

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

OMB No 1545 0047

Department of the Treasury

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

2012	
Open to Public Inspection	

111161	Tial Tievellac	OCI VICE				·	<u> </u>				
Α	For the 20	012 calend	ar year, or tax	year begir	ining $7/0$	1,	2012, an	d ending	6/30		, 2013
В	Check if app	licable	С							Employer identi	fication Number
	Address	s change			PROJECT,	INC.				58-1917	659
	Name o	hange	438 EDGEW	OOD AV	E				E -	Felephone numb	per
	Initial re	eturn	ATLANTA,	GA 303	12					404-827	-0027
	Termina	ated									<u></u>
	Amende	ed return							G	Gross receipts	\$ 1,787,589
	Applica	tion pending	F Name and add	ress of princi	pal officer			H((a) Is this a grou	ip return for affi	
			SAME AS C	ABOVE				H	(b) Are all affilia If 'No,' attach	tes included?	trustions) Yes I
ī	Tax-exem	pt status	X 501(c)(3)	501(c) () √ (in:	sert no.) 4947(a	a)(1) or	527	ii No, attaci	i a list (see ins	dructions) —
J	Website	e:► WW	W.GJP.ORG					H((c) Group exemp	otion number	•
K	Form of o	rganization	X Corporation	Trust	Association	Other►	L Year	r of Formation	1986	M State of le	egal domicile GA
Pε	ırt I	Summar		<u></u>		-				<u> </u>	<u> </u>
(ZZ				tion's mis	sion or most si	gnificant activities:	GEO	RGTA JI	USTICE F	ROJECT	PROVIDES
a	LE	GAL SE	RVICES AN	SOCI	AL SERVICE	SUPPORT TO					ÆTRO-ATLANTA
Ĕ											LIENTS A WAY
Ĕ	TO	MOVE				AND BE PRODU					
ĕ		eck this bo				d its operations or	disposed	d of more	than 25% of		
<u>ග</u> න			ting members				l line 16V			3	1
Se	l			-		ning body (Part VI ir 2012 (Part V, Iin)		4	
ŧ			of volunteers (11 2012 (Fait V, III)	1 6 2a)			5	2
Activities & Governance			ed business rev			mn (C), line 12				7 a	<u>8</u>
•			l business taxat							7b	
		 							Prior '		Current Year
_	8 Cor	ntributions	and grants (Pa	rt VIII, Jind	e 1h)					35,705.	1,775,337
Revenue			rice revenue (P							,,,,,,,,,	
Š	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)									1,022.	1,208
æ	11 Oth	er revenu	e (Part VIII, col	umn (A), I	ines 5, 6d, 8c,	9c, 10c, and 11e)			-1	18,889.	-12,824
	12 Total	al revenue	e – add lines 8	through 1	1 (must equal F	Part VIII, column ((A), line 1	2)		7,838.	1,763,721
			mılar amounts								
	14 Ber	nefits paid	to or for memb	ers (Part	IX, column (A),		ļ				
rA.	15 Sal	aries, othe	er compensatioi	n, employe	ee benefits (Pā	rt-IX, column (A),	Jines 5-1	0)	73	38,747.	851,696
Expenses	16a Pro	fessional	fundraising fees	(Part IX,	column (A)ը կո	じ ¹ 3 ^{e)} の 2013	SO			1,468.	
per	b Tota	al fundrais	sing expenses (Part IX. co	olumn (D), line	25)		,094.	-		***************************************
ŭ	1		es (Part IX, col		8 Y			, , , , , , , , , , , , , , , , , , , ,	31	9,820.	377,578
	1	-	•				25)			0,035.	1,229,274
			expenses. Sub						_	57,803.	
88	4	701100 1000	CAPCINOUS. Cui	a det in ie	10 11 0111 11110 12	·					534,447 End of Year
Assets o i Balance	20 Tot	al assets ((Part X, line 16)						Beginning of 0	1,894.	2,025,432
¥ ñ	21 Tot		s (Part X, line 2							10,471.	39,420
žŽ	il		fund balances	-	line 21 from lin	a 20			-		
Ž .	4 2) (i a matuu	n Dlack		11116 21 110111 1111	- 20			1,45	51,423.	1,986,012
A P	art II S	oignatui	re Block lare that I have examinater (other than office)	<i>A</i>							
Com	er penalties of plete Declara	perjury, deci	lare that I have exami arer (other than office	er) is based	, including accompar on all information of	lying schedules and state which preparer has an	ements, and t iy knowledge	to the best of r	my knowledge and	d belief, it is true	, correct, and
<u>Z</u> —	· · · · · · · · · · · · · · · · · · ·		1000	11	2.1	:			12/	20/13	
زوان	nn	Sygnato	ne of office	// / /	7				Date		
· He	ere	K	ACA/AS	Ams	n A 4						
He }			r print name and title		711						
		Print/Type (preparer's name		reparer's sign	aure _	D	ate	Chec	k if	PTIN
¯ УPa	id	SHETTA	A M. KOZAK	, CPA	(()D11~	KIRUL CA	2a	12/4/			P00687026
ra ∨Pr	eparer	Firm's name			ZAK, CPA	LULY Y		100/	1 13/11	_ r	
⊇ Üs	e Only	Firm's addre			ORO RD STI	E 100A			Firm'	s EIN ► 20-	-1403280
->	=	s addir			30260-294				Phon		961-4200
Mar	v the IRS	discuss th				² (see instructions	s)		7 1104	<u> </u>	X Yes No
					the separate in	 	-/	TEEA	01131 12/19/12		Form 990 (201

BAA	•	TEEA0102L 08/08/12		For	m 990 (2012)
4 e Total progra	am service expenses	994,429.			
(Expenses	\$	including grants of \$) (Revenue \$)
4 d Other progra	am services (Describe in S	schedule O.)			
					
			-		
					
					·
				- -	
4 c (Code.) (Expenses \$	including grants of \$) (Revenue	\$)
				-	 -
					-
				- -	
	- 		-		
					-
				- -	
	-				
4 b (Code:) (Expenses \$	including grants of \$) (Revenue	\$)
					
				- 	-
					-
			-		-
					
			- 		
SEE_SCHE	EDULE O				
4 a (Code:		994,429. including grants of \$		\$)
				.	
Section 501 (others, the t	(c)(3) and 501(c)(4) organiz total expenses, and revenu	ations and section 4947(a)(1) trusts are require e, if any, for each program service reported.	ea to report the amount of gr	rants and allo	cations to
	•	ervice accomplishments for each of its three lar eations and section 4947(a)(1) trusts are require	gest program services, as m	neasured by	expenses.
_	cribe these changes on Sci	<u> </u>	o, any program sormos:	1es	, [V] 140
		n Schedule O. or make significant changes in how it conduct:	s. any program services?	Yes	X No
Form 990 or	· 990-EZ? cribe these new services or	a Schedule O		Yes	X No
_		nificant program services during the year which	n were not listed on the prior		⊡
SEE_SCHE	TDOTF 0			- -	
-	ribe the organization's miss				
		response to any question in this Part III			X
	_	ervice Accomplishments			
	GEORGIA JUSTICE		58-1	1917659	Page 2

11,

			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	Х	
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		Х
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? If 'Yes,' complete Schedule D, Part I	6		Х
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		X
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, 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? If 'Yes,' complete Schedule D, Part IV	9_		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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	
ı	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		Х
•	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		Х
,	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		Х
	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	
1	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		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	X	
	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 and XII is optional.	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
١	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? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
15	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		X
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	_	Х
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 hospital facilities? If 'Yes,' complete Schedule H	20		X
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	Ţ	

14,

Part 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 1º If 'Yes,' complete Schedule I, Parts I and II	21		X			
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			
t	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					
c	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			
t	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>	25b		_X_			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X			
27	7 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? If 'Yes,' complete Schedule L, Part III						
	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):			17			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u> X</u>			
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X			
	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		X			
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X			
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		X			
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			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X			
ŀ	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)? If 'Yes,' complete Schedule R, Part V, line 2	35b					
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			
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	37		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	38	X				
BAA		Form	990 (2012)			

	30-1917	059		age
Pai	Tt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			_
	Check it Schedule O contains a response to any question in this Part V		T.v.	-
1.	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	o F	Yes	No
	b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 1 b	8		
		0		
•	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		Х
2 a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	20		
Ŀ	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a]	X
ŀ	f 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4 a	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 account)?	4 a		Х
ŀ	b If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	1	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			v
t	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 a		X
	Organizations that may receive deductible contributions under section 170(c).	6 b		
ŧ	a 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?	7 a	Х	
k	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
C	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	Ì	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
ę	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
ε	a Did the organization make any taxable distributions under section 4966?	9a	1	
Ŀ	b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
ā	a Initiation fees and capital contributions included on Part VIII, line 12			
k	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter.	\dashv		
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	•	
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		1
•	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in			
٠	which the organization is licensed to issue qualified health plans			
(c Enter the amount of reserves on hand	7		
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	<u> </u>	

١,

X

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 to any question in this Part VI

se	Cubii A. Governing body and management			
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members			
	of the governing body, or if the governing body delegated broad			1
	authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 1b 18			
	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.			
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?	2		Х
3				
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4				
_	since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5 6	Did the organization have members or stockholders?	6		X
-	a 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?	7 a		X
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	X	
	b Each committee with authority to act on behalf of the governing body?	8 b	X	
	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	9		Х
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Rev	enu <u>e</u>		
	D.10		Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
	b 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?	10 b		
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
12	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O	12 c	X	
13	Did the organization have a written whistleblower policy?	13	- <u>X</u>	
	Did the organization have a written document retention and destruction policy?	14	X	
15				[
	a The organization's CEO, Executive Director, or top management official	15 a	Х	
	b Other officers of key employees of the organization SEE SCHEDULE O	15 b	X	<u> </u>
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions)			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х
	b 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 taken steps to safeguard the	161		
<u></u>	organization's exempt status with respect to such arrangements?	16 b		<u> </u>
	ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► GA		-	
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) ava	 lable 1	or put	
10	inspection Indicate how you make these available. Check all that apply.	iable	or put	JIIC
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements availa the public during the tax year SEE SCHEDULE O	ble to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	nızatıo	n.	
	JULIE SMITH, COO 438 EDGEWOOD AVE ATLANTA GA 30312 404-827-0027			

Farm 990 (2012)	GEORGIA	JUSTICE	PROJECT.	INC

58-1917659

Page 7

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a 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 employees.'
- 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.

|X| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		(C)									
(A) Name and Title	(B) Average hours per week (list	one bo	x,ùπ	less g	perso	k more to on is bot or/truste	h an e)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other	
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations	
(1) ROBERT J. FREEMAN BOARD MEMBER	1	Х						0.	0.	0.	
(2) DAVID S. PHILLIPS BOARD MEMBER	10	Х						0.	0.	0.	
(3) J. MARC ALBERTSON BOARD MEMBER	10	Х						0.	0.	0.	
(4) PHILIP E. HOLLADAY, JR. BOARD MEMBER	10	X						0.	0.		
(5) J. MARBURY RAINER BOARD MEMBER	2	X						0.	0.	0.	
(6) KIMBERLY D. MELTON BOARD MEMBER	1	Х						0.	0.	0.	
7) MOLLY H. SCOTT BOARD MEMBER	1	X						0.	0.	0.	
(8) B. ROSE MILLER BOARD MEMBER	10	X						0.	0.		
(9) JANINE BROWN BOARD MEMBER	10	X						0.	0.	0.	
(10) CHRISTOPHER TURNER BOARD MEMBER	1 0	Х						0.	0.	0.	
(11) VON A. DUBOSE BOARD MEMBER	2 0	Х						0.	0.	0.	
(12) DAVID ZIMMERMAN BOARD MEMBER	1	X						0.	0.	0.	
(13) ELLEN E. BROWN LANDERS CAMPAIGN CHAIR	3 0	X		Х				0.	0.	0.	
(14) REV. GEORGE M. MAXWELL, PAST-CHAIR	$-\frac{2}{0}$	Х		X				0.	0.	0.	

Form 990 (2012) GEORGIA JUSTICE PROJECT,				_					58-191765			age 8
Part VII Section A. Officers, Directors, Trust		y Eı	mplo			and	H	ighest Comper	isated Employe	es (co	ont)	
(A)	(B) Average	(do	not ch	heck	sition	e than o	опе	(D)	(E)		(F)	
Name and title	per week		ceran		direct	Highest compensated employee	tee)	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	am	Estimated output of oppensation the from the organization and relate rganization	ther ion on ed
(15) JEAN SCHICK BOARD TREASURER	$-\frac{2}{0}$	x		Х				0.	0.			0.
(16) NORMAN M. BROTHERS, JR. BOARD SECRETARY	$-\frac{2}{0}$	X		X				0.	0.			0.
(17) JOEL M. NEUMAN VICE-CHAIR	$-\frac{2}{0}$	X		<u></u>				0.	0.			0.
(18) LESLIE P. KLEMPERER	3_											
BOARD CHAIR (19) DOUGLAS B. AMMAR	40	X		<u>X</u>				0.	0.	1		0.
EXECUTIVE DIRECTOR (20)	0				Х			97,034.	0.	-	10,	800.
(21)	 								, <u>,</u>			
(22)		-						-				
(23)												
(24)	 									†		
(25)							-					
1 b Sub-total	1		ш			Щ,	<u> </u>	97,034.	0.	+	10.8	300.
c Total from continuation sheets to Part VII, Section	A						•	0.	0.	+	10,	0.
d Total (add lines 1b and 1c)						ı	•	97,034.	0.		10,8	300.
2 Total number of individuals (including but not limite from the organization ► 0	ed to tho	se lis	sted a	abo	ve)	who r	rece	eived more than \$	100,000 of reportal	ole con	npensat	tion
											Yes	No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trust <i>individua</i>	ee, k a/	кеу е	mp	loye	e, or	hig	ghest compensated	d employee	3		X
For any individual listed on line 1a, is the sum of rithe organization and related organizations greater such individual	eportable than \$15	e con 50,00	npen 0? <i>If</i>	satı F'Ye	on a	and o compl	the <i>lete</i>	r compensation fro Schedule J for	om	4		Х
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compens complet	atıor e Sc	n fror hedu	n a	ny u <i>I for</i>	inrela such	tec pe	d organization or in erson	ndıvıdual	5		Х
Section B. Independent Contractors			h			10			¢100.000 /			
Complete this table for your five highest compensa- compensation from the organization. Report comp	ensation	for t	he ca	con aler	trac idar	year	nat en	received more that ding with or within	the organization's	tax ye	ar	
(A) Name and business addre	ess							(B) Description of	of services	Comp	(C) ensatio	on .
NONE ,												
										_		
							<u> </u>		1			

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ightharpoonup 0

Total Add lines 1a-1f Tota		Check if Schedule O contains a response to any question	n in this Part VIII			
1			(A) Total revenue	Related or exempt function	Unrelated business	Revenue excluded from tax under sections
Tribular Adult miss 18-11	ONS, GIFTS, GRANTS SIMILAR AMOUNTS	b Membership dues c Fundraising events d Related organizations 1 b 1 c 107,780.				
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) d Net rental income or (loss) c agross amount from sales of assess other than investory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) b Less: direct expenses c Net income or (loss) from fundraising events c Net income or (loss) from gaming activities See Part IV, line 19 b Less: direct expenses b C Net income or (loss) from gaming activities See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a OTHER INCOME 1 1,027.	NUE AND OTHER	g Noncash contributions included in lns la-lf \$ 19,075. h Total. Add lines la-lf	1,775,337.			
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) d Net rental income or (loss) c agross amount from sales of assess other than investory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) b Less: direct expenses c Net income or (loss) from fundraising events c Net income or (loss) from gaming activities See Part IV, line 19 b Less: direct expenses b C Net income or (loss) from gaming activities See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a OTHER INCOME 1 1,027.	RAM SERVICE REVE					
other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cast or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$ 107,780. of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events c Net income or (loss) from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning 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 OTHER INCOME 1,027. 1,027. 1,763,721. 0. 011,616.	PROGI	g Total. Add lines 2a-2f ▶				
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 b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) c Net income from fundraising events (not including \$ 107,780, or contributions reported on line Ic) See Part IV, line I8 b Less: direct expenses c Net income or (loss) from fundraising events See Part IV, line I8 b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line I8 b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line I8 b Less: direct expenses c Net income or (loss) from gaming activities loss sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miccellaneous Revenue Business Code 11a OTHER INCOME d All other revenue e Total. Add lines 11a-11d 1,027. 1,763,721. 0. 011,616.		other similar amounts) 4 Income from investment of tax-exempt bond proceeds	1,208.			1,208.
Begin assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 107, 780. of contributions reported on line 1c) See Part IV, line 18 a 10,017. b Less: direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities a b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a OTHER INCOME c d All other revenue e Total. Add lines 11a-11d 1, 763, 721. 0. 0. 0. 1, 763, 721. 0. 0. 0. 1, 763, 721. 0. 0. 0. 1, 763, 721. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 0. 1, 763, 721. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		6 a Gross rents b Less: rental expenses c Rental income or (loss)				
Ba Gross income from fundraising events (not including \$ 107,780, of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a OTHER INCOME c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 1,763,721. 0. 0. 0. 1,763,721. 0. 0. 0. 1,763,721. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 0. 0. 1,763,721. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		b Less cost or other basis and sales expenses c Gain or (loss)				
9 a Gross income from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a OTHER INCOME c d All other revenue e Total. Add lines 11a-11d 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027. 1,027.		8a Gross income from fundraising events (not including \$\frac{107,780}{107,780}\$. of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses b 23,868.	_12 051			12.051
10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a OTHER INCOME c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 1,763,721. 10 0 0 0 -11,616.		9 a Gross income from gaming activities See Part IV, line 19 a b Less: direct expenses b	13,031.			-13,651.
11 a OTHER INCOME 1,027. 1,027. b 1,027. 1,027. c 1,027. 1,027. d All other revenue 1,027. 1,027. e Total. Add lines 11a-11d 1,763,721. 0. 0. -11,616. 12 Total revenue. See instructions 1,763,721. 0. 0. -11,616.		b Less. cost of goods sold b				
e Total. Add lines 11a-11d 1,027. 12 Total revenue. See instructions 1,763,721. 0. 011,616.		Miscellaneous Revenue Business Code 11 a OTHER INCOME	1,027.			1,027.
		e Total. Add lines 11a-11d		0.	0.	-11,616.

Part IX Statement of Functional Expenses

۶,

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 to any question in this Part IX (A) Total expenses (B) <u>(C)</u> (D) Do not include amounts reported on lines 6b. Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States, See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees 82,524 105,800 7,406 15,870. 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. Other salaries and wages 599,229. 467,399 41,946. 89,884. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 82,556. 64,394 5,779 12,383. Payroll taxes 64,111. 50,007. 9,616. 4,488. Fees for services (non-employees): a Management **b** Legal 784 c Accounting 16,570 15,786 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) 18,802 11,074 7,137 591. Advertising and promotion 13 Office expenses. 41,815 36,358 2,153 3,304. Information technology Royalties 15 16 Occupancy 22,693. 20,276 805 1,612. 17 Travel 7,500 7,500 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 55,803. 49,107. <u>2,232</u>. 4,464 23 11,349 10,197 1,152 Other expenses. Itemize expenses not 24 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 ADVOCACY CONSULTANT 55,321 55,321. <u>31,2</u>30. **b** CLIENT EVENTS 31,230. c TELEPHONE & INTERNET 27,819. 24,481. 1,113 2,225. d PROGRAM MATERIALS 17,234. 17,234. e All other expenses 71,442. 66,543. 1,754 3,145. 25 Total functional expenses. Add lines 1 through 24e 1,229,274. 994,429. 91,751. 143,094. 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 ► I if following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,964.	1	136,093.
	2	Savings and temporary cash investments	264,273.	2	411,613.
	3	Pledges and grants receivable, net	292,257.	3	501,924.
	4	Accounts receivable, net	4,353.	4	856.
	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	
A	7	Notes and loans receivable, net.		7	
A S S E T S	8	Inventories for sale or use		8	· · · · · · · · · · · · · · · · · · ·
T	9	Prepaid expenses and deferred charges	3,088.	9	1,992.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1,479,168.			
		Less: accumulated depreciation 10b 536,789.	990,259.	10 c	942,379.
	11	Investments – publicly traded securities	30,700.	11	30,558.
	12	Investments – other securities. See Part IV, line 11	30, 100.	12	30,330.
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	17.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,591,894.	16	2,025,432.
_	17	Accounts payable and accrued expenses	11,024.	17	14,043.
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
A	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
LIABILITIES	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	
į	23	Secured mortgages and notes payable to unrelated third parties	108,400.	23	
š	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	21,047.	25	25,377.
	26	Total liabilities. Add lines 17 through 25.	140,471.	26	39,420.
HIN.		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	1,109,805.	27	1,377,682.
女のと としょう	28	Temporarily restricted net assets	341,618.	28	608,330.
Š	29	Permanently restricted net assets		29	330/0001
R		Organizations that do not follow SFAS 117 (ASC 958), check here ►	······································		······································
		and complete lines 30 through 34.		ŧ	
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund	"	31	
Ļ	32	Retained earnings, endowment, accumulated income, or other funds		32	
題々して至いたの	33	Total net assets or fund balances	1,451,423.	33	1,986,012.
Š	34	Total liabilities and net assets/fund balances	1,591,894.	34	2,025,432.
ВА	Δ		<u> </u>		Form 990 (2012)

		1917659		Pa	age 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1.7	63.	721.
2	Total expenses (must equal Part IX, column (A), line 25)	2			274.
3	Revenue less expenses. Subtract line 2 from line 1	3			447.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			423.
5	Net unrealized gains (losses) on investments	5			142.
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)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,98	36 (
Pai	t XII Financial Statements and Reporting		1,5	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
نتتستنا	• •				 -
	Check if Schedule O contains a response to any question in this Part XII				للب
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Yes	No
•					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	Separate basis Consolidated basis Both consolidated and separate basis			:	
ŀ	Were the organization's financial statements audited by an independent accountant?		2 b		Х
	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.	e		71	
	Separate basis Consolidated basis Both consolidated and separate basis				
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	e audıt,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	ıngle	3 a	:	Х
ŀ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requi or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audit	3 b		
BAA			Form	990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

GEO		IA JUSTICE PR									17659		
Part					All organizations m					<u>ee inst</u>	ruction	ns.	
The o					it is (For lines 1 through								
1	П	A church, convention	n of church	hes or assoc	iation of churches desc	ribed in s	section	170(b)(1	χΑχi).				
2	П	A school described i	n section	170(b)(1)(A)	(ii). (Attach Schedule E.)							
3	П	A hospital or a coop	erative ho	spital service	e organization described	l ın secti	on 170(<mark>bχ1χΑχ</mark>	Ϊιι).				
4	П	A medical research	organızatı	on operated	in conjunction with a ho	spital de	scribed	ın secti	on 17 0 (l	οχ1χΑχ	iii) Ente	er the hospi	tal's
		name, city, and state	э,										
5	ш	170(b)(1)(A)(iv). (Co	mplete Pa	art II)	a college or university					mental u	init desc	cribed in se	ction
6					vernmental unit describ								
7	끔	in section 170(b)(1)(A)(vi). (Co	omplete Part				ernment	al unit d	or from t	he gene	ral public d	escribed
8	\Box	•			0(b)(1)(A)(vi) . (Complete								
9	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)(Complete Part III.)								and				
10					xclusively to test for put								
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.								e publicly of				
		a Type I	э Птуре	e II c	Type III - Function	ally inte	grated	c	1 🗌 t	ype III -	– Non-fu	unctionally i	ntegrated
е	ш	By checking this box	k, I certify n manage	that the orga ers and other	anization is not controlle than one or more publi	d directi cly supp	y or ind orted or	irectly by ganizati	y one or ons des	more o	lisqualifi n section	ed persons n 509(a)(1)	or
f If the organization received a written determination from the IRS check this box					mination from the IRS t	hat is a	Type I,	Туре II с	or Type	III supp	orting or	ganızatıon,	
g		Since August 17, 20	06, has th	ie organizatio	on accepted any gift or	contribu	tion froi	n any of	the foll	owing p	ersons?		
•		•		-	, , ,			-	Yes				Van Na
													Yes No
		(i) A person who below, the gov	directly or erning bo	r indirectly co dy of the sup	ontrols, either alone or toported organization?	ogether	with per	sons de	scribed	ın (ıı) ar	nd (III)	11 g (i)	Tes No
		below, the gov	erning bo	dy of the sur	ontrois, either alone or to oported organization? oed in (i) above?	ogether	with per	sons de	scribed	ın (II) ar	nd (III)	11 g (i)	res No
		below, the gov	erning bo per of a pe	dy of the sur erson descrit	oported organization?		with per	sons de	scribed	ın (II) ar	nd (III)	11 g (ii)	Tes No
h		below, the gov (ii) A family mem (iii) A 35% control	erning boomer of a period entity of the second seco	dy of the superson descrited of a person o	oported organization? oed in (i) above?	ove?	with per	sons de	scribed	ın (II) ar	nd (III)		Tes No
<u>h</u>		below, the gov (ii) A family mem (iii) A 35% control	verning boo ber of a per led entity of g informat	dy of the superson descrited of a person o	oported organization? bed in (i) above? described in (i) or (ii) ab	ove? n(s). (iv)! organiz column (i	s the ation in) listed in verning	(v) Did yo the organi column (u notify zation in	(vi) l organiz colur organize	s the atton in in in it is	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
h		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i	s the ation in) listed in verning	(v) Did yo the organ column (u notify zation in	(vi) organiz colur	s the atton in in in it is	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
h		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
h (A)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
(A)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
(A)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
(A) (B)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
(A) (B) (C)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary
(A) (B) (C) (D)		(ii) A family memi (iii) A 35% control Provide the followin (i) Name of supported	verning boo ber of a per led entity of g informat	dy of the superson described to the superson	ported organization? described in (i) or (ii) able supported organization (iii) Type of organization (described on lines 1-9 above or IRC section	ove? n(s). (iv) I organiz column (i your go docur	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	u notify zation in i) of your port?	(vi) I organız colur organıze U :	s the atton in nn (i) ed in the S ?	11 g (ii) 11 g (iii) (vii) Amoun	t of monetary

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)

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	0. 0. 0. 0. 0.									
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	0.									
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	0.									
facilities furnished by a governmental unit to the organization without charge	0.									
4 Total. Add lines 1 through 3 976, 092. 515, 567. 989, 121. 1, 652, 374. 1, 775, 337. 5, 9										
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	573,492.									
6 Public support. Subtract line 5	334,999.									
Section B. Total Support										
Calendar year (or fiscal year beginning in) - (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f)	(f) Total									
7 Amounts from line 4 976, 092. 515, 567. 989, 121. 1, 652, 374. 1, 775, 337. 5, 9	908,491.									
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 10,207. 4,532. 726. 1,361. 1,208.	18,034.									
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0.									
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV 2,772. 1,280. 5,495. 4,677. 1,027.	15,251.									
11 Total support. Add lines 7 through 10 5,9	941,776.									
	712,487.									
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	-									
Section C. Computation of Public Support Percentage										
ma	89.79%									
15 Public support percentage from 2011 Schedule A, Part II, line 14	88.68%									
16 a 33-1/3% support test — 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this and stop here. The organization qualifies as a publicly supported organization	s box ► X									
b 33-1/3% support test – 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check thi and stop here. The organization qualifies as a publicly supported organization	s box ►									
17 a 10%-facts-and-circumstances test — 2012. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	-									
b 10%-facts-and-circumstances test — 2011. 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 IV how organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	the									
Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	, -									

Support Schedule for Organizations Described in Section 509(a)(2)

(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees		-				
	received. (Do not include any 'unusual grants')						
2	Gross receipts from admis-				-		
	sions, 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						
5	The value of services or						
	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				 		
	Amounts included on lines 1.						
/ a	2. and 3 received from						
	disqualified persons						
b	Amounts included on lines 2						
	and 3 received from other than			ĺ			
	disqualified persons that exceed the greater of \$5,000 or					i	
	1% of the amount on line 13					ŀ	
	for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line					***************************************	
	7c from line 6.)					<u> </u>	
Sec	tion B. Total Support			T	,	T-~-	,
Caten	dar year (or fiscal yr beginning in) 🟲 👚	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
10 a	Gross income from interest,						
	dividends, payments received on securities loans, rents,						
	royalties and income from						
	sımılar sources			Į	1		İ
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses	i					
	acquired after June 30, 1975	,				Į	
С	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						
14-	gain or loss from the sale of						
	čapital assets (Explain in Part IV.)						
13	Total support. (Add ins 9, 10c, 11, and 12)					-	
	First five years. If the Form 990 i	s for the organiza	tion's first, secon	d, third, fourth, or	fifth tax vear as a	section 5016	:)(3)
	organization, check this box and	stop here					→
<u>Sec</u>	tion C. Computation of Pu						
15	Public support percentage for 20	-	•	e 13, column (f))		 -	15 %
16	Public support percentage from 2						16 %
Sec	tion D. Computation of Inv						· · · · · · · · · · · · · · · · · · ·
17	Investment income percentage for			-	nn (f))		17 %
18	Investment income percentage fi					L	18 %
19 a	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	the organization of	did not check the	box on line 14, ar	nd line 15 is more	than 33-1/3%,	and line 17
h	33-1/3% support tests – 2011. If	-	_			_	
ι.	line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qua	ie 19a, and iine 10 alifies as a publicly	supported or	ganization
20	Private foundation. If the organi		•				-
=						<u>.</u>	

Schedule A	(Form 990 or 9	990-EZ) 2012	GEORGIA	JUSTICE	PROJECT,	INC.	58-1917659	Page 4
Part IV	Supplement Part II, line (See instru	al Information. 17a or 17b; ctions).	. Complete and Part II	this part to I, line 12.	provide the Also compl	explanations required ete this part for any a	by Part II, line 10; additional information.	
						·		
				- -				
						·		
		-						
 						·		
								-
						·		
-		-				`		
								
-						·		
- -								
- 								
-						· 	-~	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2012

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.

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

- 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-A

I/ alice a construction and accompany to a file of the file control of the file of the control o	
lf the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), tl	200

• 5	Section 501(c)(4), (5), or (6) or	ganizations: Complete Part III.			
Name	of organization			Employer identifica	ation number
GE	ORGIA JUSTICE PROJE	CT, INC.		58-191765	9
Par	t I-A Complete if the or	ganization is exempt under section	501(c) or is a sect	tion 527 organizatio	n.
1	Provide a description of the	organization's direct and indirect political ca	ampaign activities in F	Part IV.	·····
2	Political expenditures			► \$,
3	Volunteer hours				
Par	t I-B Complete if the o	rganization is exempt under sect	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under s	ection 4955	► \$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No
4 :	Was a correction made?				Yes No
ı	b If 'Yes,' describe in Part IV.				
Par	TI-C Complete if the o	rganization is exempt under sect	on 501(c) , exce	ot section 501(c)(3).
1		pended by the filing organization for section			<u></u>
2	Enter the amount of the filing function activities	g organization's funds contributed to other o	organizations for secti	on 527 exempt	
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and o	on Form 1120-POL,	► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payments amount of political contribute segregated fund or a political	ling organization's filinds	ich the filing		
	(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)					

	/F 000 000 FT 6	.04.0			
Schedule C ((Form 990 or 990-EZ) 2	UIZ CEODCIA	THOTTOR	PPO TFCጥ	TNC

• • •

58-1917659

Page 2

<u> </u>		ODITOR PRODUCT, IN			
Part II-A Complete if the section 501(h		on is exempt under section	on 501(c)(3) and filed	Form 5768 (election	under
A Check ► If the filing	organization be	elongs to an affiliated group (a	and list in Part IV each aff	iliated group member's	name,
	-	and share of excess lobbying		• ,	·
B Check ► I If the filing	g organization ch	necked box A and 'limited con	trol' provisions apply.		
(The term	Limits on Lob 'expenditures' m	obying Expenditures neans amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	es to influence p	public opinion (grass roots lob	obying)		
b Total lobbying expenditur	es to influence a	a legislative body (direct lobby	/ing).	98,461.	
c Total lobbying expenditur	es (add lines 1a	and 1b)		98,461.	0.
d Other exempt purpose ex	•			939,108.	
e Total exempt purpose ex	penditures (add	lines 1c and 1d)	_	1,037,569.	0.
f Lobbying nontaxable amo both columns	ount. Enter the a	amount from the following tabl	le in	178,757.	
If the amount on line 1e, colun	nn (a) or (b) is	The lobbying nontaxable a	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 excess			
Over \$1,000,000 but not over \$1,		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$1	7,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000	‡	
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable ar	•	•		44,689.	0.
h Subtract line 1g from line			<u></u>	0.	0.
i Subtract line 1f from line	1c. If zero or les	ss, enter -0-		0.]	0.
j If there is an amount othe section 4911 tax for this y	er than zero on o year?	either line 1h or line 1i, did th	e organization file Form 4	720 reporting	Yes No
(Som		4-Year Averaging Period Uthat made a section 501(h) elumns below. See the instruction	ection do not have to con		
	Lo	bbying Expenditures During	4-Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount			159,745.	178,757.	338,502.
b Lobbying ceiling amount (150% of line 2a, column (e))					507,753.
c Total lobbying expenditures			86,742.	98,461.	185,203.
d Grassroots nontaxable amount	······		39,936.	44,689.	84,625.
e Grassroots ceiling amount (150% of line 2d, column (e))					126,938.
f Grassroots lobbying expenditures					0.
BAA				Schedule C (Form 9	990 or 990-EZ) 2012

	1 1-				
For each 'Yes' response to lines 1a through 1ı below, provide in Part IV a detailed description of the lobbying activity	Yes	No	A	(b) mount	
			:		
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?					
e Publications, or published or broadcast statements?					
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?					
j Total. Add lines 1c through 1i		. 1			
2 a 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		1			
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 50 section 501(c)(6).	1(c)(5), or			
				Yes	, N
Were substantially all (90% or more) dues received nondeductible by members?				\rightarrow	_ _
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		\perp
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?					Ц.,
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	1(c)(5 Part), or III-A,	section line 3,	1 501(is	<u>(</u> C)
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).		2 a			
expenses for which the section 527(f) tax was paid). a Current year		2ь			
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year		2 c			
expenses for which the section 527(f) tax was paid). a Current year		3			
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year					
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	cal	4			
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 contents. 	cal				
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 politic expenditure next year?	cal	4			
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 politic expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 	cal	4 5	ed group	list);	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
 Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047 2012

Open to Public Inspection

Employer identification number

GEORGIA JUSTICE PROJECT, 58-1917659 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate gentributions to (during year)

4	Aggregate contributions to (during year)	L				
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and don are the organization's property, subject to the			advised funds	Yes	☐ No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writi of the donor or donor advisor	ing that grant funds c r, or for any other pur	an be used only rpose conferring	Yes	No
Par	t II Conservation Easements. Comp	olete if the organization	answered 'Yes'	to Form 990	, Part IV, lın	e 7.
1	Purpose(s) of conservation easements held by	the organization (check all the	hat apply).			
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of a	an historically im	nportant land ar	rea
	Protection of natural habitat		Preservation of a	a certified histor	ic structure	
	Preservation of open space		_			
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation	on contribution in the	form of a conse	rvation easem	ent on the
				Held a	it the End of the	Tax Year
ē	Total number of conservation easements			2 a		
ŀ	Total acreage restricted by conservation easer	ments		2 b		
c	: Number of conservation easements on a certif	fied historic structure included	d in (a)	2 c		
C	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, a	and not on a historic	2 d		
3	Number of conservation easements modified,	transferred, released, extingu	ushed, or terminated	by the organiza	tion during the	
	tax year ►					
4	Number of states where property subject to co	onservation easement is locate	ed >			
5	Does the organization have a written policy reand enforcement of the conservation easement	garding the periodic monitorin	ng, inspection, handlir	ng of violations,	Yes	No
6	Staff and volunteer hours devoted to monitorin	ng, inspecting, and enforcing	conservation easeme	ents during the y	ear	
7	Amount of expenses incurred in monitoring, in ►\$	ispecting, and enforcing consi	ervation easements o	during the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the re	equirements of sectio	on 170(h)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote to conservation easements	to the organization's financial	statements that desc	ribes the organi	zátion's accour	sheet, and iting for
Pai	Organizations Maintaining Collect Complete if the organization ans	tions of Art, Historical To swered 'Yes' to Form 99	reasures, or Othe 90, Part IV, line 8	r Similar Ass 3.	ets.	
1 6	a If the organization elected, as permitted under	r SFAS 116 (ASC 958), not to	report in its revenue	statement and	balance sheet	works of

- 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.
 - Revenues included in Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X
- 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 Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

► \$ ▶\$

▶\$ ▶\$

Schedule D (Form 990) 2012 GEOR(SIA JUSTICE PR	ROJECT, INC		58-191	<u>. 7659</u>		Page 2
Part III Organizations Maintair	ing Collections o	f Art, Historic	al Treasures, or Oth	ner Similar Assets	(contın	ued)	
3 Using the organization's acquisition items (check all that apply):	on, accession, and ot	her records, che	ck any of the following t	that are a significant us	se of its	collect	on
a Public exhibition		d Loan o	r exchange programs				
b Scholarly research		e 🗌 Other					
c Preservation for future generation	ations				_		
4 Provide a description of the organ Part XIII.	nization's collections	and explain how	they further the organiz	ation's exempt purposi	e in		
5 During the year, did the organizato be sold to raise funds rather th	an to be maintained.	as part of the org	ganization's collection?		Yes	[No
Part IV Escrow and Custodial Arra reported an amount o	<mark>ngements.</mark> Complete n Form 990, Part	of the organizat X, line 21.	ion answered 'Yes' to I	Form 990, Part IV, line	∍ 9, or		
1 a Is the organization an agent, trus on Form 990, Part X?		•		r assets not included	Yes	[No
b If 'Yes,' explain the arrangement	in Part XIII and comp	olete the following	g table:		Amoun	 .	
c Beginning balance				1 c	Amoun		
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				16			_
2 a Did the organization include an ai	mount on Form 990. I	Part X. line 21?		L_ ''L	Yes		No
b If 'Yes,' explain the arrangement	•	•	on has been provided ii	n Part XIII		_	
Part V Endowment Funds. Co	mplete if the orga	anization ansv	vered 'Yes' to Form	990, Part IV, line	10.		
	(a) Current	(b) Prior year		(d) Three years		our yea	ars
1 a Beginning of year balance			7			-	
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships					 	•	
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	5:		-	
a Board designated or quasi-endow	ment ►	8					
b Permanent endowment ►	8						
c Temporarily restricted endowmen	t ►	%					
The percentages in lines 2a, 2b,	and 2c should equal	100%.					
3a Are there endowment funds not in organization by:	n the possession of th	ne organization th	nat are held and admını	stered for the	ſ	Yes	No
(i) unrelated organizations					3a(i)		- 110 -
(ii) related organizations				·	3a(ii)		
b If 'Yes' to 3a(ii), are the related o	rganizations listed as	required on Sch	edule R?		3b		
4 Describe in Part XIII the intended	=	-			35		<u> </u>
Part VI Land, Buildings, and							
Description of property	(a) Cos	st or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) [Book va	alue
1 a Land	(180,000.			180	,000.
b Buildings		•	945,844.	242,926.			,918.
c Leasehold improvements		·	,	212,3201		, 02	, , , , , , , ,
d Equipment			249,636.	208,871.		40	,765.
e Other			103,688.	84,992.			, 703. , 696.
Total. Add lines 1a through 1e. (Column	n (d) must eaual Forr	n 990, Part X. co		▶			, 030. 379

Schedule **D** (Form 990) 2012

BAA

Schedule I	O (Form 990) 2012 GEORGIA JUSTICE PRO	JECT, INC.	58-191	7659 Page 3
Part VII			12. N/A	
<u> </u>	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: end-of-year market v	Cost or value
(1) Financ	rial derivatives			
(2) Closely	y-held equity interests			·
(3) Other				
(A) (B) (C) (D) (E)				
(C)				· · · · · · · · · · · · · · · · · · ·
<u>(0)</u>				
(0)				·· .
<u>(F)</u>		<u> </u>		
(G)				
(H)				
_(l)				· · · · · · · · · · · · · · · · · · ·
	nn (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments – Program Related. See F	orm 990, Part X	, line 13. N/A	
	(a) Description of investment type	(b) Book value	(c) Method of valuation:	Cost or
			end-of-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, III	ne 15. N/A	<u> </u>	
FF AIL IA	(a) Desc			(b) Book value
(1)	(4) 2000	прион		(b) Book Valdo
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)		1.15.51.51		
(9)				
(10)				
Total. (Co	olumn (b) must equal Form 990, Part X, column (B),	line 15).	▶	
Part X	Other Liabilities. See Form 990, Part X	, line 25.		
<u> </u>	(a) Description of liability	(b) Book value		
(1) Fede	eral income taxes			
	YROLL ACCRUAL	25,3	77.	
(3)	INOLD NECKONA		, , , , , , , , , , , , , , , , , , ,	
(4)			···	
		-		
(5)				
(6)			 	
(7)				
(8)				
(9)				
(10)				
(11)				
	mn (b) must equal Form 990, Part X, column (B) line 25)	▶ 25,3	77.	
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to t	he organization's financial		or uncertain tax positions
under FIN 48	3 (ASC 740) Check here if the text of the footnote has been provide	d in Part XIII		, <u> </u>
BAA		TEEA3303L 12/23/12	Sched	dule D (Form 990) 2012

Schedule D (Form 990) 2012 GEORGIA JUSTICE PROJECT, INC.			-1917	559 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements	With Revenue	per Return		
1 Total revenue, gains, and other support per audited financial statements			1	1,802,169.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains on investments	2 a	142.	1	
b Donated services and use of facilities	2 b	14,436.		
c Recoveries of prior year grants	2 c			
d Other (Describe in Part XIII) SEE PART XIII	2 d	23,870.		
e Add lines 2a through 2d			2 e	38,448.
3 Subtract line 2e from line 1			3	1,763,721.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a			
b Other (Describe in Part XIII.)	4 b			
c Add lines 4a and 4b			4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).			5	1,763,721.
Part XII Reconciliation of Expenses per Audited Financial Statements	With Fynens	es ner Retu		1,705,721.
Total expenses and losses per audited financial statements	TTTTT EXPONS	os per neta	1	1,267,580.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25				1,201,300.
a Donated services and use of facilities	2a	14,436.		
b Prior year adjustments	2 b	14,430.		
c Other losses	2c			
d Other (Describe in Part XIII.) SEE PART XIII	2 d	23,870.		
e Add lines 2a through 2d		23,010.	2 e	20 206
3 Subtract line 2e from line 1			3	38,306. 1,229,274.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			1,229,214.
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a			
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,229,274.
Part XIII Supplemental Information		 .		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Paline 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also comp	plete this part to	provide any a	dditional	information
		. -		
				
				
BAA			Schedule	D (Form 990) 2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2012

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, lines 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. See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization						Employer identifica	
GEORGIA JUSTICE PROJECT,						58-191765	9
Part Fundraising Activities. Complete Form 990-EZ filers are not recommended.	quired to compl	ete this pa	nrt				
1 Indicate whether the organization r	aised funds thre	ough any o	of the follo	wing activities. Check a	ıll that a _l	pply.	
a Mail solicitations			е	X Solicitation of non-	governm	ent grants	
b Internet and email solicitations			f	Solicitation of gove	rnment g	grants	
c Phone solicitations			q	Special fundraising	events		
d X In-person solicitations			9				
				-1 C1		.	
2a Did the organization have a written employees listed in Form 990, Par	t VII) or entity in	n connectio	on with pro	ofessional fundraising s	ervices?	•	Yes ∠XNo
b If 'Yes,' list the ten highest paid incompensated at least \$5,000 by th	e organization	T-					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custor of contr	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or r	nount paid to retained by) aiser listed in olumn (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
1							
2	-						
3							
4				_			
5							
6							
7							
8							
9							
10							,, _ ,
Total		- !	•				0.
 List all states in which the organization or licensing. 	ation is register	ed or licen	sed to sol	icit contributions or has	been no	otified it is exem	pt from registration
							
	-						
				-			
		_		-			
							
				-			 _

	١٠,					
		G (Form 990 or 990-EZ) 2012 GEORGIZ Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts gr	organization answe	red 'Yes' to Form 99	58-19 0, Part IV, line 18, e on Form 990-EZ	or reported
R			(a) Event #1 GRASS ROOTS JU (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1	Gross receipts	109,872.			109,872.
Ě	2	Less: Charitable contributions	101,365.			101,365.
	3	Gross income (line 1 minus line 2)	8,507.			8,507.
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs				
	7	Food and beverages			<u> </u>	
X P E	8	Entertainment				
EXPENSES	9	Other direct expenses	23,868.			23,868.
	10 11	Direct expense summary. Add lines 4 thr. Net income summary. Combine line 3, co. Gaming. Complete if the organization	olumn (d), and line 10	Form 990 Part IV	ine 19 or reported	23,868. -15,361.
1 443	N. 555 1	\$15,000 on Form 990-EZ, line 6a				Thore than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ď E	1	Gross revenue				
E	2	Cash prizes				
D X P R E N	3	Non-cash prizes				
E N C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes%	Yes 8	
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•	
	8	Net gaming income summary Combine I	ines 1, column (d) and l	ine 7	•	
	ls th	er the state(s) in which the organization op ne organization licensed to operate gaming lo,' explain.				Yes No
	 Wer	e any of the organization's gaming license	s revoked, suspended of	or terminated during the	tax year?	

b If 'Yes,' explain

Sche	dule G (Form 990 or 990-EZ) 2012 GEOR	GIA JUSTICE PROJECT, INC.	58-1917659	Page 3
11	Does the organization operate gaming acti	ivities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary o administer charitable gaming?	or trustee of a trust or a member of a partnership or	other entity formed to	No
13	Indicate the percentage of gaming activity	operated in:	1 1	
	The organization's facility] 13a	8
	An outside facility		13b	
		n who prepares the organization's gaming/special even	ents books and records.	
	Name •			- -
	Address •			
15 a	Does the organization have a contact with	a third party from whom the organization receives g	aming revenue? Yes	No
ı	If 'Yes,' enter the amount of gaming reven	nue received by the organization 🕨 💲	and the amount	Ш
	of gaming revenue retained by the third pa	arty ► \$		
•	: If 'Yes,' enter name and address of the thi			
	Name •	_ 		
	Address ►			i
16	Gaming manager information:			
	Name ►			-
	Gaming manager compensation ► \$			
	Description of services provided •			
	Director/officer Empl	loyee Independent contractor		
17	Mandatory distributions			
i		w to make charitable distributions from the gaming p		
ı	state gaming license? Enter the amount of distributions required	under state law to be distributed to other exempt or		∐No
	organization's own exempt activities during		·	
Pa	columns (III) and (v), and Pathis part to provide any additional columns.	Complete this part to provide the explana art III, lines 9, 9b, 10b, 15b, 15c, 16, and thoual information (see instructions).	tions required by Part I, line 17b, as applicable. Also com	2b, iplete
	· · · · · · · · · · · · · · · · · · ·			
				
BAA		TEEA3703L 01/07/13	Schedule G (Form 990 or 990)-EZ) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
GEORGIA JUSTICE PROJECT, INC.	58-1917659
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
GEORGIA JUSTICE PROJECT PROVIDES LEGAL SERVICES AND SOCIAL SER	VICE SUPPORT TO
INDIGENT CLIENTS IN THE METRO-ATLANTA AREA. BY REMOVING LEGAL	BARRIERS AND OFFERING
SUPPORT, WE OFFER OUR CLIENTS A WAY TO MOVE BEYOND THEIR LEGAL	CASE AND BE
PRODUCTIVE CITIZENS.	
FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS	
CRIMINAL REPRESENTATION:	
GJP REPRESENTS CRIMINALLY INDIGENT ACCUSED IN THE METRO-ATLANT.	A AREA. WE PROVIDE
FULL CRIMINAL DEFENSE FREE OF CHARGE FOR SELECTED CLIENTS. CRI	MINAL CLIENTS ALSO
PARTICIPATE IN SOCIAL SERVICE SUPPORTS. WE HANDLE ABOUT 100 C	RIMINAL CASES PER YEAR
RANGING FROM MISDEMEANOR TO SERIOUS FELONIES.	
COMING HOME DIRECT SERVICE:	
GJP PROVIDES ASSISTANCE TO THOSE WHOSE CRIMINAL RECORD IS CREA	TING A BARRIER TO
EMPLOYMENT, HOUSING, EDUCATION OR OTHER BENEFITS. WE PROVIDE	EDUCATION REGARDING
CRIMINAL RECORDS AND RIGHTS, CORRECTION OF RECORDS IF NEEDED A	ND EXPUNGEMENT OF
RECORDS WHEN ALLOWED UNDER GEORGIA LAW. WE ALSO ADVOCATE WITH	EMPLOYERS AND HOUSING
ON BEHALF OF THOSE WITH CRIMINAL HISTORIES. WE PROVIDE THIS	SERVICE TO CLIENTS FREE
OF CHARGE TO ABOUT 300 CLIENTS PER YEAR. GJP EXPLORED AN OFFI	CE IN MACON TO OFFER
THESE SERVICES IN THAT COMMUNITY.	
SOCIAL SERVICES:	
GJP PROVIDES SUPPORT SERVICES TO BOTH CRIMINAL AND COMING HOME	CLIENTS AS NEEDED. WE
PROVIDE COUNSELING, EMPLOYMENT SUPPORT AND OTHER SOCIAL SUPPOR	TS. WE PROVIDE
VISITATION_TO CLIENTS IN PRISON OR JAIL. WE ALSO PROVIDE ASSI	STANCE TO CLIENT
FAMILIES THROUGH THREE EVENTS DURING THE YEAR. WE HAVE 3 SOCI	AL WORKERS ON STAFF WHO

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization GEORGIA JUSTICE PROJECT, INC.	Employer identification number 58-1917659
FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS	
WORK WITH ABOUT 200 CLIENTS PER YEAR.	
ADVOCACY/POLICY:	
GJP SEEKS TO IMPROVE THE LAWS IN GEORGIA THAT CREATE COLLATER!	AL_CONSEQUENCES_FOR
THOSE WITH CRIMINAL RECORDS. BY CHANGING THE LAWS, WE HOPE TO	ALLOW MORE PEOPLE
ACCESS TO EMPLOYMENT, HOUSING, EDUCATION AND OTHER BENEFITS.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE ORGANIZATION'S ACCOUNTANT PROVIDES A DRAFT OF FORM 990 TO	THE BOARD FOR REVIEW
AND APPROVAL PRIOR TO FILING. THE BOARD DISTRUBUTES THIS DRAF	FT TO ALL MEMBERS
ELECTRONICALLY. MEMBERS ARE INVITED TO ASK QUESTIONS OR RESPO	OND TO ANY INFORMATION
INCLUDED. ONCE THE BOARD CHAIR IS SATISFIED THAT ALL QUESTION	NS_HAVE_BEEN
ANSWERED/RESOLVED, THE DOCUMENT IS FILED.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCE	MENT OF CONFLICTS
ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE 1	THE CONFLICT OF
INTEREST QUESTIONNAIRE EACH YEAR. THE BOARD CHAIR REVIEWS ALI	THESE DOCUMENTS AND
DISCUSSES ANY POSSIBLE CONFLICTS WITH THE INVOLVED PARTIES.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCES	S - OFFICERS & KEY EMPLOYEES
THE BOARD AND MANAGEMENT OBTAIN COMPENSATION INFORMATION FROM	SIMILAR NON-PROFITS IN
OUR AREA ANNUALLY. THIS INFORMATION IS REVIEWED BY BOTH THE I	BOARD AND MANAGEMENT.
ALL COMPENSATION FOR MANAGEMENT POSITIONS IS PRESENTED TO THE	BOARD FOR INPUT AND
APPROVAL.	·
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	AVAILABLE
THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 SPEC	CIFICALLY FOR PUBLIC
INSPECTION. THIS COPY, IN ADDITION TO THE ORGANIZATION'S GOVE	ERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS, IS AVA	ILABLE UPON REQUEST.
THE ORGANIZATION ALSO MAKES THIS INFORMATION AVAILABLE ON THE	IR WEBSITE,

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization	Employer identification number
GEORGIA JUSTICE PROJECT, INC.	58-1917659
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS	PUBLICLY AVAILABLE (CONTINUED)
MANU CID ODC	
WWW.GJF.ORG.	

٠.

2012

SCHEDULE D, PART XIII - SUPPLEMENTAL INFORMATION PAGE 5

GEORGIA JUSTICE PROJECT, INC.

58-1917659

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

SPECIAL EVENT EXPENSES

TOTAL $\frac{$}{$}$ $\frac{23,870}{23,870}$.

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

SPECIAL EVENT EXPENSES

TOTAL \$ 23,870.

6/30/13		2012 F	2012 FEDER	 - 	00 X	DEP	AL BOOK DEPRECIATION SCHEDULE	TION	SCH	EDULE				PAGE 1
				GEOF	GIA J	USTICE	GEORGIA JUSTICE PROJECT, INC	ST, INC.						58-1917659
NO DESCRIPTION	DATE	DATE SOI D	COST / BASIS	BUS. PCT. F	CUR 179 BONUS.	SPECIAL DEPR. Allow.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	- 11FE RATE	CURRENT
M 990/990-PF														
AUTO / TRANSPORT EQUIPMENT														
1 2008 HONDA CIVIC	12/14/07		23,766							23,766	21,604	S/L	S	2,162
2 DONATED VEHICLE	2/25/08		1,613							1,613	1,402	S/L		211
	1/01/08		900'9							9'000	6,000	S/L		0
4 2008 HONDA ODYSSEY	6/18/11	·	25,000	l	1					25,000	5,185	S/L	. 22	2,000
TOTAL AUTO / TRANSPORT EQUIP			56,379		0	0	0	0	0	56,379	34,191			7,373
BUILDINGS														
6 438 EDGEWOOD - BUILDING	7/25/00		180,411							180,411	53,828	S/L	9	4,510
	3/01/02		558,591							558,591	144,335	S/L	. 40	13,965
8 438 EDGEWOOD-ARCHITECTURE	9/30/02		18,959							18,959	2,252	S/L	. 40	474
9 438 EDGEWOOD-2RENOVATION	6/25/08	•	187,883	ļ						187,883	18,865	S/L		4,697
TOTAL BUILDINGS			945,844		0	0	0	0	0	945,844	219,280			23,646
FURNITURE AND FIXTURES														
10 FURNITURE-FACILITY SOLUT.	2/28/02		62,584							62,584	62,584	S/L	01	0
11 FURNITURE-GIFT IN KIND	12/31/03		200							200	425	S/L	- 10	22
12 FURNITURE-2FACILITY SOLUT	1/01/04		4,128							4,128	3,508	S/L	01 -	413
13 CHAIRS, FILING CABINET	12/20/07		4,899							4,899	2,219	S/L	- 10	490
14 OFFICE FURNITURE	6/02/08		28,929							28,929	11,801	S/L	01 -	2,893
15 LOGIFLEX WIDE	9/23/08		069							069	260	S/L	0 -	69
16 CHAIRS AND BOOKCASES	12/09/11		583							583	99		0 -	88
36 SOFA - RE-UPHOLSTERED	11/01/12	,	788							788		S/L	. 2	105

• •

6/30/13	2012 FEDER		BOOM	(DEP	AL BOOK DEPRECIATION SCHEDULE	NOIT	SC语 SC语	DULE				PAGE 2
		35	ORGIA.	USTICE	GEORGIA JUSTICE PROJECT, INC	t, INC.						58-1917659
NO DESCRIPTION	DATE DATE ACQUIRED SOLD	COST/ BUS. BASIS 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	LIEE RATE	, CURRENT DEPR.
TOTAL FUR		101		0	0		0	103,101	80,862			4,078
LAND												
5 438 EDGEWOOD - LAND	7/25/00	180,000						180,000				0
TOTAL LAND		180,000	0	0	0	0	0	180,000	0			0
Machinery and equipment												
17 BROCHURE BINS	1/24/12	287						287	51	S/L	01	29
18 BOOKSHELVES	5/28/98	1,800						1,800	1,800	S/L	7	0
19 ELECTROGRAPHIC EQUIPMENT	2/28/02	11,660						11,660	11,660	S/L	S	0
20 KITCHEN EQUIP-SEARS	3/11/02	3,105						3,105	3,105	SVL	7	0
21 MICROSOFT SOFTWARE	10/11/02	40,000						40,000	40,000	S/L	က	0
22 SERVER	8/20/04	2,000						2,000	2,000	S/L	က	0
23 COMPUTER EQUIPMENT	10/01/04	15,876						15,876	15,876	S/L	က	0
24 LAPTOPS	12/01/04	3,600						3,600	3,600	S/L	က	0
25 PHONE AND VOICE MAIL	90/08/9	25,827						25,827	25,827	S/L	က	0
26 EXCEED SOFTWARE	11/30/06	6,761						6,761	6,761	S/L		0
27 BOYTER LAPTOP 1547	6/05/07	1,183						1,183	1,183	S/L	. ,	0
28 AV EQUIPMENT 1	2/04/08	5,645						5,645	4,973	S/L		629
	4/03/08	3,388						3,388	2,875	S/L		208
30 DELL LATITUDE COMPUTER	4/10/08	3,361						3,361	3,361	SVL		0
31 TOSHIBA PROJECTOR	80/91/6	230						230	447	S/L	2	118
32 MICROSOFT SOFTWARE	3/03/11	39,163						39,163	17,364	S/L	က	13,054
33 COMPUTERS 27 ACERS	3/18/11	12,125						12,125	5,210	S/L	က	4,042
34 COMPUTER	1/11/12	1,515						1,515	237	SVL	ო	505
35 COPIER	4/23/12	8,522						8,522	321	S/L	2	1,704
												:

....

m	559		0 0	20,706	55,803	55,803	
PAGE	58-1917659	CURRENT DEPR.		20,	55,	55,	
PA	58-1						
		RAIE					
		빀	2 2 2 2				
		METHOD	37L 37L 37L 37L 37L				
		M.	ı		l zil	≅ #	
		PRIOR DEPR.		146,651	480,984	480,984	
		a q					
LE		%; <u>S</u>	683 542 998 4,912	193,843	1,479,167	1,479,167	
בם		DEPR. BASIS			1-1	-	
뿡		SALVAG /Basis Reduct		0			
)S 7	.:			0	 	 	
<u>5</u>	J.	PRIOR DEC. BAL DEPR.					
IA1	JECT	1		0		0	
	PRO	PRIOR 179/ BONUS/ SP. DEPR.					
	JCE.		Į.	0		0	
0	JUST	SPECIAL DEPR. ALLOW.					
AL BOOK DEPRECIATION SCHEDULE	GEORGIA JUSTICE PROJECT, INC.	CUR 179 BONUS		0		٥	
M M	EOR	l i				¥	
₽ ₩	G	BUS	683 542 998 4,912	843	<u> 191</u>	<i>1</i> 91	
2012 FEDER		COST / BASIS	4,	193,843	1,479,167	1,479,167	
벁						1	
012		DATE SOLD					
~		DATE ACQUIRED	713 713 713				
		DA	2/04/13 6/17/13 6/18/13 6/26/13				
				PME			
 		NO NO	CREEN STEM SING ST	ID EQUI		IATION	•
		DESCRIPTION	JECTOR WITH S IND SYS	ery an	IATION	DEPREC	
			PORTABLE PROJECTOR 3D PROJECTOR WITH SCREEN PORTABLE SOUND SYSTEM 4 LAPTOPS WITH DOCKING ST	TOTAL MACHINERY AND EQUIPME	TOTAL DEPRECIATION	GRAND TOTAL DEPRECIATION	
13			PORTAB 3D PROJ PORTAB	TOTAL I	TOTAL I	SRAND .	
6/30/13		C Z		, -		J	
ق							

.

		_
α	4	\sim
/!!		
		_

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

GEORGIA JUSTICE PROJECT, INC.

58-1917659

PART II,	LINE 10	- OTHER	INCOME
----------	---------	---------	---------------

NATURE AND SOURCE	2012	2011	<u> 2010 </u>	2009	2008
OTHER INCOME TOTAL	\$ 1,027. \$ 1,027.	\$ 4,677. \$ \$ 4,677. \$	5,495. \$ 5,495. \$	1,280. \$	2,772. 2,772.

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

1

File a separate application for each return.

								
-	re filing for an Automatic 3-Month Extension,				· X			
-	re filing for an Additional (Not Automatic) 3-Mo				·='			
Electronic f	plete Part II unless you have already been gra iling (e-file). You can electronically file Form 8	868 if you nee	d a 3-month automatic extension of time	to file	(6 months for a			
request an e	required to file Form 990-T), or an additional (xtension of time to file any of the forms listed in P	art I or Part II v	with the exception of Form 8870, Information	n Returr	n for Transfers			
Associated	With Certain Personal Benefit Contracts, which ling of this form, visit www.irs.gov/efile and clid	n must be sent	to the IRS in paper format (see instruct	ions) f	For more details on the			
Part I	Automatic 3-Month Extension of Tin	ne. Only sub	omit original (no copies needed).					
A corporation	on required to file Form 990-T and requesting a	an automatic 6	-month extension - check this box and	comple	ete Part I only			
All other co	rporations (including 1120-C filers), partnership	os, REMICs, ai	nd trusts must use Form 7004 to request	an ex	tension of time to file			
ıncome tax	returns		Enter filer's identi	fvina n	umber, see instructions			
	Name of exempt organization or other filer, see instructions		Enter mer 3 taenta		ver identification number (EIN) or			
Type or								
print	GEORGIA JUSTICE PROJECT, INC	. .		58-1	58-1917659			
File by the	Number, street, and room or suite number. If a P O box, se				Social security number (SSN)			
due date for filing your	438 EDGEWOOD AVE							
return See instructions	City, town or post office, state, and ZIP code. For a foreign	address, see instru	ctions					
	ATLANTA, GA 30312				·			
Enter the R	eturn code for the return that this application is	s for (file a ser	parate application for each return)		01			
Litter the rv	etain code for the retain that this application is	s ioi (iiic a sc	variate application for each returny		101			
Application Is For		Return Code	Application Is For					
	Form 990-EZ	01	Form 990-T (corporation)		Code 07			
Form 990-B		02 Form 1041-A			08			
Form 4720 (ndividual)	03	Form 4720		09			
Form 990-P	F	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			
Telephor If the or If this is check the the external to the content to the cont	ension is for.	FAX Not business in the our digit Group or, check this b	Exemption Number (GEN) If ox I and attach a list with the na		for the whole group, and EINs of all members			
until The e. ► [est an automatic 3-month (6 months for a corporate $2/15$, 2014 , to file the exempt of extension is for the organization's return for: calendar year 20 or tax year beginning $7/01$, 201 , and tax year entered in line 1 is for less than 12 manage in accounting period	organization re	turn for the organization named above $\frac{6}{30}$, $\frac{20}{13}$	al retu	rn			
	application is for Form 990-BL, 990-PF, 990-T fundable credits. See instructions.	, 4720, or 6069	9, enter the tentative tax, less any	3 a	\$ 0.			
b If this application is for Form 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.					\$ 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				\$0.			
Caution. If y payment in:	ou are going to make an electronic fund withdrawa structions	al with this Form	1 8868, see Form 8453-EO and Form 8879-E	EO for				