7b; and P	omplete t art III, lin	this part to ne 12. Also	provide complet	the explan e this part	ations re for any a	quired by additional	Part II, line information.	10;
		-									
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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

If the organization answered 'Yes,' to 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,' to 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-B

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• 5	section 501(c)(4), (5), or (6) o	rganizations: Complete Part III			
Name	of organization			Employer identifica	
	<u>ithern Coalition fo</u>			26-068837	
Par	t I-A Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV.	
2	Political expenditures			▶\$	
3	Volunteer hours				
Par	t I-B Complete if the or	rganization is exempt under section	on 501(c)(3).	·	
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	0.
2	Enter the amount of any exc	ise 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
t	If 'Yes,' describe in Part IV				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c) , except	t section 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt functio	n activities > \$	
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►\$	
3	Total exempt function expen line 17b	ditures Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contributi	and employer identification number (EIN) For each organization listed, enter the arons received that were promptly and direct action committee (PAC) If additional spa	mount paid from the fill to delivered to a sepa	iling organization's fun arate political organizat	ds Also enter the ion, such as a separate
	(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)					

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010	Southern C	oalition for Soci	al Justice	26-06883	875 Page 2
Part II-A Complete if t section 501(the organization)).	on is exempt under se	ection 501(c)(3) and	d filed Form 5768 (ele	ction under
A Check ► If the filin	ig organization be	longs to an affiliated group),		
B Check ► If the filin	ig organization ch	ecked box A and 'limited co	ontrol' provisions apply		
(The term	Limits on Lobb 'expenditures' me	ying Expenditures eans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ires to influence p	public opinion (grass roots l	obbying)		
b Total lobbying expenditu	ires to influence a	legislative body (direct lob	bying)		
c Total lobbying expenditu	ires (add lines 1a	and 1b)		0.	0.
d Other exempt purpose e	•			1,222,383.	
e Total exempt purpose ex	xpenditures (add	lines 1c and 1d)		1,222,383.	0.
f Lobbying nontaxable am both columns	nount Enter the a	mount from the following to	able in	197,238.	
If the amount on line 1e, colu	ımn (a) or (b) ıs.	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,0		\$100,000 plus 15% of the exces			
Over \$1,000,000 but not over \$, ,	\$175,000 plus 10% of the exces			
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		40 310	
g Grassroots nontaxable a		•		49,310.	0.
h Subtract line 1g from lin i Subtract line 1f from line				0.	0.
		•		• • • • • • • • • • • • • • • • • • • •	<u></u>
j If there is an amount oth section 4911 tax for this	ner than zero on e vear?	either line 1h or line 1i, did	the organization file Fo	orm 4720 reporting	☐Yes ☐No
	, , , , , , , , , , , , , , , , , , , ,	4-Year Averaging Period	Under Section 501(h)		
(Some	e organizations th colun	nat made a section 501(h) e nns below. See the instruct	election do not have to	complete all of the five gh 2f.)	
	Lol	obying Expenditures Durin	g 4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount				197,238.	197,238.
b Lobbying ceiling amount (150% of line 2a, column (e))					295,857.
c Total lobbying expenditures					0.
d Grassroots nontaxable amount				49,310.	49,310.
e Grassroots ceiling amount (150% of line 2d, column (e))					73,965.
f Grassroots lobbying expenditures					0.
BAA				Schedule C (Form	990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Southern Coalition for Social Justice 26-0688375

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	a)	(b)
	Yes	No	Amount
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?			
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 	-		
d Mailings to members, legislators, or the public?	\vdash	-	
e Publications, or published or broadcast statements?	\vdash		
f Grants to other organizations for lobbying purposes?			
, , , ,			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV	\vdash		
j Total Add lines 1c through 1:			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	-		
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	(a)(E)		
section 501(c)(6).	(c)(s)	, or	
			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 carryover lobbying and political expenditures from the prior year?			3
section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Pais answered 'Yes.' 1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible tobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year		2Ь	
c Total		2с	
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 exce	ss		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli expenditure next year?	ucal	4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, a Also, complete this part for any additional information	nd Par	t II-B,	line 1i.
		-	
Additional Information			
The Organization has not participated in lobbying activities or			
	i <u>ncu</u> r	red	any
lobbying expenses from formation through the year of this return			
lobbying expenses from formation through the year of this returnsubmitted Form 5768 (election under Section 501(h)).			

Schedule C (Form 990 or 990-EZ) 2010 Southern Coalition for Social Justice	26-0688375	Page 4
Schedule C (Form 990 or 990-EZ) 2010 Southern Coalition for Social Justice ParkIVE Supplemental Information (continued)		
		-
		-
		-
	-	

SCHEDULE D (Form 990)

2010

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545 0047

Name of the organization

Employer identification number

Sou	uthern Coalition for Social Ju	ıstice	26-0688375
Pai	rt I Organizations Maintaining Dono	r Advised Funds or Other Sim	ilar Funds or Accounts. Complete if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	<u> </u>
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do funds are the organization's property, subject	nor advisors in writing that the assets to the organization's exclusive legal of	held in donor advised Yes No
6	Did the organization inform all grantees, donc used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor adv	grant funds can be sor, or for any other
Par	rt II Conservation Easements. Comp		
	Purpose(s) of conservation easements held b		- · · · · · ·
•	Preservation of land for public use (e.g., i	,	ervation of an historically important land area
	Protection of natural habitat	· —	servation of a certified historic structure
	Preservation of open space		icivation of a certifica filstoric structure
2	— · · ·	on held a qualified conservation cont	ribution in the form of a conservation easement on the
_	last day of the tax year		ibation in the form of a conservation casement on the
			Held at the End of the Tax Year
ā	Total number of conservation easements		2a
Ŀ	Total acreage restricted by conservation ease	ments	2b
C	Number of conservation easements on a certi-	fied historic structure included in (a)	2c
C	d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not	on a historic 2d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, o	or terminated by the organization during the
4	Number of states where property subject to co	onservation easement is located 🟲 _	
5	Does the organization have a written policy reand enforcement of the conservation easeme	garding the periodic monitoring, inspints it holds?	ection, handling of violations, Yes No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conserv	ation easements during the year
7	Amount of expenses incurred in monitoring, ii	nspecting, and enforcing conservation	easements during the year
8	Does each conservation easement reported o 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirem	ents of section Yes No
9	conservation easements		and expense statement, and balance sheet, and ents that describes the organization's accounting for
Pai	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treas wered 'Yes' to Form 990, Part	ures, or Other Similar Assets. IV, line 8.
1 a	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	s held for public exhibition, education	in its revenue statement and balance sheet works of , or research in furtherance of public service, provide, items
ŀ	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report in it ild for public exhibition, education, or	s revenue statement and balance sheet works of art, research in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	► \$
	(ii) Assets included in Form 990, Part X		►\$ ►\$
2	If the organization received or held works of a amounts required to be reported under SFAS		ar assets for financial gain, provide the following
á	a Revenues included in Form 990, Part VIII, line	e 1	> \$
<u>t</u>	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2010 SOUTH						26-068			Page Z
Part III Organizations Maintai	ining Collec	tions	of Art, Histo	rical	Treasures, or	Other Similar Ass	ets (co	<u>ontınu</u>	<u>ed)</u>
3 Using the organization's acquisition items (check all that apply):	on, accession,	and o	ther records, ch	eck ar	y of the following	that are a significant u	ise of its	collect	ion
a Public exhibition			d Loan o	or exc	hange programs				
b Scholarly research			e 🗌 Other						
c Preservation for future general	ations								
4 Provide a description of the organ Part XIV.	nızatıon's colle	ctions	and explain how	w they	further the organi	zation's exempt purpos	se in		
5 During the year, did the organizar assets to be sold to raise funds r	ather than to b	e mair	ntained as part o	of the	organization's coll	ection?	Yes		No
Part IV Escrow and Custodia	l Arrangeme	ents.	Complete if of	organ	iization answer	ed 'Yes' to Form 9	90, Pa	ırt IV,	line
9, or reported an amou	unt on Form	1990,	Part X, line	21.					
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian	, or oti	ner intermediary	for co	ontributions or othe	er assets not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV ar	nd com	plete the follow	ing tab	ole.				
							Amount	i	
c Beginning balance						1c			
d Additions during the year						1 d			
e Distributions during the year						1e			
f Ending balance									
2a Did the organization include an a	mount on Forr	n 990,	Part X, line 21?	•			Yes	L	No
b If 'Yes,' explain the arrangement									
Part V Endowment Funds. Co	mplete if th	e org	anızatıon ans	swere	ed 'Yes' to Forn	n 990, Part IV, line	<u> </u>		
	(a) Current y	ear	(b) Prior year	r	(c) Two years back	(d) Three years back	(e)	Four years	s back
1 a Beginning of year balance									
b Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships									i
e Other expenditures for facilities and programs									
f Administrative expenses							<u> </u>		
g End of year balance									
2 Provide the estimated percentage	e of the year e	nd bal	ance held as						
a Board designated or quasi-endov	vment ►		%						
b Permanent endowment ▶	%								
c Term endowment ►	%								
3a Are there endowment funds not organization by	in the possess	on of	the organization	that a	are held and admir	nistered for the	٦	Yes	No
(i) unrelated organizations.							3a(i)		
(ii) related organizations							3a(ii)		
b If 'Yes' to 3a(II), are the related of	organizations I	sted a	s required on Se	chedul	e R?		3b		
4 Describe in Part XIV the intended									
Part VI Land, Buildings, and									
Description of investment		(a) Cos	t or other basis evestment)	(b)	Cost or other pasis (other)	(c) Accumulated depreciation	(d)	Book va	ilue
1 a Land									
b Buildings									
c Leasehold improvements									
d Equipment					20,153.	6,356.		<u>13</u> ,	<u>,797.</u>
e Other							_		
Total. Add lines 1a through 1e (Column	nn (d) must equ	ıal For	m 990, Part X, o	columi	n (B), line 10(c).)	•			<u>,797.</u>
DAA			•			Cahaa	tula D (OC	2010

Schedule D	(Form 990) 2010	Southern Coalition	for Social Ju	stice	26-0688375	Page 3
Part VII	Investments-C	Other Securities. See Fo	orm 990, Part X, III	ne 12. N/A		
	(a) Description of se (including nam	ecurity or category e of security)	(b) Book value	(c) Cost or	Method of valuation end-of-year market value	
• •	al derivatives					
	-held equity interest	s				
(3) Other						
<u>(A)</u>	 -					
<u>(B)</u>						
(C)						
<u>(D)</u>						
<u>(E)</u>						
<u>F</u>						
(G)						
<u>(H)</u>						
_(l)		90 Part X, column (B) line 12)				
		Program Related. (See	Form 990 Part X	line 13) N/A		
I are viii	(a) Description of		(b) Book value		Method of valuation:	
	(a) Description of		(b) Book Value		end-of-year market value	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)				_		
(8)						
(9)						
(10)	un (h) must squal Form 00	00, Part X, column (B) line 13)				
Part IX		(See Form 990, Part X,	line 15) N/A			
	,	.	scription		(b) Book	value
(1)		X=2 <u>1</u>			(4) 2 3 3 1	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)				······································		
(8)						<u> </u>
(9)						
(10)						
		Form 990, Part X, column(B			•	
Part X	•	s. (See Form 990, Part				
(1) [•	ion of liability	(b) Amount	_		
	ral income taxes					
(2)						
(4)						ì
(5)						ļ
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
	nn (b) must equal Form 99	90, Part X, column (B) line 25)	•			
2 EIN 49 /	ASC 740) Footpoto	In Part XIV provide the text	of the feetnets to the	reanization's financia	I statements that remarks the	

Sche	edule D (Form 990) 2010 Southern Coalition for Social Justice	26-068	18375	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)		-	
3	Excess or (deficit) for the year Subtract line 2 from line 1	ļ	<u> </u>	
4	Net unrealized gains (losses) on investments	,		
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8		_	
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a	Net unrealized gains on investments			
	Donated services and use of facilities 2b			
C	Recoveries of prior year grants			
C	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		_	
a	Investments expenses not included on Form 990, Part VIII, line 7b			
Ŀ	Other (Describe in Part XIV.)			
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	-	
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Retu	rn N/A	
	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities 2a			
b	Prior year adjustments 2b	_		
	Other losses 2c			
C	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV.)	_		
	Add lines 4a and 4b.	4c		
Da	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5		
	t XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl additional information	ete this p	oart to provide	;
	·			 -
	·			 _
		-		
				

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Schedule **D** (Form 990) 2010

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Schedule D (Form 990) 2010 Southern Coalition for Social Justice Part XIV Supplemental Information (continued)	26-0688375	Page 5
Supplemental Information (Continued)		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection

Employer identification number

Southern Coalition for Social Justice	26-0688375	
Form 990, Part III, Line 1 - Organization Mission		
The Southern Coalition for Social Justice promotes justice h	by empowering minority	
and low-income communities to defend and advance their political, social and		
economic rights, using the combined skills of lawyers, social scientists, community		
organizers and media experts to help underrepresented people develop strategies to		
achieve their visions for themselves and their communities, incorporating an		
international human rights perspective and linking their efforts to broader		
processes of political, legal, social and economic change in the South		
Form 990, Part III, Line 4a - Program Service Accomplishments		
Census, Redistricting, & Voting Rights -		
Distributed almost \$60,000 in small grants to 27 community	organizations in Virginia, _	
North Carolina, Florida, Georgia, and Louisiana to conduct outreach for hard-to-count		
communities prior to and during the 2010 Census		
Hosted 2 meetings of experts in redistricting to develop a	community-based institute	
to train expert witnesses and community organizations to be involved in redistricting		
efforts following the 2010 Census.		
Intervened in LaRogue vs. Holder to defend the constitution	ality of section 5 of the	
Voting Rights Act.		
Represented individual clients in election challenges and submitted an amicus brief		
in a voting rights case of national significance.		

Schedule 0 (Form 990 or 990-EZ) 2010	Page 2	
Name of the organization Southern Coalition for Social Justice	Employer identification number 26-0688375	
Form 990, Part III, Line 4b - Program Service Accomplishments		
Immigrant Rights -		
Provided pro-bono representation to approximately 75 people in	 n immigration court.	
Conducted a number of educational events to inform the public	about immigration	
policy and opportunities for reform.		
Served as national partners in a number of immigrant rights in	nitiatives and as	
members of a number of national committees and workgroups.		
Developed a checkpoint watch program to monitor police checkpo	oints for evidence of	
racial_profiling		
Form 990, Part III, Line 4d - Other Program Services Description		
Environmental Justice -		
Represented the majority African-American community of New Hill in its opposition to		
the placement of a sewage treatment plant in their historic di	istrict.	
Represented the rural, low & moderate-income community of Gate	es County in its	
opposition to the placement of an outlying landing field in the	neir county.	
Intervened on behalf of the NC NAACP and grassroots group to c	defend a state law	
restricting the size and location of new landfills.		
Preserving Heirs' Property -		

Schedule 0 (Form 990 or 990-EZ) 2010	Page 2	
Name of the organization	Employer identification number 26-0688375	
Southern Coalition for Social Justice	120-0000373	
Form 990, Part III, Line 4d - Other Program Services Description	·	
Worked with the NC Bar Association to implement stronger ethics guidelines with		
regard to lawyers involvement in partition sales.		
	·	
Worked with a number of families to ensure that their land will be protected by		
creating LLC's, drafting wills, and providing networking opportunities and		
educational information.		
Conducted a number of educational events for families and advocates to raise		
awareness about heirs' property and black land loss in the South.		
Form 990, Part VI, Line 3 - Description of Delegated Duties to Management Co	mpany	
The duties of the Chief Financial Officer were performed by a contracted CPA as of		
November 2010.		
Form 990, Part VI, Line 11b - Form 990 Review Process		
Prior to filing, the Form 990 will be reviewed by the Executive	ve Director, CFO, and	
Office Manager, and then distributed to the full Board and the Finance Committee for		
review.		
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co	onflicts	
The Conflict of Interest policy is monitored by the Executive	Director and reviewed	
and signed by the Board Secretary at the beginning of each fiscal year by all staff		
and Board members with significant decision making authority. It is each		
signatory's obligation to disclose any potential conflict as	soon as it is known.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO,	Exec. Dir., or Top Mgtment	

directors reviewed comparability data to determine compensation. These deliberations

The current executive director was one of the founding directors. Prior to hiring

after the incorporation of the organization, the remaining four independent

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