# Return of Organization Exempt From Income Tax

2017

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

	Departm	ent of th	ne Treasury			enter social sec	-			-	-				o Public ,
			e Service			www.irs.gov/F	orm990 for	instructions						- Inspe	ections
	A Fo	or the	2017 calendar	r year, or ta	ax year beg	inning			, 201	7, and en	ding		_	, 20	
	B Ch	eck if ap	oplicable C	Name of orga	anization Sou	thern Coal	ition f	or Socia	l Justice	e			D En	nployer ider	ntification no.
	∐ Ad	dress ch	nange	Doing busine	ess as								26-	068837	<u> 15</u>
	∐ Na	me char	nge	Number and	street (or PO	box if mail is not deli-	vered to street	address)			Room/suite		£ Tel	ephone nun	nber
	Und	ual return	<sup>-</sup> ∟	1415 W	est Hig	hway 54					101		(91	9) 323-	-3380
	Fir	al return	n/terminated	City or town,	state or provin	ce, country, and ZIP	or foreign posta	il code					G Gr	oss receipts	•
	☐ Arr	nended r	return	Durham	, NC 27	707					_		\$	3,40	6,285
3	Ap	plication	pending F	Name and ac	ddress of princi	ipal officer					H(a) is this	a Group cepti	m for subore	dinates?	Yes 💹 No
15										100	H(b) Are a	ıll subordin	ates inclu	ded?	Yes   No
10	I Ta	x-exemp	nt status 🐰 50	01(c)(3)	501(c) (	) 🖣 (insert no.)	4947	'(a)(1) or	527	_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u> </u>	No," atta	ch a list (i	see instructio	ons)
	J We	bsite.	▶ www.	souther	coalitio	on.org		[			H(c) Gro	up exempt	on numbe	er 🕨	
			ganızatıon 🐰 C	Corporation	Trust A	Association Oth	ner 🕨	ļ	L Year of for	mation 2	<u>007 м</u>	State of I	egal domi	cile NC	<u>.                                    </u>
	Part	11	Summary												
		1	Briefly describe	e the organ	ızatıon's mı	ssion or most sig	gnificant act	ıvıtıes <u>Th</u>	e Southe	rn Coa	lition	for S	ocial	Justi	.ce
	•		partners v	with con	munitie	s of color	and ec	onomical:	ly disad	vantag	ed comm	unitie	s in	the s	outh
	auc.		to defend	and adv	vance th	eır polıti	cal, so	cial and	economi	c righ	ts thro	ugh th	ne cor	mbinat:	lon
	Governance		of legal a	advocacy	y, resea	arch, organ	ızıng &	communi	cations.						
	ò	2	Check this box	< ▶ 📗 if the	e organızatı	on discontinued	its operatio	ns or dispose	ed of more th	an 25% d	of its net as:	sets			
	ڻ مخ	3	Number of vote	ıng member	rs of the go	verning body (Pa	art VI, line 1	а)				· · · <u>    :</u>	3		11
	Activities &	4	Number of inde	ependent vo	oting memb	ers of the gover	ning body (	Part VI, line 1	lb)			· · · <u>L</u>	4		11
	į	5	Total number o	of individual	s employed	l ın calendar yea	r 2017 (Par	t V, line 2a)				🗀	5		20
	cţi	6	Total number o	of volunteer:	s (estimate	ıf necessary)						🔃	6		12
	⋖	7a	Total unrelated	l business r	evenue fror	m Part VIII, colui	mn (C), line	12				7	7a		0
		b	Net unrelated t	business ta:	xable incon	ne from Form 99	0-T, line 34		<u>.</u>			7	7b		0
									<u> </u>		Prior	Year		Current	Year
		8	Contributions a	and grants (	(Part VIII, lır	ne 1h)				[	2,	425,2	71	2,	,950,928
	Ð	9	Program service	ce revenue	(Part VIII, II	ıne 2g)			. <b></b>	[		<u> </u>			407,281
	Revenue	10	Investment inc	ome (Part \	VIII, column	(A), lines 3, 4, a	and 7d) .		. <b></b> .	[		(3	81)		12,164
	æ					lines 5, 6d, 8c,						15,3	808		6,878
		12	Total revenue -	- add lines (	8 through 1	1 (must equal Pa	art VIII, colu	mn-(A)_line_	12)	· · · [	2	440,1	.98	3,	,377,251
		13	Grants and sin	nılar amoun	its paid (Pai	rt IX, column (A)	, lines 1-3)	IRF	CEIVE	- N	7				0
						t IX, column (A),		ا شا	-OLIVE		.]				0
		15	Salaries, other	r compensa	tion, emplo	yee benefits (Pa	rt IX, colum	nga), lines <sub>A</sub> 5	710) 7 30	· . [2	1	,106,4	169	1,	,318,438
	Sec					C, column (A), lin		ĭ```  ĭĭ	7 2.0	2  قا	2				0
	Expenses	ь	Total fundraisir	ng expense	s (Part IX, o	column (D), line	25) 🕨	L	152,41	0	4		• ] .		
	Ä	17	Other expense	es (Part IX,	column (A)	, lines 11a-11d, 1	11f-24e)	QG	DEN I	IT.	1	,312,9	51		783,173
		18	Total expenses	s Add lines	s 13-17 (mu	ist equal Part IX	, column (A)				2	419,4	120	2,	,101,611
,		19	Revenue less	expenses	Subtract lin	ne 18 from line 1	2					20,7	778	1,	,275,640
	or ses							-			Beginning of	Current Ye	ear	End of	
€	alan	20	Total assets (P	art X, line 1	16)						1_	,923,2	209	3,	<u>,204,830</u>
2018	Net Assets or Fund Balances	21	Total habilities	(Part X, line	e 26) · ·					· • • • <u>L</u>		80,5	512		86,493
N CO			Net assets or f	fund balanc	es Subtra	ct line 21 from lii	ne 20 · ·			<u>  </u>	1	,842,6	597	3	,118,337
	Par		Signature								_				
	Under	penaltie	s of perjury, I decla	ire that I have e	examined this r	return including acco n officer) is based on	mpanying sche	edules and stater	ments, and to the	e best of my	knowledge and	d belief, it is	S		
JUL	- 1146, 0	onect a	na complete Decia	aration of purpa	die (other train	Tollicer) is based on	airinidinadon	or which prepare	Thus any known	.agc					
<u>.</u>	٥.		<b></b>	(X	aun	- 11 1	$\sqrt{}$						ļ.,		
	Sign		Signature of	of officer		1 C	ノ , ,		,		•		Date	,	
	Here	•	<b>\</b>	Kar.	eem (	rayton	, 194	rim tre	e caple	Direct	DV	7	121/	<i>I</i> Z	
SCANNED			Type or pn	nnt name and til	tle	/					<del></del> _		. ,		
S			Print/Type prepa	arer's name		Preparer's signa		_	Date		Che	ck 🛚	f PTIN		
Õ	Paid		Mark Dan	es		Mark	ς ς,	Danes	04-24-	-2018	setf-	employed	P	013217	36
	-	arer		<b>&gt;</b>	Mark S	Danes CPA	PLLC_				Firm's EIN	46	-106	1285	
	Use	Only	Firm's address	•	P.O. B	ox 424					Phone no	<u> </u>			t
					Clayto	n NC 27528					<u></u>	919	-452-		
	May t	ne IRS	discuss this re	eturn with th	ne preparer	shown above?	(see instruc	tions) · ·		<u></u>	<u></u>		• • • •	· 🔀 Yes	
	F 0		and Dankinskins	- A-4 NI-4:-			-4:				~ ~ ~		_	Г	~ 000 /2017\

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Form	m 990 (2017) Southern Coalition for Social Justice	26-0688375	Page 2
<b>i</b> Ra	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	. <b></b>	<u> </u>
1	Briefly describe the organization's mission		
	The Southern Coalition for Social Justice partners with communities of color as	nd economi	cally
	disadvantaged communities in the south to defend and advance their political,	social and	<u>i</u>
	economic rights through the combination of legal advocacy, research, organizing	g &	
	communications.		
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	pnor Form 990 or 990-EZ?	· · 📙 Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	П.,	п.,
	Services?	· · U Yes	K No
4	If "Yes," describe these changes on Schedule O	<b>.</b>	
•	Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	the total expenses, and revenue, if any, for each program service reported	л <b>э</b> ,	
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 995,710 including grants of \$ ) (Revenue \$		
	Criminal Justice: Through its Criminal Justice initiative, the Southern Coality		′
	Justice (SCSJ) tackles racial discrimination at the legal and policy levels to		
	obstacles facing those with criminal records as they attempt to re-enter the management		
	society, and engages in criminal justice impact litigation. In addition, the You		
	Project seeks to end the criminalization of youth through interventions in the	juvenile	
	justice and education systems.		
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	
4b	(Code) (Expenses \$ 704,436 including grants of \$ ) (Revenue \$	407	7,281)
	Voting Rights: SCSJ's voting rights work protects the rights of communities of		
	defending the Voting Rights Act through fair redistricting and minimizing elec-		
	administration practices that threaten free democratic participation in election		18
	photo ID requirements, restrictions on voter registration and early voting and	Election	Day
	voter challenges.		
4c	(Code) (Expenses \$ 60,498 including grants of \$ ) (Revenue \$		<u> </u>
	Human Rights: Using a community-lawyering model, SCSJ levels the playing field		t the
	civil, economic, and political rights in priority areas that are defined by the		
	SCSJ seeks to serve. SCSJ will take on cases under the general rubric of Human		
	meet certain criteria and promise broad impact.		
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ 20,764 including grants of \$ ) (Revenue \$	)	
4e			
EEA		For	m <b>990</b> (2017)



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Part IV **Checklist of Required Schedules** No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х 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 Х 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, 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Χ Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 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 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII ........ 11b Χ c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c Χ d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 Χ . . . . . . . . . . . . . . . . . . . 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 ...... Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Х Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 

Pa	Triv   Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			İ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
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 29 If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J · · · · · · · · · · · · · · · · · ·	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			ł
	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u> </u>
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<b></b>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			1
	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ĺ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	- 3	ر ر بورد ر بورد	. ~
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		<del></del>	لسيسا
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		X
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	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
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,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			۱
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			۱
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			١
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	_		١
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		,.	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u></u>

Pai	tt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	· · · ·	· · ·	┌╚
4-	Establishment of D. O. C. 1999 E. L. O.		Yes	No
1a h	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	. 1	, Ì	
b c	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		.	1
·	reportable gaming (gambling) winnings to prize winners?	1c	- <u>-</u> -	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<del>''</del>		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 20	.	. İ	ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
	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	3ь		
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	.		l
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country		_	1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	,	.	1
	(FBAR)			<b> </b>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
þ	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		. 1	l
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			l
7	gifts were not tax deductible?	6b	,	
, a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
a	and services provided to the payor?	7a	X	
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	$\vdash$
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			$\vdash$
-	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7c	, I	Ιx
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		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
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		Х
9	Sponsoring organizations maintaining donor advised funds.	į		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			İ
b 44	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 a	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them )			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			l
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
_ <u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
EEA		Form	990 (2	2017)

Form 990 (2017) Page 6 Southern Coalition for Social Justice 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 Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 11 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Χ Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X 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 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 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 13 X Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 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? 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 Χ 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 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 | Upon request | Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records

Danielle M Carman (919)323-3380, 1415 West Highway 54, Durham, NC 27707

Form 990 (20	17) Southern Coalition for Social Justice	26-0688375	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	ompensated Employ	ees, and
	Check if Schedule O contains a response or note to any line in this Part VII		🔲
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete	this table for all persons required to be listed. Benefit compensation for the colorade was ending with an	wthin the	

- 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

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

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

EEA

	T Transfer	T	рсп			Cuit	J111 C	I	T T	<del></del>
				,	(C)					
(A)	(B)	Position (do not check more than one		(D)	(E)	(F)				
Name and Title	Average					nan one s both a		Reportable	Reportable	Estimated
	hours per						compensation	compensation from	amount of	
	week (list any hours for							from the	related organizations	other compensation
	related	악方	7	Q	<u>~</u>	\$ 9 I		organization	(W-2/1099-MISC)	from the
	organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	me	(W-2/1099-MISC)	`	organization
	below dotted line)	et al	Sa.		郞	/ee				and related organizations
	line,	nst.	2		ye e	mpe				organizations
		*	stee			nsa				
						8				1
(1) Farad Ali	0.60									
Chair		X		Х				. 0	0_	0
(2) Anne Gordon	0.60_									
Director		X						o	0	0
(3) Anita Earls	50.00									
Executive Director	- [	Х		Х				123,454	l 0	15,195
(4) James Ferguson	0.60									
Director		Х			1 1			o	0	o
(5) Jim Grant	0.60									
Director		Х						o	0	0
(6) Brittany "Bree" Newsome	0.60									
Director		Х						o	0	0
(7) Jennifer Paul	0.60									
Director		Х						o	o	0
(8) Barry Williams	0.60									
Director		Х						0	0	o
(9) Trina Jones	0.60			П	$\Box$				<del>                                     </del>	
Vice-Chair		Х		l x	li			o	0	o
(10)Jane Wettach	0.60	1		Ë						
Director		Х						o	٥	o
(11)Mark Trustin	0.60	<u> </u>		Н	$\vdash$				<b>-</b>	
Director		Х						o	٥	o
(12)Ryan Roberson	0.60	1		H	$\vdash$				<u> </u>	
Treasurer		X		х				o		o
	<del></del>	<del>  ^-</del>	$\vdash$	$\vdash \cap$			-		ļ	
(13)										
(14)				$\vdash$				·		
	_ [									
					_					

Form 990 (2017)

Part	VII   Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd i	High	est	Comp	ens	ated Employees (	(continued)			
	(A) Name and title	(B)  Average hours per week (list any hours for	(do not check more than one Average box, unless person is both an officer and a director/frustee)  week (list any  (do not check more than one Reportable compensation from						(E)  Reportable compensation from related organizations		(F) Estimated amount of other compensation		
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Kay employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the organization and relate organization	e on ed
(15)				-									
(16)											1		
(17)										_	+		
(18)_											+		<u> </u>
<u>(19)</u>											$\dagger$		
(20)										_	+		
(21)											+		
(22)_										_	1		
(23)_											+		
(24)_										_	<del> </del>		
(25)													
1b	Sub-total							•			1		
C d	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)							•	102 454	-	+		195
<u>u</u>	Total number of individuals (including but not limited							_	123,454 than \$100,000 of				193
	reportable compensation from the organization			Ĺ				_		1			
_												Yes	No
3	Did the organization list any former officer, director employee on line 1a? If "Yes," complete Schedule						-				3	_	X
4	For any individual listed on line 1a, is the sum of rep								ation from the		-	+-	<del>  ^</del>
	organization and related organizations greater than		•					•					1-
	ındıvıdual										4		X
5	Did any person listed on line 1a receive or accrue of								tion or individual				<del> </del>
Secti	for services rendered to the organization? If "Yes," on B. Independent Contractors	complete Sci	hedule	J fo	r su	ch pe	erson		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · ·	5	Щ.	X
1	Complete this table for your five highest compensal compensation from the organization Report compe	•											
	year								<del></del>	Т			
	(A) Name and business address			_					(B) Description of		Co	(C) mpensati	ion
	<del></del>												
									+	+			
									<del>                                     </del>	<del></del>			
				_									
2	Total number of independent contractors (including	but not limite	d to th	ose	liste	d ab	ove)	who					-

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

Lare		Check if Schedule O contain		ote to any line in th	ıs Part VIII			[
	•	,	_		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
_ = 2	1a	Federated campaigns	1a					
in in	b	Membership dues · · · · ·	1b			1		
A T G	C	Fundraising events · · · ·	· · · · 1c	24,770				
a i	d	Related organizations	1d					
si iii	е	Government grants (contribution	ons) · · 1e	166,001	]			Ì
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gr	ants,			ľ		ļ
흎		and similar amounts not includ	ed above 11	2,760,157				ł
g g	9	Noncash contributions included	d in lines 1a-1f <sup>.</sup> \$					
	h	Total. Add lines 1a-1f · · ·	· · · · · · · · ·		2,950,928			
				Business Code				
Program Service Revenue	2a	Attorney fees		541100	407,281	407,281		
<b>8</b> e	b							ļ
821	С							
Sen	d							<u> </u>
E E	е							
<sup>7</sup> og		All other program service reven						
	g	Total. Add lines 2a-2f	· · · · · · · · · · · · · · · · · · ·	· · · · · · • •	407,281			
	3	Investment income (including di						1
	١.	and other similar amounts)			12,164			12,164
	4	Income from investment of tax-e						
	5	Royalties	<del> </del>	<u> ▶</u>				<u> </u>
	[ _	_	(ı) Real	(ii) Personal				
	1	Gross rents						
		Less rental expenses · · · ·		<u> </u>	]	Ì		1
	1	Rental income or (loss) · · · [		L				
	a	Net rental income or (loss)		<u> ▶</u>				
	7a	Gross amount from sales of	(i) Secunties	(ii) Other				
		assets other than inventory				Ì		
	Ь	Less cost or other basis				1		
		and sales expenses · · · ·	<del></del>	<del></del>		İ		
		Gain or (loss)	<del></del>	L				
Ф		Net gain or (loss) · · · · · ·			<del></del>			<del> </del>
evenue	oa	Gross income from fundraising				•		
			24,770					
<u>ج</u>		of contributions reported on line				1		
Other	۱.	See Part IV, line 18 · · · · ·		19,290				
0		Less direct expenses Net income or (loss) from fundra		29,034		-		
		Gross income from gaming activ	_		(9,744)	<del></del>	<del></del>	(9,744
	Ja	See Part IV, line 19						
	h	Less direct expenses		-		Ì		
		Net income or (loss) from gamin						-
	I		ig activities		<del></del>			
	iva	Gross sales of inventory, less returns and allowances						
	Ь	Less cost of goods sold · · ·	_	<u> </u>		1		
		Net income or (loss) from sales						<del></del>
	Ť	Miscellaneous Revenue	or inventory	Business Code			<del></del>	
	11a	Reimbursements	<del></del>	900099	11,927	11 027		
	Ι.	Administrative fees		900099		11,927	<del></del>	<del>                                     </del>
		Miscellaneous		900099	2,194	2,194		<del>                                     </del>
		All other revenue	<del></del>	300033	2,501	2,501		<del>                                     </del>
	l				16,622			<del> </del>
	l .	Total revenue. See instructions		= -	3,377,251	423,903		0 2,420
						423,303		V <sub>1</sub>

Form 990 (2017) Southern Coalition for Social Justice
Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to	any line in this Part IX	<u> </u>	<u> </u>	<u></u>
	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	rants and other assistance to domestic organizations		expenses	general expenses	expenses
	nd domestic governments See Part IV, line 21	Ì			
	rants and other assistance to domestic				
	dividuals See Part IV, line 22				
	rants and other assistance to foreign	<del></del>			
	rganizations, foreign governments, and foreign				
	dividuals See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,				
					24.66
	ustees, and key employees	138,649	90,122	13,865	34,66
	ompensation not included above, to disqualified				
	ersons (as defined under section 4958(f)(1)) and			1	
	ersons described in section 4958(c)(3)(B)				
	ther salanes and wages	926,276	788,170	87,681	50,42
	ension plan accruals and contributions (include	[		[	
	ection 401(k) and 403(b) employer contributions)	70,250	55,728	4,355	10,16
	ther employee benefits	99,016	80,725	5,561	12,73
	ayroll taxes	84,247	64,232	14,159	5,85
	ees for services (non-employees)				
	lanagement				
	egal·········				
	ccounting	21,220	8,585	12,635	
	obbying				
	rofessional fundraising services. See Part IV, line 17				
	vestment management fees · · · · · · · · · · · · · · · · · ·		<u>-</u>		
	ther (If line 11g amount exceeds 10% of line 25, column	[			
	A) amount, list line 11g expenses on Schedule O) · · ·	404,503	371,386	15,624	17,49
	dvertising and promotion				
	ffice expenses	59,457	21,343	36,575	1,53
	formation technology	50,092	32,097	13,815	4,18
<b>5</b> Ro	oyalties				
	ccupancy	87,926	71,176	10,729	6,02
	avel · · · · · · · · · · · · · · · · · · ·	98,154	96,413	715	1,02
	ayments of travel or entertainment expenses			}	
	r any federal, state, or local public officials				
	onferences, conventions, and meetings				
	terest · · · · · · · · · · · · · · · · · · ·				
	ayments to affiliates				
	epreciation, depletion, and amortization	16,835	15,627	290	91
3 In:	surance	14,817	1,637	12,943	23
4 Ot	ther expenses Itemize expenses not covered	4	1		
	pove (List miscellaneous expenses in line 24e If				
	ne 24e amount exceeds 10% of line 25, column	1			
(A	anount, list line 24e expenses on Schedule O)				
a <u>s</u> t	taff development	13,252	10,815	946	1,49
b Me	embership dues	12,655	8,952	3,703	
C M	ıscellaneous	4,262	384	3,678	20
d <u>A</u>	llocation of indirect costs		64,016	(69,481)	5,46
e Al	I other expenses				
	otal functional expenses. Add lines 1 through 24e .	2,101,611	1,781,408	167,793	152,41
	pint costs. Complete this line only if the				
	ganization reported in column (B) joint costs om a combined educational campaign and		ļ		
	ndraising solicitation Check here				
	Illowing SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 240,567 263,509 2 2 898,867 1,815,229 3 3 693,607 1,025,781 4 3,784 697 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 7 8 9 41,554 19,475 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . 10a 10c 72,380 66,909 58,060 11 11 12 12 13 13 14 14 15 15 16 16 3,204,830 1,923,209 17 17 80,512 86,493 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, -iabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L ....... 22 23 Secured mortgages and notes payable to unrelated third parties . . . . . 23 24 Unsecured notes and loans payable to unrelated third parties  $\cdots \cdots \cdots$ 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 80,512 26 86,493 Organizations that follow SFAS 117 (ASC 958), check here > X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 1,390,153 2,317,584 28 28 800,753 452,544 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds ..... 32 33 33 1,842,697 3,118,337 34

1,923,209

Form	1 990 (2017) Southern Coalition for Social Justice	26-068	8375	ı	Page 12
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> .	· · · · <u>·</u>	<u></u>	· · 🔲
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,377	251
2	Total expenses' (must equal Part IX, column (A), line 25)	. 2		2,101	611
3	Revenue less expenses Subtract line 2 from line 1	. 3		,275	640
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		.,842	697
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	:	3,118	, 337
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				🗆
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		- 1	- {	
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		7	a	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		1	1	
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		_2	b 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		- 1		
	Separate basis Consolidated basis Both consolidated and separate basis		İ	- 1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		- 1		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	c X	1
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		ŀ	1	
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?		3	a	X
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				$\top$
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	ь	
EEA			Fo	rm <b>990</b>	(2017)

#### SCHEDULE A

#### **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.

2017 n to Public

OMB No 1545-0047

Denartment of the Treasury Internal Revenue Service Name of the organization

(Form 990 or 990-EZ)

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

Employer identification number Southern Coalition for Social Justice 26-0688375 Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ) ) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D. and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Southern Coalition for Social Justice 26-0688375 Page 2 Schedule A (Form 990 or 990-EZ) 2017 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 (c) 2015 (b) 2014 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2,915,727 2,415,017 2,950,928 343,951 1,401,641 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . Total. Add lines 1 through 3 . . . . . . 343,951 1,401,641 2,915,727 2,415,017 2,950,928 10,027,264 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) 5,270,641 Public support. Subtract line 5 from line 4 · · 4,756,623 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (e) 2017 (a) 2013 (b) 2014 (c) 2015 (d) 2016 (f) Total Amounts from line 4 . . . . . . . . 343,951 1,401,641 2,915,727 2,415,017 2,950,928 10,027,264 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from 1,340 1,115 260 12,164 14,879 Net income from unrelated husiness. activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) . . . . . . . . . 4,828 2,205 35.912 11 Total support. Add lines 7 through 10 . 10,099,996 12 424,229 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 47.10 Public support percentage from 2016 Schedule A, Part II, line 14 15 45.34 16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2017 Page 3 Southern Coalition for Social Justice 26-0688375 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (f) Total (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Public support. (Subtract line 7c from line 6) . . . . . . . . . . . . . . . . . . Section B. Total Support (b) 2014 Calendar year (or fiscal year beginning in) (a) 2013 (c) 2015 (d) 2016 (e) 2017 (f) Total 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 . . . c Add lines 10a and 10b · · · · Net income from unrelated busines 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) Total support. Add lines 9, 10c, 11, and 12) . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public/support percentage for 2017 (line 8, column (f) divided by line 13, column (f))

	Public support percentage from 2016 Schedule A, Part III, line 15	16	9/
Se	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	9,
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	9
19a	33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, at 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	nd line tion	▶ □

33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

15

Part IV Supporting Organizations

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

### Section A: All Supporting Organizations

- 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
- 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
- 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)
- 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.
- 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)
- 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
  - 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 )

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	10b		<u> </u>
A (Fo	m 990	OT 990-	EZ) 2017

Pa	rt IV   Supporting Organizations (continued)		<u>·</u>	uge <b>e</b>
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	f		
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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	tion B. Type I Supporting Organizations			
-			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			li
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			1
	controlled the organization's activities. If the organization had more than one supported organization,			İ
	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		
	g and tan you	<u> </u>		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		<u> </u>
Sec	tion 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	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how	i		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		├──
_		<u> </u>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			J
500	supported organizations played in this regard	3		L
	tion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	struc	tions	<i>i)</i>
b	= 3. 3. 1. 3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	/ ·		-4
2	The organization supported a governmental entity Describe in Part VI how you supported a government entity Activities Test Answer (a) and (b) below.	(see i		
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		Yes	NO
a	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		<u> </u>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			<b></b>
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	<del></del> -		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Sched	dule A (Form 990 or 990-EZ) 2017 Southern Coalition for Social Justice		26-068	8375	Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov 20, 1970 (expla	in in Part VI)	See
	instructions. All other Type III non-functionally integrated supporting organi	zatio	ns must complete Section	ns A through	E _
Sec	tion A - Adjusted Net Income		(A) Pnor Year	(B) Curre	nt Year
			(A) Phor fear	(optioi	nal)
_1	Net short-term capital gain	1			
_2	Recoveries of prior-year distributions	2			
_3	green green	3			
4	Add lines 1 through 3	4		T	
_ 5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
co	illection of gross income or for management, conservation, or				
_ ma	aintenance of property held for production of income (see instructions)	6		ŀ	
7	Other expenses (see instructions)	7		1	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8			
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Currei	
1	Aggregate fair market value of all non-exempt-use assets (see				
Ins	structions for short tax year or assets held for part of year)				
a	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other		- · · · · · · · · · · · · · · · · · · ·		
	actors (explain in detail in Part VI)				
_2	Acquisition indebtedness applicable to non-exempt-use assets	2			
_3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	ТП		T	
_	e instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
_6	Multiply line 5 by 035	6			
7	Recoveries of prior-year distributions	7			
_8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C - Distributable Amount			Current \	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		1	
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	П			
_en	nergency temporary reduction (see instructions)	6			

8 Breakdown of line 7
a Excess from 2013
b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

. . . .

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

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C

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

	Section 527 organizations Complete Part				
If the	organization answered "Yes," on Form	i 990, Part IV, line 4, or Form 990-EZ, I	Part VI, line 47 (Lo	obbying Activities), then	
	Section 501(c)(3) organizations that have				
	Section 501(c)(3) organizations that have				
If the	organization answered "Yes," on Form	ı 990, Part IV, line 5 (Proxy Tax) (see s	eparate instruction	ons) or Form 990-EZ, Part	t V, line 35c (Proxy
	(see separate instructions), then	Complete Boot III			
	Section 501(c)(4), (5), or (6) organizations e of organization	. Complete Part III.		Employer	Identification number
				' '	
	uthern Coalition for Social	Justice		26-0688	
Pa		ization is exempt under secti			anization.
1	Provide a description of the organization's		ctivities in Part IV	(see instructions for	
	definition of "political campaign activities"				
2	Political campaign activity expenditures (	see instructions)	<i>.</i>	<b>&gt;</b> \$	
3	Volunteer hours for political campaign act	tivities (see instructions)			
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 incurr	ed by the organization under section 49	55	▶ \$	
2	Enter the amount of any excise tax incurr				
3	If the organization incurred a section 495				· Yes No
4a	Was a correction made?				
b	If "Yes," describe in Part IV				
		ization is exempt under secti	on 501(c) ex	cent section 501(c)(	3)
1	Enter the amount directly expended by th	<del></del>		cept section out (o)(	<del></del>
•			=	<b>~</b> ¢	
_	activities			· · · · · · · · • • • <u> </u>	
2	Enter the amount of the filing organization	•			
	527 exempt function activities · · · ·			· · · · · · · • \$	
3	Total exempt function expenditures Add	lines 1 and 2 Enter here and on Form 1	120-POL,		
	line 17b			·	
4	Did the filing organization file Form 1120	-POL for this year?			. Yes No
5	Enter the names, addresses and employe	er identification number (EIN) of all secti	on 527 political org	ganizations to which the filit	ng
	organization made payments. For each o	rganization listed, enter the amount paid	d from the filing org	anization's funds. Also ent	er
	the amount of political contributions recei	ved that were promptly and directly deliv	vered to a separate	e political organization, suc	h
	as a separate segregated fund or a politic	cal action committee (PAC) If additional	space is needed,	provide information in Part	IV
	tol Nome	/L\ A dd	4-> EINI	(d) Amount noul from	(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate
				i	political organization If none, enter -0-
(1)					
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	dule C (Form 990 or 990-EZ) 2017 Southern Coa	lition for Soc	ial Justice		26-0688	375 Page 2
Ра	rt II-A Complete if the organization	on is exempt un	der section 50	1(c)(3) and filed	Form 5768 (ele	ction under
	section 501(h)).					·
Α	Check 🕨 📙 if the filing organization belongs to			ch affiliated group me	ember's name,	
	address, EIN, expenses, and sha		•			
<u>B</u>	Check   If the filing organization checked it	oox A and "limited con	trol" provisions app	у		
		bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures"				organization's totals	group totals
1a	Total lobbying expenditures to influence public of	• ••	,			
b	Total lobbying expenditures to influence a legisla	itive body (direct lobb	yıng)			
C	Total lobbying expenditures (add lines 1a and 1b	•				
d	Other exempt purpose expenditures · · · ·	<i></i>	• • • • • • • •		1,949,201	
8	Total exempt purpose expenditures (add lines 1	c and 1d) · · · · ·	• • • • • • • •		1,949,201	
f	Lobbying nontaxable amount. Enter the amount	from the following tab	le in both			
	columns		<del></del>		247,460	<del></del>
	If the amount on line 1e, column (a) or (b) is:	The lobbying r	iontaxable amount	is:		
	Not over \$500,000	20% of the amo	unt on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	5% of the excess o	ver \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	0% of the excess o	ver \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000		
	Over \$17,000,000	\$1,000,000				
_ g	Grassroots nontaxable amount (enter 25% of lin	e 1f)			61,865	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	г-0				
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did th	e organization file F	orm 4720		
	reporting section 4911 tax for this year?					Yes 🛚 No
		4-Year Averagin	g Period Under	section 501(h)	- · · · ·	<u> </u>
	(Some organizations that made a s	ection 501(h) elec	ction do not hav	e to complete all	of the five column	ns below.
	Se	e the separate ins	tructions for lin	es 2a through 2f.	)	
				_		
	Lobb	ying Expenditures D	ouring 4-Year Avera	ging Period		
	Calendar year (or fiscal year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
	beginning in)	(a) 2014	(b) 2015	(6) 2010	(4) 2017	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount	-				
a	Lobbying normaxable amount	190,936	233,993	263,748	247,460	936,137
 b	Lobbying ceiling amount				-	
_	(150% of line 2a, column (e))					1,404,206
	Total labbung expanditures					
_ c	Total lobbying expenditures					
	Crossrade portovekla avvent					
d	Grassroots nontaxable amount	47,734	58,498	65,937	61,865	234,034
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					351.051

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017 Southern Coalition for Social Justice 26-0688375

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

	(election under section 501(h)).			<u>,</u>		
For	each "Yes," response on lines 1a through 1ı below, provide ın Part IV a detailed		a)	(b)		
des	cription of the lobbying activity	Yes	No	Amount	:	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or				ļ	
	referendum, through the use of				ļ	
а	Volunteers?				ļ	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?		ļ			
d	Mailings to members, legislators, or the public?	<u> </u>				
e	Publications, or published or broadcast statements?	<u> </u>	<u> </u>			
f	Grants to other organizations for lobbying purposes?		<u> </u>	<u> </u>		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			-		
;	Total Add lines 1c through 1i	_	<del> </del> -	<del></del>		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>		<del></del>		
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1				
d			<del>                                     </del>			
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5),	or s	ection		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	L	
3				3	<u> </u>	
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (				2 ic	
	answered "Yes."	טוי אכ	, rai	t III-A, IIIIe	J, 13	
1	Dues, assessments and similar amounts from members		1	1	<del></del>	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of			1		
	political expenses for which the section 527(f) tax was paid).					
а	Current year · · · · · · · · · · · · · · · · · · ·		2a			
b	Carryover from last year		2b			
C	Total · · · · · · · · · · · · · · · · · · ·		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		<b> </b>			
_	and political expenditure next year?	• •	4	<u> </u>		
5	Taxable amount of lobbying and political expenditures (see instructions)	• •	5			
Prov	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, be instructions), and Part II-B, line 1. Also, complete this part for any additional information	lines 1	and			

### 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.

OMB No 1545-0047 **2017** 

2017

Department of the Treasury
Internal Revenue Service 
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Con	thorn Coolition for Cooled Tueties	2.C. O.C.O.O.2.7.5
	thern Coalition for Social Justice	26-0688375
Par		ounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control? $\cdots \cdots$	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be use	ed
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Par		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	cally important land area
	Protection of natural habitat Preservation of a certifie	d historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a	conservation
	easement on the last day of the tax year	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the or	ganization during the
	tax year 🕨	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserv-	ation easements during the year
	<b>&gt;</b>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
	<b>▶</b> \$	
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 conservation easements in its revenue and expense sta	atement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements	that describes the
	organization's accounting for conservation easements	
Par	Organizations Maintaining Collections 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 116 (ASC 958), not to report in its revenue statemen	t and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research i	n furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these	items
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement an	nd balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research i	n furtherance of
	public service, provide the following amounts relating to these items	
	(i) Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	<b>&gt;</b> \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial grant treasures.	ain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
_	Appete included in Form 000, Port V	<b>.</b>

	rt III Organizations Maintaining (						05 Oth	26-068		_	age 2
3									sets (CO	illilue	<del>(U)</del>
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)										
а											
b	Soholarly research		e Oth		inge progra	ams					
C	Preservation for future generations		е 📙 Отп	er							—
1		<b></b>	and avalate he	45 6	4646	!					
7	Provide a description of the organization's collection of the organization's collection of the organizatio	Cuons	and explain no	ow utey tur	trier trie or	ganizations	exempt (	purpose in Part			
5	During the year, did the organization solicit or re		damatiana af a		_1 4	41	1				
,	assets to be sold to raise funds rather than to be								П	г	٦ ٨,٥
Pa	rt IV Escrow and Custodial Arran			or the orga	anizations	Collection		· · · · · · · · ·	· ·   Y	93	No
	Complete if the organization ar			n Form	990 Par	t I\/ line 9	or rer	norted an amo	unt on Fo	ırm	
	990, Part X, line 21.		103 0		550, i di	t 1 <b>v</b> , iii 0	, 01 101	sorted arranne	on i	,,,,,	
1a	Is the organization an agent, trustee, custodian	or oth	er intermedian	for contri	hutions or	other assets	not	<del> </del>			
									🛛 Y	F	Пνο
ь	If "Yes," explain the arrangement in Part XIII and								121		
-	w voo, orprant the entengentenet the art //m and		piete tire rollon	ing table				Δ,	nount		
С	Beginning balance						10	<del>-</del>		44,6	40
d	Additions during the year						· · <u> </u>	1			43
е	Distributions during the year							+		85,1	
f	Ending balance									60,3	
2a	Did the organization include an amount on Form	990.	Part X. line 21	. for escro	w or custo	dial account			🗌 Y		
b	If "Yes," explain the arrangement in Part XIII Cr						•			_	์ 1
Pa	rt V Endowment Funds.								<del></del>		
	Complete if the organization ar	iswe	red "Yes" o	n Form !	990, Par	t IV, line 1	0				
		(a)	Current year	( <b>b</b> ) Pn	or year	(c) Two years	s back	(d) Three years back	(e) Four	vears ba	ack
1a	Beginning of year balance					(,,,		<b>(.,</b>			
b	Contributions							· · · · · · · · · · · · · · · · · · ·			
С	Net investment earnings, gains, and										
	losses			ĺ							
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the current	year	end balance (li	ne 1g, col	umn (a)) he	eld as					
а	Board designated or quasi-endowment		%								
b	Permanent endowment • %		<del></del>								
С	Temporarily restricted endowment		%								
	The percentages on lines 2a, 2b, and 2c should	equa	1100%								
3a	Are there endowment funds not in the possession	on of t	he organizatioi	n that are I	neld and a	dministered f	or the		-		
	organization by									Yes	No
	(i) unrelated organizations								· 3a(i)		
	(ii) related organizations								. 3a(ii)		
b	If "Yes" on 3a(ii), are the related organizations li				२७				. 3b		
4	Describe in Part XIII the intended uses of the or		ation's endowm	ent funds	<u></u>						
Pai	t VI Land, Buildings, and Equipm		1.052.0	_	D					40	
	Complete if the organization ar	iswe	red "Yes" o	n Form	990, Par	t IV, line 1	1a Se	e Form 990, F	art X, line	9 10	
	Description of property		(a) Cost or othe (investme			r other basis other)		Accumulated epreciation	(d) Book	value	
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment					70,440		60,380		10,0	60
_ е	Other · · · · · · · · · · · · · STMD11	3				60,000		12,000		48,0	00
Total	. Add lines 1a through 1e (Column (d) must equ	al For	m 990, Part X,	column (E	3), line 10c	)		▶		58,0	60
EEA									Schedule D (Fo	orm 990	2017

Schedule D (Fon	m 990) 2017 Southern Coalit:	ion for Social Just	tice 26-06	883 <b>7</b> 5 Page
Part VII	Investments - Other Securities.  Complete if the organization answered	d "Yes" on Form 990, F	Part IV, line 11b See Form 990	), Part X, line 12.
	(a) Description of security or category (victuding name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year market	on
(1) Financial	denvatives	· <del></del>		
	neld equity interests			
(3) Other				
(A)				- <del>-</del>
(B)				
(C)				
_(D)				
(E)		<u> </u>		
(F)				
(G)				
(H)				<u>.                                      </u>
	b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related.  Complete if the organization answered	l "Yes" on Form 990, P	Part IV, line 11c See Form 990	, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	on
(1)				
(2)		-		
_(3)				
(4)				
(5)				
(6)				
(7)		· · · · · · · · · · · · · · · · · · ·		
(8)				
(9)				
Total. (Column (b	n) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.		· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered	l "Yes" on Form 990, P	art IV, line 11d See Form 990	, Part X, line 15.
		scrption		(b) Book value
(1)				-
(2)				
(3)				
(4)				
(5)				_
(6)				
(7)				
(8)		_		
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities.			
	Complete if the organization answered line 25	l "Yes" on Form 990, P	art IV, line 11e or 11f. See For	m 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes		$\neg$	
(2)		<del></del>		
(3)		<del></del>	$\dashv$	
(4)			$\dashv$	
(5)				
(6)				

(7) (8) Total (Column (b) must equal Form 990, Part X, col (B) line 25)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII. . . . . . .

		-0688	
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Returr	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 2	Total revenue, gains, and other support per audited financial statements	1	3,383,721_
а	Net unrealized gains (losses) on investments	1	
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )	Ì	
	Add lines 2a through 2d	-	6 470
е .	Subtract line 2e from line 1	2e	6,470
3		3	3,377,251
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	i	
þ	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
<u>5</u>	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,377,251
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Ret	urn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,108,082
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses	1	
d	Other (Describe in Part XIII )		
е	Add lines 2a through 2d	2e	6,471_
3	Subtract line 2e from line 1	3	2,101,611
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 )	1	
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	2,101,611
Par	t XIII Supplemental Information.	•	
, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
_			

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

### Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

2017 Open to Public Inspection

OMB No 1545-0047

Name of the organization						Employer identification number		
Southern Coalition for Social Justice							88375	
Form 990-EZ filers are no	-	_		swered "Yes" on	Form 9	90, Part IV	, line 17.	
Indicate whether the organization rais				vities Check all that a	vlaa	<del></del>	<del></del>	
a Mail solicitations	ou rando amougi.		-	of non-government gr				
b Internet and email solicitations				of government grants				
c Phone solicitations				draising events				
d  n-person solicitations		, _						
2a Did the organization have a written or	oral agreement v	vith any indiv	vidual (includ	dına officers, directors	. trustees.			
or key employees listed in Form 990,	-	•	•	•		□ Y	es 🗍 No	
b If "Yes," list the 10 highest paid individ	duals or entities (f	undraisers) į	pursuant to	agreements under wh	ich the fun	draiser is to t	ре	
compensated at least \$5,000 by the o	organization							
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody or	draiser have r control of outlons?	(iv) Gross receipts from activity	(or re	ount paid to tained by) ser listed in	(vi) Amount paid to (or retained by) organization	
		Yes	No			ol (ı)	0,94	
1								
2		<del>  -</del> -	<u> </u>					
3		-		<u> </u>	- <u></u>	<del>_</del> _		
				L				
4								
5								
6				·				
7		<del>                                     </del>				<del></del> _		
8		<del>                                     </del>		<u> </u>				
9		<del></del>		- <del></del> -		<del></del> -		
	: 	<del></del>						
10		<u> </u>						
Total			▶					
3 List all states in which the organization				utions or has been no	tified it is e	xempt from	<u> </u>	
registration or licensing	_					•		
<del></del>								
							<u> </u>	
				<del></del>				
<del></del>								
<del></del>				<del></del>				
	<del></del>			<del></del>		<del></del>		
				<del></del>				
							<del></del>	
						·-		

Schedule G (Form 990 or 990-EZ) 2017 Southern Coalition for Social Justice 26-0688375 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through Anniversary None col (c)) (event type) (event type) (total number) Gross receipts . 44,060 44,060 Less Contributions 24,770 24,770 Gross income (line 1 minus line 2) . . . . . . . . . . . . . . . . 19,290 19,290 Cash prizes . . . Noncash prizes Rent/facility costs -3,738 3,738 Expenses Food and beverages . . . . . 24,696 24,696 Direct 8 Entertainment 600 600 Other direct expenses 29,034 Net income summary Subtract line 10 from line 3, column (d) (9,744)Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col (a) through col (c)) bingo/progressive bingo Gross revenue . . . . . . . . . 2 Cash prizes Expenses Noncash prizes Direct Rent/facility costs Other direct expenses Yes Volunteer labor Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . . . . . . . . . . . ▶ Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain

#### **SCHEDULE 0** (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.

Open to Public Inspection

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

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

Southern Coalition for Social Justice	26-0688375
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. Organizational document changes (Part VI, line 4)	
In December 2017, the Board approved revisions to the terms of direct	ctors and officers that
allowed the previously elected Chair and Vice-Chair to continue to	serve for an additional
year while the Board conducts a search for a new permanent Executive	e Director. Those
revisions are reflected in Article III, 2.c. and Article VII, 8.b.	
03. 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.	
04. 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 dis-	close any potential
conflicts as soon as it is known, or reasonably should be known.	
05. 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 comp	ensation based on years
of experience. The Executive Director's salary level is also indepe	ndently reviewed by the
Board's Executive Committee, to ensure that it does not exceed comp	arable_levels_of

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer Identification number
Southern Coalition for Social Justice	26-0688375
compensation for nonprofit directors in this region of the country.	<del></del>
·	
06. Governing documents, etc, available to public (Part VI, line 19)	
The three most recent Forms 990 (including financial information), the By	laws, Articles of
Incorporation, Form 1023 Application for Exemption, and Conflict of Interes	est Policy are
provided to the public upon request.	<del></del>
07. List of other fees for services expenses (Part IX, line 11g)	
Fees for services-other on line 11g of the Statement of Functional Expense	es includes funds
should with an entire 1 Community 1 to 1 to 1 to 1 to 1 to 1 to 1 to 1	
shared with co-counsel for program-related activities (\$121,515) and amoun	nts paid to
consultants and organizers (\$200,533), experts and researchers (\$78,495),	and financial
The state of the s	
service providers (\$3,960) to conduct various program and supporting activities	vities of the
Organization.	
<del></del>	