

Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

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

2013

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning , 2013, and ending , 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
 Georgia Conflict Center, Inc.
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
 440 Deering Ext 1-23
 City or town, state or province country, and ZIP or foreign postal code
 Athens, GA 30606

D Employer identification number
 45-3532279

E Telephone number
 706-202-4642
 202-222-2012

F Group Exemption Number ▶

G Accounting Method. Cash Accrual Other (specify) ▶

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

I Website: ▶

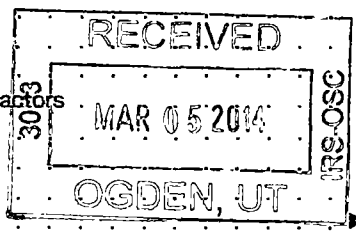
J Tax-exempt status (check only one) - 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 35,496.62

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	10	Grants and similar amounts paid (list in Schedule O)	18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	11	Benefits paid to or for members	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
3	Membership dues and assessments	12	Salaries, other compensation, and employee benefits	20	Other changes in net assets or fund balances (explain in Schedule O)
4	Investment income	13	Professional fees and other payments to independent contractors	21	Net assets or fund balances at end of year. Combine lines 18 through 20
5a	Gross amount from sale of assets other than inventory	14	Occupancy, rent, utilities, and maintenance		
5b	Less: cost or other basis and sales expenses	15	Printing, publications, postage, and shipping		
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	16	Other expenses (describe in Schedule O)		
6	Gaming and fundraising events	17	Total expenses. Add lines 10 through 16		
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)				
6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)				
6c	Less: direct expenses from gaming and fundraising events				
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)				
7a	Gross sales of inventory, less returns and allowances				
7b	Less: cost of goods sold				
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				
8	Other revenue (describe in Schedule O)				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				
10	Grants and similar amounts paid (list in Schedule O)				
11	Benefits paid to or for members				
12	Salaries, other compensation, and employee benefits				
13	Professional fees and other payments to independent contractors				
14	Occupancy, rent, utilities, and maintenance				
15	Printing, publications, postage, and shipping				
16	Other expenses (describe in Schedule O)				
17	Total expenses. Add lines 10 through 16				
18	Excess or (deficit) for the year (Subtract line 17 from line 9)				
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)				
20	Other changes in net assets or fund balances (explain in Schedule O)				
21	Net assets or fund balances at end of year. Combine lines 18 through 20				



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Georgia Conflict Center Inc

45-3532279

Form 990-EZ (2013)

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Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	15,330.29	22	18,781.65
23 Land and buildings	-	23	-
24 Other assets (describe in Schedule O) <i>Contributions Receivable</i>	7,679.29	24	-
25 Total assets	23,009.59	25	18,781.65
26 Total liabilities (describe in Schedule O) <i>Federal and State payroll taxes</i>	1,537.83	26	2,494.59
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	21,471.75	27	16,287.06

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? _____

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)
28 <i>Georgia Conflict Center is just getting started. It is devoted to reducing conflict especially involving teenagers. It has held a number of peacemaking conferences in 2013. It is working with the local Athens, GA Police and the Public Schools to set up programs for troubled or potentially troubled students. See attached A Better Description.</i>	28a	<i>All expenses were incurred in connection with the activities described</i>
29 <i>Georgia Conflict Center is just getting started. It is devoted to reducing conflict especially involving teenagers. It has held a number of peacemaking conferences in 2013. It is working with the local Athens, GA Police and the Public Schools to set up programs for troubled or potentially troubled students. See attached A Better Description.</i>	29a	
30 _____		
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) _____		
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) _____	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
<i>John Lash Executive Director</i>	<i>20</i>	<i>17,181.70</i>	<i>0</i>	<i>0</i>
<i>Tina Guthrie Program Director</i>	<i>24</i>	<i>7,204.50</i>	<i>0</i>	<i>0</i>
<i>Dr. Phillip Holmes President</i>	<i>5 to 10</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Nicole Woodfork, JD Vice President</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Dr. Robin McDowell, Secretary</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Wayne Stallings, CPA Treasurer</i>	<i>5 to 10</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>The Rev. Andy Cook Director</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Dr. David L Hyman OFM Director</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Ms. Pat Jaurett Director</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Ms. Elizabeth Loescher Director</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>Ms. Beth Shakleford Director</i>	<i>3 to 8</i>	<i>0</i>	<i>0</i>	<i>0</i>

Beginning Net Assets above were corrected. Amount reported on prior year return was 23,223.00.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O. 34 Were any significant changes made to the organizing or governing documents? 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities... 37a Enter amount of political expenditures, direct or indirect, as described in the instructions 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee... 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911, section 4912, section 4955... 42a The organization's books are in care of Wayne Stallings Located at 440 Deering Extension 1-23 Telephone no. 706-202-4642 ZIP + 4 30606 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44a Did the organization maintain any donor advised funds during the year? 44b Did the organization operate one or more hospital facilities during the year? 44c Did the organization receive any payments for indoor tanning services during the year? 44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Yes No

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Yes No

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Yes No

49a Did the organization make any transfers to an exempt non-charitable related organization? Yes No

b If "Yes," was the related organization a section 527 organization? Yes No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000 None

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 None

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here Signature of officer *Wayne Stallings* Date *2/21/14*
 Type or print name and title *Wayne Stallings Treasurer*

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
 Firm's name Firm's EIN
 Firm's address Phone no.

May the IRS discuss this return with the preparer shown above? See instructions Yes No



SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2013

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

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization: Georgia Conflict Center, Inc. Employer identification number: 45-3532279

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 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).
- 4 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 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.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
 - e 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).
 - f 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
 - g 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) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		
 - h Provide the following information about the supported organization(s).

(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?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0	15,498.00	30,475.91	45,973.91
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 organization without charge	0	0	0	3,000.00	3,000.00	6,000.00
4 Total. Add lines 1 through 3				18,498.00	33,475.91	51,973.91
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						20,000.00
6 Public support. Subtract line 5 from line 4.						31,973.91

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	-	-	-	18,498.00	33,475.91	51,973.91
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						51,973.91
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Row 15: Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2012 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, and Percentage. Row 17: Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2012 Schedule A, Part III, line 17 18 %

- 19a 33 1/3% support tests-2013. 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.
b 33 1/3% support tests-2012. 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.
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Georgia Conflict Center, Inc

Employer identification number

45-3532279

Part 1, line 16 other expenses

*• Write off of Contributions Receivable
Not Collected*

6,614.54

• All other expenses

2,251.20

8,865.74

What is the GCC?

By John Lash

The Georgia Conflict Center is committed to peacemaking. We work to reduce harm of all sorts in our community, including physical, emotional and verbal violence. We accomplish this work in two ways. First, we work to empower individuals in developing their

communication and conflict management skills. This includes classes and workshops aimed at better understanding how we currently handle conflicts, how we can



expand our choices of responding to conflict, and honing the specific skills that will let us engage in the inevitably difficult situations we face without resorting to violence. GCC does this work with kids, teachers, prisoners, and community members around the city and state.

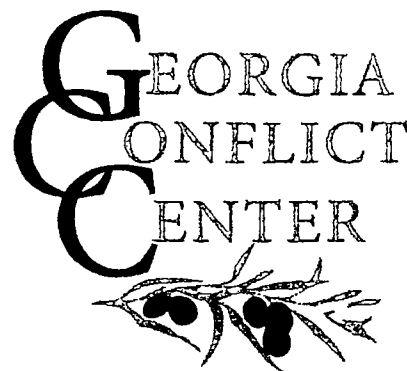
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UPCOMING PEACEMAKER CLASS



Dates: Tuesdays from
Jan. 4 to Feb. 11
Time: 6:00p to 8:00p
Cost: free

Please join us in January for our Peacemaker class. Over six weeks we will explore styles of conflict, common reactions to conflict, tools and skills to give us more options when faced with conflict, and we'll have a lot of fun along the way. Would you enjoy having the skills to talk to anyone about anything, no matter how difficult? With Peacemaker training you'll learn both how to express yourself and how to hear others in a way that leads to greater connection, mutuality without giving in or giving up, and a better chance that others will work with you instead of against you.



Mission

The Georgia Conflict Center is a not for profit organization that aims to reduce the levels of physical, emotional, and verbal violence in our community.

We are dedicated to empowering individuals in violence prevention and conflict management skills.

Staff

John Lash, Executive Director
Tina Guthrie, Program Director

Board of Directors

Dr. Will Holmes, President
Nicole Woolfork Hull, J.D., Vice Pres.
Dr. Robin John McDowell, Secretary
Wayne Stallings, CPA, Treasurer
The Rev. Andy Cooke
Fr. David L. Hyman, OFM
Pat Jarrett
Elizabeth Loescher
Beth Shackleford

Contact

Georgia Conflict Center
440 Dearing Extension
Athens, GA 30605
www.gaconflict.org
[facebook.com/gaconflict](https://www.facebook.com/gaconflict)
twitter.com/gaconflict
706-389-5912

CONFLICT IS INEVITABLE. VIOLENCE IS NOT.

What is the GCC? (Continued)

Even with the best of skills we sometimes need help with conflict, and GCC works both to provide that help and to train others in taking the "third side" as interested community members. This is the second way that we work to increase the potential for peace. Through restorative processes we create a safe space and give all sides of a conflict a chance to speak and be heard. This work can happen anywhere that we find ourselves in community. It is used in schools, courts, shelters, intentional communities, neighborhoods and many other places.

"This work can happen anywhere that we find ourselves in community."

In all of our work we strive to cultivate curiosity about communication and a positive orientation to conflict. This lets us look at conflict as both feedback from the systems we are in and also as an opportunity to improve our relationships in a way that doesn't compromise our own needs. Many of us are either avoidant or aggressive, but with a little training and support we can develop strategies that utilize compromise and collaboration. None of us has to be stuck with the ways we currently meet conflict. At GCC our motto is, "Conflict is Inevitable, Violence is Not."

Georgia Conflict Center
440 Dearing Extension
Athens, GA 30605

ATLANTA METRO SUB

17 DEC 2013 FNS 1



Wayne & Sandra Stallings
1251 McNutt Crossing
Bogart GA 30622

30622300051



Calendar

Diversion Center Training
Every Wednesday at 3:00 p.m.

Board Meetings
Tuesday, Dec. 17, Jan. 21, and Feb. 18
at 5:30 p.m.

Peacemaker Training
Tuesdays from Jan. 4 to Feb. 11
6:00 p.m. to 8:00 p.m.

Restorative Circles Training
Feb. 21, 6:00 to 9:00 p.m. and
Feb. 22, 10:00 a.m. to 5:00 p.m.

THANK YOU TO OUR DONORS

- | | | |
|-----------------------------------|--------------------------------------------|---------------------------------------------|
| Catholic Center at UGA | Liz Loescher | Elinor Myers Rees |
| Andy & Stacey Cooke | Rochelle Long | Loring Resler |
| Jack F. Crowley | John S. Halow | Peter & Berry Rice |
| Emmanuel Episcopal Church | John R. Hennigan | Terry H. Salguero |
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