NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx



DLN: 93493286005169

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

Inspection

Department of the Treasury Internal Revenue

Service

Form **990**

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

A Fo	or the 20	008 ca				and ending 03-31-2009	9		1 .:6 .: 1				
	eck if app		Please	Name of organization SOUTHERN ENVI	ation RONMENTAL LAW CENTER				dentification number				
	dress cha	_	use IRS label or	Doing Business A	S			52-14367 E Telephone					
	me chang		print or type. See					(434) 977	7-4090				
	tıal return		Specific Instruc-	Number and stree		ot delivered to street addre	ss) Room/suite		ipts \$ 23,035,871				
	mination		tions.										
	nended re				te or country, and ZIP + 4 E, VA 229025065	•							
J Ap	plication p	ending					<u> </u>						
				and address of CKS MIDDLE	f Principal Officer TON III		H(a) Is this affiliat	s a group retu	rn for				
				T MAIN STRE			diiiia	.63	·				
T Ta	ıx-exemp	t status	•	TTESVILLE, V 3) (Insert no)	4947(a)(1) or □	527		affiliates inclu					
				vironment org	,(-/(-/ /		1	(If "No," attach a list See instructions) Group Exemption Number ►					
, W	eb site.	- ***	w southernen	vironinent org			11(0)	•					
К Тур	e of orga	nızatıon	Corporation	trust asso	ciation other 🟲		L Year of For	mation 1985	M State of legal domicile NC				
Da	rt I	Sum	mary										
1.0	_			organization's	mıssıon or most sıgnı	ificant activities							
φ						AST UNITED STATES	THROUGH LA	WAND POL	ICY				
allo													
ē	1,	ا با د د دا د	h 🖵 .6	4h			6	T.O/					
Governance			•			erations or disposed o /I, line 1a)			32				
			_)		31							
tles			umber of emp	,		117							
Activities &	6 T	otal n	umber of volu	6	49								
ă						line 12, column (C)	•	7a	0				
	b N	let unr	elated busine	ess taxable inc	ome from Form 990-	T, line 34		7b	T				
횰				. /D/T	TT 413		Prio	r Year	Current Year				
	8				II, line 1h) II, line 2a)			9,823,069	· · ·				
Rayenue	-	•		•	lumn (A), lines 3, 4,		850,424	97,348					
2					(A), lines 5, 6d, 8c,	·			0				
	I		revenue—add	lines 8 throug	h 11 (must equal Par	e	10.007.202	16,438,503					
		12)	s and similar	amounts haid /	Part IX, column (A),	lines 1 2)							
	14				rart IX, column (A), lı		16,476 80						
			•	-		IX, column (A), lines 5	5-						
Expenses		10)						5,959,473 6,695,75					
<u>₹</u>				-	t IX, column (A), line	11e)		150,229 63,38					
五		•			mn (D), line 25 <u>964,589</u> (A), lines 11a–11d, :)		2 227 466	2.450.207				
				•		, line 25, column (A))		2,327,466 8,453,644	2,459,397 9,298,538				
	19				line 18 from line 12	, inic 23, column (xy)		2,533,658	7,139,965				
<u>চঞ্</u>			<u> </u>				Beginni	ng of Year	End of Year				
San A	20	Total	assets (Part	X, line 16)				12,202,858	16,944,850				
Net Assets or Fund Balances	21	Total	liabilities (Pa	rt X, line 26)				571,024	536,385				
<u> </u>	22	Netas	ssets or fund	balances Subt	ract line 21 from line	20		11,631,834	16,408,465				
Pa	rt II	_	ature Bloc				_						
						irn, including accompanying (other than officer) is base			o the best of my knowledge parer has any knowledge				
Plea		***	***				2009-	10-12					
Sig:		Sign	ature of officer				Date						
			LY HUESTON TR e or print name										
		F 'ype	o or print hanne	and otte		Date		Dranarada Pa	TIN (See Gen Inst)				
Pai	d		parer's ROB	ERT M HUFF	Check If self-	Preparers Pr	in (see Gen inst)						
	_u parer	1 -	Signature				empolyed 🕨 🦵	-					
Use	-	Firn	Firm's name (or yours										
Onl	У	if self-employed), address, and ZIP + 4 ROBINSON FARMER COX ASSOCIATES						EIN Þ					
		530 WESTFIELD RD											
		CHARLOTTESVILLE, VA 229011726						Phone no 🕨 (434) 973-8314					
—— May	the IRS	dıscus	ss this return			e instructions)			Tyes TNo				

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

	Briefly describe the organization's mission COAST & WETLANDS TO PROTECT AND PRESERVE THE WETLANDS AND HIGH PRIORITY COASTAL ECOSYSTEMS IN THE SOUTHEAST FOR THE BENEFIT OF WILDLIFE, MARINE LIFE, AND PEOPLE
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting or make significant changes in how it conducts any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 1,932,820 including grants of \$) (Revenue \$ 82,827) COAST & WETLANDS TO PROTECT AND PRESERVE THE WETLANDS AND HIGH PRIORITY COASTAL ECOSYSTEMS IN THE SOUTHEAST FOR THE BENEFIT OF WILDLIFE, MARINE LIFE, AND PEOPLE
4b	(Code) (Expenses \$ 1,703,061 including grants of \$) (Revenue \$) HEALTHY AIR TO IMPROVE AIR QUALITY AND PROMOTE AND SECURE A SUSTAINABLE ENERGY POLICY ACROSS THE SOUTHEAST WHILE PROTECTING PEOPLE AND NATURAL RESOURCES FROM THE HEALTH, ENVIRONMENTAL, AND ECONOMIC HARMS OF AIR POLLUTION, INCLUDING GREENHOUSE GASES
4c	(Code) (Expenses \$ 1,510,139 including grants of \$) (Revenue \$ 22,956) CLEAN WATER TO PROTECT AND RESTORE WATER QUALITY AND WATER FLOW TO ENSURE SURFACE AND GROUND WATERS IN OUR REGION CAN MEET LONG- TERM ECOLOGICAL AND HUMAN NEEDS
	(Code) (Expenses \$ 1,387,634 including grants of \$ 60,000) (Revenue \$) Land & Community To promote vibrant communities and the protection of natural areas,
	(Code) (Expenses \$ 1,029,411 including grants of \$ 20,000) (Revenue \$) SOUTHERN FORESTS TO ENSURE THAT SOUTHERN APPALACHIAN NATIONAL FORESTS ARE MANAGED
4d	Other program services (Describe in Schedule O) (Expenses \$ 2,417,045 including grants of \$ 80,000) (Revenue \$)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	_
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I . •	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		N o
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25a 25b		No No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pa	art V Statements Regarding Othe	r IRS Filings and Tax Compliance	e				
						Yes	No
1a	Enter the number reported in Box 3 of Forn	n 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not a	applicable					
			1a	56			
b	b Enter the number of Forms W-2G included	ın lıne 1a Enter -0- ıf not applıcable	1b	0			
	Bod the consensation of the characteristics	akh haldan a mala a faman anta-bla manan aka k					
С	 Did the organization comply with backup w gaming (gambling) winnings to prize winner 		o vend	ors and reportable	1c		Νο
2a		,					
	Statements filed for the calendar year endir	ng with or within the year covered by this	2a	117			
h	return	appropriate file all required federal employs					
U	Note: If the sum of lines 1a and 2a is greater				2b	Yes	
3a	Did the organization have unrelated busine	ess gross income of \$1,000 or more durin	g the	year covered by this			
	return?				3a		No
	b If "Yes," has it filed a Form 990-T for this				3b		
4a	At any time during the calendar year, did t over, a financial account in a foreign count						
	account)?	· · · · · · · · · · · · · · · · · · ·		· · · ·	4a		Νo
b	b If "Yes," enter the name of the foreign cou	ntrv					
	See the instructions for exceptions and fili		eport o	f Foreign Bank and			
	Financial Accounts.						
5a	3 , , ,				5a		No
Ь	b Did any taxable party notify the organization	on that it was or is a party to a prohibited	tax sh	elter transaction?	5b		Νο
c	c If "Yes," to 5a or 5b, did the organization fi	le Form 8886-T, <i>Disclosure by Tax-Exemp</i>	t Entit	y Regarding Prohibited	_		
. .	Tax Shelter Transaction?		•		5c		NI -
6a	- · · · · · · · · · · · · · · · · · · ·				6a		N o
D	b If "Yes," did the organization include with e were not tax deductible?	every solicitation an express statement tr	iat sud	en contributions or gifts	6b		
7	Organizations that may receive deductible co	ntributions under section 170(c).					
а	a Did the organization provide goods or serv	ices in exchange for any quid pro quo con	trıbutı	on of \$75 or	7a		Νo
	more?						
	b If "Yes," did the organization notify the dor	- ·			7b		
С	c Did the organization sell, exchange, or other file Form 8282?			-	7c		No
d	d If "Yes," indicate the number of Forms 828		7d				
	,						
е	e Did the organization, during the year, recei				7e		No
f	benefit contract?				76 7f		No
' a					71 7g		No
_	h For contributions of cars, boats, airplanes,				<i>'</i> 9		140
••	required?				7h		Νο
8	Section 501(c)(3) and other sponsoring organ						
	supporting organizations. Did the supporting excess business holdings at any time duri		spons	oring organization, have			
	year?				8		No
9	Section 501(c)(3) and other sponsoring organ	nizations maintaining donor advised funds.					
а	a Did the organization make any taxable dist	tributions under section 4966?			9a		Νο
b	b Did the organization make a distribution to	a donor, donor advisor, or related person	?.		9b		Νο
10	Section $501(c)(7)$ organizations. Enter						
	a Initiation fees and capital contributions in		10a				
b	b Gross receipts, included on Form 990, Par	t VIII, line 12, for public use of club	10b				
	facilities						
11	Section 501(c)(12) organizations Enter						
а	a Gross income from members or shareholde	ers					
L	b Gross income from other sources (Do not i	nat amounts due or naid to other course	11a				
D	against amounts due or received from ther	·	11b				
4.7	- Carting 40.47/aV/1 and and a 1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4			£510413	4.0		
	a Section 4947(a)(1) non-exempt charitable tru		i neu d) FORM 1041/	12a		
D	b If "Yes," enter the amount of tax-exempt in year	iterest received or accided during the	12b				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A	Δ.	Governing	Body	and	Management
	٦.	GOV CI IIIII G	Doug	ana	rianagement

				Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, d processes, or changes in Schedule O. See instructions.	escribe the circumstances,							
1a	Enter the number of voting members of the governing body 1a 32		2						
Ь	Enter the number of voting members that are independent 1	L							
2	Did any officer, director, trustee, or key employee have a family relationship or a busin other officer, director, trustee, or key employee?	·	2		Νο				
3	Did the organization delegate control over management duties customarily performed l supervision of officers, directors or trustees, or key employees to a management comp		. 3		Νο				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a material diversion of the organization	zatıon's assets?	5		Νο				
6	Does the organization have members or stockholders?								
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?								
Ь	Are any decisions of the governing body subject to approval by members, stockholders	s, or other persons?	7b		Νο				
8	Did the organization contemporaneously document the meetings held or written actions year by the following	s undertaken during the							
а	the governing body?		8a	Yes					
Ь	each committee with authority to act on behalf of the governing body?		8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?		9a		Νο				
b	If "Yes," does the organization have written policies and procedures governing the acti affiliates, and branches to ensure their operations are consistent with those of the organization.	• •	9b						
10	• Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990								
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O								

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AL, GA, NC, SC, TN, VA, NY, MD, CT, KY, OR, FL, MA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

GAYLE DAVIS 201 WEST MAIN STREET CHARLOTTESVILLE,VA 229025065 (434) 977-4090

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did r		ate any	offic	er, c	direc	tor, tru	uste	e or key employee	T	
		Posit	(C tion (hat a	ched		I			(5)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
FREDERICK S MIDDLETON III , President	50 00	Х		Х	Х			216,301	0	28,470
HAYLEY PARRISH , Secretary	50 00			Х				59,135	0	9,293
HOLLY HUESTON , Treasurer	50 00			Х				101,595	0	17,198
DEADERICK C MONTAGUE , Vice President	0 00	Х						0	0	0
JEANIE NELSON , Chairperson	0 00	Х						0	0	0
JOEL B ADAMS JR , Trustee	0 00	Х			İ			0	0	0
MARTIN S BROWN , Trustee	0 00	Х						0	0	0
MARION A COWELL JR , Trustee	0 00	Х			İ			0	0	0
DENNIS M CRUMPLER , Trustee	0 00	Х						0	0	0
STEPHEN DOCKERY III , Trustee	0 00	Х			Ì			0	0	0
JIM G HANES III , Trustee	0 00	Х						0	0	0
MATT HAPGOOD , Trustee	0 00	Х						0	0	0
ELIZABETH HASKELL, Trustee	0 00	Х						0	0	0
ANNA KATE HIPP , Trustee	0 00	Х						0	0	0
J DAVID BRANCH , Trustee	0 00	Х						0	0	0
GLYNN KEY , Trustee	0 00	Х						0	0	0
ELLIOTT H LEVITAS , Trustee	0 00	Х						0	0	0
MARK B LOGAN , Trustee	0	Х								
NIMROD WE LONG III , Trustee	0	Х								
MARY ELIZABETH LUPTON , Trustee	0	Х								
ALLEN L MCCALLIE , Trustee	0	Х								
EDWARD M MILLER , Trustee	0	Х								
SUSAN S MULLIN , Trustee	0	Х								
STEPHEN E O'DAY , Trustee	0	Х								
GINNA MCGEE RICHARDS , Trustee	0	Х								
WILLIAM H SCHLESINGER , Trustee	0	Х								
J RUTHERFORD SEYDEL II , Trustee	0	Х								
TERENCE Y SIEG , Trustee	0	Х								
KATHYRN S SMITH , Trustee	0	Х								
THOMAS F TAFT SR , Trustee	0	Х								
						Ĺ				
			T		1					

Part VII	Continue	a
rait vii	Continue	u

			(C) Position (check all that apply)							(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	or	Estima mount o compens from t ganizati relat organiza	f other ation the on and ed
1b	Total						•	►	1,380,63	37			203,235
2	Total number of individuals (includin compensation from the organization)		a) who i	recei	ved	mo	re thar	າ \$1	00,000 in reportat	ole			
										_		Yes	No
3	Did the organization list any former on line 1a? <i>If</i> "Yes," complete Schedu									sated employee	_		
4	For any individual listed online 1a, is									n from the	3		No
	organization and related organization										_		
5	Did any person listed on line 1a rece	ive or accru	· ·	• ensa	• ition	• fro	manv	unr	elated organization	for services	4	Yes	
	rendered to the organization? <i>If</i> "Yes						-		-		5		No
Se	ection B. Independent Contra	ctors											
1	Complete this table for your five high	nest comper		ndep	end	ent	contra	ctor	rs that received mo	re than			
	· · · · ·	(A) nd business add							Dei	(B) scription of services		(C Comper	
	naille ai	w pasilicas du	41033						De	scription of services		Compe	15ation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

Par VII		Statement o	f Revenue					Page
					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 51
	1a	Federated car	mpaigns 1a	1				
Contributions, gifts, grants and other similar amounts	b	Membership d	lues 1b	·				
£ a	с	Fundraising e	vents					
gifts ara	d	Related organ	1c izations 1d					
ns,	e	Government gran	nts (contributions) 1e					
er.	f	All other contribu similar amounts i	tions, gifts, grants, and not included above	16,235,372				
e te	g	Noncash cont	1f ributions included in					
S E					16,235,372			
	h	lotal (Add III	es 1a-1f)	<u> </u>				
alle	2a	Attorneys Fees A	warded	Business Code 900,099	105,783	105,783		
емеп	b							
e H	С							
ier Ker	d							
3 E	e f	All other prog	ram service revenue					_
Program Serwce Revenue								
	g	Total. Add line ► \$ 105,783	es 2a-2f					
	3		ncome (including divi	·	413,799			413,79
			amounts)	▶	413,799			413,75
	4		estment of tax-exempt b	ona proceeds				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross Rents	(i) iteur	(ii) i cisonai				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inc	ome or (loss)					
	7a	Gross amount	(i) Securities 6,280,917	(II) O ther				
	/4	from sales of assets other	3,233,521					
	ь	than inventory Less cost or	6,597,368					
		other basis and sales expenses	216.451					
	d	Gain or (loss) Net gain or (lo	-316,451 oss)		-316,451			-316,45
		<u> </u>	<u> </u>	. •				_
	8a	events (not in	from fundraising cluding					
ıne		\$ of contribution	ns reported on line					
e∧e		1c) See Part <i>Attach Schedui</i>	IV , line 18 <i>le G if total exceeds</i>					
Other Revenue		<i>\$15,000</i>						
Ě	b c		xpensesb r (loss) from fundrais					
-	9a	Gross income		<u> </u>				
			e part IV , line 19					
		exceeds \$15,00	00					
	ь	Less directe	a xpensesb					
	С		r (loss) from gaming	activities				
	10a		f inventory, less					
		returns and al	lowances . a					
	ь	Less cost of	goods sold b					
	с		r (loss) from sales of					
	11a	Miscellaneou	is Kevenue	Business Code				
	ь							
	c							
	d	All other reve						
	e 12		es 11a-11d e. Add lines 1h, 2g, 3		16,438,503	105,783		97,34
		8c,	11e		, -,	-,2		

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	80,000	80,000		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	954,914	457,178	170,997	326,739
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	4,700,694	4,055,686	0	284,044
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	269,551	240,927	19,002	9,622
9	Other employee benefits	370,355	299,234	40,750	30,371
10	Payroll taxes	400,244	323,249	35,295	41,700
11	Fees for services (non-employees)				
а	Management				
b	Legal	84,504	84,504	0	0
c	Accounting	25,098	20,152	2,350	2,596
d	Lobbying	4,717	4,717	0	0
e	Professional fundraising See Part IV, line 17	63,383			63,383
f	Investment management fees	0	0	0	0
g	Other	165,830	143,539	1,692	20,599
12	Advertising and promotion	50,640	50,640	0	0
13	Office expenses	388,306	320,080	29,503	38,723
14	Information technology	212,390	179,332	11,970	21,088
15	Royalties	0	0	0	0
16	Occupancy	716,092	605,239	60,061	50,792
17	Travel	306,345	250,465	17,879	38,001
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0	0	0	0
19	Conferences, conventions and meetings	79,632	71,757	3,986	3,889
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	37,025	30,504	3,626	2,895
23	Insurance	40,604	37,658	1,400	1,546
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Miscellaneous	56,965	43,391	3,741	9,833
Ь	Professional Dues & Org Fees	43,516	40,516	1,411	1,589
c	Subscriptions & Reference	42,668	30,205	401	12,062
d	Professional Training	34,863	31,401	2,883	579
е	Photography & A V	25,914	25,914	0	0
f	All other expenses	144,288	136,777	2,973	4,538
25	Total functional expenses. Add lines 1 through 24f	9,298,538	7,563,065	770,884	964,589
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			300	1	400
	2	Savings and temporary cash investments			11,643,478		13,082,740
	3	Pledges and grants receivable, net			275,000		3,523,015
	4	Accounts receivable, net				4	-,,
	5	Receivables from current and former officers, directors, trustees	. kevemr	olovees or			
		other related parties Complete Part II of Schedule L		,		5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use		-		8	
\$	9	Prepaid expenses and deferred charges			41,045	9	130,739
Assets	10a	Land, buildings, and equipment cost basis	10a	1,473,581			
_	ь	Less accumulated depreciation Complete Part VI of					
		Schedule D	10b	1,383,665	67,391	10 c	89,916
	11	Investments—publicly traded securities		•		11	
	12	Investments—other securities See Part IV, line 11 $\it Complete Passing Schedule D$	art VII of			12	
	13	Investments—program-related See Part IV, line 11 $\it Complete Part State}$ of Schedule $\it D$	art VIII			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	175,644	15	118,040		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			12,202,858	16	16,944,850
	17	Accounts payable and accrued expenses .		421,239	17	444,987	
	18	Grants payable			18		
	19	Deferred revenue				19	
(0	20	Tax-exempt bond liabilities				20	
ě	21	Escrow account liability Complete Part IV of Schedule D			21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				•	
		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable			24		
	25	Other liabilities Complete Part X of Schedule D		149,785	25	91,398	
	26	Total liabilities. Add lines 17 through 25			571,024	26	536,385
ces		Organizations that follow SFAS 117, check here ▶	lete lines	27			
Balance	27	Unrestricted net assets			10,312,575	27	10,031,226
ထို	28	Temporarily restricted net assets			1,219,259	28	2,277,239
돧	29	Permanently restricted net assets		100,000	29	4,100,000	
or Fund		Organizations that do not follow SFAS 117, check here ► □ an lines 30 through 34.	d complet	e			
<u>9</u>	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31		
	32	Retained earnings, endowment, accumulated income, or other fu			32		
Net	33	Total net assets or fund balances			11,631,834	33	16,408,465
_	34	Total liabilities and net assets/fund balances			12,202,858	34	16,944,850
Pa	rt XI	Financial Statements and Reporting					
	TAT '						

Dowl VI	Financial Statements and Reporting
Part XI	Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue

10

h

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Service Name of the organization SOUTHERN ENVIRONMENTAL LAW CENTER

52-1436778 Reason for Public Charity Status (to be completed by all organizations) (See Instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i). 1 2 A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally Integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11q(i) (ii) a family member of a person described in (i) above? 11g(ii)

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		the orga) of your	organiz	s the ation in organized US?	(vii) A mount of support?
			Yes	No	Yes	No	Yes	No	
-									
Total									

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the organizations the organization supports

11g(iii)

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	ked the box of	II IIIIe 5, 7, or	O OI PART I.)				
	ublic Support		(1) 0000	() 2 2 2 7	/ IS a s s = -	, .	2005	(6) = : :
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,859,857	7,300,998	7,811,544	9,548,469	=	12,712,358	44,233,226
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the							
4	organization without charge Total. Add line 1-3	6,859,857	7,300,998	7,811,544	9,548,469		12,712,358	44,233,226
5	The portion of total contribution by each	-,,	.,,	.,,	-,,		,,	,,
J	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column							16,523,589
6	(f) Public Support subtract line 5 from line 4							27,709,637
T	otal Support		•	•	'			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	6,859,857	346,312	7,811,544	9,548,469	1	12,712,358	44,233,226
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	262,304	346,312	402,146	423,904	4 413,799		1,848,465
9 10	Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in	10,199	11,565	1,679				23,443
	Part IV)							
11	Total Support (Add lines 7 through 10)							46,105,134
12	Gross receipts from related activities, etc	(See instruction	s)			12		
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		rst, second, thire	d, fourth, or fifth	tax year as a 5	01(c)(3)	▶ ┌
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	olumn (f))		14		60 100 %
15	Public Support Percentage for 2007 Sched		•	· · //		15		54 470 %
	33 1/3% Test - 2008. If the organization did and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization di	a publicly supp	orted organizati	on				▶ ▼
17a	box and stop here. The organization qualifier 10% Facts and Circumstances Test - 2008. more, and if the organization meets the "factors are the state of the	If the organization is the community of	on did not check ances" test, che	a box on line 1. eck this box and	stop here. Exp	laın ın	Part IV ho	w the
b	organization meets the "facts and circumst 10% Facts and Circumstances Test - 2007." more, and if the organization meets the "facts and circumstances the "facts and circumstances" and circumstances are also as a second circumstance and circumstances.	If the organization is the contraction of the contr	on did not check ances" test, che	a box on line 1 eck this box and	3, 16a, 16b, or I stop here. Exp	17a ar Iain in	nd line 15 i Part IV ho	
18	the organization meets the "facts and circu Private Foundation. If the organization did							F

Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's taxexempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Total of lines 7a and 7b Public Support (Substract line 7c from line 6) **Total Support (e)** 2008 **(b)** 2005 (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 (c) 2006 (f) Total 9 Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss 12 from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here **Computation of Public Support Percentage** 15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f)) 15 0 % Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g 16 **Computation of Investment Income Percentage** Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f)) 17 **17** 0 % 18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h 19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

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DLN: 93493286005169

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Service If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities) Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B Section 527 organizations complete Part I-A only If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities) ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) ◆ Section 501(c)(4), (5), or (6) organizations complete Part III Name of the organization Employer identification number SOUTHERN ENVIRONMENTAL LAW CENTER 52-1436778 Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.) Provide a description of the organization's direct and indirect political campaign activities in Part IV 1 2 Political expenditures 3 Volunteer hours Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.) Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred in a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.) Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and internal funds If none, directly delivered to a enter-0separate political organization If none. enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

	(election under sec	organizations exempt under section 501(otion 501(h)). (See the instructions for Scheduk belongs to an affiliated group		768
		checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)	77	
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)	122,407	
С	Total lobbying expenditures (add line	es 1a and 1b)	122,484	
d	Other exempt purpose expenditures		9,156,679	
е	Total exempt purpose expenditures	(add lines 1c and 1d)	9,279,163	
f	Lobbying nontaxable amount Enter t	he amount from the following table in both	613,958	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e	!	
	Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000	\$100,000 plus 15% of the excess over \$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		
	Grassroots nontaxable amount (ente	r 25% of line 1f)	153,490	
h	Subtract line 1g from line 1a Enter -	0- If line g is more than line a		
	Subtract line 1 f from line 1 c Enter -	7- if line fis more than line c		

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 1a through 1f of the instructions.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total		
2a	Lobbying non-taxable amount	510,302	515,616	571,861	613,958	2,211,737		
ь	Lobbying ceiling amount (150% of line 2a, column(e))					3,317,606		
c	Total lobbying expenditures	60,772	68,444	189,028	122,484	440,728		
_d	Grassroots non-taxable amount	127,576	128,905	142,966	153,490	552,937		
е 	Grassroots ceiling amount (150% of line d, column (e))					829,406		
f	Grassroots lobbying expenditures	534	7	369		987		

	5768 (election under section 501(h)). (See the instructions for Schedule C for d					
		(a	1)		(b)	
	·	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of Volunteers?					
ь				1		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f						
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	Other activities If "Yes," describe in Part IV					
j	Total lines 1c through					
-	1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2		Ī	1		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912			+		
	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	5016) or	
G.	section 501(c)(6). (See the instructions for Schedule C for details.)		301(,, 0.	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec					
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.)	OK II	Part	III-A	٠,	
1	Dues, assessments and similar amounts from members	T	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	F	'			
	expenses for which the section 527(f) tax was paid).					
	Current Year		2a \$			
b	Carryover from last year		2b\$			
c	Total	<u> </u>	2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4 \$			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5 \$			
Pā	Supplemental Information	•				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information	Part II	l-B, line	e 1ı		
	Identifier Return Reference Explanation	on				

Part IV Supplemental I	<u>nformation</u>				
Ident if ier	Return Reference	Explanation			

Schedule C (Form 990 or 990EZ) 2008

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DLN: 93493286005169

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Inspection

	e of the organization HERN ENVIRONMENTAL LAW CENTER		Employer identification number
300	HERN ENVIRONMENTAL DAW CENTER		52-1436778
Pa	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99		inds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		may be
Par	Conservation Easements. Complete	ıf the organızatıon answered "Yes" to	Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of an Preservation of cer	historically importantly land area rtified historic structure of a conservation easement
	on the last day of the tax year		Held at the End of the Year
-	T had a supplied of a supplied of the supplied		
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	S	2b
С	Number of conservation easements on a certified hi	storic structure included in (a)	2c
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminated	d by the organization during
	the taxable year 🕨		
4	Number of states where property subject to conserva	ation easement is located 🕨	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, viola	tions, and Yes No
6	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ar ► \$
8	Does each conservation easement reported on line 2	(d) above satisfy the requirements of sect	
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	he footnote to the organization's financial	
Par	Organizations Maintaining Collection Complete if the organization answered	ns of Art, Historical Treasures, o	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or researc	h in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in	·
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		r financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		▶- \$
	Assets included in Form 990, Part X aperwork Reduction Act Notice, see the Intructions f	or Form 990 Cat No 52283D	Schedule D (Form 990) 200

Part	Organizations Maintaining Co	llections of Art,	His	tori	cal Treası	ures, or Othe	r Similar Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	owing that a	re a sıgnıfıcant u	se of its collectior	ı	
а	Public exhibition		d	Γ	Loan or exc	hange programs			
b	Scholarly research		e	Γ	Other				
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n hov	v the	further the	organızatıon's ex	empt purpose in		
	During the year, did the organization solicit of assets to be sold to raise funds rather than t							Yes	┌ No
Pari		Arrangements.	Com	plete	of the orga		ered "Yes" to Fo	rm 9	90,
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	for c	ontributions	or other assets r		Yes	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following table	e						
							A mou	nt	
С	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				Γ.	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV								
Par	t V Endowment Funds. Complete							VE V	DI-
1-	Reginning of year balance	(a)Current Year	(b) Prior	Year (c)	wo Years Back (d)	Three Years Back (e)	Four Y	ears Back
1a b	Beginning of year balance	4,000,000							
_	Investment earnings or losses	1,000,000							
c d	Grants or scholarships								
e e	Other expenditures for facilities								
-	and programs								
f	Administrative expenses								
g	End of year balance	4,100,000							
2	Provide the estimated percentage of the yea	r end balance held a	s						
а	Board designated or quasi-endowment 🕨								
ь	Permanent endowment 100 000 %								
С	Term endowment ▶								
	Are there endowment funds not in the posses	ssion of the organiza	tion t	hat a	re held and	administered for	the		
	organization by	•						Yes	No
	(i) unrelated organizations			•			3a(i)	Yes	
	(ii) related organizations						3a(ii)	Yes	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second or the secon						3b		<u> </u>
	VI Investments—Land, Buildings					Part X line 10			
T GII	·	s, and Equipmen	16. 5		Cost or other				
	Description of investment				is (investment)		(c) Depreciation	(d) B	ook value
1a L	and						1		
	uildings						7		
	easehold improvements					189,211	166,750		22,461
	quipment					1,008,274	,	 	31,014
	ther					276,096	<u> </u>	l	36,441
	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colum	n (B)	, line	10(c).)				89,916
		·					Schedule D (F	orm 9	

Part VIII Investments—Other Securities. S	<u>ee Form 990, Part X, line 1</u>	2.	
(a) Description of security or cateory	(b)Book value		d of valuation
(including name of security)		Cost or ena-or-	year market value
Financial derivatives and other financial products			
Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related.	See Form 990 Part X line	13	
			d of valuation
(a) Description of investment type	(b) Book value		year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X			
(a) Des	cription		(b) Book value
Deposits			26,642
Charitable Remainder Annuity Trust			91,398
T. I. (0.1 (1.1 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1			440040
Part X Other Liabilities. See Form 990, Part X, col.(B) III		<u> </u>	118,040
(a) Description of Liability	(b) A mount		
Federal Income Taxes	(S) Amount		
Charitable Remainder Annuity Trust	91,398		
Chantable Remainder Annatty Trast	31,330		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	▶ 91,398		
, , , , , , , , , , , , , , , , , , , ,	71,390	j	

Part	XI Reconciliation of C	hange in Net Assets from For	m 990) to F	<u>inancial Stateme</u>	nts	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)				1	16,438,503
2	Total expenses (Form 990, Par	rt IX, column (A), line 25)				2	9,298,538
3	Excess or (deficit) for the year	Subtract line 2 from line 1				3	7,139,965
4	Net unrealized gains (losses) o	n investments				4	-2,340,276
5	Donated services and use of fa	cilities				5	19,783
6	Investment expenses					6	-42,841
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	
9	Total adjustments (net) Add III	nes 4 - 8				9	-2,363,334
10	•	per financial statements. Combine lin	as 3 and	4 9		10	4,776,631
Part		evenue per Audited Financia			ts With Revenue i		<u> </u>
1		er support per audited financial					14,075,169
	statements					1	
2		it not on Form 990, Part VIII, line 12	1				
а	Net unrealized gains on invest			2a	-2,340,276	1 1	
b	Donated services and use of f		.	2b	19,783		
С	Recoveries of prior year grant		•	2c			
d	Other (Describe in Part XIV)		[2d			
e	Add lines 2a through 2d .					2e	-2,320,493
3	Subtract line 2e from line 1 .					3	16,395,662
4		0, Part VIII, line 12, but not on line 1	1				
а		uded on Form 990, Part VIII, line 7b		4a	42,841		
b	Other (Describe in Part XIV)			4b			
С	Add lines 4a and 4b					4c	42,841
5		d 4c. (This should equal Form 990, Pa				5	16,438,503
Part 1		xpenses per Audited Financia raudited financial statements		emei	its with Expense:	s per 1	9,298,538
2	·	it not on Form 990, Part IX, line 25					9,298,538
² a	Donated services and use of fa	, , ,		2a	I		
b	Prior year adjustments	acilities		2b		1	
c		, Part IX, line 25	•	2c		1	
d	Other (Describe in Part XIV)			2d		1	
e	Add lines 2a through 2d		• •				
3	Subtract line 2e from line 1.		• •			3	9,298,538
4		0, Part IX, line 25, but not on line 1 :	• •	•		<u> </u>	3,230,330
a		uded on Form 990, Part VIII, line 7b		4a	I		
ь				4b		1	
c	Add lines 4a and 4b		•	45		4c	
5		nd 4c. (This should equal Form 990, P	art Ilur	 .a 18 \		5	9,298,538
	XIV Supplemental Inf		uic 1, iii	10 10)			3,230,330
Com	plete this part to provide the de	scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part X				art XIV	, lines 1b and 2b,
	Ident if ier	Return Reference			Explanat	ion	
Pt V L			Toger	erate	revenue and capital gr		
			, o ger	.c.ute	. e. e. nac ana capital gi	~ **C	
·							

Part XIV Supplemental Information(continued)							
Ident if ier	Return Reference	Explanation					
Pt V Line 4		To generate revenue and capital growth					

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SCHEDULE G

Department of the

As Filed Data -

DLN: 93493286005169

Supplemental Information Regarding (Form 990 or 990-EZ)

Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV,

Open to Public

OMB No 1545-0047

Treasury Internal Revenue Service	illes 17, 16, 01 15, and	i by organizations	tilat elite	er more than \$13,000 on For	III 990-E2, IIIE 04.	Inspection		
Name of the organization					Employer iden	tification number		
SOUTHERN ENVIRONME	NTAL LAW CENTER				52-1436778			
Part I Fundraising	Activities. Complet	e if the orga	nızatıc	on answered "Yes"		. line 17.		
<u> </u>	organization raised funds				·	,		
a Mail solicitations	=	tillough any		=	non-government grants			
b Email solicitations	jovernment grants							
b								
<u></u>			-	, ., .,				
b If "Yes," list the ten h	ted in Form 990, Part VII) or entity in or rentities (fund	onnect draisers	tion with professional f s) pursuant to agreeme	undraising activities? ents under which the fun			
(i) Name of individual or entity (fundraiser)	I (III) A CTIVITY	(iii) Did fundraiser custody control d contribution	have or of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization		
		Yes	No					
ELIZA PHILIPS CONSULT	Strategy FING		No		49,713	-49,713		
RESEARCH VENTURES	Research		No		12,200	-12,200		
		+						
		+						
		+ +						
		+ +						
Total	1		P					

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL,GA,NC,SC,TN,VA,NY,MD,CT,KY,OR,FL,MA

			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Tot (Add col		
			(event type)	(event type)	(total number)		(0)	
至	1	Gross receipts						
Revenue	2	Less Charitable contributions						
	3	Gross revenue (line 1 minus line 2)						
	4	Cash Prizes						
s မိ	5	Non-cash Prizes						
Expenses	6	Rent/Facility costs						
	7	Other direct expenses						
Direct	8	Direct expense summary Add lin	es 4 through 7 ın columr	n(d)	🛌			
	9	Net income summary Combine li	·	-				
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	orted more	e than	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total col (a) thr		
<u>~</u>	1	Gross revenue						
မ မ	2	Cash prizes						
pens	3	Non-cash prizes						
Direct Expenses	4	Rent/facility costs						
₽ B	5	Other direct expenses						
	6	Volunteer labor	┌ Yes%	┌ Yes%	┌ Yes%			
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in col	umn (d)	🕨			
9		er the state(s) in which the organiza the organization licensed to operate		·		· 9a	Yes	No
a		No," Explain						
	If"	, ,						
a b	— We	re any of the organization's gaming l Yes," Explain	icenses revoked, suspe	nded or terminated during	g the tax year?	10a		
a b 10a	Wei	re any of the organization's gaming l				10a		

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

Software ID: Software Version:

EIN: 52-1436778

Name: SOUTHERN ENVIRONMENTAL LAW CENTER

Form 990 Schedule G - Licensed States

L	icensed States

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No 1545-0047

2008

DLN: 93493286005169

Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Inspection

Name of the organization Employer identification number SOUTHERN ENVIRONMENTAL LAW CENTER 52-1436778 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed. (c) IRC section 1(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) SOUTHERN APPALACHIAN 30-0066360 15,000 Roadless work FOREST COALITION46 HAYWOOD STREET SUITE ASHEVILLE, NC 28801 04-6149986 CONSERVATION LAW 30,000 Regional FOUNDATION62 SUMMER Transportation STREET Initiative work BOSTON, MA 02110 **ENVIRONMENTAL LAW** 36-3866530 30,000 Regional POLICY CENTER35 EAST Transportation WACKER DRIVE SUITE Initiative work 1300 CHICAGO, IL 60601 Enter total number of section 501(c)(3) and government

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990	Part IV. line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	,

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Pt I Line 2		WHEN SELC RECEIVES GRANT AWARD CORRESPONDENCE, ESSENTIAL INFORMATION IS RECORDED IN THE DONOR DATABASE ABOUT THE GRANTOR'S INTENTIONS AND RESTRICTIONS ON HOW THE GRANT MONIES ARE TO BE UTILIZED ALL GRANT AGREEMENTS AND PERTINENT CORRESPONDENCE IS KEPT PERMANENTLY ON FILE IN THE DEVELOPMENT DEPARTMENT AND IS FORWARDED ANNUALLY TO SELC'S ACCOUNTING DEPARTMENT FOR AUDIT PURPOSES GRANT REVENUE RECEIVED DURING THE FISCAL YEAR, AND THE VARIOUS RESTRICTIONS ON IT, IS TRACKED AND RECONCILED ANNUALLY AG

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DLN: 93493286005169

Schedule J

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization
SOUTHERN ENVIRONMENTAL LAW CENTER

52-1436778

Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		No
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	▼ Compensation committee			
	Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
а	Receive a severance payment or change of control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base compensation	(i) Base (iii) Other	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
FREDERICK S MIDDLETON III	(1) (11)	188,876	5,000	22,425	19,854	8,616	244,771	211,662
JEFFREY M GLEASON	(1) (11)	139,699		21,990	14,671	11,873	188,233	156,396
MARIE HAWTHORNE	(ı) (ıı)	111,734	5,000	16,746	12,369	8,616	154,465	128,863
DERB CARTER	(ı) (ıı)	128,596		1,230	11,771	8,616	150,213	127,541
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

See Additional	Data Table				
Ident if ier	Return Reference	Explanation			
Pt I Line 1b		Frederick S Middleton's wife Chita Middleton travels to the board and other meetings and her travel is paid for by the Southern Environmental Law Center			
	•				

Schedule J (Form 990) 2008

Software ID:

Software Version:

EIN: 52-1436778

Name: SOUTHERN ENVIRONMENTAL LAW CENTER

Part IIII Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
Dt I Ling 1h		Frederick C Middleton's wife Chita Middleton travels to the heard and other meetings and her travels a noid for by the Southern Environmental Law Conter

Pt I Line 1b | Frederick S Middleton's wife Chita Middleton travels to the board and other meetings and her travel is paid for by the Southern Environmental Law Center

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As Filed Data -

DLN: 93493286005169

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization SOUTHERN ENVIRONMENTAL LAW CENTER **Employer identification number**

52-1436778

ldentifier	Return Reference	Explanation
Pt VI-A, Line 10		THE FORM 990 WAS DISTRIBUTED TO MEMBERS OF THE BOARD AUDIT COMMITTEE, WHO MET AND DISCUSSED THE DOCUMENT WITH DEPUTY DIRECTOR, DIRECTOR OF FINANCE AND GENERAL COUNSEL

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		THE CONFLICT OF INTEREST POLICY IS A SECTION OF SELC'S CODE OF ETHICS WHICH IS INCLUDED IN THE EMPLOYEE'S POLICIES AVAILABLE ON THE COMPANY INTRANET EMPLOYEES ARE INDIVIDUALLY REMINDED OF THE CONFLICT OF INTEREST POLICY DURING ANNUAL EVALUATIONS

Identifier	Return Reference	Explanation
Pt VI-B, Line 15		A THE EXECUTIVE COMMITTEE MEETS ANNUALLY AND IN THE ABSENCE OF THE EXECUTIVE DIRECTOR TO DISCUSS THE EXECUTIVE DIRECTOR'S PERFORMANCE THE COMMITTEE DISCUSSES COMPENSATION AND BENEFITS USING COMPARATIVE DATA FROM OTHER ORGANIZATIONS' FORM 990 AND SALARY SURVEYS THE COMMITTEE CHAIR COMMUNICATES THE DECISIONS MADE BY THE COMMITTEE TO THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE IN A SIGNED MEMO

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		B THE EXECUTIVE DIRECTOR DISCUSSES HIS RECOMMENDATIONS WITH THE EXECUTIVE COMMITTEE DURING THEIR ANNUAL MEETING THE COMMITTEE DISCUSSES COMPENSATION AND BENEFITS USING COMPARATIVE DATA FROM OTHER ORGANIZATION'S FORM 990 AND SALARY SURVEYS

ldentifier	Return Reference	Explanation
Pt VI-C, Line 19		These documents are available to the public upon written request

ldentifier	Return Reference	Explanation
Pt XI, Line 2c		YES, THE BOARD AUDIT COMMITTEE MEETS QUARTERLY TO REVIEW FINANCIAL STATEMENTS. THE AUDIT COMMITTEE SELECTS AND ENGAGES THE INDEPENDENT ACCOUNTANT. THE AUDIT COMMITTEE MEETS WITH THE INDEPENDENT ACCOUNTANT TO REVIEW THE.