### Form 990

Return of Organization Exempt From Income Tax

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

OMS No. 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. 2012, and ending For the 2012 calendar year, or tax year beginning D Employer Identification Number Check if applicable: SOUTHERN CENTER FOR HUMAN RIGHTS 62-1025326 Address change 83 POPLAR STREET, N.W. E Telephone number Name change ATLANTA, GA 30303 (404) 688-1202 Initial return Terminated G Gross receipts \$ 5,129,581 Amended return H(a) Is this a group return for affiliates? Application pending F Name and address of principal officer: Yes XINO H(b) Are all affiliates included?

If 'No,' attach a list. (see instructions) SAME AS C ABOVE Yes ĺΝο 501(c) ( Tax-exempt status X 501(c)(3) (insert no.) 4947(a)(1) or WWW.SCHR.ORG H(c) Group exemption number 🏲 Website: ► L Year of Formation: 1976 M State of legal domicile: GA Form of organization; X Corporation Trust Part I Summary Briefly describe the organization's mission or most significant activities: SCHR PROVIDES LEGAL REPRESENTATION TO PEOPLE FACING THE DEATH PENALTY, CHALLENGES HUMAN RIGHTS VIOLATIONS IN PRISONS AND JAILS, SEEKS THROUGH LITIGATION AND ADVOCACY TO IMPROVE LEGAL REPRESENTATION FOR POOR PEOPLE ACCUSED OF CRIMES, AND ADVOCATES FOR CRIMINAL JUSTICE SYSTEM REFORMS.

Check this box F | If the organization discontinued its operations or disposed of more than 25% of its net assets. Governance Number of voting members of the governing body (Part VI, Ilne 1a)..... 19 19 25 Number of Independent voting members of the governing body (Part VI, line 1b)..... Total number of individuals employed in calendar year 2012 (Part V, line 2a)..... 5 Total number of volunteers (estimate if necessary)..... 6 30 7 a Total unrelated business revenue from Part VIII, column (C), line 12..... 0. b Net unrelated business taxable income from Form 990-T, line 34..... 0. **Current Year** 3,154,114. Contributions and grants (Part VIII, line 1h)..... 1,833,635 Program service revenue (Part VIII, line 2g)..... 90,756. 423,193. Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 98,110. 111,432. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ...... -20,634.-16,775. 11 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 2,005,7263,668,105. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... 14 1,488,011 1,445,584. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ...... Expenses 16 a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) > Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 614,507. 484,910. 17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 1,972,921. 2,060,091. Revenue less expenses, Subtract line 18 from line 12..... 32,805. 1,608,014. Beginning of Current Year End of Year 5,650,175. 20 Total assets (Part X, line 16) ..... 3,936,027. Total liabilities (Part X, line 26) ...... 13,908. 36,026. 21 Net assets or fund balances. Subtract line 21 from line 20...... 3,922,119. 5,614,149. Signature Block Under penalties of perjury, I declare that I have examined this/return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other true) officer) is passed on all information of which preparer has any knowledge. Signature of officer Sign Sara Here Type or print name and title. Print/Type preparer's name P00687026 self-employed SHEILA M. KOZAK, CPA Paid FULTON & KOZAK Preparer Firm's name Use Only | Firm's address - 7187 JONESBORO RD STE 100A Flm's EIN ► 20~1403280

MORROW, GA 30260-2944

Phone no.

770-961-4200

	A 990 (2012) SOUTHERN CENTER FOR HUMAN RIGHTS	12.0	- <u></u> :	ugoz
Pa	Statement of Program Service Accomplishments			ſγ
	Check if Schedule O contains a response to any question in this Part III.	*****		[23]
1	Briefly describe the organization's mission:			
	SEE SCHEDULE O			
		<del></del>		
2	Did the organization undertake any significant program services during the year which were not listed on the prior			
•	Form 990 or 990-EZ?	Yes	Х	No
	if 'Yes,' describe these new services on Schedule O.			
3		Yes	X	No
	If 'Yes.' describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants at others, the total expenses, and revenue, if any, for each program service reported.	ed by ex	(pense	es.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a	na alloc	auons	to
	others, the total expenses, and revenue, if any, for each program service reported.			
	(Code: ) (Eyponees \$ 588 782 including grapts of \$ ) (Revenue \$			
4 a	a (Code:) (Expenses \$ 588,782. including grants of \$) (Revenue \$			
	SEE SCHEDULE O	. – – –		
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	w			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
	(Code: ) (Expenses \$ 533,830, including grants of \$) (Revenue \$	42	3,19	3 )
4 b	(Code: ) (Expenses \$ 533,830, including grants of \$) (Revenue \$		<u> </u>	
	CIVIL LITIGATION (IMPACT LITIGATION UNIT)			
	THE THE TARE	רייית.	CAT!	<u>รัก</u> มี
	SEE THE ATTACHED LIST FOR DETAIL OF SCHR'S IMPACT LITIGATION UNIT'S ACTIVE		IGGAL.	
	FOR 2012. EACH OF THE CASES BENEFIT NOT ONLY THE PLAINTIFFS IN EACH CASE		14.G -	λm —
	PEOPLE, BY SEEKING TO ESTABLISH PRECEDENT THAT PROTECTS THE CONSTITUTIONAL	T/TG:	7777	
	ISSUE IN EACH CASE.			
			<u>-</u>	
				~
4 c	: (Code:) (Expenses \$ 430,569. including grants of \$) (Revenue \$			)
	SEE SCHEDULE O			
	X77			
	M			<b>-</b>
	중 다 구요 단체를 요 본 스틱의 등 자들 다 들 다 했는 때 문의 또 하게 되는 나 나 는 나 나 는 나 나 를 받는 다 다 나 나 나 나 나 나 나 나 나 나 나 나 나 나 나 나 나			
	College Calabrida (Calabrida (Cal			
4 d	1 Other program services, (Describe in Schedule O.)  (Expenses \$ including grants of \$ . ) (Revenue \$		· }	
	(CAPOLISCO Y		<u> </u>	
	e Total program service expenses ► 1,553,181.	Form	990 (	2012)
BAA	LETALINE ANIMALIE			•

200			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X.	}
2	Cabadula D. Cabadula D. Cabadula at Castributare (con instructions)?	2	. X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbyling activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b	Х	
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 0		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	<u>x</u>	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	.	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		$\frac{x}{x}$
14	a Did the organization maintain an office, employees, or agents outside of the United States?	148		
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		_X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to Individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	bif 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Cara	n 990 (2012) SOUTHERN CENTER FOR HUMAN RIGHTS 62-102532	26 _	F	age
rorn Mass	Checklist of Required Schedules (continued)			
	Checklist of Required Schodalos (continuos)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	_	X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		x
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was Issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization invest any proceeds of tax oxompt bonds believed the company partial process of tax oxompt bonds of the company partial process of tax oxompt bonds of the company tax exempt bonds?	24c		
	any tax-exempt bonds?	24d		
	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
}	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 L	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	to the second of the second state of the secon	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			Ų.
í	a 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		Х
•	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or Indirect owner? If 'Yes,' complete Schedule L, Part IV	28c	V	Х
29		29	X	ļ <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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301,7701-2 and 301,7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV,	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ. <u> </u>	X
ļ	b If 'Yes' to line 35a, dld the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	to the second se	37		X
38	to Color talk O and arguide evaluations in Schedule O for Part VI, lines 11b and 19?	38	X	0015
BA		Forn	990 (	(2012)

art	Statements Regarding Other IRS Filings and Tax Compliance			П
	Check if Schedule O contains a response to any question in this Part V		Yes	s No
		10		
1 a	Enter the number reported in Box 3 of Form 1095. Enter -0- if not applicable	0		
b i	Enter the number of Forms W-2G included in the Ta. Cites to it not approached the first and in the contract of			
	Did the organization comply with backup withholding rules for reportable payments to vendors and re (gambling) winnings to prize winners?	portable garring	1 c	X
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	25	2 Ы Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns to the control of the control o	) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		
!	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see Instruction	13)	3 a l	X
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 b	+
þ	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O			+-
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4 a	X
b	If 'Yes,' enter the name of the foreign country:  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.		
	See instructions for filling requirements for Form 1D F 30-22.1, Report of Foreign burning the tax year?.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.		5 a	X
5 a	Was the organization a party to a prohibble tax shelter transaction at any time tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a party to a party to a party to a party tax shelter transaction at a party tax shelter transaction at a party tax shelter tax shel	action?	5 b	X
b	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c	
C	If 'Yes,' to line 5a or 5b, did the organization me form seed 7.	ne organization		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to solicit any contributions that were not tax deductible as charitable contributions?	one or gifts were	6 a	<u> </u>
	If 'Yes,' did the organization include with every solicitation an express statement that such contribution of tax deductible?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	d 6	
7	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 services provided to the payor?		7a X 7b X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	an version to file	/ D ^	`——
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for writer it was 8282?	vas teddited to life	7 c	X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	contract?	7 e	X
	but the experience receive any funds, directly or indirectly, to pay premiums on a personal benefit	tract2	7 f	- X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con-		<del>'</del>	+
	If the organization received a contribution of qualified intellectual property, did the organization file F as required?	} <del>-</del>	7 g	
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, airplanes	T	7 h	
8	Sponsoring organizations maintaining donor advised funds and section 50%(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, have excholdings at any time during the year?	Izations. Did the	8	
Λ	Change-ling organizations maintaining donor advised lunds.	ports		
	Did the assembled and the environment of the state of the		9 a 9 b	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		<i>0</i> D	
10	Section 501(cV7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Fait 4111, 1110 12, 101 paper do st state			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members of stid enoughs			
	Gross Income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	1041?	2a	
12 a	Section 4947(a)(1) non - exempt charitable trusts, is the organization filing Form 990 in lieu of Form			
b	of Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance Issuers.		3a	MARKAT TOTAL PROPERTY.
a	a is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			
C	Enter the amount of reserves on hand	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4a	X
14 a	a Did the organization receive any payments for indoor tarming services during the tax year.  If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedu.	le 0,	14b	
b BAA	TECADAGE 0000010	F	orm 99	0 (2012)

Form 990 (2012)

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI..... Section A. Governing Body and Management No Yes 19 1 a Enter the number of voting members of the governing body at the end of the tax year......

If there are material differences in voting rights among members
of the governing body, or if the governing body delegated broad 1 a authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent ... 19 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee?... Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.... 3 Х Did the organization make any significant changes to its governing documents X 4 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Х X 6 Did the organization have members or stockholders?..... 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X 7 a members of the governing body?..... b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?..... 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a a The governing body?..... 8 b Х b Each committee with authority to act on behalf of the governing body?..... Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes?..... X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts?..... X 12 ( X 13 Did the organization have a written whistleblower policy?..... X 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? X a The organization's CEO, Executive Director, or top management official ... SEE. SCHEDULE. .0....... 15 a X b Other officers of key employees of the organization..... If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See Instructions.) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16 a taxable entity during the year?..... b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 b organization's exempt status with respect to such arrangements?..... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > DC FL GA IL MA MD NC NY VA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection, indicate how you make these available. Check all that apply. X Upon request Other (explain in Schedule O) X Another's website Own website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to SEE SCHEDULE O the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JULIA ROBINSON-HICKS 83 POPLAR STREET, NW ATLANTA GA 30303 404-688-1202

TEEA0106L 08/08/12

Form 990 (2012) SOUTHERN CENTER	FOR H	UMAN	R	IGH	ITS				62-1025	326 P	age 7
Part VII Compensation of Officers, Independent Contractors	Directo	rs, Tr	ust	ees	, K	y Er	npl	oyees, Highest Co	mpensated Emplo	yees, and	
Check if Schedule O contains a	) roenanco	to any	e con re	estia	n in	this F	art	VII		**!*!*****	. []
Check II Schedule O contains a	stees k	(ev F	mr	lov	ree:	s. an	ďΗ	lighest Compens	ated Employees		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the											
avanization's tay year											
<ul> <li>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.</li> </ul>											
• List all of the organization's current ke	v emplov	ees. if	anv	. Se	e in:	structi	ions	for definition of 'key e	employee.		
List the organization's five current high who received reportable compensation (Box organization and any related organizations.											
List all of the organization's former off reportable compensation from the organization.	icers, key ation and	emplo any re	yee late	s, ar	nd h gan	Ighes izatio	t cor 15.	mpensated employees	s who received more	han \$100,000	
List all of the organization's former dir organization, more than \$10,000 of reportab	ectors or le comper	t <b>ruste</b> Isation	es th	nat r	ecei e or	ved, i ganiz	n the ation	e capacity as a forme and any related orga	r director or trustee of anizations.	∵t∩e	
ist persons in the following order: individual is individual in the following order: individual is individual in the following order: individual is individual in the following order: individual indi	•										
Check this box if neither the organization	nor any r	elatec	org	aniz	atio	n con	pen	sated any current offi	cer, director, or truste	e.	
				(C	•)			Į į			
(A)	(B)	Positio	n (de x. un	not o	ineck ersor	more t	han han	(D) Reportable	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated	
Name and Title	Average hours per week (list	offic	er an	d a di	recto	ស្រីសមាវិស 	e)	compensation from		amount of other compensation	
	any hours for related organiza	Individual trustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MiSC)	(W-2/1099-MISC)	from the organization and related	
	tions	iual ictor	55		흥	t cor	74			organizations	
•	dotted line)	สาร	ਭੂ		8	apci					
		8	stee		ļ	sate					
(1) CHARLES OGLETREE JR.	1						_				
CHAIRMAN		X		x				0.	<u>0</u> .		0.
(2) WILLIAM HOFFMAN, JR.	1				_						
SECRETARY	0	Х		Х				0.	0.		0.
(3) GREGORY CAMP	1								_		
T&FINAN CHR	0	X						0.	0.	· · · · · · · · · · · · · · · · · · ·	0.
(4) BETSY BIBEN-SELIGMAN	1				İ				0.1		0.
TRUSTEE/DIR.	0	X						0.	<u> </u>		<u> </u>
(5) GARY PARKER	1	ļ i						١	ا م	•	n

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TRUSTEE/DIR.

TRUSTEE/DIR.

(7) ANDREW L. LIPPS

TRUSTEE/DIR. (8) BRYAN STEPHENSON

TRUSTEE/DIR. (9) ANGELA JORDAN DAVIS

TRUSTEE/DIR.

TRUSTEE/DIR.

TRUSTEE/DIR.

(13) MARY BRODERICK

TRUSTEE/DIR.

TRUSTEE/DIR.

(14) STEPHEN F. HANLON

(12) KATHARINE HUFFMAN

DEVELOPMENT CHR

(11) VIRGINIA E. SLOAN

(10) EDWARD T. M. GARLAND

(6) DAVID LIPMAN

Part VII Section A. Officers, Directors, Trusto	ees, Ke	y E≀	npl	oye	es,	and	<u>H</u>	ighest Comper	isated Employe	es (cont)
	(B) (C)									
(A)	Ауегаде	Average (do not check more than one			оле	(D)	(E)	(F)		
Name and title	hours	box, unless person is both an		Reportable compensation from	Reportable compensation from	Estimated amount of other				
•		Q 5	7	Q	\$	Highest compensated employee	ਹਾ	the organization (W-2/1099-MISC)	related organizations (Y-2/1099-MISC)	compensation from the
	week (list any hours for related organiza - tions below dotted line)	F 5	S.	Officer	Key employee	S 2	١Ē	(		and related
	related organiza	춵호	l S	*	핥	8 8	**			organizations
	- tions below	, Š	풀		yee	륗				
	dotted line)	8	S.			R		]		
•		] :	۱۳			8	1			
(15) ALEXANDER RUNDLET	1_1_						<u> </u>			
TRUSTEE/DIR.	0	X						0.	0.	0.
(16) MICHAEL CAPLAN	1						$\Box$			
TRUSTEE/DIR.	7-0-	X			İ			0.	0.	0.
(17) MAUREEN F. DEL DUCA	1									
TRUSTEE/DIR.	7-7-	X						0.	0.	0.
(18) C. ALLEN GARRET, JR.	1				ļ		Γ-			
TRUSTEE/DIR.	7-0	X						0.	0.	0.
(19) LAUREN SUDEALL LUCAS	1									
TRUSTEE/DIR.	7 - 0 -	X						0.	0.	0.
(20) SUSAN TEN KWAN	1									
TRUSTEE/DIR.	7 0	X			·			0.	0.	0.
(21) STEPHEN B. BRIGHT	24								1	
PRES/SR LGL CO	7 70			X		<u> </u>		25,000.	0.	1,000.
(22) SARA TOTONCHI	40				Γ				_	
DIRECTOR SCHR	0				X			60,000.	0.	2,400.
(23)	1									
						_	<u> </u>			
(24)										
	<u> </u>			<u> </u>		<u> </u>	<u> </u>			
(25)	<b> </b>	İ			Ì		ļ			
	-l	<u> </u>	$ldsymbol{f L} egin{array}{c} eta \end{array}$	<u> </u>	l	<u> </u>	<u> </u>	85,000.	0.	3,400.
1 b Sub-total				• • • •	• • • •		<b>.</b>	03,000.	0.	0.
c Total from continuation sheets to Part VII, Section							<b>&gt;</b>	85,000.	0.	3,400.
d Total (add lines 1b and 1c)	of to the	an fin	tod	200		who	roci	elved more than \$		le compensation
2 Total number of individuals (including but not limite	ad to wo	S <b>e</b> 115	ieu	auc	(67	WITO	160	SIVE A MOTO BIGHT &	1001000 0. 1000	
from the organization > 0										Yes No
									d amatawaa	
3 Old the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	r of trust individua	ee, k	ey e	emp	iloye	e, or	เนเรี	guest combensare	merubioλee	. З Х
						ملمسم		r sampaneation fo	om	
4 For any individual listed on tine 1a, is the sum of retune organization and related organizations greater	HIGH I DE.	<b></b>	v: /	7 7	co t		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Conference and	OIII	
such individual						• • • •	• • • •	* * * * * * * * * * * * * * * * * * * *	*************	. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compens	ation	ı fro	m a	iny t	ınrel	atec	d organization or in	ndividual	. 5 X
for services rendered to the organization? If 'Yes,'	complet	e Sc.	ned	ule .	J for	SUC	ηpe	erson	4	·
Section B. Independent Contractors  1 Complete this table for your five highest compensations.	ted inde	nend	lent	con	trac	fors	hat	received more th	an \$100,000 of	
compensation from the organization. Report compensation	ensation	for t	he c	aler	ndar	year	r en	ding with or within	the organization's	tax year.
(A) Name and business addre								(B)	) {	(C) Compensation
								Description d		
BIOPURE CONSULTING GROUP 4470 CHAMBLEE DUNW	OODY R	<u> </u>	ITE	50	13 A	<u>Alt.</u>	ATN	CONTRUCTION C	ONTRACT	180,967.
				_						
								<u> </u>		
						<del></del>		<u> </u>	J a Ata a	
2 Total number of independent contractors (including	j but not	limit	ed t	to th	ose	liste	d at	pove) who receive	d tuote mist)	
\$100,000 in compensation from the organization										Form 990 (2012)
		TEFA	าากผ	711	run/13					

	Check if Schedule O contains a respons	e to any question	on in this Part VIII	***********		
	Officer B depletation of software a respect		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
£ε	1 a Federated campaigns 1 a					
ON SPA	b Membership dues 1b					
7 S S	c Fundraising events	300,911.				
	d Related organizations 1 d					
옹종	e Government grants (contributions) 1 e					
CONTRIBUTIONS, GIFTS, GRANT, AND OTHER SIMILAR AMOUNTS		2,853,203.				
중봉	g Noncash contributions included in ins 1a-if: \$	505,800.	A = F + 114			
- 1	h Total, Add lines 1a-1f	Business Code	3,154,114.			
E		5031(1433-0044	423,193.	423,193.		
PROGRAM SERVICE REVENUE	2a ATTORNEY FEE INCOME		120,1001	and page 1		
	C					
SE	d					
3	e					
8	f All other program service revenue					
쭚	g Total, Add lines 2a-2f		423,193.			
	3 Investment income (including dividends, inf	terest and	120 655			130,655.
	other similar amounts)4 Income from investment of tax-exempt bon		130,655.			130,033.
	5 Royalties					
	(i) Real	(ii) Personal		-		
	6a Gross rents	<del></del>				
	b Less: rental expenses					
	c Rental income or (loss)	^, <b></b> ,,				
	d Net rental income or (loss)					
ļ	7 a Gross amount from sales of   (i) Securities	(ii) Other				
	assets other than inventory . 1,369,912.	126.				
	b Less; cost or other basis					
]	and sales expenses 1,383,945.	5,316.				
	c Gain or (loss)14,033.	-5,190.	10.000			10 222
	d Net gain or (loss)		-19,223 <u>.</u>			-19,223 <u>.</u>
OTHER REVENUE	8 a Gross Income from fundraising events (not including. \$ 300,911. of contributions reported on line 1c).					
E	See Part IV, line 18 a	48,800.				
픺	b Less: direct expenses	72,215.				
ಕ	c Net Income or (loss) from fundraising even	ts.,	-23,415.			
	9 a Gross income from gaming activities. See Part IV, line 19a					
ĺ	b Less; direct expenses b					
	c Net Income or (loss) from garning activities				<u> </u>	
	10 a Gross sales of Inventory, less returns and allowances a					
	b Less; cost of goods sold b					
į	c Net income or (loss) from sales of inventor					
		Business Code	0.704		·	2,781.
	11a OTHER INCOME	<del></del>	2,781.			4,101.
	b	· · · · · · · · · · · · · · · · · · ·				
	d All other revenue,	······				
	e Total, Add lines 11a-11d	<b>.</b>	2,781.			
	12 Total revenue. See instructions		3,668,105,	423,193.	0.	114,213.
BAA			10109L 12/17/12			Form 990 (2012)

Part X Statement of Functional Expenses

BAA

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX ..... (C) Management and general expenses (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service expenses expenses. Grants and other assistance to governments and organizations in the United States. See Part IV, line 21. Grants and other assistance to individuals in the United States, See Part IV, line 22..... Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16... Benefits paid to or for members...... Compensation of current officers, directors, trustees, and key employees..... 12,480 12.480 88,400 63,440. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... £ 0 160,200. 93,199. Other salaries and wages..... 712,065 965,464 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)..... 6,840. 3,826. 29,033. 39,699 199,718. 46,519. 27,366. Other employee benefits..... 273,603. 13,331. 7,842. 78,418. 57,245. 11 Fees for services (non-employees): b Legal..... 13,695 13,695 c Accounting..... d Lobbying.... e Professional fundraising services. See Part IV, line 17 . . . f Investment management fees..... g Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 1 ig expenses on Sch 0)...... Advertising and promotion ..... 14.088 8.201 63,685 85,974 13 Office expenses ..... 14 Information technology..... Royalties 4,7042,767. 27,671 20,200 Occupancy..... 6,670 1,420 836. 8,926 Payments of travel or entertainment expenses for any federal, state, or local public officials..... 19 Conferences, conventions, and meetings.... 20 Interest ..... 756 7,810 35,373 22 Depreciation, depletion, and amortization.... 45,939 2.999 9,014 Insurance...... 12,013 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, (Ist line 24e expenses on Schedule O.)..... 271,422 a LITIGATION EXPENSES 271,422 31,756. b DEVELOPMENT 31,756. 3,779. 2,223. c COMPUTER CONSULTING 22,225 16,223 d STAFF DEVELOPMENT 21,817 21,180. 637. 4,022. 73,069 47,913. 21,134. e All other expenses..... 309,636 197,274. 25 Total functional expenses. Add lines 1 through 24e.... 2,060,091 1,553,181 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)..... Form 990 (2012)

TEEA0110L 12/18/12

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Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X..... (A) Beginning of year (B) End of year 99,649. 54,047 Cash - non-interest-bearing..... 133,832 2 176,435. Savings and temporary cash investments..... 3 494,200. Pledges and grants receivable, net ..... 3 4 237,126. 184,628 Accounts receivable, net..... Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L..... 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 organizations (see instructions). Complete Part II of Schedule L . . . . . 6 7 Notes and loans receivable, net ..... 8 Inventories for sale or use..... 9 10,447 2.509 Prepaid expenses and deferred charges..... 10 a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D...... 10 a 1,189,995 10 c 715,630. 492,230 b Less; accumulated depreciation..... 10 b 474,365. 11 Investments - publicly traded securities..... 12 3,916,688. Investments - other securities. See Part IV, Ilne 11..... 3,068,781 13 Investments - program-related, See Part IV, line 11..... 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 15 16 Total assets. Add lines 1 through 15 (must equal line 34)...... 3,936,027 5,650,175 16 17 13,908 36,026 Accounts payable and accrued expenses ..... 17 18 Grants payable..... 18 19 Deferred revenue..... 19 20 Tax-exempt bond liabilities..... 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.

Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties ..... 24 Unsecured notes and loans payable to unrelated third parties..... Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D... 25 13,908 36,026 26 Total liabilities. Add lines 17 through 25 ..... Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 4,087,977. 3,517,830 27 Unrestricted net assets ..... 404,289 28 1,526,172. Temporarily restricted net assets..... 29 Permanently restricted net assets..... Organizations that do not follow SFAS 117 (ASC 958), check here 🟲 R and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds..... 31 Paid-in or capital surplus, or land, building, or equipment fund..... 32 Retained earnings, endowment, accumulated income, or other funds ...... 33 5,614,149. 3,922,119. Total net assets or fund balances..... 33 3,936,027. 34 5,650,175, Total liabilities and net assets/fund balances..... 34 Form 990 (2012)

For	m 990 (2012) SOUTHERN CENTER FOR HUMAN RIGHTS	<u>52-1025326</u>	F	⊃age 12
Pa	rt XIII Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			<u>···                                   </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>3,668,</u>	<u>.105.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,060,	
3	Revenue less expenses. Subtract line 2 from line 1	3	1,608,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,922,	119.
5	Net unrealized gains (losses) on investments	5	84,	016.
6	Donated services and use of facilities	6		
7	Investment expenses	. 7		
8	Prior period adjustments			<u></u>
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	5,614,	149.
Pa	rt XIII Financial Statements and Reporting			
******	Check if Schedule O contains a response to any question in this Part XII			🗖
	Officer if deflocate o contains a respector to any question in the rest.		Yes	
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 Schedule O.			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	wed on a		
	Separate basis Consolidated basis Both consolidated and separate basis			
1	b Were the organization's financial statements audited by an independent accountant?		2b X	
	If 'Yes,' check a box below to Indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:    X   Separate basis	rate		
	of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the	f the audit,		
	review, or compilation of its financial statements and selection of an independent accountants	,,,,,,,,,,,,	2c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	0:1		
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?		3 a	X
I	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 b	
200	······································		Form 990	(2012)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No. 1545-0047

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2012

Department of the Treasury Internal Revenue Service

Total

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Employer Identification number Name of the organization 62-1025326 SOUTHERN CENTER FOR HUMAN RIGHTS Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(bX1)(A)(i). A school described in section 170(bX1XAXii), (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(bX1XAXIII). Enter the hospital's 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1XAXIv). (Complete Part II.) 5 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(bX1XAXvi). (Complete Part II.) 6 7 A community trust described in section 170(bX1XAXvi). (Complete Part II.) 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 urrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). 8 9 (Complete Part III.) 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 carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. 10 Type III - Non-functionally integrated c Type III - Functionally integrated Type l By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?..... 11 g (i) A family member of a person described in (i) above?..... 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organization(s). h (vi) is the organization in column (i) organized in the U.S.? (vii) Amount of manetary (iv) is the organization in clumn () listed in your poversion (v) Did you notify the organization in column (i) of your (ii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (I) EIN (I) Name of supported organization support supporti your governing document? No Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	Of Garazation to desire						
Sec	ion A. Public Support	_ <del></del> _		<del></del> -			//\ Total
seair	ndar year (or fiscal year nning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received, (Oo not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						<u> </u>
	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						···-
	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)						
	Public support. Subtract line 5 from line 4						
	tion B. Total Support	<del></del>		<u> </u>	40.0011	(2) 2012	(f) Total
begi	ndar year (or fiscal year nning in) >	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(I) I Otal
7	Amounts from line 4			<u> </u>	<u> </u>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		,				····
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	vities, etc (see ins	tructions)	.,,		F014-200	
	First five years. If the Form 990 organization, check this box and	1 3(op 11010 111111					▶
Sec	ction C. Computation of P Public support percentage for 2	ublic Support	Percentage	11 (5)		14	%
						15	%
15	Public support percentage from Public support percentage from	2011 Schedule A	, martii, iine 14.		10. 8. 34. 77	1/3% or more ob	ack this boy
16	a 33-1/3% support test — 2012. If and stop here. The organization	the organization of qualifies as a pul	did not check the blicly supported o	box on line 13, ar organization	na the line (41833	- 1/3/0 OF MOTE, COL	ook this hav
	b 33-1/3% support test — 2011. If and stop here. The organization	( ) Quantition	• • •	-			
	a 10%-facts-and-circumstances t or more, and if the organization the organization meets the 'fact	ID CHILL THE THE					
	b 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	est 2011. If the an meets the 'facts- nd-circumstances'	organization did r and-circumstance test. The organiz	not check a box or es' test, check this zation qualifies as	n line 13, 16a, 16b box and stop her a publicly support or 17h, check thi	, or 17a, and line 1 e.Explain in Part I' ed organization s box and see instr	5 IS IU% V how the uctions
18	organization meets the 'facts-are Private foundation. If the organ	nization did not che	eck a box on line	13, 108, 100, 178	, 0, 175, 616 617 611	chedule A (Form 95	
RΛ					S	chequie A (Form 9:	7U UI 33U+E.Z.) 2U 12

Schedule A (Form 990 or 990-EZ) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

to qualify under the tests l	sted below, pleasi	e complete Fait ii	·/		·····	
Section A. Public Support				4-B-0011	(e) 2012	(f) Total
Calendar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(8) 2012	(1) (3(4)
Gifts, grants, contributions     and membership fees     received. (Do not include     any 'unusual grants.')	1,615,689.	1,493,026.	2,180,133.	1,833,635.	3,154,114.	10,276,597.
<ul> <li>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</li></ul>	333,914.	240,229.	214,083.	90,756.	423,193.	1,302,175.
that are not an unrelated trade or business under section 513.						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge			2 224 616	1,924,391.	3,577,307.	0.
<ul> <li>6 Total. Add lines 1 through 5</li> <li>7 a Amounts included on lines 1, 2, and 3 received from</li> </ul>	1,949,603.	1,733,255.	2,394,216.		0.	0,
b Amounts included on lines 2 and 3 received from other than discussible persons that	0.	0.	0.	,		
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	<u> </u>			
8 Public support (Subtract line 7c from line 6.)					<u> </u>	11,578,772.
Section B. Total Support			T (2) 0010	(d) 2011	<b>(e)</b> 2012	(f) Total
Calendar year (or fiscal yr beginning in) 🗠	(a) 2008	<b>(b)</b> 2009	(c) 2010		3,577,307.	
9 Amounts from line 6	1,949,603.	1,733,255.	2,394,216.	1,944,391.	3,311,0011	22/0/0//
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	108,484.	77,654.	74,246	85,283.	130,655.	476,322.
acquired after June 30, 19/5				85,283.	130,655.	476,322.
c Add tines 10a and 10b	108,484.	77,654.	74,246.	03,203.	130,000	1,0,0221
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12 Other income. Do not include gain or loss from the sale of capital assets Explain in Ty			911			
13 Total support, (Add Ins 9, 10c, 11, and 12,	[2,058,087]	11,810,909	2,469,3/3	14, UII, UZ9	a section 501(c)(3	)
14 First five years. If the Form 990 organization, check this box an	is for the organized stop here	ation's first, secon	nd, third, fourth, o	r murtax year as.	u 3000011 001 (0)(0	<u>′</u>
O I O O O O O O O O O O	いんりゃ くいれんかけ	Percentage				96.01 %
15 Public support percentage for 2	012 (line 8. colum	n (f) divided by lir	ne 13, column (t))		16	95.46 %
16 Public support percentage from	2011 Schedule A	, Part III, line 15.				33,10
C. Han D. Commutation of It	wastment Inco	ome Percenta	ae			3.95 %
17 Investment Income percentage	for 2012 (line 10c)	, column (f) divide	ed by line 13, colu	RUU (1))	18	
	August 2011 Cabadi	Ja A Dari III line	• • • • • • • • • • • • • • • • • • • •		,	7100
18 Investment income percentage 19 a 33-1/3% support tests - 2012. is not more than 33-1/3%, chec b 33-1/3% support tests - 2011.	A till box and see	, p 110, 00 the 21 gam	Bar 14 av 1	ing 10a and line 1	6 is more than 33	-1/3%, and
line 18 is not more than 33-173	%, check this box	and stop here. The	ne organization qu 14, 19a, or 19b.	check this box and	l see instructions.	▶ ∐
	IIZAUOT UIG TIOCUI		BL 08/09/12		Schedule A (Form	990 or 990-EZ) 2012
BAA		1EEA0403	A COLOSITA		•	

Sahadula A	(Form 990 or 990 EZ) 2012	SOUTHERN C	ENTER FOR	HUMAN RIGHTS	62-1025326	Page 4
Part IV	Supplemental Information. Part II, line 17a or 17b; (See instructions).	Complete thi and Part III, I	s part to pro ne 12. Alsc	vide the explanation complete this par	s required by Part II, line 10; it for any additional information.	
					, .,, .,	
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					يت ويت هند هند وين ويت مند فيه فيه فيه من ويت من هند ويت ويت من مند مند مند ويت	
			<del>-</del> -			
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			· 			
					Schedule A (Form 990 or 990	0·EZ) 2012

2012

# SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

SOUTHERN	CENTER	FOR	HUMAN	RIGHTS
SOUTHERM	CENTER	1.017	LIOINAIN	111011110

62-1025326

PART III.	LINE 12 -	OTHER	INCOME
-----------	-----------	-------	--------

NATURE AND SOURC	<u>E</u>	2012	2011	2010	2009	2008
OTHER INCOME	TOTAL \$	2,781. 2,781.	\$ 1,355. \$ 1,355.	\$ 911. \$ 911.	<u>\$</u> 0.	\$ 0.

#### Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2012

Name of the organization		Employer identification number
SOUTHERN CENTER FOR HUMAN	J RIGHTS	62-1025326
Organization type (check one):	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Filers of:	Section:	·
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organizat	tion
	4947(a)(1) nonexempt charitable trust no	•
		•
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tre	eated as a private foundation
	501(c)(3) taxable private foundation	•
	501(c)(3) taxable bitivate toditidation	
Check if your organization is covered by	the General Rule or a Special Rule	
· · · · · · · · · · · · · · · · · · ·	organization can check boxes for both the General	Rule and a Special Rule. See instructions.
Note. Only a section 501(c)(7), (8), or (10	ny organization can check boxes for both the deheral	Traile and a openies trains one incomments
General Rule		000
For an organization filling Form 990, Scontributor, (Complete Parts I and II.)	990-EZ, or 990-PF that received, during the year, \$5,	000 or more (in money or property) from any one
contributor, (complete t and t and m	,	•
Special Rules	•	
	This Come 000 or 000 E7 that mat the 22 1/2% curps	art tast of the regulations under sections
509(a)(1) and 170(b)(1)(A)(vi) and rec (2) 2% of the amount on (i) Form 990	iling Form 990 or 990-EZ that met the 33·1/3% suppo ceived from any one contributor, during the year, a c o, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Compl	ontribution of the greater of (1) \$5,000 or lete Parts I and II.
For a section 501(c)(7), (8), or (10) or	rganization filing Form 990 or 990 EZ that received fr to for use <i>exclusively</i> for religious, charitable, scientil	om any one contributor, during the year,
total contributions of more than \$1,00 the prevention of cruelty to children of	or for use <i>exclusively</i> for religious, charitable, scientil or animals. Complete Parts I, II, and III.	iic, iiterary, or educational purposes, or
[ [ For a postion 501/a)/7) /9) or /10) or	rappization filing Form 900 or 900-F7 that received fr	om any one contributor, during the year,
purpose. Do not complete any of the	total contributions that were received during the year parts unless the General Rule applies to this organiz	ation because it received nonexclusively
religious, charitable, etc, contribution	s of \$5,000 or more during the year	
Outline As assessment that is not assessed by the O	teneral Rule and/or the Special Rules does not file Schedule B (Form	m 990, 990.F7 or 990.PF) but it must
answer 'No' on Part IV. line 2. of its horm 990; or	r check the box on line H of its horm 990-62 or on Part I, line a	2, of its Form 990-PF, to certify that it does not
meet the filing requirements of Schedule	B (Form 990, 990-EZ, or 990-PF).	
BAA For Paperwork Reduction Act Notic or 990-PF.	ce, see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)		Employe	r idealistication number
Name of org			62-1	025326
	ERN CENTER FOR HUMAN RIGHTS			
Part	Contributors (see instructions), Use duplicate copies of Part I if additional space i	is needed.	<u> </u>	
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
1		\$	125,000.	Person X Payroll Noncash Complete Part II If there is a roncash contribution.)
(a) Number			(c) Total contributions	(d) Type of contribution
2		\$	390,000.	Person X  Payroll   Noncash   (Complete Part II if there is a noncash contribution.)
(a) Number			(c) Total contributions	(d) Type of contribution
3		\$	350,000.	Person X  Payroll   Noncash   (Complete Part II If there is a noncash contribution.)
(a) Number			(c) Total contributions	(d) Type of contribution
4		\$	127,096.	Person X  Payroll  Noncash  (Complete Part II If there is a noncash contribution.)
(a) Number			(c) Total contributions	(d) Type of contribution
5		\$	200,000.	Person X  Payroll   Noncash   (Complete Part II if there is a noncash contribution.)
(a) Number	· ·		(c) Total contributions	(d) Type of contribution
6				Person X Payroll Noncash X  (Complete Part II if there is a noncash contribution.)
	!			a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Page

1 to

of Part II

î,

Employer Identification number

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

a) No. from Part i	loncash Property (see Instructions). Use duplicate copies of Part II if ad  (b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
62	0,000 SHARES OF GUIDEWIRE SOFTWARE INC		
		\$ 505,800.	8/10/12
a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		ş	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received
		ş	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	

: Cabadula 🎛 (	Form 990, 990-EZ, or 990-PF) (2012)	_	Page 1 to 1 of Part III
Name of amaniza	affor		Employer identification number 62-1025326
Part III E	CENTER FOR HUMAN RIGHTS Exclusively religious, charitable, etc, organizations that total more than for organizations completing Part III, enter to contributions of \$1,000 or less for the year. (to lise duplicate copies of Part III if additional s	individual contributions to se \$1,000 for the year. Complete of otal of exclusively religious, charitab Enter this information once. See insepace is needed.	ection 501(c)(7), (8) or (10) clumns (a) through (e) and the following line entry. le, etc, tructions.)
(a) No. from Part I	(b) Purpose of glift	(c) Use of gift	(d) Description of how gift is held
	N/A		
-	Transferee's name, addres:	(e) Transfer of gift s, and ZIP +4	Relationship of transferor to transferee
(a)	(b)	(c) Use of gift	(d) Description of how gift is held
(a) No. from Part I	Purpošé of glft	use or girt	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP +4	Relationship of transferor to transferee
		(c)	(d) Description of how gift is held
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of now girt is neid
	Transforee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
ВАА		TEEA0704L 11/30/12	Schedule B (Form 990, 990-EZ, or 990-PF) (201

#### 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 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only.

Section 527 organizations, complete transfer and the confer next time 47 (Lobbying Activities), then									
	* Section 527 organizations: Complete Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5758 (election under section 501(h)): Complete Part II-A. Do not complete								
● <u>S</u> e	Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.  Part II-A.  The organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then								
If the c	organization answered 'Yes,'	to Form 990, Part IV, line 5 (Proxy Tax) or F	orm 990-EZ, Part V, II	He 224 (F10X) Taxy, We	11				
• Se	ction 501(c)(4), (5), or (6) org	ganizations: Complete Part III.		Employer identifica					
Name of	organization			62-102532					
SOUT	THERN CENTER FOR HI	JMAN RIGHTS	na ( )	on F27 organization	<u> </u>				
0.0	Complete if the ord	ianization is exempt under section 3	out (c) or is a secu	Off DZ7 Organization	I.				
**********	الم مملة عمر بيدالله بالبيار المسالم المسالم	zaonization's direct and indirect political cal	mbalon activities in m	લારાજ.					
2 (	Political expenditures			4 * 1 * 1 * 1 * 4 * 1 * 1 * 1 * 1 * 1 *					
2 1	Volunteer hours		,,,,,,,,, <u>,,,,,,,,,,,,</u>						
Part	B Complete if the or	ganization is exempt under secti	on 501(c)(3).						
**********	the state of any Augir	to tax incurred by the organization under so	ection 4955	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.				
	Catar the emeliat of any eyes	SE 18X INCOMED DY OLGARIZATION MARIAGOS ~	1100. 01-11	-					
•	is the averagization incurred a	section 4955 tax, did it file Form 4720 for the	nis year?	*********	[1] Les [1]				
3	it the organization incurred a				Yes No				
4 a '	Was a correction made?			•					
b	If 'Yes,' describe in Part IV.	i i i i i i i i i i i i i i i i i i i	on E01/c) eyeer	t section 501(c)(3)					
Part	IsC   Complete if the or	rganization is exempt under secti	EOT exempt & metion	activities S					
1	Enter the amount directly exp	ended by the filing organization for section	327 exempt function	Q041100011111111					
		organization's funds contributed to other o	zaanizations for sectio	on 527 exempt					
	lina 176	litures. Add lines 1 and 2, Enter here and c		⊁\$					
		and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t			.,,   165   1110				
5	Enter the names, addresses organization made payments amount of political contributions aggregated fund or a political	and employer identification number (EIN) of . For each organization listed, enter the armons received that were promptly and directly action committee (PAC). If additional space	f all section 527 point ount paid from the fil y delivered to a separ se is needed, provide	cal organizations to whi ing organization's funds ate political organization information in Part IV.	Also enter the , such as a separate				
	(a) Name	(b) Address	(c) EiN	(d) Amount pald from filing organization's funds, It none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0				
(1)									
(2)									
(3)				<u> </u>					
(4)									
(5)									
(6)			<u>.</u>						

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012	SOUTHERN CE	NTER FOR HUMAN R	IGHTS	62-1025	326 Page 2
Part II-A Complete if the section 5010	he organization h)).	is exempt under secti	on 501(c)(3) and file		<del></del>
A Check ► if the filin	g organization belo	ngs to an affiliated group (	and list in Part IV each	affiliated group member's	name,
address.	EIN, expenses, and	d share of excess lobbying	expenditures).		
B Check ► If the filin	g organization chec	ked box A and 'limited cor	trol' provisions apply.		
	'expenditures' mea	ring Expenditures ins amounts paid or incum		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	res to influence pub	olic opinion (grass roots lot	bying)		<del></del>
h Total lobbying expenditu	res to influence a le	egistative body (direct lobb)	ying)		
c Total lobbying expenditu	res (add lines 1a ar	nd 1b)			
a Other exempt purpose e	xpenditures				
a Total exempt purpose e)	oenditures (add lin	es 1c and 1d)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
f i obbyjgg nogtavable am	ount. Enter the ame	ount from the following tab	le în		
If the amount on line 1e, colu		The lobbying nontaxable	amount is:		
Not over \$500,000	Interest (a) 47 (a) (a)	20% of the amount on line 1e.			
Over \$500,000 but not over \$1,6	000,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$1	,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
n Grassroots nontaxable a	mount (enter 25% o	of line 1f)		<u> </u>	
h Subtract line to from fin-	e 1a. If zero or less	, enter -0			
I Subtract line If from line	e 1c. If zero or less,	enter -0			
	11	har line ther line ti did th	e organization file Forn	n 4720 reporting	Yes No
	no organizations th	4-Year Averaging Period lat made a section 501(h) ens below. See the instructi	Under Section 501(h) lection do not have to d	complete all of the five	
		ying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2009	(ъ) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying celling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				Schedule C (Form	990 or 990-EZ) 2012
UMM		•			

Page 3

Schedule C (Form 990 or 990-EZ) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS

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

(election and social social)	(a	)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
SEE PART IV  During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		Χ	
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		-x	
c Media advertisements?		X	
d Mallings to members, legislators, or the public?		X	<del></del>
e Publications, or published or broadcast statements?		$\frac{\Lambda}{X}$	
f Grants to other organizations for lobbying purposes?	X		19,600.
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х	13,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	}	X	
Other activities?			19,600.
Total, Add lines 1c through 1t	3333333	X	
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c if 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		*******	
Partill A Complete if the organization is exempt under section 501(c)(4), section 50	)1(c)(5	). or	
section 501(c)(6).			
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?		.,,,,	
a. Did the examination make only in-house tobbying expenditures of \$2,000 or less?			····   4_
2. Did the argentization agree to carry over lobbying and political expenditures from the prior year?			3
Part III B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b answered 'Yes.'	) Part	), or III-A,	section bullion
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		2 a	
a Current year.		2 b	
b Carryover from last year		2 c	
c Total		3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polices the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polices.	s tical	4	
expenditure next year?  5 Taxable amount of lobbying and political expenditures (see Instructions)		5	
Examplemental Information			
Supplemental anomation	art II-A (	affiliat	ed group list);
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
PART II-B - DESCRIPTION OF LOBBYING ACTIVITY		<del></del>	
THE CENTER EMPLOYS TWO PAID STAFF MEMBERS, THE EXECUTIVE DIRECTO			
ASSOCIATE, WHO SPEND 20% OF THEIR TIME WORKING TO AFFECT STATE I			
METHODS USED INCLUDE FREQUENT UPDATES TO COALITION PARTNERS DETA			
LEGISLATION ORGANIZING A LOBBY DAY IN CONJUNCTION WITH GFADP AT			
MEMBERS TO TALK WITH THEIR LEGISLATORS AND DIRECTLY CONTACTING I	EGISI	LATO	RS REGARDING m 990 or 990 EZ) 2012
DBA			

Schedule C (Form 990 or 990-EZ) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS	62-1025326	Page 4
Part IV Supplemental Information (continued)		
PART II-B - DESCRIPTION OF LOBBYING ACTIVITY (CONTINUED)		<b>__</b>
PERTINENT LEGISLATION.		
wing and wing and wing and an extreme and wing and wind an angular and wing and an and wind an and wing and an and any and an and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analysis of the wind and wind an analys	<b></b>	
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RAA	Schedule C (Form 990 or 99	0-EZ) 2012

#### SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public Inspection Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

30	UTHERN CENTER FOR HUMAN RIGHTS			62-1025326
	Organizations Maintaining Donor Advis	sed Funds or Other Sin	ilar Funds or Ac	
1885	the organization answered 'Yes' to	Form 990, Part IV, Iir	1е б.	·
		(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year			
2	A			
3	A commendation of the second columbia and the second		1	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a are the organization's property, subject to the organization's property.	dvisors in writing that the a	assets held in dono	or advised funds
6	Did the organization inform all grantees, donors, a	nd donor advisors in writing he donor or donor advisor.	g that grant funds or for any other pa	can be used only urpose conferring
	Impermissible private benefit?		anamarad Vac	
P	Conservation Easements. Complet	e if the organization a	answered res	to Form 990, Fait IV, line 7.
1	Purpose(s) of conservation easements held by the		at appry).	an historically important land area
	Preservation of land for public use (e.g., recre	ation or education)		a certified historic structure
	Protection of natural habitat	l	Frescivation of	a continua materia and della
_	Preservation of open space	- 1 - 1 1145 1	- contribution in the	form of a concentation easement on the
2	Complete lines 2a through 2d if the organization he last day of the tax year.	a qualified conservation	1 COLIGIDATION IN THE	5 JOHN OF A CONSCIPACION COSCINCTION THE
	,			Held at the End of the Tax Year
;	Total number of conservation easements	, ,		. 2a
	Total acreage restricted by conservation easement			
	: Number of conservation easements on a certified h	nistoric structure included i	n (a)	. 2c
	Number of conservation easements included in (c)	acquired after 8/17/06, an	d not on a historic	
	structure listed in the National Register		,	,   <u> </u>
. <b>3</b>	Number of conservation easements modified, transtax year ►	sferred, released, extinguis	shed, or terminated	l by the organization during the
4	Number of states where property subject to conser	vation easement is located	<b>1</b> ►	
5	Does the organization have a written policy regard and enforcement of the conservation easements it	ing the periodic monitoring holds?	, inspection, handl	ing of violations, Yes No
6	Staff and volunteer hours devoted to monitoring, in	ispecting, and enforcing co	onservation easeme	ents during the year
. 7	Amount of expenses incurred in monitoring, inspec	ting, and enforcing conser	vation easements	during the year
	<b>►</b> \$			150.6.3743.003.03
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?			[1 tes [] 110
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the conservation easements.			
Pai	Organizations Maintaining Collection Complete if the organization answer	s of Art, Historical Tre red 'Yes' to Form 990	asures, or Othe ), Part IV, line	er Similar Assets. 8.
1:	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets hele in Part XIII, the text of the footnote to its financial	AS 116 (ASC 958), not to re	eport in its revenue	e statement and balance sheet works of
	in Part XIII, the text of the footnote to its financial	statements that describes t	these items.	stament and belongs shout works of set
ļ	If the organization elected, as permitted under SF/ historical treasures, or other similar assets held for following amounts relating to these items:			
	(i) Revenues included in Form 990, Part VIII, line	1	· · · · · · · · · · · · · · · · · · ·	
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, hi amounts required to be reported under SFAS 116	(ASC 338) relating to these	s ligitio:	
	Revenues included in Form 990, Part VIII, line 1			PS
	Assets included in Form 990, Part X			.,,,,,,,,,,,,, <b>~</b> \$

	CHAINER DAY HITLIAN DT	~ むがで	62-102	33Zb	Page Z
Schedule D (Form 990) 2012 SOUTHERN Part III Organizations Maintaining Co	CENTER FUR HUMAN RIC	Treasures, or Oth	er Similar Assets (	continued)	
3 Using the organization's acquisition, acce	order and albert search shoot	k any of the following th	nat are a significant use	of its collect	tion
items (check all that apply):		exchange programs	100 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to 10 to		
a Public exhibition	e Other	= :			
b Scholarly research c Preservation for future generations	• 🗆 • • • • • • • • • • • • • • • • • •				
4 Provide a description of the organization	's collections and explain how t	hey further the organiza	ation's exempt purpose	in	
Part XIII.  During the year, did the organization soli to be sold to raise funds rather than to b	cit or receive donations of art, i	nistorical treasures, or o	other similar assets	Yes	No_
Ecorow and Custodia Arrangement	nts. Comolete it the organization	on answered 'Yes' to F	orm 990, Part IV, line	9, or	
reported an amount on Forr	n 990, Part X, line 21.			<del></del> -	
1 a Is the organization an agent, trustee, cus on Form 990, Part X?	tadian or other intermediary fo	or contributions or other	assets not included [	Yes	No
b If 'Yes,' explain the arrangement in Part	XIII and complete the following	table:		<del></del>	
				Amount	
c Beginning balance	*************		· 1c		
# Additions during the year	****************		·   (u		
<ul> <li>Distributions during the year</li> </ul>		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·   -   -   -   -   -   -   -   -   -		
f Ending balance		********		Yes	No
2a Did the organization include an amount of bif 'Yes,' explain the arrangement in Part	on Form 990, Part X, line 217	n has been provided ir	Part XIII		H
					<u></u>
Part V Endowment Funds. Complete	e if the organization answ	(c) Two years	(d) Three years	(e) Four ye	ears
(a)	Current (b) Prior year	(6) 140 years	(1) 1100 / 1100	<del> </del>	
1 a Beginning of year balance				<u> </u>	
<b>b</b> Contributions				-	<del></del>
c Net investment earnings, gains, and losses				-	
d Grants or scholarships				<del></del>	
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance		Lu seluma (a)) held as		<del></del> _	
2 Provide the estimated percentage of the	current year end balance (IIIIe	ig, column (a)) neid ac	<b>,</b>		
a Board designated or quasi-endowment	<b>▶</b> %				
b Permanent endowment >	<del></del> *				
c Temporarily restricted endowment					
The percentages in lines 2a, 2b, and 2c	Silouid educit toosas	Land and adminis	ctored for the		
3a Are there endowment funds not in the porganization by:	ossession of the organization tr	nat are neld and admini	stered for the	. 3a(i)	No
organization by: (i) unrelated organizations	*********************				
(i) related organizations	transfer and an analysis of an Cah	odule 92		. 3b	
b If 'Yes' to 3a(ii), are the related organiza	ations listed as required on 500	edule Mariana		L	
4 Describe in Part XIII the intended uses	of the organization's endowned	art X line 10.			
Part VI Land, Buildings, and Equi	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book	value
Description of property	(investment)	basis (other)	depreciation	<del></del>	3,335.
1a Land		73,335.	226 962		9,274.
<b>b</b> Buildings	,,,,,,	946,136.	326,862.		J/ 613.
c Leasehold Improvements		150 045	134,495.	1	8,750.
d Equipment	,,	153,245. 17,279.	13,008.		4,271.
e Other	Com 000 Day V as	11,613.			5,630.
Total. Add lines 1a through 1e. (Column (d) n	nust equal Form 990, Part X, co	numas (D), and ro(o).)	Sched	dule D (Form	
BAA	•			•	

ACCUPATED A CENTED F	OR HIMAN RIGHTS	62-102532	6 Page <b>3</b>
Schedule D (Form 990) 2012 SOUTHERN CENTER F	rm 990 Part X line	12	
Part VII Investments - Other Securities, See Fo	(b) Book value	(c) Method of valuation: Cost end-of-year market value	or
(a) Description of security or category (Including name of security)	(n) Dook value	end-of-year market value	<u> </u>
(1) Financial derivatives			
(1) Financial derivatives			
(2) Closely-held equity interests	825,311.	END OF YEAR MARKET VALUE	
(3) Other LORD ABBETT INVESTMENT A		END OF YEAR MARKET VALUE	
(A) ALLIANCEBERNSTEIN/REGEN (INVEST)			
(B) AGGRESSIVE GROWTH	2,635,029.	END OF YEAR MARKET VALUE	
(C)			
(D)			
<u>/F\</u>			
(E)			
(F)			
(G)	· <del>  </del>		
(H)	· <del></del>		
<u>()</u>	2 016 609		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	3,916,688.	line 13. N/A	
Part VIII Investments - Program Related. Sec	e Form 990, Part A	(c) Method of valuation: Cost	or
(a) Description of investment type	(b) Book value	end-of-year market value	. 01
	<u></u>		
(1)	<u> </u>		
(2)			
(3)			
(4)			
(5) .			
(6)		`	
(7)	<del></del>		<del></del>
(8)			- <del>-</del>
(9)	<del></del>		
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	73./7		
One Earn 000 Part Y	, line 15. N/I	1	b) Book value
Partix Uther Assets, See Point 930, Part A			
Parl IX Other Assets. See Form 990, Part X (a) D	escription		B) DOOK FAILED
(a) U	escription	·	S) DOOR FAILE
(1)	escription	V	S) DOON FAILE
(1) (2)	escription		Sypoon value
(1) (2) (3)	escription		J DOOR MILE
(1) (2) (3) (4)	escription		J DOOR WILL
(1) (2) (3) (4) (5)	escription		J DOOR WILL
(1) (2) (3) (4) (5) (6)	escription		J GOOR WILL
(1) (2) (3) (4) (5) (6) (7)	escription		J DOOR WILL
(a) D (1) (2) (3) (4) (5) (6) (7) (8)	escription		J JOON WILL
(1) (2) (3) (4) (5) (6) (7)	escription		J JOON WILL
(1) (2) (3) (4) (5) (6) (7) (8) (9)	escription		J JOON WILL
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, column (b)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, column (b)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) and the column (b) Part X. Other Liabilities, See Form 990, Part X	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, column (Part X) (a) Description of liability	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) att X Other Liabilities, See Form 990, Part X (a) Description of liability (1) Federal income taxes	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) att X Other Liabilities, See Form 990, Part X, column (a) Description of liability (1) Federal income taxes (2)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) att X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) (3)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) at X and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y an	(B), line 15.)		
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) at X and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y and Y an	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) att X  (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) att X  Other Liabilities, See Form 990, Part X, column (a) Description of liability  (1) Federal income taxes (2) (3) (4) (5) (6) (7)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Description of Hability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	(B), line 15.)		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (part) (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	(B), line 15.)		
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B) East X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	(B), line 15.)	I statements that reports the organization's liability for unc	certain tax positions
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (part) (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	(B), line 15.)	I statements that reports the organization's liability for uno	

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62-1025326

Schedule D (Form 990) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS		62-1025326	5 Page 4
Paganciliation of Revenue per Audited Financial Statements	With Revenue per F	Return	
Total revenue, gains, and other support per audited financial statements		1	4,106,072.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2a 84,	016.	
b Donated services and use of facilities			
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.) SEE. PART. XIII.		951.	
d Other (Describe in Part XIII.)Dud. X.A.DA.Z.Z.	24 0007		437,967.
e Add lines 2a through 2d		3	3,668,105.
3 Subtract line 2e from line 1			3,000,103.
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	4 a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	0.660.105
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			3,668,105.
Part XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per	r Return	
1 Total expenses and losses per audited financial statements		1	2,414,042.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII.) SEE. PART .XIII	2d 353,	951.	
e Add lines 2a through 2d		2 e	353,951.
3 Subtract line 2e from line 1		3	2,060,091.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b.		4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		5	2,060,091.
Part XIII Supplemental Information			
THE Supplemental information	t III lines 1a and 4: Pa	ert IV. lines 1b and 2	2b: Part V.
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par IIne 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also comp	plete this part to provide	any additional info	rmation.
illio 4, Fart X, illio 2, Cart XI, illios 24 and 15, 212 and 15, 212	•		
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Mar and and and and and and and and and and			
BAA		Schedule D (	Form 990) 2012
NOD			

2012

# SCHEDULE D, PART XIII - SUPPLEMENTAL INFORMATION PAGE 5

SOUTHERN	CENTER	FOR HUMAN	RIGHTS
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62-1025326

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

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

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

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization						Employer Identifica	
SOUTHERN CENTER FOR HUMAN	RIGHTS					62-102532	6
Part Fundraising Activities. Complete Form 990-EZ filers are not required.	ete if the orgar uired to compl	nization an lete this pa	swered 'Y art.	es' to Form 990, Part N	√, line 17	<u>.                                    </u>	
1 Indicate whether the organization ra	ised funds thr	ough any	of the follo	wing activities. Check a	ខ្សា ៤ ខេ ខេង្	opiy.	
a Mail solicitations			e				
b Internet and email solicitations			f	Solicitation of gove	rnment (	grants	
c Phone solicitations			g	Special fundraising	j events		
` <del>   </del>			•	L			
d In-person solicitations		مطائب المما	ny indisêd	ial Analydina officers of	tirectors.	trustees or key	· — —
2a Did the organization have a written employees listed in Form 990, Part	or orai agreen VII) or entity ii	nent with a n connecti	on with pro	ofessional fundraising s	ervices?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes X No
b if 'Yes,' list the ten highest paid indi compensated at least \$5,000 by the	ividuals or enti organization.	ities (fundi	alsers) pu	rsuant to agreements u	ınder whi	ch the <b>f</b> undrais	er is to be
(i) Name and address of individual	(II) Activity		fundraiser	(iv) Gross receipts	(v) An	nount paid to etained by)	(vi) Amount paid to
or entity (fundraiser)	(II) (II)		dy or control ibutions?	from activity	i fundra	etained by) hiser listed in plumn (i)	(or retained by) organization
		Yes	No				
1							
2	······································						
3					- <del>-</del> -		
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Total					<u> </u>	nead the access	0.
3 List all states in which the organizat or licensing.	ion is registere	ed or licen	sed to soli	cit contributions or has	been no	tisea it is exem	pt from registration
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** ** ** ** ** ** ** ** ** ** ** ** **							
			<del> </del>				

b If 'Yes,' explain:

Sche	edule <b>G</b> (Form 990 or 990-EZ) 2012 SOUTHERN CENTER FOR HUMAN RIGHTS 62-1025.  Does the organization operate gaming activities with nonmembers?	326 Page 3 Yes No
11	Does the organization operate gaming activities with nonlinearises	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity operated in:	
9	a The organization's facility	<del></del>
1-	h An outside facility	8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name >	
	Address >	
15 a	a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	Yes No
b	b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ and the amount	
	of gaming revenue retained by the third party > \$	
c	c If 'Yes,' enter name and address of the third party:	
	Name >	<del>-</del>
	Address >	
16	Gaming manager information:	•
	Name ▶	
	Gaming manager compensation ► \$	
	Description of services provided	
	Director/officer Employee Independent contractor	٠
17	Mandatory distributions	
а	a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the	Yes No
b	state gaming license?	
	and the sum around patieties during the tay year > \$	
Par	Supplemental Information. Complete this part to provide the explanations required by Pa columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. A this part to provide any additional information (see instructions).	lso complete
ВАА	TEEA3703L 01/07/13 Schedule G (Form 9	990 or 990-EZ) 2012

#### SCHEDULE M (Form 990)

### **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOUTHERN CENTER FOR HUMAN RIGHTS

Employer Identification number 62~1025326

Par	Types of Property		· · · · · · · · · · · · · · · · · · ·		
		(a) Check if applicable	(b)  Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
4	Art – Works of art				
	Art - Historical treasures				
	Art - Fractional interests				
	Books and publications				
_	Clothing and household goods				
5	Cars and other vehicles				
6	Boats and planes				
7	Intellectual property				·
8	Securities Publicly traded,	X	1	505,800.	FMV
9	Securities - Closely held stock				
10	Securities - Partnership, LLC, or trust interests.	<del></del>			•
11	Securities - Miscellaneous				
12					
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
14	Real estate - Residential				
15	Real estate - Commercial	<del></del>			
16	Real estate - Other	<del></del>			
17	Collectibles				
18	Food inventory				
19	Drugs and medical supplies				
20	Taxidermy			<del> </del>	
21	Historical artifacts	<del>-</del>			
22				· · · · · · · · · · · · · · · · · · ·	
23	Scientific specimens	<del></del>		<del> </del>	
24					
25	Other ()	<del></del>			
26	Other (				
27	Other (		- <del></del>	<del> </del>	
			e toy year for contribution	ons for which the	
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	an uuring tii Acknowled	daement	******	29
30a	During the year, did the organization receive by control for at least three years from the date of the inpurposes for the entire holding period?	ontribution a	iny property reported in	Part I, lines 1-28 that it required to be used for	
h	If IVor I decarbo the arrangement in Part II.			•	
31	Does the organization have a gift acceptance police	y that requ	ires the review of any n	on-standard contribution	ns? 31 X
	Does the accomination hire or use third parties or t	elated orga	nizations to solicit, proc	cess, or sell	}
シエロ	noncash contributions?	. , , , , , , , , , , , , , , , , , , ,		*********	32a X
ì	If 'Ves' describe in Part II.				
33	If the organization did not report an amount in col	umn (c) for	a type of property for w	thich column (a) is chec	кеа,
	describe in Part II.		_		

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TEEA4602L 12/10/12

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

# Supplemental Information to Form 990 or 990-EZ

0MB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ

Employer identification number Name of the organization 62-1025326 SOUTHERN CENTER FOR HUMAN RIGHTS FORM 990, PART III, LINE 1 - ORGANIZATION MISSION THE SOUTHERN CENTER FOR HUMAN RIGHTS PROVIDES LEGAL REPRESENTATION TO PEOPLE FACING THE DEATH PENALTY, CHALLENGES HUMAN RIGHTS VIOLATIONS IN PRISONS AND JAILS, SEEKS THROUGH LITIGATION AND ADVOCACY TO IMPROVE LEGAL REPRESENTATION FOR POOR PEOPLE ACCUSED OF CRIMES, AND ADVOCATES FOR CRIMINAL JUSTICE SYSTEM REFORMS ON BEHALF OF THOSE AFFECTED BY THE SYSTEM IN THE SOUTHERN UNITED STATES. THE CENTER REPRESENTS INDIVIDUALS FACING THE DEATH PENALTY AT ALL STAGES OF LITIGATION, CONSULTS WITH LAWYERS THROUGHOUT THE COUNTRY ON CAPITAL CASES, AND WORKS WITH OTHER ORGANIZATIONS AND INDIVIDUALS IN EFFORTS TO END THE USE OF THE DEATH PENALTY; BRINGS IMPACT LITIGATION TO CHALLENGE UNCONSTITUTIONAL CONDITIONS AND PRACTICES IN PRISONS AND JAILS AND INADEQUATE SYSTEMS FOR PROVIDING LEGAL REPRESENTATION FOR POOR PEOPLE ACCUSED OF CRIMES; PUBLISHES REPORTS AND ARTICLES ON THESE AND OTHER ISSUES INCLUDING JUDICIAL INDEPENDENCE AND THE NEED FOR MORE HUMANE AND CONSTRUCTIVE RESPONSES TO CRIME; AND ADVOCATES FOR POSITIVE NEGATIVE) CRIMINAL JUSTICE POLICIES AND LEGISLATION FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS CAPITAL LITIGATION THE CAPITAL LITIGATION UNIT (CLU) OF THE SOUTHERN CENTER FOR HUMAN RIGHTS REPRESENTS PERSONS FACING THE DEATH PENALTY AT ALL STAGES OF THE LEGAL PROCESS IN GEORGIA AND ALABAMA. SCHR IS INVOLVED IN A SUBSTANTIAL NUMBER OF ALABAMA DEATH PENALTY CASES BECAUSE ALABAMA IS THE ONLY DEATH-PENALTY STATE IN THE NATION THAT DOES NOT PROVIDE REPRESENTATION TO INDIGENT DEATH-SENTENCED INMATES IN STATE POST-CONVICTION IN ADDITION TO PROVIDING REPRESENTATION TO PERSONS FACING THE DEATH PROCEEDINGS. PENALTY WHO ARE IN DESPERATE NEED OF ASSISTANCE, SCHR ALSO SEEKS TO ADDRESS THROUGH

Schedule 0 (Form 990 or 990-EZ) 2012 Name of the organization	Employer identification number
SOUTHERN CENTER FOR HUMAN RIGHTS	62-1025326
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 9	90 TO THE BOARD FINANCE &
INVESTMENTS COMMITTEE FOR REVIEW AND APPROVAL PRIOR TO	FILING.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND EM	NFORCEMENT OF CONFLICTS
THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS DISCU	SSED ANNUALLY AT BOARD
MEETINGS.	
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL	PROCESS - CEO, TOP MANAGEMENT
WHILE APPROVING THE ANNUAL BUDGET EACH YEAR, THE BOARD	OF DIRECTORS ALSO REVIEWS THE
COMPENSATION LEVEL AND BENEFITS OFFERED TO EMPLOYEES. T	HIS GENERALLY HAPPENS AT THE
OCTOBER BOARD MEETING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PU	BLICLY AVAILABLE
THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 9	90 SPECIFICALLY FOR PUBLIC
INSPECTION. THIS COPY IS AVAILABLE UPON REQUEST. THE	ORGANIZATION ALSO POSTS A
COPY OF FORM 990 ON THE GUIDESTAR WEBSITE AND PROVIDES	A LINK TO IT ON THE SCHR
WEBSITE.	
	~ ~ ~ ~ ~
PAA	Schedule <b>0</b> (Form 990 or 990-EZ) 2012

BAA

ATTACHMENT TO FEDERAL FORM 990 SOUTHERN CENTER FOR HUMAN RIGHTS EIN: 62-1025326

PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS, LINE 4a,

PUBLIC INTEREST LAW - LITIGATION RESULTS CAPITAL LITIGATION UNIT

#### CAPITAL LITIGATION

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

NICHOLAS ACKLIN (ALABAMA):

SCHR HAS REPRESENTED ALABAMA DEATH ROW INMATE NICHOLAS ACKLIN SINCE 2002. SCHR VOLUNTEERED TO REPRESENT ACKLIN BECAUSE HE IS INDIGENT AND UNABLE TO AFFORD COUNSEL, AND ALABAMA DOES NOT PROVIDE COUNSEL TO INDIGENT DEATH ROW INMATES FOR POST-CONVICTION PROCEEDINGS. IN JUNE 2002, SCHR FILED A PETITION FOR STATE POST-CONVICTION HABEAS CORPUS RELIEF IN MADISON COUNTY CIRCUIT COURT IN HUNTSVILLE, ALABAMA, WHICH REMAINS PENDING BEFORE THE COURT. THE CENTRAL ISSUES IN ACKLIN-S CASE CONCERN INEFFECTIVE ASSISTANCE OF COUNSEL AT TRIAL. THE COURT SCHEDULED AN EVIDENTIARY HEARING IN THE CASE IN THE FALL OF 2009, BUT IT WAS POSTPONED AFTER THE JUDGE TO WHOM THE CASE WAS ASSIGNED EXCUSED HIMSELF FROM THE CASE AND REQUESTED THAT THE CASE BE REASSIGNED TO ANOTHER JUDGE. THE COURT HAS YET TO RESCHEDULE THE EVIDENTIARY HEARING.

RICKY ADKINS (ALABAMA):

SCHR HAS REPRESENTED ALABAMA DEATH ROW INMATE RICKY ADKINS IN APPEALS OF HIS CAPITAL CONVICTION AND DEATH SENTENCE SINCE 1992. SCHR HAS CONTENDED IN ADKINS= APPEALS THAT THE PROSECUTION INTENTIONALLY EXERCISED PEREMPTORY CHALLENGES TO PREVENT AFRICAN- AMERICAN PROSPECTIVE JURORS FROM SERVING ON THE JURY; THAT ADKINS RECEIVED INEFFECTIVE ASSISTANCE OF COUNSEL AT THE PENALTY PHASE BECAUSE HIS TRIAL LAWYERS FAILED TO INVESTIGATE OR PRESENT COMPELLING MITIGATING EVIDENCE; AND THAT ADKINS= RIGHT TO A FAIR AND IMPARTIAL TRIAL WAS COMPROMISED BECAUSE THE JUDGE WHO PRESIDED AT TRIAL WAS ASSIGNED TO HEAR THE CASE THE DAY BEFORE TRIAL BEGAN AND TWO WEEKS BEFORE A CONTESTED JUDICIAL ELECTION IN WHICH THE JUDGE WAS RUNNING FOR ELECTION TO THE SAME COURT IN WHICH ADKINS= TRIAL WAS CONDUCTED.

JAMES ANDREWS (GEORGIA):

SCHR IS REPRESENTING GEORGIA DEATH ROW PRISONER JAMES ANDREWS IN A MOTION FOR NEW TRIAL AND WILL CONTINUE TO REPRESENT HIM ON DIRECT APPEAL OF HIS CONVICTION AND SENTENCE. IN THE PAST YEAR, SCHR HAS SOUGHT TO RESOLVE THE CASE WITH THE DISTRICT ATTORNEY'S OFFICE THROUGH A NEGOTIATED SETTLEMENT IN WHICH ANDREWS' DEATH SENTENCE WOULD BE VACATED AND A SENTENCE OF LIFE IMPRISONMENT WOULD BE IMPOSED IN ITS PLACE.

BOBBY BAKER (ALABAMA):

AT THE REQUEST OF OUR COLLEAGUES AT THE EQUAL JUSTICE INITIATIVE IN MONTGOMERY, SCHR AGREED TO REPRESENT ALABAMA DEATH ROW INMATE BOBBY BAKER AFTER HIS COURT-APPOINTED APPELLATE ATTORNEY FILED A 17-PAGE DIRECT APPEAL BRIEF IN THE COURT OF CRIMINAL APPEALS. IN JANUARY 2012, SCHR AND ATTORNEYS FROM THE DC OFFICE OF COVINGTON & BURLING FILED A STATE HABEAS CORPUS PETITION, WHICH REMAINS PENDING BEFORE THE ALABAMA STATE COURTS AT THIS TIME.

ROBERT COOK (GEORGIA)

SCHR IS WORKING WITH ATTORNEYS FROM THE GEORGIA CAPITAL DEFENDER TO DEFEND ROBERT COOK AGAINST CAPITAL MURDER CHARGES IN PENDING TRIAL PROCEEDINGS IN FULTON COUNTY SUPERIOR COURT. PRETRIAL PROCEEDINGS AND EFFORTS TO RESOLVE THE CASE BY PLEA ARE ONGOING. IF EFFORTS TO RESOLVE THE CASE BY PLEA AGREEMENT ARE UNSUCCESSFUL, THE CASE WILL EVENTUALLY GO TO TRIAL BUT A TRIAL DATE IS UNLIKELY TO BE SET UNTIL SOMETIME IN 2014.

DAVID DAVIS (ALABAMA):

SCHR REPRESENTS ALABAMA DEATH ROW INMATE DAVID DAVIS IN STATE POST-CONVICTION PROCEEDINGS. IN DAVIS=S CASE, SCHR HAS ALLEGED THAT HIS LAWYERS AT TRIAL FAILED TO PROVIDE CONSTITUTIONALLY REQUIRED EFFECTIVE ASSISTANCE OF COUNSEL BY FAILING TO CONDUCT AN ADEQUATE INVESTIGATION INTO HIS CASE AND ALLOWING HIM TO PLEAD GUILTY WITHOUT PROPERLY ADVISING HIM OF DEFENSES THAT WERE AVAILABLE TO HIM IF HE WERE TO GO TO TRIAL. THE ST. CLAIR COUNTY CIRCUIT COURT SUMMARILY DENIED DAVIS'S HABEAS PETITION IN NOVEMBER 2012, AND SCHR

IS NOW APPEALING THAT RULING TO THE ALABAMA COURT OF CRIMINAL APPEALS. ORAL ARGUMENT ON DAVIS' APPEAL WAS CONDUCTED ON DECEMBER 4, 2012, AND WE ARE NOW AWAITING A DECISION FROM THE COURT OF APPEALS.

DIONNE EATMON, WESTLEY HARRIS, ULYSSES SNEED, ANTONIO JONES, OSCAR DOSTER (ALABAMA):

IN EARLY 2009, SCHR BEGAN TRAINING, ASSISTING, AND CONSULTING WITH SEVERAL TEAMS OF ATTORNEYS ASSOCIATED WITH THE LAW FIRM OF REED SMITH LLP, WHO AGREED TO PROVIDE PRO BONO REPRESENTATION TO THREE ALABAMA DEATH ROW INMATES B DIONNE EATMON, WESTLEY HARRIS, AND ULYSSES SNEED B WHO WERE UNREPRESENTED BY COUNSEL IN DESPERATE NEED OF LEGAL REPRESENTATION. EACH CASE WAS ON THE VERGE OF THE EXPIRATION OF THE DEADLINE FOR FILING A STATE POST-CONVICTION PETITION FOR WRIT OF HABEAS CORPUS WHEN SCHR AND REED SMITH JOINED FORCES TO PROVIDE REPRESENTATION TO THESE PRISONERS. HABEAS PETITIONS ARE NOW PENDING IN ALABAMA CIRCUIT COURT IN EACH CASE.

IN LATE 2012, SCHR RESPONDED TO REQUESTS FOR ASSISTANCE IN TWO OTHER ALABAMA STATE HABEAS CASES INVOLVING DEATH ROW INMATES ANTONIO JONES AND OSCAR DOSTER. IN ANTONIO JONES' CASE, SCHR WAS CONTACTED BY AN ATTORNEY IN SOLO PRACTICE IN RURAL ALABAMA WHO HAD NO PRIOR EXPERIENCE IN CAPITAL CASES AND HAD ONLY GRADUATED FROM LAW SCHOOL FOUR YEARS EARLIER. THE ATTORNEY REQUESTED EMERGENCY ASSISTANCE IN CONDUCTING AN EVIDENTIARY HEARING IN THE CASE THAT WAS SCHEDULED FOR TWO WEEKS LATER. SCHR ASSISTED THE ATTORNEY IN OBTAINING A SIX-MONTH CONTINUANCE OF THE EVIDENTIARY HEARING, AND THEN RECRUITED ANOTHER TEAM OF REED SMITH ATTORNEYS TO ENTER APPEARANCES IN JONES' CASE.

IN OSCAR DOSTER'S CASE, SCHR RESPONDED TO A SIMILAR REQUEST FOR EMERGENCY ASSISTANCE FROM AN ATTORNEY IN SOLO PRACTICE WHO HAD BEEN APPOINTED BY THE LOCAL COURT TO REPRESENT DOSTER. DOSTER WAS SENTENCED TO DEATH BY THE TRIAL JUDGE NOT WITHSTANDING THE FACT THAT THE JURY HAD UNANIMOUSLY RECOMMENDED THAT HE BE SENTENCED TO LIFE IMPRISONMENT. SCHR IS NOW CONSULTING WITH ANOTHER TEAM OF ATTORNEYS FROM REED SMITH WHO HAVE AGREED TO REPRESENT DOSTER IN POST-CONVICTION PROCEEDINGS.

CLAYTON ELLINGTON (GEORGIA):

SCHR HAS ASSISTED ATTORNEYS FROM THE GEORGIA CAPITAL DEFENDER AND THE DC OFFICE OF JENNER & BLOCK ON DIRECT APPEAL BRIEFING IN THE CASE OF GEORGIA DEATH ROW INMATE CLAYTON ELLINGTON TO THE GEORGIA SUPREME COURT. ELLINGTON'S OPENING BRIEF ON APPEAL WAS FILED IN THE GEORGIA SUPREME COURT ON APRIL 27, 2012, AND ORAL ARGUMENT WAS CONDUCTED ON JULY 9, 2012. ON NOVEMBER 19, 2012, THE GEORGIA SUPREME

COURT REVERSED ELLINGTON'S DEATH SENTENCE AND REMANDED FOR RESENTENCING BECAUSE THE TRIAL COURT HAD IMPROPERLY RESTRICTED VOIR DIRE QUESTIONING OF PROSPECTIVE JURORS.

#### TIM FOSTER (GEORGIA):

SCHR IS REPRESENTING GEORGIA DEATH ROW INMATE TIM FOSTER IN PENDING STATE POST-CONVICTION PROCEEDINGS. AN EVIDENTIARY HEARING WAS CONDUCTED IN THE CASE IN OCTOBER 2006. SCHR FILED POST-HEARING BRIEFING IN FOSTER'S CASE IN 2010, AND THE CASE REMAINS PENDING BEFORE THE SUPERIOR COURT FOR A RULING AT THIS TIME.

#### LASAMUEL GAMBLE (ALABAMA):

ON OCTOBER 11, 2012, FORMER ALABAMA DEATH ROW PRISONER LASAMUEL GAMBLE WAS SENTENCED TO LIFE IMPRISONMENT WITHOUT PAROLE, BRINGING TO A CLOSE SCHR'S DECADE-LONG DEFENSE OF GAMBLE AGAINST THE DEATH PENALTY. SCHR FIRST BEGAN REPRESENTING GAMBLE IN 2002. IN 2007, FOLLOWING AN EXTENSIVE EVIDENTIARY HEARING, THE SHELBY COUNTY CIRCUIT COURT RULED IN FAVOR OF GAMBLE AND ORDERED THAT HIS DEATH SENTENCE REVERSED DUE TO INEFFECTIVE ASSISTANCE OF COUNSEL. THE STATE APPEALED AND ON OCTOBER 1, 2010, THE ALABAMA COURT OF CRIMINAL APPEALS AFFIRMED THE LOWER COURT'S RULING, REVERSING GAMBLE'S DEATH SENTENCE. AFTER THE CASE WAS REMANDED TO THE TRIAL COURT FOR RESENTENCING, SCHR - WORKING TOGETHER WITH ATTORNEYS FROM JENNER & BLOCK IN WASHINGTON, DC AND THE ACLU DEATH PENALTY PROJECT IN DURHAM, NC - NEGOTIATED AN AGREEMENT WITH THE STATE FOR GAMBLE TO BE SENTENCED TO LIFE IMPRISONMENT.

#### ARTHUR GILES (ALABAMA)

SCHR IS ASSISTING APPOINTED COUNSEL ANGELA WESSELS IN REPRESENTING ALABAMA DEATH ROW PRISONERS ARTHUR GILES IN PENDING FEDERAL HABEAS PROCEEDINGS IN UNITED STATES DISTRICT COURT.

#### TOFOREST JOHNSON (ALABAMA):

SCHR IS REPRESENTING ALABAMA DEATH ROW PRISONER TOFOREST JOHNSON IN STATE HABEAS CORPUS PROCEEDINGS. SCHR HAS ARGUED THAT JOHNSON=S TRIAL ATTORNEY RENDERED INEFFECTIVE ASSISTANCE OF COUNSEL BY PRESENTING TWO MUTUALLY IRRECONCILABLE DEFENSES AND BY FAILING TO CONDUCT ADEQUATE PRE-TRIAL INVESTIGATION. AN APPEAL IN JOHNSON=S CASE IS PRESENTLY PENDING IN THE ALABAMA COURT OF CRIMINAL APPEALS.

#### **JERRY JONES (GEORGIA):**

SCHR IS ASSISTING APPOINTED COUNSEL JACK MARTIN AND ATTORNEYS FROM THE GEORGIA CAPITAL DEFENDER AND THE BOALT LAW SCHOOL DEATH PENALTY CLINIC WHO ARE REPRESENTING GEORGIA DEATH ROW INMATE JERRY JONES ON A MOTION FOR NEW TRIAL AND ON DIRECT APPEAL TO THE GEORGIA SUPREME COURT. PROCEEDINGS ON JONES'S MOTION FOR NEW TRIAL

HAVE BEEN HELD IN ABEYANCE AFTER THE TRIAL COURT FOUND JONES INCOMPETENT TO PROCEED.

BRANDON KELLEY (ALABAMA):

SCHR IS REPRESENTING ALABAMA DEATH ROW INMATE BRANDON KELLEY ON DIRECT APPEAL. SCHR FILED THE OPENING BRIEF ON APPEAL IN APRIL 2012 AND A REPLY BRIEF IN JULY 2012. THE ALABAMA COURT OF CRIMINAL APPEALS ORDERED THE PARTIES TO FILE SUPPLEMENTAL BRIEFING REGARDING KELLEY'S BATSON CLAIM, WHICH WAS FILED IN NOVEMBER 2012. WE ARE NOW AWAITING THE SCHEDULING OF ORAL ARGUMENT IN THE APPEAL.

ALBERT MACK (ALABAMA):

TOGETHER WITH ATTORNEYS FROM THE PHILADELPHIA LAW FIRM OF BUCHANAN, INGERSOLL & ROONEY, SCHR IS REPRESENTING ALABAMA DEATH ROW INMATE ALBERT MACK IN PENDING STATE HABEAS CORPUS PROCEEDINGS IN TUSCALOOSA COUNTY. AMONG OTHER CLAIMS IN MACK'S CASE, SCHR HAS ALLEGED THAT THE SYSTEM EMPLOYED BY TUSCALOOSA COUNTY FOR SUMMONING PERSONS FOR JURY SERVICE SYSTEMATICALLY DISCRIMINATED AGAINST AFRICAN-AMERICANS. AFTER THE STATE RESISTED MACK'S ATTEMPTS TO OBTAIN DISCOVERY OF DEMOGRAPHIC INFORMATION ABOUT JURY VENIRES IN TUSCALOOSA COUNTY, SCHR FILED A PETITION FOR WRIT OF MANDAMUS TO COMPEL THE STATE TO COMPLY WITH PRIOR DISCOVERY ORDERS. IN DECEMBER 2010, THE ALABAMA SUPREME COURT UPHELD THE COURT OF CRIMINAL APPEALS'S RULING THAT MACK WAS ENTITLED TO THE DEMOGRAPHIC INFORMATION AND REMANDED THE CASE TO THE CIRCUIT COURT FOR FURTHER PROCEEDINGS. THE CASE IS AWAITING ASSIGNMENT OF A NEW CIRCUIT JUDGE.

DEKELVIN MARTIN (GEORGIA):

SCHR IS ASSISTING ATTORNEYS FROM THE GEORGIA CAPITAL DEFENDER AND THE BOALT LAW SCHOOL DEATH PENALTY CLINIC WHO ARE REPRESENTING GEORGIA DEATH ROW INMATE DE=KELVIN MARTIN IN PROCEEDINGS ON A MOTION FOR NEW TRIAL AND ON DIRECT APPEAL TO THE GEORGIA SUPREME COURT. A HEARING ON MARTIN'S MOTION FOR NEW TRIAL WAS CONDUCTED IN MAY AND JULY 2012. POST-HEARING BRIEFING AND SUPPLEMENTAL MOTIONS FOR NEW TRIAL HAVE BEEN FILED. WE ARE NOW AWAITING A RULING FROM THE COURT.

JAMES MCWILLIAMS (ALABAMA):

SCHR AGREED TO TAKE OVER THE REPRESENTATION OF ALABAMA DEATH ROW INMATE JAMES MCWILLIAMS FROM A BIRMINGHAM LAW FIRM THAT HAD REPRESENTED HIM IN FEDERAL HABEAS CORPUS PROCEEDINGS IN THE UNITED STATES DISTRICT COURT. IN DECEMBER 2010, SCHR SOUGHT AUTHORIZATION TO APPEAL TO THE 11<sup>TH</sup> CIRCUIT COURT OF APPEALS AND ALSO ASKED THE COURT OF APPEALS TO REMAND THE CASE TO THE DISTRICT COURT FOR FURTHER PROCEEDINGS. THE 11<sup>TH</sup> CIRCUIT GRANTED AUTHORIZATION TO

APPEAL IN NOVEMBER 2011 AND REMANDED THE CASE TO THE DISTRICT COURT IN SEPTEMBER 2012. THE CASE IS NOW PENDING BEFORE THE DISTRICT COURT AND SCHR HAS FILED ADDITIONAL BRIEFING IN SUPPORT OF MCWILLIAMS' CLAIM THAT THE STATE FAILED TO DISCLOSE EXCULPATORY EVIDENCE AT TRIAL.

**ROY PERKINS (ALABAMA):** 

SCHR IS REPRESENTING ALABAMA DEATH ROW INMATE ROY PERKINS IN STATE HABEAS CORPUS PROCEEDINGS. AN EXTENSIVE EVIDENTIARY HEARING WAS CONDUCTED IN APRIL 2008, AT WHICH SCHR PRESENTED EVIDENCE THAT THE STATE SUPPRESSED EXCULPATORY EVIDENCE AND THAT PERKINS=S TRIAL ATTORNEYS FAILED TO PROVIDE EFFECTIVE ASSISTANCE OF COUNSEL. AFTER SCHR ATTORNEYS FILED EXTENSIVE POST-HEARING BRIEFING, THE CIRCUIT COURT ISSUED A CURSORY 9-PAGE RULING. SCHR IS NOW APPEALING THAT RULING IN THE ALABAMA COURT OF CRIMINAL APPEALS. ORAL ARGUMENT WAS CONDUCTED ON DECEMBER 6, 2011. ON NOVEMBER 2, 2012, THE ALABAMA COURT OF CRIMINAL APPEALS ISSUED A DECISION AFFIRMING THE DENIAL OF POST-CONVICTION RELIEF. SCHR FILED AN APPLICATION FOR REHEARING ON JANUARY 31, 2013, WHICH REMAINS PENDING BEFORE THE COURT AT THIS TIME.

STEPHEN PETRIC (ALABAMA):

SCHR IS REPRESENTING ALABAMA DEATH ROW INMATE STEPHEN PETRIC ON DIRECT APPEAL IN A CASE INVOLVING COMPLICATED ISSUES OF FORENSIC SCIENCE. SCHR COMPLETED APPELLATE BRIEFING IN THE CASE AND ORAL ARGUMENT WAS CONDUCTED IN THE ALABAMA COURT OF CRIMINAL APPEALS IN DECEMBER 2011. ON FEBRUARY 15, 2013, THE COURT OF CRIMINAL APPEALS ISSUED AN OPINION AFFIRMING PETRIC'S CONVICTION AND DEATH SENTENCE. SCHR IS NOW SEEKING RECONSIDERATION OF THE COURT OF APPEALS' DECISION.

JAMES ROGERS (GEORGIA):

SCHR IS REPRESENTING GEORGIA DEATH ROW INMATE JAMES ROGERS IN STATE HABEAS CORPUS PROCEEDINGS IN GEORGIA STATE COURT. ROGERS' APPEAL CENTERS AROUND ISSUES OF STATE MISCONDUCT AND LEGAL ERRORS THAT OCCURRED AT HIS MENTAL RETARDATION TRIAL IN 2002, AT WHICH HE WAS FOUND NOT TO BE MENTALLY RETARDED DESPITE HIS LOW IQ SCORES. AN EVIDENTIARY HEARING WAS CONDUCTED IN ROGERS' CASE IN OCTOBER 2010. SCHR FILED A POST-HEARING BRIEF ON APRIL 13, 2011, WHICH REMAINS PENDING BEFORE THE CIRCUIT COURT AT THIS TIME.

MONTEZ SPRADLEY (ALABAMA):

SCHR HAS AGREED TO ASSIST ATTORNEYS FROM THE ACLU DEATH PENALTY PROJECT IN DURHAM, NC IN REPRESENTING FORMER ALABAMA DEATH ROW INMATE MONTEZ SPRADLEY, WHOSE CONVICTION AND DEATH SENTENCE WERE REVERSED BY THE ALABAMA COURT OF CRIMINAL APPEALS IN NOVEMBER 2011, AND WHO IS NOW AWAITING A RETRIAL. SCHR IS CURRENTLY ASSISTING THE

ACLU IN BRINGING A POST-CONVICTION CHALLENGE TO A PRIOR FELONY CONVICTION TO PREVENT THE STATE FROM SEEKING A DEATH SENTENCE ON THE BASIS OF THE PRIOR CONVICTION AT SPRADLEY'S RETRIAL.

MARIO WOODWARD (ALABAMA):

SCHR IS REPRESENTING ALABAMA DEATH ROW INMATE MARIO WOODWARD ON DIRECT APPEAL OF HIS CAPITAL CONVICTION AND SENTENCE. AT TRIAL, THE JURY RECOMMENDED THAT WOODWARD BE SENTENCED TO LIFE IMPRISONMENT BY AN 8-TO-4 VOTE; THE TRIAL JUDGE, HOWEVER, AOVERRODE® THE JURY = S RECOMMENDATION AND SENTENCED WOODWARD TO DEATH. IN DECEMBER 2012, THE ALABAMA COURT OF CRIMINAL APPEALS AFFIRMED WOODWARD'S CONVICTION AND DEATH SENTENCE. SCHR IS NOW PETITIONING FOR FURTHER REVIEW IN THE ALABAMA SUPREME COURT.

GREG WYNN (ALABAMA):

GREG WYNN'S DEATH SENTENCE WAS VACATED AND COMMUTED TO LIFE IMPRISONMENT AFTER THE UNITED STATES SUPREME COURT STRUCK DOWN IMPOSITION OF THE DEATH PENALTY ON DEFENDANTS WHO WERE YOUNGER THAN 18 AT THE TIME OF THEIR ALLEGED OFFENSE. SCHR CONTINUES TO REPRESENT WYNN IN POST-CONVICTION HABEAS CORPUS PROCEEDINGS CHALLENGING HIS CONVICTION. ON OCTOBER 26, 2012, WYNNE FILED AN AMENDED PETITION FOR WRIT OF HABEAS CORPUS, WHICH IS NOW PENDING BEFORE THE COURT.

ATTACHMENT TO FEDERAL FORM 990 SOUTHERN CENTER FOR HUMAN RIGHTS EIN: 62-1025326

PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS, LINE 4b,

#### PUBLIC INTEREST LAW -- LITIGATION RESULTS CIVIL LITIGATION (SCHR IMPACT LITIGATION UNIT)

THROUGHOUT 2012, SCHR INITIATED OR CONTINUED LITIGATION AIMED AT ENSURING EQUAL JUSTICE FOR PEOPLE WHO ARE INDIGENT AND INVOLVED IN THE CRIMINAL JUSTICE SYSTEM. FOLLOWING ARE HIGHLIGHTS FROM OUR WORK:

#### RIGHT TO COUNSEL CASES & INDIGENT DEFENSE ADVOCACY

IN JUNE 2012, SCHR FILED FUQUA V. PRIDGEN IN THE FEDERAL COURT FOR THE MIDDLE DISTRICT OF GEORGIA, CHALLENGING THE ROUTINE CLOSURE OF THE BEN HILL AND CRISP COUNTY JAIL COURTROOMS TO THE PUBLIC. SCHR'S INVESTIGATION REVEALED THAT EVEN WHEN SPACE WAS AVAILABLE, MEMBERS OF THE PUBLIC WERE OFTEN TURNED AWAY. THE ATTORNEY GENERAL'S OFFICE, WHICH IS DEFENDING THE CIRCUIT'S SUPERIOR COURT JUDGES WHO ARE NAMED DEFENDANTS IN THE SUIT, ARGUED THAT CITIZENS DO NOT HAVE A RIGHT TO ENTER COURTROOMS EVEN WHEN SEATS ARE AVAILABLE, AND THAT THERE IS NO CONSTITUTIONAL RIGHT TO ATTEND ARRAIGNMENTS EVEN THOUGH MANY CRIMINAL DEFENDANTS ARE SENTENCED AT ARRAIGNMENTS. IN A FEBRUARY 2013 ORDER ALLOWING PLAINTIFFS' SUIT TO PROCEED, THE FEDERAL COURT STATED THAT "[P]ROHIBITING THE MAJORITY OF THE PUBLIC FROM THESE PROCEEDINGS OFTEN BARS THEM FROM OBSERVING THE ENTIRE JUSTICE SYSTEM." THE COURT WENT ON TO SAY THAT "[T]O DEPRIVE THE PUBLIC [OF] THE RIGHT TO ATTEND PROCEEDINGS DURING WHICH THAT PROCESS OCCURS COULD UNDERMINE THE PUBLIC'S FAITH IN THE MODERN CRIMINAL JUSTICE SYSTEM."

IN 2009, SCHR FILED CANTWELL V. CRAWFORD IN A GEORGIA STATE COURT, ON BEHALF OF POOR PEOPLE ACCUSED OF CRIMES IN THE NORTHERN JUDICIAL CIRCUIT OF GEORGIA, CHALLENGING GEORGIA'S FAILURE TO PROVIDE ATTORNEYS TO INDIGENT DEFENDANTS WHOSE CASES CONFLICTED WITH CASES HANDLED BY THE NORTHERN CIRCUIT PUBLIC DEFENDER AND WHO THEREFORE COULD NOT BE REPRESENTED BY THAT OFFICE. IN 2010, SCHR ACHIEVED A SETTLEMENT AGREEMENT IN THE CASE AND CONTINUED TO MONITOR DEFENDANTS' COMPLIANCE WITH THE AGREEMENT THROUGH 2012. AFTER A THOROUGH REVIEW OF DEFENDANTS' COMPLIANCE, SCHR AGREED TO DISMISS THE CASE AT THE END OF 2012.

IN 2009, SCHR ALSO FILED FLOURNOY V. STATE ON BEHALF OF NEARLY 200 INDIVIDUALS ACROSS THE STATE OF GEORGIA WHO HAD BEEN DENIED THE ASSISTANCE OF CONFLICT-FREE COUNSEL ON THEIR MOTIONS FOR NEW TRIAL AND ON APPEAL. IN FEBRUARY 2010, THE COURT GRANTED CLASS CERTIFICATION AND MANDAMUS RELIEF TO PLAINTIFFS. THE COURT ORDERED THAT THE DEFENDANTS PROVIDE ALL MEMBERS OF THE CLASS WITH EFFECTIVE AND CONFLICT-FREE COUNSEL "AT THE EARLIEST POSSIBLE OPPORTUNITY" AND NO LATER THAN 30 DAYS AFTER THE ENTRY OF THE ORDER. AS TO FUTURE MEMBERS OF THE CLASS, THE COURT HELD THAT EFFECTIVE CONFLICT-FREE COUNSEL MUST BE PROVIDED NO LATER THAN 30 DAYS AFTER GPDSC RECEIVES THE REQUEST FOR NEW COUNSEL. IN DECEMBER 2011, THE PARTIES REACHED A PROPOSED SETTLEMENT AND JUDGE BAXTER SIGNED AN ORDER GRANTING PRELIMINARY APPROVAL OF THE CONSENT DECREE. SCHR CONTINUES TO MONITOR THE STATE'S COMPLIANCE WITH THE CONSENT DECREE TO ENSURE THAT CLASS MEMBERS ARE ZEALOUSLY REPRESENTED.

IN MARCH 2011, SCHR FILED MILLER V. DEAL, A PUTATIVE CLASS ACTION LAWSUIT PENDING IN FULTON COUNTY SUPERIOR COURT THAT SEEKS TO SECURE LAWYERS FOR INDIGENT PARENTS WHO HAVE BEEN JAILED OR ARE IN DANGER OF BEING JAILED WITHOUT COUNSEL FOR BEING UNABLE TO FULFILL THEIR CHILD SUPPORT OBLIGATIONS. AFTER A HEARING, ON DECEMBER 30, 2011, THE FULTON COUNTY SUPERIOR COURT GRANTED SCHR'S MOTION FOR CLASS CERTIFICATION. THE STATE APPEALED THE CLASS CERTIFICATION RULING, AND SCHR ARGUED THE CASE BEFORE THE GEORGIA COURT OF APPEALS IN NOVEMBER 2012.

### CHALLENGING FEAR-BASED POLICIES: SEX OFFENDER LITIGATION

IN JULY 2006, SCHR FILED WHITAKER V. PERDUE IN THE FEDERAL COURT FOR THE NORTHERN DISTRICT OF GEORGIA CHALLENGING THE DRACONIAN RESIDENCE, EMPLOYMENT, AND VOLUNTEER RESTRICTIONS IMPOSED BY GEORGIA'S SEX OFFENDER LAW. THE PASSAGE OF HOUSE BILL 571 IN MAY 2010 SIGNIFICANTLY NARROWED THE CLAIMS AT ISSUE IN THIS CASE AND ARGUABLY MOOTED THE CLAIMS OF ALL THE CURRENT NAMED PLAINTIFFS. HOUSE BILL 571 ELIMINATED RETROACTIVE APPLICATION OF THE RESIDENCE RESTRICTIONS, ADDED PROTECTIONS FOR RENTERS, CLARIFIED THE DEFINITION OF THE TERM "VOLUNTEER," AND CREATED A MECHANISM FOR CERTAIN LOW-RISK PERSONS TO BE REMOVED FROM THE REGISTRY. THE CONSTITUTIONALITY OF THE "SCHOOL BUS STOP PROVISION," WHICH PROHIBITS PERSONS ON THE REGISTRY FROM RESIDING WITHIN 1,000 FEET OF SCHOOL BUS STOPS, IS STILL AT ISSUE. IN SEPTEMBER 2010, SCHR RE-FILED SUMMARY JUDGMENT ON THE QUESTION OF WHETHER THE STATE CAN PROHIBIT PEOPLE ON THE REGISTRY FROM LIVING WITHIN 1,000 FEET OF SCHOOL BUS STOPS. IN SEPTEMBER 2011, SCHR AND THE STATE SUBMITTED ADDITIONAL BRIEFING ON WHETHER THE 6-YEAR-OLD CASE

IS NOW MOOT. SCHR IS AWAITING THE TRIAL COURT'S DECISION ON THE MOOTNESS ISSUE.

## CHALLENGING INHUMANE CONDITIONS OF INCARCERATION & MONITORING CHANGES

IN 2004, SCHR FILED HARPER V. BENNETT IN THE FEDERAL COURT FOR THE NORTHERN DISTRICT OF GEORGIA, CHALLENGING FULTON COUNTY'S OVERCROWDED JAIL CONDITIONS. SCHR NEGOTIATED A CONSENT AGREEMENT IN FEBRUARY 2006 AND MONITORING ENSUED. SCHR IS CONTINUING TO MONITOR DEFENDANTS' COMPLIANCE WITH THE AGREEMENT, WITH THE ASSISTANCE OF A COURT-APPOINTED MONITOR, WHO VISITS THE JAIL EACH MONTH.

IN APRIL 2011, SCHR WAS APPOINTED BY THE CHIEF JUDGE OF THE MIDDLE DISTRICT OF ALABAMA TO REPRESENT EDVIN BARKER IN BARKER V. JONES; A SUIT FOR DAMAGES AGAINST PRISON OFFICIALS AT BULLOCK CORRECTIONAL FACILITY WHO USED EXCESSIVE FORCE ON MR. BARKER, BREAKING HIS ARM. THIS CASE CONTINUED THE WORK WE BEGAN WITH THE DONALDSON CASE TO CHALLENGE A STATEWIDE PATTERN OF EXCESSIVE FORCE BY ADOC OFFICERS. IN MARCH 2012, THIS CASE WAS SETTLED FOR A MONETARY PAYMENT TO MR. BARKER.

#### CHALLENGING POLICE PRACTICES

IN DECEMBER 2010, SCHR FILED CALHOUN V. PENNINGTON IN FEDERAL COURT ON BEHALF OF 28 PEOPLE WHO WERE FORCIBLY DETAINED AND SEARCHED BY ABOUT 48 POLICE OFFICERS AT THE ATLANTA EAGLE, A BAR FREQUENTED BY PATRONS WHO ARE GAY, IN 2011, SCHR REACHED A COMPREHENSIVE SETTLEMENT AGREEMENT WITH THE CITY OF ATLANTA THAT FORCES THE ATLANTA POLICE DEPARTMENT TO REWRITE UNCONSTITUTIONAL POLICIES REGARDING ARREST, SEARCH, AND SEIZURE, AND MAKE OTHER CHANGES TO PROTECT THE PUBLIC FROM POLICE MISCONDUCT. THE REFORMS REQUIRE ATLANTA POLICE OFFICERS TO DOCUMENT CERTAIN TYPES OF WARRANTLESS DETENTIONS, FRISKS AND SEARCHES; PROHIBIT OFFICERS FROM INTERFERING WITH THE PUBLIC'S RIGHT TO TAKE PHOTOS AND MAKE VIDEO AND AUDIO RECORDINGS OF POLICE ACTIVITY; REQUIRE THE APD TO RULE ON CITIZEN COMPLAINT'S OF POLICE MISCONDUCT WITHIN 180 DAYS; AND REQUIRE THE CITY OF ATLANTA TO CONDUCT MANDATORY IN-PERSON TRAINING OF ALL POLICE OFFICERS EVERY TWO YEARS REGARDING FOURTH AMENDMENT ISSUES AND THE SAFE USE OF FIREARMS. IN 2012, SCHR FILED FOR CONTEMPT, AND ULTIMATELY REACHED AN AGREEMENT WITH THE CITY TO EXPEDITE CHANGES IN POLICY AND PRACTICE. SCHR CONTINUES TO MONITOR THE CONSENT ORDER IN THIS CASE.

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(Rev January 2013)

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

OMB No. 1545-1709

Department of the Treasury

File a separate application for each return.

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If you are	filing for an Automatic 3-Month Extension, comp	siete only P	art I and check this box	orm).		[V
<ul><li>If you are</li></ul>	filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Fart in (oil page 2 of the	d Form	8868	
Do not compi	lete Part II unless you have already been granted	an automa	tic 3-month extention on a previously life	u i viii viila 16	monthe fo	r &
Electronic fili corporation re equest an ex Associated W electronic filir	ng (e-file). You can electronically file Form 8868 it equired to file Form 990-T), or an additional (not a ctension of time to file any of the forms listed in filh Certain Personal Benefit Contracts, which mu- ng of this form, visit www.irs.gov/efile and click on	f you need automatic) 3 art I or Par st be sent to e-file for C	a 3-month automatic extension of time to 3-month extension of time. You can elect till with the exception of Form 8870, Info to the IRS in paper format (see instruction Charities & Nonprofits.	ronical	ly file Form	r Transfers
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and the second second	required to file Form 990-T and requesting an au	ıtomatic 6⋅r	month extension - check this box and co	mplete	Part I only	/ ⊁ []
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