

# Return of Organization Exempt From Income Tax

**2001**

Department of the Treasury  
Internal Revenue Service

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

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

Open to Public Inspection

**A** For the 2001 calendar year, or tax year period beginning **NOV 1, 2001** and ending **OCT 31, 2002**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>SOUTHERN POVERTY LAW CENTER, INC.</b> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 548</b> City or town, state or country, and ZIP + 4 <b>MONTGOMERY, AL 36104</b>	<b>D</b> Employer identification number <b>63-0598743</b>  <b>E</b> Telephone number <b>(334) 264-0286</b>  <b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Hand I are not applicable to section 527 organizations.

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates ▶

**H(c)** Are all affiliates included? **N/A**  Yes  No  
(If "No," attach a list.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN ▶

**G** Web site: ▶ **N/A**

**J** Organization type (check only one)  501(c)(3)  (insert no.)  4947(a)(1)  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **45,145,103.**

**M** Check  if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

	Description	Code	Amount
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:		
	<b>a</b> Direct public support	1a	27,541,578.
	<b>b</b> Indirect public support	1b	
	<b>c</b> Government contributions (grants)	1c	
	<b>d</b> Total (add lines 1a through 1c) (cash \$ 27,541,578. noncash \$ )	1d	27,541,578.
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2	99,201.
	<b>3</b> Membership dues and assessments	3	
	<b>4</b> Interest on savings and temporary cash investments	4	89,600.
	<b>5</b> Dividends and interest from securities	5	531,674.
	<b>6 a</b> Gross rents	6a	
	<b>b</b> Less: rental expenses	6b	
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c	
<b>7</b> Other investment income (describe ▶ <b>ENDOWMENT INCOME</b> )	7	2,782,020.	
<b>Revenue</b>	<b>8 a</b> Gross amount from sale of assets other than inventory	(A) Securities	13,742,811.
		(B) Other	9,080.
	<b>b</b> Less: cost or other basis and sales expenses	8b	15,062.
	<b>c</b> Gain or (loss) (attach schedule)	8c	<5,982.>
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	133,930.	
<b>Revenue</b>	<b>9</b> Special events and activities (attach schedule)		
	<b>a</b> Gross revenue (not including \$ of contributions reported on line 1a)	9a	
	<b>b</b> Less: direct expenses other than fundraising expenses	9b	
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
<b>Revenue</b>	<b>10 a</b> Gross sales of inventory, less returns and allowances	10a	
	<b>b</b> Less: cost of goods sold	10b	
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	
<b>11</b> Other revenue (from Part VII, line 103)	11	349,139.	
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	31,527,142.	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	13	14,517,978.
	<b>14</b> Management and general (from line 44, column (C))	14	1,757,619.
	<b>15</b> Fundraising (from line 44, column (D))	15	5,273,998.
	<b>16</b> Payments to affiliates (attach schedule)	16	
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	17	21,549,595.
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18	9,977,547.
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19	114,211,931.
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 3</b>	20	<12,067,090.>
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	112,122,388.

**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.

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	Grants and allocations (attach schedule) .....				
	cash \$ _____ noncash \$ _____	22			
23	Specific assistance to individuals (attach schedule) .....	23			
24	Benefits paid to or for members (attach schedule) .....	24			
25	Compensation of officers, directors, etc. ....	25	779,930.	200,265.	86,895.
26	Other salaries and wages .....	26	4,084,809.	383,504.	1,080,642.
27	Pension plan contributions .....	27	560,774.	67,293.	134,586.
28	Other employee benefits .....	28	685,918.	82,310.	164,620.
29	Payroll taxes .....	29	342,983.	41,158.	82,316.
30	Professional fundraising fees .....	30			
31	Accounting fees .....	31	93,958.	93,958.	
32	Legal fees .....	32	36,010.	36,010.	
33	Supplies .....	33	496,514.	178,745.	134,059.
34	Telephone .....	34	417,093.	51,942.	54,259.
35	Postage and shipping .....	35	2,221,142.	177,637.	929,588.
36	Occupancy .....	36			
37	Equipment rental and maintenance .....	37	55,103.	19,837.	14,878.
38	Printing and publications .....	38	5,246,665.	104,964.	1,128,538.
39	Travel .....	39	99,435.	2,912.	2,317.
40	Conferences, conventions, and meetings .....	40			
41	Interest .....	41	248,116.	62,029.	62,029.
42	Depreciation, depletion, etc. (attach schedule) .....	42	986,947.	98,695.	98,694.
43	Other expenses not covered above (itemize):				
a	.....	43a			
b	.....	43b			
c	.....	43c			
d	.....	43d			
e	<b>SEE STATEMENT 4</b>	43e	5,194,198.	192,370.	1,300,577.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 .....	44	21,549,595.	14,517,978.	5,273,998.

**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 \$ 3,939,495.; (ii) the amount allocated to Program services \$ 2,781,001.;

(iii) the amount allocated to Management and general \$ 341,361.; and (iv) the amount allocated to Fundraising \$ 817,133.

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? **SEE STATEMENT 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.)

<b>a</b>	<b>PROVIDING LEGAL SERVICES FOR VICTIMS OF CIVIL RIGHTS INJUSTICE AND HATE CRIMES</b>	
	(Grants and allocations \$ _____)	3,377,029.
<b>b</b>	<b>SEE STATEMENT 6</b>	
	(Grants and allocations \$ _____)	11,140,949.
<b>c</b>		
	(Grants and allocations \$ _____)	
<b>d</b>		
	(Grants and allocations \$ _____)	
<b>e</b>	Other program services (attach schedule)	(Grants and allocations \$ _____)
<b>f</b>	<b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) .....	<b>14,517,978.</b>

**Part IV Balance Sheets**

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

		(A) Beginning of year	(B) End of year	
<b>Assets</b>	45 Cash - non-interest-bearing .....	1,420,741.	56,364.	
	46 Savings and temporary cash investments .....	10,000.	10,000.	
	47 a Accounts receivable .....	1,688,990.		
	b Less: allowance for doubtful accounts .....			
	48 a Pledges receivable .....			
	b Less: allowance for doubtful accounts .....			
	49 Grants receivable .....			
	50 Receivables from officers, directors, trustees, and key employees .....			
	51 a Other notes and loans receivable .....			
	b Less: allowance for doubtful accounts .....			
	52 Inventories for sale or use .....			
	53 Prepaid expenses and deferred charges .....	122,038.	333,400.	
	54 Investments - securities <b>STMT 7 STMT 8</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	9,833,826.	10,834,590.	
	55 a Investments - land, buildings, and equipment: basis .....			
	b Less: accumulated depreciation .....			
56 Investments - other .....	SEE STATEMENT 9	101,637,301.	99,346,316.	
57 a Land, buildings, and equipment: basis .....	57a 23,117,037.			
b Less: accumulated depreciation .....	57b 4,175,495.	19,264,272.	18,941,542.	
58 Other assets (describe <input type="checkbox"/> )				
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74)		134,075,776.	131,211,202.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses .....	1,629,889.	548,604.	
	61 Grants payable .....			
	62 Deferred revenue .....			
	63 Loans from officers, directors, trustees, and key employees .....			
	64 a Tax-exempt bond liabilities .....	STMT 10	15,000,000.	15,000,000.
	b Mortgages and other notes payable .....			
	65 Other liabilities (describe <input type="checkbox"/> )	SEE STATEMENT 11	3,233,956.	3,540,210.
<b>66 Total liabilities</b> (add lines 60 through 65)		19,863,845.	19,088,814.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/></b> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted .....	114,097,277.	112,022,824.	
	68 Temporarily restricted .....	114,654.	99,564.	
	69 Permanently restricted .....			
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/></b> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds .....			
	71 Paid-in or capital surplus, or land, building, and equipment fund .....			
	72 Retained earnings, endowment, accumulated income, or other funds .....			
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		114,211,931.	112,122,388.	
<b>74 Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		134,075,776.	131,211,202.	

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.

<b>Part IV-A</b> Reconciliation of Revenue per Audited Financial Statements with Revenue per Return		<b>Part IV-B</b> Reconciliation of Expenses per Audited Financial Statements with Expenses per Return	
<b>a</b> Total revenue, gains, and other support per audited financial statements	<b>a</b> 19,460,052.	<b>a</b> Total expenses and losses per audited financial statements	<b>a</b> 21,549,595.
<b>b</b> Amounts included on line <b>a</b> but not on line 12, Form 990:		<b>b</b> Amounts included on line <b>a</b> but not on line 17, Form 990:	
(1) Net unrealized gains on investments ..... \$ <12067090.>		(1) Donated services and use of facilities ... \$	
(2) Donated services and use of facilities ... \$		(2) Prior year adjustments reported on line 20, Form 990 ..... \$	
(3) Recoveries of prior year grants ..... \$		(3) Losses reported on line 20, Form 990 ... \$	
(4) Other (specify):		(4) Other (specify):	
\$		\$	
Add amounts on lines (1) through (4) ..... ▶	<b>b</b> <12067090.>	Add amounts on lines (1) through (4) ..... ▶	<b>b</b> 0.
<b>c</b> Line <b>a</b> minus line <b>b</b> ..... ▶	<b>c</b> 31,527,142.	<b>c</b> Line <b>a</b> minus line <b>b</b> ..... ▶	<b>c</b> 21,549,595.
<b>d</b> Amounts included on line 12, Form 990 but not on line <b>a</b> :		<b>d</b> Amounts included on line 17, Form 990 but not on line <b>a</b> :	
(1) Investment expenses not included on line 6b, Form 990 ... \$		(1) Investment expenses not included on line 6b, Form 990 ... \$	
(2) Other (specify):		(2) Other (specify):	
\$		\$	
Add amounts on lines (1) and (2) ..... ▶	<b>d</b> 0.	Add amounts on lines (1) and (2) ..... ▶	<b>d</b> 0.
<b>e</b> Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> ) ..... ▶	<b>e</b> 31,527,142.	<b>e</b> Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> ) ..... ▶	<b>e</b> 21,549,595.

<b>Part V</b> List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
JULIAN BOND	DIRECTOR			
WASHINGTON, DC	MINIMAL	0.	0.	0.
PATRICIA CLARK	DIRECTOR			
NYACK, NY	MINIMAL	0.	0.	0.
FRANCES M. GREEN	DIRECTOR			
BOULDER, CO	MINIMAL	0.	0.	0.
LLOYD V. HACKLEY	DIRECTOR			
CHAPEL HILL, SC	MINIMAL	0.	0.	0.
HOWARD MANDELL	DIRECTOR			
NEW YORK, NY	MINIMAL	0.	0.	0.
JAMES MCELROY	DIRECTOR			
SAN DIEGO, CA	MINIMAL	0.	0.	0.
JOSEPH J. LEVIN, JR.	PRESIDENT/CEO			
MONTGOMERY, AL	40 HOURS	217,935.	26,243.	0.
TEENIE HUTCHISON	SECRETARY/TREASURER			
MONTGOMERY, AL	40 HOURS	80,000.	12,400.	0.
RICHARD COHEN	GENERAL COUNSEL			
MONTGOMERY, AL	40 HOURS	223,947.	25,362.	0.
MORRIS DEES	CHIEF TRIAL COUNSEL			
MONTGOMERY, AL	40 HOURS	258,048.	25,357.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule.  Yes  No Form 990 (2001)

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	X	
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
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?		X
b	If "Yes," enter the name of the organization and check whether it is <input checked="" type="radio"/> exempt OR <input type="radio"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a   0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	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		
83 a	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? N/A		
84 a	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		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A		
	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.		
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 in 85f? N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A		
86	501(c)(7) organizations. 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) organizations. 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		
88	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		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. 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		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed SEE STATEMENT 12		
b	Number of employees employed in the pay period that includes March 12, 2001 90b   96		
91	The books are in care of TEENIE HUTCHISON Telephone no. 334-956-8349		
	Located at 403 WASHINGTON AVENUE, MONTGOMERY, AL ZIP + 4 36104		
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   N/A		

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>Note:</b> Enter gross amounts unless otherwise indicated.					
<b>93</b> Program service revenue:					
<b>a</b> SALE & RENTAL OF EDUCATIONAL MATERIALS					99,201.
<b>b</b> TIONAL MATERIALS					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			14	89,600.	
<b>96</b> Dividends and interest from securities			14	531,674.	
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income			14	2,782,020.	
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	133,930.	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue:					
<b>a</b> MISCELLANEOUS					38,590.
<b>b</b> ROYALTIES			15	310,549.	
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		0.		3,847,773.	137,791.
<b>105</b> Total (add line 104, columns (B), (D), and (E))					3,985,564.

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 32.)

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).
93A	THE SALE OF EDUCATIONAL MATERIALS TO THE PUBLIC IS PART OF THE OVERALL EDUCATIONAL PROGRAM.
103A	COURT AWARDS AND ATTORNEY FEES FROM CASES FOR VICTIMS OF CIVIL RIGHTS INJUSTICE AND HATE CRIMES

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33.)

(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 Specific Instructions on page 33.)

- (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).

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 \_\_\_\_\_ Date \_\_\_\_\_ Type or print name and title \_\_\_\_\_

Paid Preparer's Use Only: Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed  Preparer's SSN or PTIN P00187613

Firm's name (or yours if self-employed), address, and ZIP + 4: JACKSON THORNTON & CO., P.C. P. O. BOX 96 MONTGOMERY, AL 36101-0096

EIN \_\_\_\_\_ Phone no. \_\_\_\_\_

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

OMB No. 1545-0047

**2001**

Name of the organization **SOUTHERN POVERTY LAW CENTER, INC.** Employer identification number **63 0598743**

**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
DAVID WATSON ----- MONTGOMERY, AL	SR PKG DESIGN  FULL TIME	87,000.	14,199.	
RHONDA BROWNSTEIN ----- MONTGOMERY, AL	SR STAFF ATTY  FULL TIME	120,461.	12,448.	
VALERIE BEATTY ----- MONTGOMERY, AL	DEP DIR DEVEL  FULL TIME	86,759.	12,837.	
ANDREW SVENSON ----- MONTGOMERY, AL	DIR.DEVELOPME  FULL TIME	135,519.	20,161.	
MARK POTOK ----- MONTGOMERY, AL	DIR PUBLICATI  FULL TIME	80,308.	12,448.	
Total number of other employees paid over \$50,000	11			

**Part II 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
IMAGISTIC MEDIA STUDIO ----- VENICE, CA	CONSULTING SERVICES	239,194.
CRS, INC. ----- BIRMINGHAM, AL	CONSULTING SERVICES	116,672.
BAMA JANITORIAL SERVICE ----- MONTGOMERY, AL	MAINTENANCE SERVICES	63,947.
----- ----- -----		
Total number of others receiving over \$50,000 for professional services	0	

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

	Yes	No
<b>1</b> 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 ► \$ _____ \$ _____ <b>(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</b> 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.	1	X
<b>2</b> 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? <i>(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</i>		
<b>a</b> Sale, exchange, or leasing of property? .....	2a	X
<b>b</b> Lending of money or other extension of credit? .....	2b	X
<b>c</b> Furnishing of goods, services, or facilities? .....	2c	X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V, FORM 990</b> .....	2d	X
<b>e</b> Transfer of any part of its income or assets? .....	2e	X
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc.? (See <b>Note</b> below.) .....	3	X
<b>4</b> Do you have a section 403(b) annuity plan for your employees? .....	4	X
<b>Note:</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

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 supports organizations described in: **(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).** (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14**  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	28,071,178.	31,509,819.	27,314,555.	20,046,239.	106,941,791.
<b>16</b> Membership fees received					
<b>17</b> 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	99,046.	92,813.	88,692.	94,931.	375,482.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	7,609,513.	120,010.	16,619,713.	8,185,038.	32,534,274.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
<b>23</b> Total of lines 15 through 22	35,779,737.	31,722,642.	44,022,960.	28,326,208.	139,851,547.
<b>24</b> Line 23 minus line 17	35,680,691.	31,629,829.	43,934,268.	28,231,277.	139,476,065.
<b>25</b> Enter 1% of line 23	357,797.	317,226.	440,230.	283,262.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> 2,789,521.
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 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b> 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> 139,476,065.
d Add: Amounts from column (e) for lines: 18 <u>32,534,274.</u> 19 _____ 22 _____ 26b _____					<b>26d</b> 32,534,274.
e Public support (line 26c minus line 26d total)					<b>26e</b> 106,941,791.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 76.6739%
<b>27 Organizations described on line 12:</b> 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: <b>N/A</b> (2000) _____ (1999) _____ (1998) _____ (1997) _____					
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 11, 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: <b>N/A</b> (2000) _____ (1999) _____ (1998) _____ (1997) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> N/A
d Add: Line 27a total _____ and line 27b total _____					<b>27d</b> N/A
e Public support (line 27c total minus line 27d total)					<b>27e</b> N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ <b>27f</b> N/A					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> N/A %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, 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.

NONE

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? ..... If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) _____ _____ _____		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? ..... If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____	32d	
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....	33a	
b	Admissions policies? .....	33b	
c	Employment of faculty or administrative staff? .....	33c	
d	Scholarships or other financial assistance? .....	33d	
e	Educational policies? .....	33e	
f	Use of facilities? .....	33f	
g	Athletic programs? .....	33g	
h	Other extracurricular activities? .....	33h	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____		
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....	34a	
b	Has the organization's right to such aid ever been revoked or suspended? .....	34b	
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

**N/A**

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		<b>N/A</b>	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>		
<b>39</b> Other exempt purpose expenditures .....	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>		
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>		
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 .....	<b>41</b>	
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 .....		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>		
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>		
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>		
<b>Caution:</b> 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 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>45</b> Lobbying nontaxable amount .....					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) .....					0.
<b>47</b> Total lobbying expenditures .....					0.
<b>48</b> Grassroots nontaxable amount .....					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) .....					0.
<b>50</b> Grassroots lobbying expenditures .....					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

**N/A**

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:	Yes	No	Amount
<b>a</b> Volunteers .....			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .) .....			
<b>c</b> Media advertisements .....			
<b>d</b> Mailings to members, legislators, or the public .....			
<b>e</b> Publications, or published or broadcast statements .....			
<b>f</b> Grants to other organizations for lobbying purposes .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....			
<b>i</b> Total lobbying expenditures (Add lines <b>c</b> through <b>h</b> .) .....			0.

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



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FORM 990                      GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES                      STATEMENT      1

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DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	13,742,811.	13,602,899.	0.	139,912.
TO FORM 990, PART I, LINE 8	13,742,811.	13,602,899.	0.	139,912.

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FORM 990	GAIN (LOSS) FROM SALE OF OTHER ASSETS	STATEMENT	2
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
SALE OF EQUIPMENT	VARIOUS	VARIOUS	PURCHASED	
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC
	9,080.	15,062.	0.	0.
TO FM 990, PART I, LN 8	9,080.	15,062.	0.	0.
	<5,982.>			<5,982.>

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FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	3
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DESCRIPTION	AMOUNT
UNREALIZED LOSSES ON MARKETABLE SECURITIES	<12,067,090.>
TOTAL TO FORM 990, PART I, LINE 20	<12,067,090.>

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FORM 990	OTHER EXPENSES	STATEMENT	4
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
RENTAL EXPENSE	31,987.	15,994.		15,993.
LIBRARY EXPENSE	95,578.	91,858.	2,984.	736.
INSURANCE	94,706.	75,765.	14,206.	4,735.
INVESTIGATION & SUPPORT	409,782.	393,785.	12,305.	3,692.
CASE COST EXPENSE	603,956.	603,956.		
LICENSE AND DUES	197,281.	160,509.	17,372.	19,400.
LETTERSHP EXPENSE	977,525.	410,561.	48,876.	518,088.
OTHER DEVELOPMENT COST	1,283,394.	539,025.	64,170.	680,199.
OTHER EDUCATIONAL PROJECTS	1,252,551.	1,252,551.		
CIVIL RIGHTS MEMORIAL-MAINTENANCE	19,490.	19,490.		
CONTRACT LABOR	222,738.	132,547.	32,457.	57,734.
MUSEUM/WALL OF TOLERANCE	5,210.	5,210.		
TOTAL TO FM 990, LN 43	5,194,198.	3,701,251.	192,370.	1,300,577.

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FORM 990 OTHER INVESTMENTS STATEMENT 9

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<u>DESCRIPTION</u>	<u>VALUATION METHOD</u>	<u>AMOUNT</u>
SECURITIES	MARKET VALUE	99,346,316.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		99,346,316.

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FORM 990	TAX-EXEMPT BOND LIABILITIES OUTSTANDING	STATEMENT 10
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<u>PURPOSE OF ISSUE</u>	<u>ISSUE DATE</u>
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CONSTRUCTION OF BUILDING	03/30/99
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<u>ORIGINAL ISSUE AMOUNT</u>	<u>PROJECT COMPLETION DATE</u>	<u>UNEXPENDED BOND PROCEEDS</u>	<u>TYPE OF FORM 8038 FILED</u>	<u>FORM 8038 DATE</u>
15,000,000.	03/31/01	0.	NONE FILED	

<u>THIRD PARTY INFORMATION</u>	<u>AMOUNT OF ISSUE OUTSTANDING</u>
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	15,000,000.
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TOTAL INCLUDED ON FORM 990, PART IV, LINE 64A	15,000,000.
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FORM 990	OTHER LIABILITIES	STATEMENT 11
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<u>DESCRIPTION</u>	<u>AMOUNT</u>
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GIFT ANNUITY & POOLED INCOME FUND LIABILITIES	3,540,210.
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TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	3,540,210.
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FORM 990	LIST OF STATES RECEIVING COPY OF RETURN PART VI, LINE 90	STATEMENT 12
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STATES

ARIZONA, ARKANSAS, CALIFORNIA, CONNECTICUT, FLORIDA, GEORGIA, ILLINOIS, KANSAS  
 KENTUCKY, LOUISIANA, MARYLAND, MASSACHUSETTS, MICHIGAN, MINNESOTA, MISSISSIPPI,  
 NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, N CAROLINA, N DAKOTA, OHIO,  
 OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, S CAROLINA, TENNESSEE, UTAH  
 VIRGINIA, WASHINGTON, WEST VIRGINIA, WISCONSIN, DISTRICT OF COLUMBIA

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

Department of the Treasury Internal Revenue Service

For calendar year 2001 or other tax year beginning NOV 1, 2001 and ending OCT 31, 2002

2001

See separate instructions.

Form header section containing: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E NEW unrelated bus. activity codes; F Group exemption number; G Check organization type; H Describe the organization's primary unrelated business activity.

Form header section containing: I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?; J The books are in care of TEENIE HUTCHISON Telephone number 334-264-0286

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales; 1b Less returns and allowances; 2 Cost of goods sold; 3 Gross profit; 4a Capital gain net income; 4b Net gain (loss); 4c Capital loss deduction for trusts; 5 Income (loss) from partnerships and S corporations; 6 Rent income; 7 Unrelated debt-financed income; 8 Interest, annuities, royalties, and rents from controlled organizations; 9 Investment income of a section 501(c)(7), (9), or (17) organization; 10 Exploited exempt activity income; 11 Advertising income; 12 Other income; 13 TOTAL (combine lines 3 through 12) 0.

Table with 4 columns: Part II Deductions Not Taken Elsewhere (Except for contributions, deductions must be directly connected with the unrelated business income.), (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers, directors, and trustees; 15 Salaries and wages; 16 Repairs and maintenance; 17 Bad debts; 18 Interest (attach schedule); 19 Taxes and licenses; 20 Charitable contributions; 21 Depreciation; 22 Less depreciation claimed on Schedule A and elsewhere on return; 23 Depletion; 24 Contributions to deferred compensation plans; 25 Employee benefit programs; 26 Excess exempt expenses; 27 Excess readership costs; 28 Other deductions; 29 Total deductions (add lines 14 through 28) 0.; 30 Unrelated business taxable income before net operating loss deduction (subtract line 29 from line 13) 0.; 31 Net operating loss deduction; 32 Unrelated business taxable income before specific deduction (subtract line 31 from line 30) 0.; 33 Specific deduction (Generally \$1,000, but see instructions for exceptions) 1,000.; 34 Unrelated business taxable income (subtract line 33 from line 32). If line 33 is greater than line 32, enter the smaller of zero or line 32 0.

Part III Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 35 (Organizations Taxable as Corporations), 36 (Trusts Taxable at Trust Rates), 37 (Proxy tax), 38 (Alternative minimum tax), and 39 (Total).

Part IV Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 40a-40e (Credits), 41-42 (Taxes), 43 (Total tax), 44a-44f (Payments), 45 (Total payments), 46 (Estimated tax penalty), 47 (Tax due), 48 (Overpayment), and 49 (Credited to 2002 estimated tax).

Part V Statements Regarding Certain Activities and Other Information (See instructions on page 15.)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions about foreign accounts, distributions to trusts, and tax-exempt interest.

Schedule A - Cost of Goods Sold (See instructions on page 16.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 1-5 (Inventory and Costs) and lines 6-8 (Cost of goods sold and Section 263A).

Signature and Preparer information section. Includes 'Sign Here' area for officer signature, date, and title, and 'Paid Preparer's Use Only' area for preparer signature, date, firm name (JACKSON THORNTON & CO., P.C.), EIN (63-1035228), and SSN (P00187613).

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(See instructions on page 16.)

Table for Schedule C with columns for Description of property, Rent received or accrued (a) and (b), Deductions directly connected with the income, and Total income/deductions.

Schedule E - Unrelated Debt-Financed Income (See instructions on page 17.)

Table for Schedule E with columns for Description of debt-financed property, Gross income from or allocable to debt-financed property, Deductions directly connected with or allocable to debt-financed property, Amount of average acquisition debt, Average adjusted basis, Column 4 divided by column 5, Gross income reportable, and Allocable deductions.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (See instructions on page 18.)

Table for Schedule F with columns for Name of Controlled Organization, Employer Identification Number, Exempt Controlled Organizations (Net unrelated income, Total of specified payments made, Part of column (4) that is included in the controlling organization's gross income, Deductions directly connected with income in column (5)), Nonexempt Controlled Organizations (Taxable Income, Net unrelated income (loss), Total of specified payments made, Part of column (9) that is included in the controlling organization's gross income, Deductions directly connected with income in column (10)), and Totals.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization**

(See instructions on page 18.)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>	0.			0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income**

(See instructions on page 18.)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Column totals</b>	0.	0.				0.

**Schedule J - Advertising Income** (See instructions on page 19.)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Column totals</b> (carry to Part II, line (5))	0.	0.				0.

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1)						
(2)						
(3)						
(4)						
(5) <b>Totals from Part I</b>	0.	0.				0.
<b>Column totals, Part II</b>	0.	0.				0.

**Schedule K - Compensation of Officers, Directors, and Trustees** (See instructions on page 19.)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
<b>Total</b> - Enter here and on line 14, Part II, page 1			0.