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

OMB No 1545-0047
2007
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.

Header section A-M containing organization details: Name (SOUTHERN CENTER FOR HUMAN RIGHTS), EIN (62-1025326), Address (83 POPLAR STREET, N.W., ATLANTA, GA 30303), and other identifying information.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)

Main table with 21 rows detailing revenue (lines 1-12) and expenses (lines 13-21). Includes sub-tables for contributions (1a-1d), rental income (6a-6c), and special events (9a-9c). Total revenue is 326,880 and total expenses are 557,740.

SCANNED JUN 25 2008

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OGDEN, UT

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22 a Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22 b Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 a Compensation of current officers, directors, key employees, etc listed in Part V-A	25a	19,250	10,587	4,725	3,938
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b				
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	248,222	213,137	19,499	15,586
27 Pension plan contributions not included on lines 25a, b, and c	27	217	177	20	20
28 Employee benefits not included on lines 25a - 27	28	58,282	47,792	5,245	5,245
29 Payroll taxes	29	19,804	16,240	1,782	1,782
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	3,995	3,595	200	200
34 Telephone	34	5,906	5,316	295	295
35 Postage and shipping	35	3,234	2,910	162	162
36 Occupancy	36	5,555	4,999	278	278
37 Equipment rental and maintenance	37	6,842	6,500	205	137
38 Printing and publications	38				
39 Travel	39	71,392	67,716	1,838	1,838
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	12,058	11,455	362	241
43 Other expenses not covered above (Itemize):					
a _____	43a				
b SEE SCHEDULE 4	43b	102,983	96,815	3,739	2,429
c _____	43c				
d _____	43d				
e _____	43e				
f _____	43f				
g _____	43g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	557,740	487,239	38,350	32,151

SCHEDULE 7

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____



Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE SCHEDULE 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a See SCHEDULE 6

(Grants and allocations \$) If this amount includes foreign grants, check here ►

487,239

b

(Grants and allocations \$) If this amount includes foreign grants, check here ►

c

d

(Grants and allocations \$) If this amount includes foreign grants, check here ►

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ►

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

487,239



Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)	
		Beginning of year		End of year	
A s s e t s	45 Cash - non-interest-bearing	12,120	45	40,123	
	46 Savings and temporary cash investments	196,126	46	179,720	
	47 a Accounts receivable		47a		
	b Less: allowance for doubtful accounts		47b	47c	
	48 a Pledges receivable		48a		
	b Less: allowance for doubtful accounts		48b	48c	
	49 Grants receivable		49		
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b		
	51 a Other notes and loans receivable (attach schedule)		51a		
	b Less: allowance for doubtful accounts		51b	51c	
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53		
	54 a Investments - publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	3,912,511	54a	3,677,421
	b Investments - other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
	55 a Investments - land, buildings, and equipment basis		55a		
	b Less: accumulated depreciation (attach schedule)		55b	55c	
	56 Investments - other (attach schedule)		56		
	57 a Land, buildings, and equipment: basis	992,528	57a		
b Less: accumulated depreciation (attach schedule)	SCHEDULE 7 442,318	57b	57c		
58 Other assets, including program-related investments (describe _____)		58			
59 Total assets (must equal line 74). Add lines 45 through 58		4,678,599	59	4,447,474	
L i a b i l i t i e s	60 Accounts payable and accrued expenses		60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64 a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe _____)		65		
66 Total liabilities. Add lines 60 through 65		0	66	0	
N e t A s s e t B a l a n c e s	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	4,555,035	67	4,323,910	
	68 Temporarily restricted	123,564	68	123,564	
	69 Permanently restricted	0	69	0	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	4,678,599	73		4,447,474
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	4,678,599	74		4,447,474



Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

Table with 5 main rows (a-e) and sub-rows (1-4) for adjustments. Column 'a' contains 'N/A'. Rows include 'Total revenue' and various adjustments.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows (a-e) and sub-rows (1-4) for adjustments. Column 'a' contains 'N/A'. Rows include 'Total expenses' and various adjustments.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week, (C) Compensation, (D) Contributions to employee benefit plans, (E) Expense account. Row 1: SEE SCHEDULE 8, 64, 19,250, 652, 0.



Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) Yes No

<p>75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 20</p> <p>b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)</p> <p>c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization "</p> <p>If "Yes," attach a statement that includes the information described in the instructions</p> <p>d Does the organization have a written conflict of interest policy?</p>	75b	X
▶	75c	X
▶	75d	X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column See the instructions)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE	0	0	0	0

Part VI Other Information (See the instructions) Yes No

<p>76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change</p> <p>77 Were any changes made in the organizing or governing documents not reported to the IRS? If "Yes," attach a conformed copy of the changes.</p> <p>78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?</p> <p>b If "Yes," has it filed a tax return on Form 990-T for this year?</p> <p>79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement</p> <p>80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?</p> <p>b If "Yes," enter the name of the organization ▶ <u>N/A</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt</p> <p>81 a Enter direct and indirect political expenditures (See line 81 instructions.) 81a NONE</p> <p>b Did the organization file Form 1120-POL for this year?</p>	76	X
▶	77	X
▶	78a	X
▶	78b	N/A
▶	79	X
▶	80a	X
▶	81a	NONE
▶	81b	X



Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b		N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ <u>NONE</u> ; section 4912 ▶ <u>NONE</u> ; section 4955 ▶ <u>NONE</u>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<u>NONE</u>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<u>NONE</u>
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a	List the states with which a copy of this return is filed ▶ <u>CA DC FL GA IL MA MD NC NY VA WA OR</u>		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	27
91a	The books are in care of ▶ <u>§ JULIA ROBINSON-HICKS</u> Telephone no. ▶ <u>404-688-1202</u> Located at ▶ <u>83 POPLAR ST NW ATLANTA GA</u> ZIP + 4 ▶ <u>30303</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued)

Yes	No
	X

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c

If "Yes," enter the name of the foreign country ▶ N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here

and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Part VII Analysis of Income-Producing Activities (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a ATTORNEY FEES					11,611
b TRAINING PRG. INCOME					1,317
c OTHER INCOME					22,970
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash investments					
96 Dividends and interest from securities			14	50,058	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	(51,554)	
101 Net income or (loss) from special events					(31,057)
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				(1,496)	4,841
105 Total (add line 104, columns (B), (D), and (E))					3,345

Note. Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE SCHEDULE 9

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13)

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	N/A

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 than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: *Lisa Kung* Date: *9/14/08*

Type or print name and title: *Lisa Kung, Director*

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN (See Gen Inst X): **P00687026**

Firm's name (or yours if self-employed), address, and ZIP + 4: **FULTON AND KOZAK LLC**
7187 JONESBORO RD STE 100 A
MORROW, GA 30260

EIN: **20-1403280**
 Phone no: **7709614200**

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2007

Supplementary Information -- (See separate instructions.)

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

SOUTHERN CENTER FOR HUMAN RIGHTS

62-1025326

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE		0	0	0

Total number of other employees paid over \$50,000 ▶ NONE

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ NONE

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of other contractors receiving over \$50,000 for other services ▶ NONE



Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>NONE</u> (Must equal amounts on line 38, Part VI-A, or line f of Part VI-B.)</p>	<p>1</p>		<p>X</p>
<p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>			
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p>			
<p>a Sale, exchange, or leasing of property?</p>	<p>2a</p>		<p>X</p>
<p>b Lending of money or other extension of credit?</p>	<p>2b</p>		<p>X</p>
<p>c Furnishing of goods, services, or facilities?</p>	<p>2c</p>		<p>X</p>
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	<p>2d</p>	<p>X</p>	
<p>e Transfer of any part of its income or assets?</p>	<p>2e</p>		<p>X</p>
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)</p>	<p>3a</p>		<p>X</p>
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	<p>3b</p>	<p>X</p>	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement</p>	<p>3c</p>		<p>X</p>
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	<p>3d</p>		<p>X</p>
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g</p>	<p>4a</p>		<p>X</p>
<p>b Did the organization make any taxable distributions under section 4966?</p>	<p>4b</p>		<p>X</p>
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	<p>4c</p>		<p>X</p>
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶</p>	<p><u>NONE</u></p>		
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶</p>	<p><u>NONE</u></p>		
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶</p>	<p><u>NONE</u></p>		
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶</p>	<p><u>NONE</u></p>		

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety Section 509(a)(4). (See page 8 of the instructions.)



Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,418,749	1,278,401	941,123	1,463,872	5,102,145
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	197,456	274,008	436,464	232,386	1,140,314
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	129,980	113,181	101,118	92,250	436,529
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	1,746,185	1,665,590	1,478,705	1,788,508	6,678,988
24 Line 23 minus line 17	1,548,729	1,391,582	1,042,241	1,556,122	5,538,674
25 Enter 1% of line 23	17,462	16,656	14,787	17,885	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____					26d
22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year:					
(2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add: Amounts from column (e) for lines: 15 5,102,145 16 _____					27c 6,242,459
17 1,140,314 20 _____ 21 _____					27d
d Add: Line 27a total _____ and line 27b total _____					27e 6,242,459
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f 6,678,988
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 93.46%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 6.54%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table-		
If the amount on line 40 is- The lobbying nontaxable amount is-		
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000	\$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 \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
	X	
X		
	X	
	X	
	X	
X		3,975
	X	
		3,975

SCHEDULE 10

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

✓ m5

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash
(ii) Other assets

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization...

Table with columns Yes and No, rows 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), c

Main schedule table with columns (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (with checked X in No)

b If "Yes," complete the following schedule:

Schedule table with columns (a) Name of organization, (b) Type of organization, (c) Description of relationship

SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART I, LINE 8 GAIN (LOSS) FROM SALES OF ASSETS OTHER THAN INVENTORY

<u>DESCRIPTION</u>	<u>GROSS SALES PRICE</u>	<u>COST OR OTHER BASIS</u>	<u>EXPENSE OF SALE</u>	<u>NET GAIN OR (LOSS)</u>
INVESTMENT SECURITIES				
MERRILL LYNCH	583,270	634,824	(9,166)	(42,653)
TOTAL SECURITIES	<u>583,270</u>	<u>634,824</u>	<u>(9,166)</u>	<u>(42,653)</u>

SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART I, LINE 9 SPECIAL EVENTS AND ACTIVITIES

<u>DESCRIPTION</u>	<u>GROSS RECEIPTS</u>	<u>CONTRIBUTIONS INCLUDED</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
WASHINGTON DC DINNER	133,555	135,370	34,417	(36,232)
OTHER EVENTS	5,175	0	0	5,175
TOTAL	<u>138,730</u>	<u>135,370</u>	<u>34,417</u>	<u>(31,057)</u>



SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART I, LINE 20 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
UNREALIZED GAIN/(LOSS) ON INVESTMENTS	(265)
TOTAL OTHER CHANGES IN NET ASSETS	<u>(265)</u>

SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
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FORM 990, LINE 43 OTHER EXPENSES

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MGMT & GENERAL	(D) FUNDRAISING
LITIGATION EXPENSES	41,864	41,864		
OFFICE EXPENSES	10,375	9,869	304	202
COMPUTER CONSULTING	6,750	6,074	338	338
PROFESSIONAL FEES	3,314	663	2,320	331
INSURANCE	28,114	27,727	232	155
DEVELOPMENT	1,403			1,403
AUTO EXPENSE	1,023	1,023		
STAFF DEVELOPMENT	7,796	7,796		
SERVICE CHARGES	1,090	545	545	
MONTGOMERY PROJECT	1,254	1,254		
	<u>102,983</u>	<u>96,815</u>	<u>3,739</u>	<u>2,429</u>

SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART III STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE

SOUTHERN CENTER FOR HUMAN RIGHTS PROVIDES PRO BONO LEGAL SERVICES TO ENFORCE THE HUMAN AND CONSTITUTIONAL RIGHTS OF PEOPLE IN PRISONS AND JAILS, THE COURTS, AND AFFECTED BY THE CRIMINAL JUSTICE SYSTEM.



SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART III, LINE A STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

SCHR REPRESENTS PRISONERS IN EFFORTS TO ENFORCE CONSTITUTIONAL STANDARDS FOR CONDITIONS OF CONFINEMENT, TO REDUCE VIOLENCE AND OVERCROWDING, AND TO ENSURE ACCESS TO MEDICAL TREATMENT IN PRISONS AND JAILS; PROVIDES CAPITAL REPRESENTATION TO 20-30 PEOPLE ON DEATH ROW IN ALABAMA AND GEORGIA; AND WORKS TO END CRIMINAL JUSTICE PRACTICES THAT HAVE A DISPROPORTIONATE IMPACT ON THE POOR, PEOPLE OF COLOR, AND MARGINALIZED GROUPS, INCLUDING PRACTICES THAT IMPOSE FINES, FEES, OR DETENTION SIMPLY BECAUSE OF INABILITY TO PAY, AND LAWS THAT CURTAIL THE CIVIL RIGHTS OF CERTAIN GROUPS.

<u>GRANTS</u>	<u>EXPENSES</u>
<u>-</u>	<u>487,239</u>

SOUTHERN CENTER FOR HUMAN RIGHTS

EIN: 62-1025326

YEAR ENDING: 12/31/07

**FORM 990, PART II, LINE 42 DEPRECIATION; PART IV, LINE 57 DEPRECIATION OF ASSETS
NOT HELD FOR INVESTMENT**

Building & Improvements	\$	665,384
Furniture & Fixtures	\$	12,255
Machinery & Equipment	\$	314,889
Total Fixed Assets	\$	<u>992,528</u>
Accumulated Depreciation	\$	<u>(442,318)</u>
Net Fixed Assets	\$	<u><u>550,210</u></u>

PROPERTY, PLANT, AND EQUIPMENT ARE STATED AT COST. DONATED PROPERTY, PLANT, AND EQUIPMENT ARE RECORDED AT ESTIMATED FAIR VALUE AT THE TIME OF CONTRIBUTION. BUILDINGS AND EQUIPMENT ARE DEPRECIATED USING THE STRAIGHT-LINE METHOD OVER THE ESTIMATED USEFUL LIVES OF THE RESPECTIVE ASSETS (25 TO 80 YEARS AND 5 TO 30 YEARS, RESPECTIVELY). DEPRECIATION EXPENSE FOR THE FYE 10/01/07 - 12/31/07 WAS \$12,058.

0



SOUTHERN CENTER FOR HUMAN RIGHTS
 EIN. 62-1028328
 YEAR ENDING: 12/31/87

FORM 990 PART V LIST OF OFFICERS, DIRECTORS & KEY EMPLOYEES

NAME	TITLE	COMPENSATION	AVG. HRS/ WEEK	CONTRIBUTION	EXPENSE	ADDRESS
				TO EMPLOYEE	ACCOUNT AND	
				BENEFIT PLANS	OTHER	
				AND DEFERRED	ALLOWANCES	
				COMP		
CHARLES J. OGLETREE	OFFICER	-	-	-	-	HARVARD LAW SCHOOL, HAUSER HALL, CAMBRIDGE MA 02138
BETSY BIBEN-SELIGMAN	OFFICER	-	-	-	-	PUBLIC DEFENDER SERVICE 633 INDIANA AVE. N.W. SECOND FLOOR, WASHINGTON, DC 20001
MARY BRODERICK	OFFICER	-	-	-	-	PO BOX 30113, LOS ANGELES CA 90030-0113
DAVID I BRUCK	OFFICER	-	-	-	-	WASHINGTON & LEE SCHOOL OF LAW, LEXINGTON, VA 24450
GREGORY CAMP	OFFICER	-	-	-	-	205 E. 83TH ST. APT 5A, NEW YORK, NY 10021
RUBIN "HURRICANE" CARTER	OFFICER	-	-	-	-	155 DELAWARE AVE. TORONTO ONTARIO, CANADA M6H 2T2
STEPHEN O. HANLON	OFFICER	-	-	-	-	2039 PENNSYLVANIA AVE. N.W., SUITE 100 WASHINGTON, DC 20006-6801
SUSAN TEN KWAN	OFFICER	-	-	-	-	OFFICE OF THE STATE PUBLIC DEFENDER, 221 MAIN STREET, 10TH FLOOR, SAN FRANCISCO, CA 94105
ANDREW L. LIPPS	OFFICER	-	-	-	-	1020 OAK LANE, MCLEAN, VA 22101
COURTLAND REICHMAN	OFFICER	-	-	-	-	KING & SPALDING, 191 PEACHTREE ST., ATLANTA, GA 30303
ANDREW BHARRRO	OFFICER	-	-	-	-	114 E. 32ND ST. SUITE 503 NEW YORK, NY 10016
LEWIS SINGLAK	OFFICER	-	-	-	-	1899 WOODLAND CIRCLE, SE, ATLANTA, GA 30216
ANGELA JORDAN DAVIS	OFFICER	-	-	-	-	WASHINGTON COLLEGE OF LAW AMERICAN UNIVERSITY 4801 MASS. AVE N.W. WASHINGTON DC 20016
MICHAEL FITZGERALD	OFFICER	-	-	-	-	PO BOX 1207, TAOS, NM 87571
EDWARD T. M. GARLAND	OFFICER	-	-	-	-	GARLAND SAMUEL & LOEB P C 3161 MAPLE DR. N.E. ATLANTA, GA 30305
VIRGINIA SLOAN	OFFICER	-	-	-	-	THE CONSTITUTION PROJECT 1120 19TH ST N.W. EIGHTH FLOOR, WASHINGTON, DC 20036
DENNIS C. SWEET III	OFFICER	-	-	-	-	SWEET & PREESE CITY CENTRE N TOWER 200 S LAMAR STE 410, JACKSON MS 39207
JOHN F. TERZANO	OFFICER	-	-	-	-	THE JUSTICE PROJECT 1723 EYE ST N.W., FOURTH FLOOR, WASHINGTON DC 20006
JANE BLANKENSTEEN TIGAR	OFFICER	-	-	-	-	411 WALNUT ST #2580, GREENCOVE SPRINGS, FL 32043
DAVID LIPMAN	OFFICER	-	-	-	-	LIPMAN & ASSOCIATES MIAMI FL
LISA KUNG	OFFICER	15,750	40+	542	-	83 POPLAR ST N.W. ATLANTA, GA 30303
STEPHEN B. BRIGHT	OFFICER	3,500	24	110	-	83 POPLAR ST N.W. ATLANTA, GA 30303
TOTAL		19,250	64	652	-	

SOUTHERN CENTER FOR HUMAN RIGHTS
EIN: 62-1025326
YEAR ENDING: 12/31/07

FORM 990, PART VIII RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE 93 A ATTORNEY FEES FOR COURT CASES AND HONORARIA ARE DERIVED FROM THE ORGANIZATION'S EFFORTS TO PROVIDE LEGAL REPRESENTATION FOR INDIGENT PRISONERS AND EDUCATE LAW STUDENTS ON RELATED LEGAL CONCEPTS.

LINE 93 B INCOME TO PROVIDE WORKSHOPS AND PRESENTATIONS TO MEMBERS OF THE SOUTHERN PUBLIC DEFENDER TRAINING CENTER

LINE 93 C INCOME FROM THE NATIONAL ASSOCIATION OF CRIMINAL DEFENSE LAWYERS. IT IS USED TO PAY THE SALARY OF AN ATTORNEY ON STAFF.

LINE 101 ANNIVERSARY DINNER HONORED OUTSTANDING ACTIVISTS IN THE FIELD OF PRISON LITIGATION AND CAPITAL DEFENSE AND RAISED MONEY TO SUPPORT THE ORGANIZATION'S EFFORTS TO PROVIDE LEGAL REPRESENTATION FOR INDIGENT PRISONERS WHILE RAISING AWARENESS FOR THESE CAUSES.

SOUTHERN CENTER FOR HUMAN RIGHTS

EIN: 62-1025326

YEAR ENDING: 12/31/07

FORM 990, SCHEDULE A PART VI-B LOBBYING ACTIVITY BY NONELECTING PUBLIC CHARITIES

THE CENTER EMPLOYS ONE PAID STAFF MEMBER, THE PUBLIC POLICY DIRECTOR, WHO SPENDS 30% OF HER TIME WORKING TO AFFECT STATE LEGISLATION. THE METHODS USED INCLUDE MAILING THE MEMBERS OF THE "FAIRNESS FOR PRISONERS' FAMILIES" PROGRAM A NEWSLETTER DETAILING UPCOMING LEGISLATION, ORGANIZING A FAMILY LOBBY DAY AT THE CAPITAL FOR FAMILY MEMBERS TO TALK WITH THEIR LEGISLATORS, AND DIRECTLY CONTACTING LEGISLATORS IN REGARDS TO PERTINENT LEGISLATION.