		) <u> </u>	
		990	
Form	٠.	330	

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not doter social security numbers on this form as it may be made public.

		the Treasury			iter social security			_			Openito Fublic.
		ue Service			on about Form 99	o and its	sinstruction				Inspection.
				tax year begin				, 2016, and	enaing	<del></del>	, 20
		applicable			hern Coaliti	on for	r Social	Justice		`	Employer identification no
$\overline{}$	\ddress (	-	Doing busing		<del></del>				<del></del>	-	26-0688375
$\overline{}$	Name ch	-		,	x if mail is not delivered	to street add	dress)		Room/suite	15	Telephone number
Ħ.	nitial retu			West High					101	<b></b> ⊦	(919) 323-3380
		m/terminated			, country, and ZIP or fore	ign postal c	ode			1	2,450,452
	mended	f return	Durha	n, NC 2770	07						Gross receipts\$
□ #	Application	n pending	F Name and	address of principa	i officer						r subordinates? Yes No
			<del></del>		<del></del>		<del></del>		H(b) Are all sub	ordinates	included? Yes No
			501(c)(3)	501(c) (	) (insert no )	4947(a	)(1) or	527	If "No,"	attach a	list (see instructions)
<u>J                                    </u>	Vebsite			coalition					H(c) Group exe	emption	number •
		rganization 🛚 🔠		Trust Ass	ociation Unther			L Year of formation	2007 M State	e of legal	I domicile NC
Pa	<del>~</del> —	Summar	<del></del>								
	1	Briefly descri	ibe the orgai	nization's missi	ion or most signific	ant activi	ties <u>The</u>	Southern Co	alition for	Soc	ıal Justice
æ	1	partners	with co	mmunities	of color an	d ecor	nomically	y disadvanta	ged communi	ties	in the south
aŭ	}	to defend	d and ad	vance the	1r political	, soci	al and o	economic rig	hts through	the	combination
Activities & Governance	1				ch, organizi						
ò	2		_	-	discontinued its o	-	•	of more than 25%	of its net assets		1
٠ 8	3	Number of ve	oting membe	ers of the gove	rning body (Part V	, line 1a)				· 3	10
es	4	Number of in	idependent v	voting member	s of the governing	body (Pa	ırt VI, lıne 1b	)		4	<u> </u>
Viti	5	Total number	r of individua	ils employed in	ı calendar year 201	6 (Part V	/, line 2a)			5	19
cti	6	Total number	r of voluntee	rs (estimate if i	necessary) · ·					6	12
٩	7a	Total unrelate	ed business	revenue from l	Part VIII, column (0	C), line 12	2			- 7a	0
	b	Net unrelated	d business ta	axable income	from Form 990-T,	line 34		<u> </u>	<u> </u>	· 7b	0
		<del></del>							Prior Year		Current Year
	8	Contributions	s and grants	(Part VIII, line	1h)				2,915	,727	2,425,271
ne	9	Program sen	vice revenue	e (Part VIII, line	e 2g)						0
Revenue	10	Investment in	ncome (Part	VIII, column (A	A), lines 3, 4, and 7	d)				260	(381)
æ	11	Other revenu	ue (Part VIII,	column (A), lir	nes 5, 6d, 8c, 9c, 1	0c, and 1	1e) · · ·		2	2,705	15,308
	12	Total revenue	e - add lines	8 through 11 (	must equal Part Vi	il, colum	n (A), line 12	·) · · · · · · · · · ·	2,918		
	13				X, column (A), line						0
	14				(, column (A), line						0
	15	Salaries, other	er compens:	ation, employe	e benefits Part IX	SEE CO	E/Mee-1	0)	725,72		1,106,469
ses	16a				column (A), line 11			<b>つ</b> い			0
Expenses					umn (D), 10825)N		£ 2017	102,712	·-	A	1000
X	17				nes 11a-1189 1f-2		<del>- 2017 -</del>		1,060	189	1,312,951
	18			•	equal Part IX colu		ıne 25) .	. [8]	1,785		
	19			•	18 from line 12			75	1,132		
- 58								<del></del>	Beginning of Currer		End of Year
t Assets or	20	Total assets	(Part X, line	16)					1,899		<del></del>
Ass	21	Total liabilitie	s (Part X, Im	e 26) · · ·						7,818	
ž.	22	Net assets or	r fund balan	ces Subtract I	line 21 from line 20				1,821		
Pai	rt II		re Block							7	<u> </u>
					ım, ıncluding accompan				ny knowledge and belief	f, it is	
true,	correct	and complete Dec	claration of prep	arer (other than off	ficer) is based on all info	mation of w	vhich preparer h	as any knowledge			
			and	Pro So	a, li					1	May 10,2017
Sigi	n	Signatur	e of officer		CAN-			<del></del>		Date	
Her	е	Anita	a Earls.	Executive	e Director						V
			print name and t		<u> </u>						
		Print/Type pre	parer's name		Preparer's signature			Date	Check	( n f	
Paid	t	Mark Da	•		Mark	<b>S</b> .	Danes	05-09-2017	self-employ	_ 1	P01321736
	parei		<b>&gt;</b>	Mark S D	anes CPA PLI		· · •		<del></del>		061285
'	Only	<u> </u>	s <b>&gt;</b>		spring Drive				Phone no	<del></del>	001200
		, min s address	-	Durham N		•			1	19-4	52-1999
May	the IRS	S discuss this	return with t		lown above? (see	nstruction	ns) · · ·			<u> </u>	Yes No
					narate instruction		,		<del></del>		Form <b>990</b> (2016)

Forn	1990 (2016) Southern Coalition for Social Justice	26-0688375	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	<u></u>
1	Briefly describe the organization's mission		
	The Southern Coalition for Social Justice partners with communities of color	r and economic	cally
	disadvantaged communities in the south to defend and advance their political		
	economic rights through the combination of legal advocacy, research, organiz	zing &	
	communications.		
2	Did the organization undertake any significant program services during the year which were not listed on the	Пу	□ N.
	prior Form 990 or 990-EZ?	· · · · · · · · Yes	X No
3	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	No No
	If "Yes," describe these changes on Schedule O	· · · · · · · · · · · · · · · · · · ·	M 140
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured.	ired by	
•	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to		
	the total expenses, and revenue, if any, for each program service reported		
	and tells. Superiodely differentially, for each program contribe topolitical		
4a	(Code) (Expenses \$ 1,123,052 including grants of \$) (Revenue	\$	)
	Voting Rights: SCSJ's voting rights work protects the rights of communities		<del></del> ′
	defending the Voting Rights Act through fair redistricting and minimizing el		
	administration practices that threaten free democratic participation in elec-		s
	photo ID requirements, restrictions on voter registration and early voting a		
	voter challenges.		
4b	(Code) (Expenses \$1,006,263 including grants of \$) (Revenue		,
	Criminal Justice: Through its Criminal Justice initiative, the Southern Coal		
	Justice (SCSJ) tackles racial discrimination at the legal and policy levels		
	obstacles facing those with criminal records as they attempt to re-enter the society. In addition, the Youth Justice Project seeks to end the criminalization.		
	through interventions in the juvenile justice and education systems.	action of your	
	chiough intervencions in the juvenile justice and education systems.		
		<u></u>	
		<del></del>	
4c	(Code) (Expenses \$26,364 including grants of \$) (Revenue	\$ <u></u>	)
	Human Rights: Using a community-lawyering model, SCSJ levels the playing fie	eld to protec	t the
	civil, economic, and political rights in priority areas that are defined by	the communit	165
	SCSJ seeks to serve. SCSJ will take on cases under the general rubric of Hu	man Rights if	they
	meet certain criteria and promise broad impact.		
4d	Other program services (Describe in Schedule O )		
4-	(Expenses \$ 16,563 including grants of \$ ) (Revenue \$		
4e	Total program service expenses 2,172,242	Eorr	n <b>990</b> (2016)
EEA		1.011	(2010)

_ e.	Checkinst of Required Schedules			
			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	X	
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		<u>X</u>
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,	_		v
6	Part III	. 5		Х
•	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		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	- 8		Χ_
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		١., ١	
40	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,	<u> </u>	br	
	VII, VIII, IX, or X as applicable	alle y his	CALLO Merri	2 (j)
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	2.1	~~	.72 >
	complete Schedule D, Part VI	· 11a	Х	
þ	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	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			١
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d		Х
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u> </u>
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	-12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			Ì
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	L	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ات ا		<u> </u>
	If "Yes," complete Schedule G, Part III	19	L	Х
		_		

Part IV Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II ...... 21 Χ 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? 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 23 Χ 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X Ь Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d П Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Χ transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Ь 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? 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or 26 Χ 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III ...... 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) ~±\* 28a Х A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .... A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 28b С 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 29 Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M ........... 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," Χ complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 Χ 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a Χ 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Х 36 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, 37 Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 Χ 19? Note. All Form 990 filers are required to complete Schedule O

	990 (2016) Southern Coalition for Social Justice 26-06883	7 <u>5</u>	F	age 5
Par				П
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		168	
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
·	reportable gaming (gambling) winnings to prize winners?	1c	Х	ĺ
2a	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 2a 19			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X -	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	. 4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	- 6b	<u> </u>	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_	l	_
	and services provided to the payor?	. 7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	- 7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h_	ļ	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	-	<b>├</b> ─
9	Sponsoring organizations maintaining donor advised funds.		ļ	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	₩
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	├	<b>↓</b> —
10	Section 501(c)(7) organizations. Enter		1	İ
а	Initiation fees and capital contributions included on Part VIII, line 12	ŀ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ł		
11	Section 501(c)(12) organizations. Enter		ļ	
a	Gross income from members or shareholders	ł		1
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
4.5	against amounts due or received from them )	40-		-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	+
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	-	+-
а	Is the organization licensed to issue qualified health plans in more than one state?	134	+-	+-
	Note. See the instructions for additional information the organization must report on Schedule O	i .	1	1

Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

the organization is licensed to issue qualified health plans

14a

14b

13c

Form 990 (2016) Southern Coalition for Social Justice Page 6 26-0688375 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 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 authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Χ X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Χ Are any governance decisions of the organization reserved to (or subject to approval by) members, Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Each committee with authority to act on behalf of the governing body? 8b Χ Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ............ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? Х 13 14 Did the organization have a written document retention and destruction policy? 14 Х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization . . . . . . Х If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website Own website 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

20

financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records

Anita Earls (919) 323-3380, 1415 West Highway 54, Durham, NC 27707

Form 990 (201	6) Southern Coalition for Social Justice	26-0688375	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	st Compensated Employ	ees, and

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 employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)  Name and Title	Name and Title Average box, unless person is both an Reportable		(E) Reportable	(F) Estimated							
	hours per week (list any hours for related	<u> </u>				/trustee		compensation from the organization	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(	organization and related organizations	
(1) Farad Alı Chaır	0.60	Х		Х				0	0	0_	
(2) Alberto Alzamora	0.60										
Director		Х						0	0	0	
(3) Anita Earls Executive Director	50.00	Х		Х				110,000	0	17,891	
(4) James Ferguson Director	0.60	X						o	0	0	
(5) Jim Grant Director	0.60	Х						0	0	0	
(6) Maurice Holland Director	0.60	Х						0	0	0	
(7) Diane Standaert Director	0.60	Х						0	0	0	
(8) Barry Williams	0.60	Х								0	
(9) Trina Jones Board Secretary	0.60	Х		Х				0		0	
(10)Jane Wettach Director	0.60_	Х						0		0	
(11)Mark Trustin	0.60	X						0		0	
Director (12)										<u> </u>	
<u>(13)</u>											
<u>(14)</u>				-							
		Ь	$\vdash$	L				L	<u> </u>	Form 000 (2016)	

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd l	High	est	Comp	pens	ated Employees (	continued)			_
•	(A) Name and title	(B)  Average hours per week (list any	Average hours per officer and a director/ftrustee) week (list any		Reportable compensation from	(E)  Reportable compensation froi related organizations		(F Estima amour othe compens	ated at of er				
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from organiza and rel organiza	the ation ated
<u>(15)</u>											_		
(16)_								-			$\top$		
<u>(17)</u>													
<u>(18)</u> _													
<u>(19)</u>											+		
(20)_							_						
(21)											$\top$		
(22)							_						
(23)_							-				+		
(24)_									<del></del> ,		1		
<u>(25)</u>													
1b c	Sub-total							-					
d	Total (add lines 1b and 1c)	· · · · · ·						•	110,000		0	17	,891
2	Total number of individuals (including but not limited reportable compensation from the organization	to those list	ed abo	ve)	who	rec	eived	more	e than \$100,000 of		1		
3	Did the organization list any <b>former</b> officer, director	, or trustee, k	ey em	ploy	ee, o	or hi	ghest	com	pensated			Ye	s No
	employee on line 1a? If "Yes," complete Schedule S										. 3	} 	X
4	For any individual listed on line 1a, is the sum of re		•										
	organization and related organizations greater than individual								, ,		250	· Sing bester	X
5	Did any person listed on line 1a receive or accrue of	ompensation	from a	any	unre	late	d orga	anıza	tion or individual			阿阿	
	for services rendered to the organization? If "Yes,"	complete Sci	hedu <u>l</u> e	J fo	r su	ch p	erson		<u></u>	<u> </u>	· !	5	X
	on B. Independent Contractors					45-	4			20.06			
1	Complete this table for your five highest compensation from the organization Report compensation from the organization f												
	(A)								(B)			(C)	
	Name and business address Description of services							Compensation					
			<del></del>		_				<del>                                     </del>				_
											<b> </b>		
	Total number of independent contractors (including	but not limite	ed to th	iose	liste	d ah	ove)	who					Marie Company

received more than \$100,000 of compensation from the organization

	990 (2016) Southern Coalition t VIII Statement of Revenue	for Social 3	Justice		26-0688	375 Page
	Check if Schedule O contains a response or	note to any line in t	bic Doct VIII			,
	- Contains a response of	note to any line in t	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
nts nts	1a Federated campaigns 1	a		TOTOLIGO		512-514
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues · · · · · · · · 1	b	7		1	1
rAn	c Fundraising events	:	7	]	j	
20.5	d Related organizations 10	i	7			
Sir	e Government grants (contributions) . 16	79,509				
ther	f All other contributions, gifts, grants,					
돌	and similar amounts not included above		╛	[		
S E	g Noncash contributions included in lines 1a-1f					
	h Total. Add lines 1a-1f	<u> </u>	2,425,271			[
9		Business Code				
Program Service Revenue	2a					
e R	b		<u> </u>			
Ž	d	<u> </u>				
Š	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>				
gra	f All other program service revenue · · · · ·	<del></del>	<del> </del>			
r.			<del> </del>			<u> </u>
			<del></del>			
	3 Investment income (including dividends, interest and other similar amounts)	,	ľ			İ
	4 Income from investment of tax-exempt bond pro	onodo •	<del></del>			
	5 Royalties	ceeus >	<del></del>			
	(i) Real		<del> </del>			   <del></del>
	6a Gross rents	(II) Personal	-			
	b Less rental expenses	<del></del>	1		İ	
	c Rental income or (loss)	<del> </del>	1			
	d Net rental income or (loss)				to the contract of the	
	7a Gross amount from sales of (i) Secunties	(II) Other				·
	assets other than inventory 9,87	<del></del>	1			
	b Less cost or other basis		1	:		
	and sales expenses 10,25	1				
	c Gain or (loss) (38:	1)	]		,	
•	d Net gain or (loss)	. <u> </u>	(381)			(381
ğ	8a Gross income from fundraising					\501
Other Reven	events (not including \$					
ŗ.	of contributions reported on line 1c)					
돭	See Part IV, line 18 a			}		
0	b Less direct expenses b			}		
	c Net income or (loss) from fundraising events	· · · · · · <b>&gt;</b>				
	9a Gross income from gaming activities					
	See Part IV, line 19 · · · · · · · · a  b Less direct expenses · · · · · · · b					
	c Net income or (loss) from gaming activities	L				
		·····				
	10a Gross sales of inventory, less returns and allowances · · · · · · · a	]				
	b Less cost of goods sold b	<del> </del>		[	Ī	1
	c Net income or (loss) from sales of inventory	<u> </u>		1	- f	_ 1
	Miscellaneous Revenue					<del></del>
	11a	Business Code				
ľ	b Reimbursements	900099	14 000			
	c Honoraria	541900	14,908	14,908		
ĺ	d All other revenue	900099	400	400	<del></del>	
ĺ	e Total. Add lines 11a-11d		15,308			<del></del>
1	12 Total revenue. See instructions		2,440,198	15,308	0	4222
					U	(381)

# Form 990 (2016) Southern Coalition for Social Justice Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Do no	t include amounts reported on lines 6b, 7b,	any line in this Part IX (A)	(B)	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations			gui via siperios	олроноос
	and domestic governments See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	107.001	02 100	10 700	21 073
	_	127,891	83,129	12,789	31,973
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	762,108	673,083	61,287	27,738
	Pension plan accruals and contributions (include	_			
	section 401(k) and 403(b) employer contributions)	53,674	44,686	3,759	5,229
	Other employee benefits	76,496	66,952	4,821	4,723
	Payroll taxes	86,300	61,879	20,266	4,155
	Fees for services (non-employees)				
	Management				
b	Legal · · · · · · · · · · · · · · · · · · ·				
C	Accounting	14,811		14,811	
d	Lobbying				
0	Professional fundraising services See Part IV, line 17 ·				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O) · · ·	920,282	900,288	4,806	15,188
2 ,	Advertising and promotion		•		-
13	Office expenses	64,106	22,328	41,778	
4	Information technology	28,005	20,030	7,966	9
15	Royalties			ĺ	
6	Occupancy	79,979	69,991	4,911	5,077
	Travel	153,822	153,059	763	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest · · · · · · · · · · · · · · · · · · ·				<del></del>
	Payments to affiliates	-			
	Depreciation, depletion, and amortization	4,921	3,706	292	923
	Insurance	10,970	694	10,276	923
	Other expenses Itemize expenses not covered	10,970	094	10,276	
	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)				
	F				
-	Staff development	11,308	9,430	1,878	
-	Membership dues	19,346	14,645	3,410	1,291
-	Miscellaneous	5,401	5,401		
	Allocation of indirect costs		42,941	(49,347)	6,406
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	2,419,420	2,172,242	144,466	102,712
	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				
	following SOP 98-2 (ASC 958-720)				

**Balance Sheet** 

Part X

Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1,085,100 1 240,567 2 143,714 898,867 2 3 693,607 651,150 3 4 3,784 2,991 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 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 6 organizations (see instructions) Complete Part II of Schedule L . . . . . . . 7 8 Inventories for sale or use 9 19,475 4,952 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . | 10a b Less accumulated depreciation . . . . . . . . . . . . . . . 10b 10c <u>66,9</u>09 55.545 11,830 11 11 12 12 13 Investments - program-related See Part IV, line 11 . . . . 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,923,209 1,899,737 16 17 77,818 80,512 17 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . . . . . Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties ..... 23 23 24 Unsecured notes and loans payable to unrelated third parties . . . . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 80,512 77,818 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🛛 and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 ,390,153 1,294,648 27 28 527,271 452,544 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here 

I and complete lines 30 through 34. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds ..... 32 33 1,821,919 1,842,697 33 1,899,737 34 1,923,209 34

Form	1 990 (2016) Southern Coalition for Social Justice	26-06883	75	Pa	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
•	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,4	40,1	198
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,4	19,4	120
3	Revenue less expenses Subtract line 2 from line 1	3		20,7	778
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,8	21,9	919
5	Net unrealized gains (losses) on investments	. 5			
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	1,8	342,6	697
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			
				Yes	No
1	Accounting method used to prepare the Form 990 🔲 Cash 🔯 Accrual 🔲 Other		İ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			-	}
b	Were the organization's financial statements audited by an independent accountant?		- 2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				,
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u> .	. 3b		
FΕΔ			Form	990 (	2016)

#### 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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

OMB No 1545-0047

2016

Open to Public

Inspection

Sou	uthern Coalition for Social Justice 26-0688375									
Pa	ırt I	Reason for Public Charit	y Status (All o	rganizations must c	omplete	this par	t) See instructio	ns		
The	orgai	nization is not a private foundation bed	ause it is (For line	s 1 through 12, check on	ly one box	)				
1	Ň	A church, convention of churches, or	•	•	=	-				
2	Ħ	A school described in section 170(b)				· // · // /				
3	Ħ	A hospital or a cooperative hospital se		·		'iii\				
4	Ħ	A medical research organization oper	=				IVAViii) Enter the			
•			ated in conjunction	i with a hospital describe	o m secuc	)(1/0(1)(	I/(A)(III). Litter the			
_	П	hospital's name, city, and state	-64 -6 U				tal vale dopped an			
5	П	An organization operated for the bend		iniversity owned or opera	ated by a g	overnmen	tai unit described in			
_		section 170(b)(1)(A)(iv). (Complete I	•							
6	님	A federal, state, or local government								
7	X	An organization that normally receive	•		vernmenta	l unit or fro	m the general public			
	_	described in section 170(b)(1)(A)(vi)								
8	Ш	A community trust described in section	on 170(b)(1)(A)(vi)	. (Complete Part II)						
9		An agricultural research organization	described in section	on 170(b)(1)(A)(ix) opera	ated in con	junction w	th a land-grant collec	je		
		or university or a non-land-grant colle	ge of agriculture (s	ee instructions) Enter th	e name, c	ity, and sta	te of the college or			
		university								
10		An organization that normally receive	s (1) more than 33	3 1/3% of its support from	contributi	ons, meml	pership fees, and gro	ss		
	_	receipts from activities related to its e	* *	• *						
		support from gross investment incom		•						
		acquired by the organization after Jur		· .		•				
11		An organization organized and opera		, ,, , ,		-				
12	Ħ	An organization organized and opera					o carry out the nurno	202		
•	ш	of one or more publicly supported org								
								•		
		Check the box in lines 12a through 12								
	а	Type I. A supporting organization		·		•		ig		
		the supported organization(s) the		• •	ity of the a	rectors or	trustees of the			
		supporting organization You mu								
	b	Type II. A supporting organization	•			_				
		control or management of the sup	oporting organization	on vested in the same pe	rsons that	control or	manage the supporte	ed		
		organization(s) You must comp	lete Part IV, Secti	ons A and C.						
	С	Type III functionally integrated.	A supporting orga	nization operated in conr	nection with	n, and fund	tionally integrated wi	th,		
		its supported organization(s) (see	e instructions) You	must complete Part IV	, Sections	A, D, and	E.			
	d	Type III non-functionally integra	ated. A supporting	organization operated in	connectio	n with its s	upported organizatio	n(s)		
		that is not functionally integrated	The organization (	generally must satisfy a d	listribution	requireme	nt and an attentivene	ess		
		requirement (see instructions) Ye	ou must complete	Part IV, Sections A and	d D, and P	art V.				
	е	Check this box if the organization	received a written	determination from the I	RS that it i	s a Type I,	Type II, Type III			
		functionally integrated, or Type III	non-functionally in	itegrated supporting orga	nızatıon					
	f	Enter the number of supported organ	izations							
	9	Provide the following information abo	ut the supported or	ganization(s)						
	(1	Name of supported organization	(u) EIN	(iii) Type of organization	(IV) Is the o	rganization	(v) Amount of monetary	(vi) Amount of		
				(described on lines 1-10	listed in you		support (see	other support (see		
				above (see instructions))	docum	ient?	instructions)	instructions)		
					Yes	No	į			
(A)					İ					
_										
(B)						1				
					<del> </del>					
(C)					[	[	1			
					<del> </del>	<del> </del>				
(D)						1				
			<del></del>		<del> </del>	<del> </del>	<del> </del>			
(E)					1	ļ	1			
					<del> </del>	<del> </del>	<del></del>	<del> </del>		
_	_					1				
Tota	N		l		1	I	1	1		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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)

360	ion A. Public Support			<del></del>		<del></del>	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	( <b>b</b> ) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,426,552	343,951	1,401,641	2,915,727	2,415,017	8,502,888
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3 · · · · · ·	1,426,552	343,951	1,401,641	2,915,727	2,415,017	8,502,888
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						4,635,484
6	Public support Subtract line 5 from line 4 · ·						3,867,404
	tion B. Total Support	····				( ) 2040	(f) Total
Caler	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,426,552	343,951	1,401,641	2,915,727	2,415,017	8,502,888
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	2 126	1,340	1,115	260		4,841
	sources	2,126	1,340	1,113			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			4,828	2,205	14,908	
11	Total support. Add lines 7 through 10 .					<del>                                     </del>	8,529,670
12	Gross receipts from related activities, etc. (	see instructions)				12	71,149
13	First five years. If the Form 990 is for the organization, check this box and stop here			h, or fifth tax year a	as a section 501(c)	(3)	<u></u> ▶□
	tion C. Computation of Public S			(0)		14	45.34 %
14	Public support percentage for 2016 (line 6,			(1))		15	39.52 %
15	Public support percentage from 2015 Sche 33 1/3% support test - 2016. If the organiz	oule A, Part II, line	the haven line 13		1/3% or more, che		33.02
16a	box and <b>stop here</b> . The organization qualif						▶ 🏻
ь	33 1/3% support test - 2015. If the organiz	ation did not check	a box on line 13 o	or 16a, and line 15	ıs 33 1/3% or more	e, check	
ь	this box and <b>stop here</b> . The organization q						▶ 📋
172	10%-facts-and-circumstances test - 2016	6. If the organization	n did not check a t	oox on line 13, 16a	or 16b, and line 1	4 is	
174	10% or more, and if the organization meets	the "facts-and-circ	umstances" test, o	heck this box and	stop here. Explain	ıın	
	Part VI how the organization meets the "fac	cts-and-circumstan	ces" test. The orga	nızatıon qualifies a	is a publicly suppor	rted	_
	organization · · · · · · · · · · · · · · · · · · ·						▶ 📋
b	10%-facts-and-circumstances test - 2019	5. If the organizatio	n did not check a t	oox on line 13, 16a	, 16b, or 17a, and i	ine	
_	15 is 10% or more, and if the organization is	meets the "facts-an	d-circumstances"	test, check this box	and stop here.		
	Evoluin in Part VI how the organization me	ets the "facts-and-o	arcumstances" tes	t The organization	qualifies as a pub	licly	_
	supported organization						▶ 📙
18	Private foundation. If the organization did	not check a box or	n line 13, 16a, 16b	, 17a, or 17b, chec	k this box and see		_
	instructions		<u></u>	<u> </u>	<u></u>	<u> </u>	▶ <u> </u>

Southern Coalition for Social Justice 26-0688375

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513 •	·					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					<u> </u>	
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		!	1		i	
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·	<del></del>	<del> </del>				
8	Public support. (Subtract line 7c from					وَ فِي اللَّهِ مِنْ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ	;
	line 6)		<u></u>	<u> </u>	<u>                                     </u>	-] <u>-</u> -3 <u>\$</u>	
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6 · · · · · · · · · · · ·						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 gain or loss from the sale of capital assets (Explain in Part VI)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14		<u> </u>	. <u> </u>	n, or fifth tax year	as a section 501(c)(3	3)	▶ 📋
	tion C. Computation of Public Su	<del></del>					
15	Public support percentage for 2016 (line 8, c	* *	7			15	
16	Public support percentage from 2015 Schedution D. Computation of Investment			<u></u> .	<u> </u>	16	
	tion D. Computation of Investme Investment income percentage for 2016 (line			olumn (ft)		17	<del></del>
17 18	Investment income percentage for 2016 (line Investment income percentage from 2015 Sc					18	
	33 1/3% support tests - 2016. If the organiz						
	17 is not more than 33 1/3%, check this box	and <b>stop here</b> . T	he organization qu	alifies as a publici	y supported organiza	tion · · · ·	▶ 🛚
	33 1/3% support tests - 2015. If the organiz line 18 is not more than 33 1/3%, check this	box and <b>stop her</b>	e. The organization	ı qualifies as a pu	blicly supported orga	3 1/3%, and nization • •	▶ 🖺
20_	Private foundation. If the organization did n	ot check a box on	line 14, 19a, or 19	b, check this box	and see instructions	<u> </u>	· · · · · · • [_
EEA						Schedule	A (Form 990 or 990-EZ)

Part IV Supporting

Supporting Organizations

(Complete only if you checked a box in line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

ı		Yes	No
	1		-
	2		
	3a		
	3b		
	3c		
	4a		
	4b		
			5 8 8 7
	4c		
	5a 5b		
	5c		
	6	ar sheet w	4 7 1
	7		
	8		
	9a		
	9b		]
	9с		i
	10a		1
	10b		

Pa	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			1
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
Sec	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			į
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			;
	controlled the organization's activities If the organization had more than one supported organization,			;
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			. ;
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
				i
2	Did the organization operate for the benefit of any supported organization other than the supported			i - i
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Sec	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			·
	or management of the supporting organization was vested in the same persons that controlled or managed			,
	the supported organization(s)	1_		
Sec	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	'		
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the		_	. 1
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			;
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		· '
•				
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's	3	-	
800	supported organizations played in this regard tion E. Type III Functionally-Integrated Supporting Organizations	<u> </u>		L
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ii	notru	ations	
1	The organization satisfied the Activities Test. Complete <b>line 2</b> below	isau	Juons	<b>?</b> /
a b	The organization satisfied the Activities Test. Complete <b>fine 2</b> below.  The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
C	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity	(see i	nstru	ctions
ິ່	Activities Test Answer (a) and (b) below.	,000,	Yes	
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
•	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			-
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		-
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			t
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.		<del>                                     </del>	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	
u	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	Зa		-
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<b>†</b>
.,	of its supported organizations? If "Yes" describe in <b>Part VI</b> the role played by the organization in this regard	з́ь	-	

Schedule A (Form 990 or 990-EZ) 2016 Southern Coalition for Social Justice  Part V Type III Non-Functionally Interested 500(2) 201		26-06	88375Page
	)rgan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated as a second support of the control of the co	g trus	t on Nov 20, 1970 (exp	lain in Part VI) See
	nızatıo	ns must complete Secti	ions A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
1 Net short-term capital gain	11	<del></del>	(optional)
2 Recoveries of prior-year distributions	2		<del></del>
3 Other gross income (see instructions)	3		<del></del>
4 Add lines 1 through 3	4		- <del> </del>
5 Depreciation and depletion	5	<del></del>	<del></del>
6 Portion of operating expenses paid or incurred for production or	-+-	<del></del>	<del></del>
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		ļ <u></u>
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)			<u> </u>
Section B - Minimum Asset Amount	8		(B) Current Year
	j	(A) Prior Year	(optional)
33. 33.60 Idli Hidiket value Oi dii Hon-exempt-lise assets (see	T		(optional)
instructions for short tax year or assets held for part of year)	1		1
a Average monthly value of securities	1a		<del> </del>
b Average monthly cash balances	1b	······································	<del> </del>
c Fair market value of other non-exempt-use assets	1c	<del></del>	<del> </del>
d Total (add lines 1a, 1b, and 1c)	1d		<del> </del>
e Discount claimed for blockage or other	+:	<del></del>	<del> </del>
factors (explain in detail in Part VI)	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		<del> </del>
3 Subtract line 2 from line 1d	$\frac{2}{3}$	<del></del>	<del> </del>
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	┼┷┼	·	<del> </del>
see instructions)	4		1
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<del> </del>
with the state of	6		<u> </u>
7 Recoveries of prior-year distributions	17		<del> </del>

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

8

2

3

4

5

8 Minimum Asset Amount (add line 7 to line 6)

emergency temporary reduction (see instructions)

1 Adjusted net income for prior year (from Section A, line 8, Column A)

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Section C - Distributable Amount

4 Enter greater of line 2 or line 3

5 Income tax imposed in prior year

2 Enter 85% of line 1

instructions)

Current Year

26-0688375 Page 7 Southern Coalition for Social Justice Schedule A (Form 990 or 990-EZ) 2016 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2016 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (iii) (ii) (i) Distributable Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2016 Amount for 2016 Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reasonable cause required - explain in Part VI) See instructions Excess distributions carryover, if any, to 2016 а b c From 2013 . . . . . . . . **d** From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount i Carryover from 2011 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2016 from Section D, line 7 a Applied to underdistributions of prior years **b** Applied to 2016 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2017 Add lines 3j and 4c Breakdown of line 7

b Excess from 2013 c Excess from 2014 d Excess from 2015 e Excess from 2016

. . . .

#### **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 2016

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**Open to Public** Inspection

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizations	Complete Part III					
Nam	e of organization				Employer i	dentification num	ıber
So	uthern Coalition for Social	Justice		_	26-0688		
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or i	s a section	527 orga	nization.	
1	Provide a description of the organization's	s direct and indirect political campaign a	ctivities in Part IV	(see instruction	ns for		
	definition of "political campaign activities"						
2	Political campaign activity expenditures (s	see instructions)			<b>&gt;</b> \$		
3_	Volunteer hours for political campaign act	tivities (see instructions)		<u></u>			
Pa	rt I-B Complete if the organ	ization is exempt under secti	on 501(c)(3).				
1	Enter the amount of any excise tax incurre						
2	Enter the amount of any excise tax incurr						
3	If the organization incurred a section 495	5 tax, did it file Form 4720 for this year?				· 🔲 Yes	☐ No
4a	Was a correction made?					· · 🗌 Yes	☐ No
_b	If "Yes," describe in Part IV						
Pa		ization is exempt under secti		ept sectio	n 501(c)(	3)	
1	Enter the amount directly expended by the	• •	-				
	activities				· 🕨 \$		
2	Enter the amount of the filing organization						
	527 exempt function activities · · · · ·				· . <b>&gt;</b> \$		
3	Total exempt function expenditures Add I						
	line 17b						
4	Did the filing organization file Form 1120-	POL for this year?				· U Yes	∐ No
5	Enter the names, addresses and employe	er identification number (EIN) of all secti	on 527 political org	janizations to v	vhich the filir	ng	
	organization made payments For each or						
	the amount of political contributions received						
	as a separate segregated fund or a politic	cal action committee (PAC) If additional	space is needed,	provide informa	ation in Part	IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount		(e) Amount of political	
				filing organ		contributions received promptly and direction	
						delivered to a sep	arate
						political organization none, enter -0-	
	<del>-</del>		- <del></del> -		<u>.</u>		
(1)							
	<del>-</del> · · · · · · · · · · · · · · · · · · ·						
(2)		<del>-</del>					
					-		
(3)							
(4)							
(5)							
(6)		<del></del>					

	dule C (Form 990 or 990-EZ) 2016 Southern Coa.	lition for Soc	ial Justice		26-06883	
Pa	rt II-A Complete if the organization	n is exempt un	der section 501	(c)(3) and filed	Form 5768 (elec	ction under
•	section 501(h))					
Α	Check 🕨 🔲 if the filing organization belongs to	an affiliated group (a	and list in Part IV eac	ch affiliated group me	ember's	
	name, address, EIN, expenses, a	nd share of excess lo	bbying expenditures	5)		
В	Check   If the filing organization checked be	ox A and "limited con	trol" provisions appl	y		
	Limits on Lob	bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" r	means amounts paid	d or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lol	bbying) · · · ·			
b	Total lobbying expenditures to influence a legisla	tive body (direct lobb	yıng)			
С	Total lobbying expenditures (add lines 1a and 1b	)				
d	Other exempt purpose expenditures	<b></b>			2,274,954	
е	Total exempt purpose expenditures (add lines 10	and 1d)			2,274,954	
f	Lobbying nontaxable amount Enter the amount	from the following tab	le in both			
	columns				263,748	
	If the amount on line 1e, column (a) or (b) is:	The lobbying r	ontaxable amount	is:		1
	Not over \$500,000	20% of the amo	ount on line 1e	-		:
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 1	15% of the excess of	ver \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 1	10% of the excess of	ver \$1,000,000		i.
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5	5% of the excess over	er \$1,500,000		;
	Over \$17,000,000	\$1,000,000				1
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)			65,937	
h	Subtract line 1g from line 1a If zero or less, ente					
i	Subtract line 1f from line 1c If zero or less, enter	r-0				
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the	e organization file Fo	orm 4720		
			•			☐ Yes ☐ No
	(Some organizations that made a s			e to complete all		s below.
	Lohh	ying Expenditures D	)uring 4-Year Avera	aging Period		
					Ī	
	Calendar year (or fiscal year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
	beginning in)					_
2a	Lobbying nontaxable amount	156,195	190,936	233,993	263,748	844,872
b	Lobbying ceiling amount (150% of line 2a, column (e))			<u></u>		1,267,308
c	Total lobbying expenditures					
d	Grassroots nontaxable amount	39,049	47,734	58,498	65,937	211,218
е	Grassroots ceiling amount (150% of line 2d, column (e))					316,827

Schedule C (Form 990 or 990-EZ) 2016

f Grassroots lobbying expenditures

EEA

	anch "Vac " recognize to lines to through to below, provide in Part IV a detailed	(	a)	<u> </u>	<u>(t</u>	o)
1	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity	Yes	No		Amo	uni
				<del> </del>	_	
	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	1	1	1		
	referendum, through the use of	-		1		
3	Volunteers?	├	<del> </del> -	-		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	├			-	
; 	Mailings to members, legislators, or the public?		<del> </del>	┼		
,	Publications, or published or broadcast statements?	<del> </del>	f	$\vdash$		
	Grants to other organizations for lobbying purposes?			+		
	Direct contact with legislators, their staffs, government officials, or a legislative body?		<del>                                     </del>	+ -		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		$\dagger$	†	_	
	Other activities?		1			
	Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·		†			_
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		1 -		-	
	If "Yes," enter the amount of any tax incurred under section 4912			† .		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
ì	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5),	or s	ecti	on	
	501(c)(6).		_			
				_	Y	'es
	Were substantially all (90% or more) dues received nondeductible by members?			·	1	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			· L	2	
	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?				3	
_	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Complete if the organization is exempt under section 501(c)(4), section 501(c)					ne
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."	)R (b	) Pa			ne
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members	)R (b				ne
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members	)R (b	) Pa			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members	OR (b	) Pa			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	OR (b	) Pa			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	OR (b	) Pa			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	OR (b	) Pa			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	OR (b	) Pa 1 2a 2b 2c			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	OR (b	) Pa 1 2a 2b 2c			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	OR (b	) Pa 1 2a 2b 2c			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	OR (b	) Pa			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	OR (b	2a 2b 2c 3			
<u> </u>	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  rt IV Supplemental Information  ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, II-A, II-A, II-A, II-A, II-B, II-B,	OR (b	2a 2b 2c 3			ne
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	OR (b	2a 2b 2c 3			ne
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#### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2016

OMB No 1545-0047

Department of the Treasury

► Attach to Form 990.

Open to Public

		(FOITH 330) and its instructions is at www.ns.	<del></del>
	of the organization	T +	Employer identification number
	uthern Coalition for Social of the Coalition for Social of the Coanizations Maintaining Donor Advis		26-0688375
Га	<del></del>	sed Funds or Other Similar Funds or Acc	counts.
	Complete if the organization answered "Ye		
4	Total number at and of year	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	ļ	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		· · · · · · · ·
5	Did the organization inform all donors and donor advisor		
	funds are the organization's property, subject to the organization		
6	Did the organization inform all grantees, donors, and do		
	only for charitable purposes and not for the benefit of the		
Pa	conferring impermissible private benefit? rt II Conservation Easements.		· · · · · · · · · · · · · · · · · · ·
		/oc" on Form 000, Part IV, line 7	
1	Complete if the organization answered "Y		
•	Purpose(s) of conservation easements held by the orga  Preservation of land for public use (e.g., recreation)		cally montant land area
		· =	cally important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
2	Preservation of open space	avaletical assessment on contribution in the form of	a concentation
_	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the form of	Held at the End of the Tax Year
			<del></del>
b			- <del></del> +
C	Total acreage restricted by conservation easements  Number of conservation easements on a certified histori		<del></del>
d	Number of conservation easements included in (c) acqu	• •	20
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferre		
ŭ	tax year	te, released, extinguished, or terminated by the o	iganization during the
4	Number of states where property subject to conservation	n easement is located	
5	Does the organization have a written policy regarding th	<del></del>	
•	violations, and enforcement of the conservation easeme	• • • • • • • • • • • • • • • • • • • •	
6	Staff and volunteer hours devoted to monitoring, inspec		<u> </u>
	<b>&gt;</b>	ing, naraling or notations, and other original	
7	Amount of expenses incurred in monitoring, inspecting,	handling of violations, and enforcing conservation	n easements during the year
	▶\$		•
8	Does each conservation easement reported on line 2(d)	above satisfy the requirements of section 170(h)	)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conse	ervation easements in its revenue and expense s	tatement, and
	balance sheet, and include, if applicable, the text of the	footnote to the organization's financial statements	s that describes the
	organization's accounting for conservation easements		
Pa	rt III Organizations Maintaining Collect	tions of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 11	6 (ASC 958), not to report in its revenue statement	nt and balance sheet
	works of art, historical treasures, or other similar assets	held for public exhibition, education, or research	in furtherance of
	public service, provide, in Part XIII, the text of the footnot	ote to its financial statements that describes these	e items
b	If the organization elected, as permitted under SFAS 110	6 (ASC 958), to report in its revenue statement a	nd 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		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X · · · · ·		<b>&gt;</b> \$
2	If the organization received or held works of art, historical	al treasures, or other similar assets for financial g	gain, provide the
	following amounts required to be reported under SFAS	• •	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		<b>▶</b> \$

_	ule D (Form 990) 2016 Southern Coalit	ion for Socia	l Justice			26-0 <u>6</u> 883		Page 2
Pai	rt III Organizations Maintaining C	ollections of A	rt, Historio	al Treasures,	or Oth	er Similar Ass	ets (conti	nued)_
3	Using the organization's acquisition, accession,	and other records, c	heck any of th	e following that are	a signific	ant use of its		
	collection items (check all that apply)							
а	Public exhibition	d 📗 Loa	n or exchange	programs				
b	Scholarly research	e 🗌 Othe	er					
C	Preservation for future generations							
4	Provide a description of the organization's collect	tions and explain ho	w they further	the organization's	exempt p	urpose in Part		
	XIII							
5	During the year, did the organization solicit or re-	ceive donations of a	rt, historical tre	easures, or other si	ımılar		_	
	assets to be sold to raise funds rather than to be	maintained as part	of the organiz	ation's collection?			· 🗌 Yes	☐ No
Pai	rt∉lV Escrow and Custodial Arrang						_	
	Complete if the organization an	iswered "Yes" o	n Form 990	), Part IV, line 9	, or rep	orted an amour	nt on Forr	n
	990, Part X, line 21							
1a	Is the organization an agent, trustee, custodian of	or other intermediary	for contribute	ons or other assets	not		_	_
	included on Form 990, Part X?						· · 🛚 Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII and	complete the follow	ing table					
						Amo	unt	
C	Beginning balance						344	, <u>708</u>
d	Additions during the year						2	2,171
е	Distributions during the year						202	2,231
f	Ending balance				· · 1f		144	,648
2a	Did the organization include an amount on Form	990, Part X, line 21	, for escrow o	custodial account	liability?		· · 🗌 Yes	<u>⊠</u> No
	If "Yes," explain the arrangement in Part XIII Ch	eck here if the expla	nation has be	en provided on Pai	rt XIII		· · · · · ·	<u>     </u>
Rai	t V Endowment Funds.							
	Complete if the organization an	swered "Yes" o	n Form 990	), Part IV, line 1	10			
		(a) Current year	(b) Pnor ye	ar (c) Two yea	rs back	(d) Three years back	(e) Four yea	rs back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses			<u></u>				
d	Grants or scholarships							
e	Other expenditures for facilities and				ļ			
	programs							
f	Administrative expenses	. ==						
g	End of year balance							
2	Provide the estimated percentage of the current	year end balance (li	ne 1g, columr	(a)) held as				
а	Board designated or quasi-endowment	%						
þ	Permanent endowment • %							
С	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c should e	•						
3a	Are there endowment funds not in the possession	on of the organization	n that are held	and administered	for the		_	
	organization by						Ye	s No
	(i) unrelated organizations · · · · · · ·						- 3a(i)	
	(ii) related organizations · · · · · · · · ·						3a(ii)	
b	If "Yes" on 3a(II), are the related organizations lis	•					3b	
4	Describe in Part XIII the intended uses of the org		nent funds					
Pa	Land, Buildings, and Equipm					E 000 B-		10
	Complete if the organization an	iswered "Yes" o	<u>n Form 990</u>	), Part IV, line	11a See	e Form 990, Pa	rt X, line	10
	Description of property	(a) Cost or oth	I -	) Cost or other basis	1 ''	Accumulated	(d) Book va	lue
		(investmi	ent)	(other)	1	epreciation		
1a	Land	• • •			<b>等等型</b>			
b	Buildings	• • •						<del></del>
С	Leasehold improvements	• • •			-			
d	Equipment			62,454		55,545		6,909
<u>e</u>	Other · · · · · · · STMD 1-E			60,000	<u> </u>			0,000
Total	<ol> <li>Add lines 1a through 1e (Column (d) must equ</li> </ol>	al Form 990. Part X.	column (B), li	ne 10c)			60	5,909

	(a) Description of security or category	(b) Book value	(c) Method of valuation
(A) F	(including name of security)		Cost or end-of-year market value
-	derivatives	• •	
•	eld equity interests	• •	
3) Other	• • • • • • • • • • • • • • • • • • • •	-	
(A) (B)		<del>-</del>	
(C)		_	
(D)		<del>-  </del>	
(E)		-	
(F)		_	
(G)		_	
(H)			
	must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>	-
Part VIII	Investments - Program Related.	· · ·	
	Complete if the organization answ	vered "Yes" on Form 990, Part	IV, line 11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
		(-,	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(8) (9)			
(8) (9) Total (Column (b)	must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>	
(8)	Other Assets.		IV line 11d. See Form 990. Part Y. line 15
(8) (9) Total (Column (b)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	IV, line 11d See Form 990, Part X, line 15
(8) (9) Total (Column (b) Part IX	Other Assets.  Complete if the organization answ		IV, line 11d See Form 990, Part X, line 15
(8) (9) Total (Column (b) Part IX	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2) (3)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4) (5)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9)  Total (Column (b)  Part IX  (1) (2) (3) (4) (5) (6)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9)  Total (Column (b)  Part IX  (1) (2) (3) (4) (5) (6) (7)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9)  Total (Column (b)  Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets.  Complete if the organization answ	vered "Yes" on Form 990, Part	
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col (B) line Other Liabilities.	vered "Yes" on Form 990, Part (a) Description	(b) Book value
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.	vered "Yes" on Form 990, Part (a) Description	(b) Book value
(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col (B) line Other Liabilities.	vered "Yes" on Form 990, Part (a) Description	(b) Book value
(8) (9)  Fotal (Column (b)  Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Fotal (Column  Part X	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) lines. Other Liabilities. Complete if the organization answers. Inc. 25  (a) Description of liability	vered "Yes" on Form 990, Part (a) Description	(b) Book value
(8) (9) Fotal (Column (b) Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal (Column Part X  1. (1) Federal	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line. Other Liabilities. Complete if the organization answers.	vered "Yes" on Form 990, Part (a) Description  e 15)  vered "Yes" on Form 990, Part	(b) Book value
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(8) (9)  Total (Column (b)  Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column  Part X  1. (1) Federal (2) (3)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) lines. Other Liabilities. Complete if the organization answers. Inc. 25  (a) Description of liability	vered "Yes" on Form 990, Part (a) Description  e 15)  vered "Yes" on Form 990, Part	(b) Book value
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(8) (9) Total (Column (b) Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) lines. Other Liabilities. Complete if the organization answers. Inc. 25  (a) Description of liability	vered "Yes" on Form 990, Part (a) Description  e 15)  vered "Yes" on Form 990, Part	(b) Book value

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

	ule D (Form 990) 2016 Southern Coalition for Social Justice			26-0688375	Page 4
Pa	Reconciliation of Revenue per Audited Financial Statem			r Return.	
<u>.</u>	Complete if the organization answered "Yes" on Form 990, F	Part IV,	line 12a		
1	Total revenue, gains, and other support per audited financial statements			1	2,443,198
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	3,000		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			20	3,000
3	Subtract line 2e from line 1			3	2.440.198
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			35	.= / /
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b	•		
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,440,198
	Reconciliation of Expenses per Audited Financial State				
×	Complete if the organization answered "Yes" on Form 990,			por recurr	•
1	Total expenses and losses per audited financial statements		, 11110 124	1	2,422,420
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				2,422,420
a	Donated services and use of facilities	2a	2 222		
b	Prior year adjustments		3,000		
	Other losses	2b			
C		2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·			2e	3,000
3	Subtract line 2e from line 1	 		3	2,419,420
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	2,419,420
	t XIII				
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin			art X, line	
2, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	addition	al information		
^1	3 mark and 1 mark 1 mar				
<u>UI.</u>	Agent not reporting amounts on 990 (Part :	LV, .	Line ID)		
_					
Con	sistent with the requirements of the North Carolina State	Bar,	the Organizati	Lon	<del></del>
<u>malı</u>	ntains trust accounts to hold any funds collected on beha-	lf of,	or from, clie	ents and	
<u>als</u> j	perses those funds at the clients' directions.				
—					<del></del> .
	<del>-</del>				
			<u>.                                    </u>		

Schedule D (Form 990) 2016

EEA

#### **SCHEDULE O** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 2016

Open to Public Inspection

26-0688375

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

Southern Coalition for Social Justice 01. Management duties delegation (Part VI, line 3) The duties of the Chief Financial Officer have been performed by a contracted accountant since November 2010. 02. Form 990 governing body review (Part VI, line 11) Prior to filing, the Form 990 is reviewed by the Executive Director and the Board of Directors. 03. Conflict of interest policy compliance (Part VI, line 12c) The Conflict of Interest policy is monitored by the Board Secretary and reviewed and signed at the beginning of each year by all staff and Board members with significant decision-making authority. It is each signatory's obligation to disclose any potential conflicts as soon as it is known, or reasonably should be known. 04. CEO, executive director, top management comp (Part VI, line 15a) The Executive Director's salary is determined by the Organization's salary scale, adopted by the Board for all staff of the Organization, which provides compensation based on years of experience. The Executive Director's salary level is also independently reviewed by the Board's Executive Committee, to ensure that it does not exceed comparable levels of compensation for nonprofit directors in this region of the country. 05. Governing documents, etc, available to public (Part VI, line 19) The three most recent Forms 990 (including financial information), the Bylaws, Articles of Incorporation, Form 1023 Application for Exemption, and Conflict of Interest Policy are provided to the public upon request.

Name of the organization  Southern Coalition for Social Justice  26-0688375  06. List of other fees for services expenses (Part IX, line 11q)	<u> </u>
06. List of other fees for services expenses (Part IX, line 11g)	— —
06. List of other fees for services expenses (Part IX, line 11g)	_
06. List of other fees for services expenses (Part IX, line 11g)	
06. List of other fees for services expenses (Part IX, line 11g)	
06. List of other fees for services expenses (Part IX, line 11g)	
Fees for services-other on line 11q of the Statement of Functional Expenses includes funds	
shared with co-counsel for program-related activities (\$487,284) and amounts paid to	
consultants and organizers (\$320,627), experts and researchers (\$110,319), and financial	
service providers (\$2,052) to conduct various program and supporting activities of the	
Organization.	
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