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· 990

Return of Organization Exempt From Income Tax

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

20**07**

Department of the Treasury Internal Revenue Service

ALLOPE - DEC 0 2 2010

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

Open to Public Inspection

Ā	For th	ne 2007 ca	elendar	year, or tax year beginni	ing	, 200	7, and	ending		, 20
•		applicable:	Please	C Name of organization					D Emplo	yer identification number
_			use IRS	CT Citizen Research Gro	up. Inc.				06 :	0889894
_		s change	label or print or		box if mail is not delivered to	o street a	address)	Room/suite	E Telepi	none number
=	Name c	-	type. See	30 Arbor Street				6 N	(860	233-2181
_	Initial re		Specific	City or town, state or cour	ntry, and ZIP + 4			1 0		ing method: Cash Accrual
	Termina		Instruc-	Hartford, CT 06106-1209					_	ther (specify)
_		ed return	• Soc	tion 501(c)(3) organizations	and 4947(a)(1) papayam	at chari	table	H and I are no		le to section 527 organizations.
ш	Applicati	on pending		ts must attach a completed						rn for affiliates? 📋 Yes 🗹 No
G	Website	e: >						H(b) If "Yes,"	enter num	ber of affiliates ▶
					····		$\neg \neg$	H(c) Are all at		
1	Organiz	zation type	(check o	nty one) 🕨 🔽 501(c) (3) ∢ (insert no.) ☐ 4947(a)(1) or 🗀	527	•		st. See instructions.)
K	Check	here ▶ 🔲	if the o	rganization is not a 509(a)(3	supporting organization a	ndints g	ross	H(d) Is this a s	eparate retu	um filed by an by a group ruting? The Yes No.
			-	re than \$25,000. A return is no	ot required, but if the organiz	ation cho	ooses			
	to me a	return, de s	sure to life	a complete retum.				<u>-</u>	xemption N	
L	Gross	receipts: A	Add lines	s 6b, 8b, 9b, and 10b to li	ine 12 ▶ 1,020 .	966				the organization is not required Form 990, 990-EZ, or 990-PF).
-	art I	•		penses, and Change			Balar			
	$\overline{}$							1000 (000 1.	10 11.00.0	1
	1			gifts, grants, and simila	r amounts received:	1a				
	a			o donor advised funds		1b		756,	85	
	b	•		apport (not included on	,	1c		,,,,		İ
	C		•	support (not included o	•	1d				
	d			ntributions (grants) (not					1e	756,851
	9			1a through 1d) (cash \$			Davi		• 💳	226,792
	2	_		revenue including gove					3	8,750
	3		•	ies and assessments .					4	22,013
	4	Dividends and interest from securities						5	1	
_	5							.		
#I 0.7	6a					6b				
3	b			Denses			l		6c	
2	7			ne or (loss). Subtract li nt income (describe ▶	ne ob from line oa .	• •	• •		j 30	1
Hevenue Revenue				•	(A) Securities	1	(E) Other	′ ·	
Z	8a			from sales of assets ot	ner	8a	<u> </u>	<u>-</u>		
		than inv	•		•	8b				}
7	1			er basis and sales expens		8c				
W.	1 .			· · · · · · · · · · · · · · · · · · ·	L		L		8d	
姜	d	•	•	s). Combine line 8c, colu				_	; —	
CANAMED	9	•		d activities (attach schedu	5,625 of	gammi	y, chec	K Here	'	
౮్లు	a			(not including \$	3,023 Of	9a	ŀ	6,5	60	
Ø				eported on line 1b) penses other than fund	lmining expenses	9b	· · · · ·			
	b			loss) from special ever	• .		2 00		9c	6,560
	10a			inventory, less returns		10a				!
	b			oods sold	and anowances , .	10b				
		Gross pr	ofitor (Ic	oods sold		_	1835	CETAEL) 100	
	11	Other re	Nenue	(from Part VII, line 103)	y (attach scriedule). Subti		T PRE	AD ELIG VOEL E	11	
	12			Add lines 1e, 2, 3, 4, 5,		1-1				1,020,966
	13			es (from line 44, colum		2	DE	. 0 6 2010	12	766,100
8	14	_		nd general (from line 4			• •	· · · ·	124	107,797
Expenses	15	_		om line 44, column (D))		1	00	DEN, U		
ă	16			filiates (attach schedul		1	<u></u>	<u> </u>	16	
_	17			s. Add lines 16 and 44					. 17	955,924
- 9	18			cit) for the year. Subtra		,			18	65,042
Assets	19		•	und balances at beginr			 lumn f	Δ))	19	209,291
₹	I			in net assets or fund b				(N) · · ·	20	49,453
Net	21			ind halances at end of v					21	323 786

13 NE G 7 990 (2007)

Cat. No 11282Y

	Functional Expenses organizations and s	ection 4	1947(a)(1) nonexempt	charitable trusts but	optional for others. (S	ee the instructions.)
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$)					
	If this amount includes foreign grants, check here $ ightharpoonup$	22a				
22b	Other grants and allocations (attach schedule) (cash \$) noncash \$)					
	If this amount includes foreign grants, check here $ ightharpoonup$	22b	334,250	334,250		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	98,116	62,925	28,199	6,992
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b				
С	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26	Salaries and wages of employees not included on lines 25a, b, and c	26	185,937	164,343	21,594	
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a – 27	28	67,735	57,498	10,237	
29	Payroll taxes	29	29,225	22,457	6,209	559
30	Professional fundraising fees	30				
31	Accounting fees	31	9,840		9,840	
32	Legal fees	32				
33	Supplies	33	14,053	13,357	573	123
34	Telephone	34	7,948	5,868	2,080	
35	Postage and shipping	35	4,446	2,626	370	1,450
36	Occupancy	36	11,485	5,660	4,810	1,015
37	Equipment rental and maintenance	37	5,853	5,758	95	
38	Printing and publications	38	4,389	3,214	497	678
39	Travel	39	9,908	9,686	120	102
40	Conferences, conventions, and meetings	40	4,430	4,430		
41	Interest	41	21,557	454	21,557	
42	Depreciation, depletion, etc. (attach schedule)	42	451	451		
43	Other expenses not covered above (itemize):	40-	6 071		1,616	5 251
a	Bank fees Consulting fees & intern stipends	43a	6,871 2,861	2,861	1,010	5,255
b	Field Canuace & Tolonhone Bank	43b 43c	136,569	70,716		65,853
C		43d	130,303	70,710		03,03
d		43e				
4		43f				
· .	•	43g				
g 44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines		955,924	766,100	107,797	82,027

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

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

۷h	at is the organization's primary exempt purpose? Consumer & environmental protection	Program Service
	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1)
	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts, but optional for others.)
а	We address environmentally caused health problems such as childhood lead poisoning. In addition	
	to educating parents and the public about lead poisoning prevention and treatment, we assist	
	families with lead poisoned children to obtain lead-free housing. We also work with local	
	governments to help them create lead abatement programs.	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	186,925
b	We research, write & publish reports and sponsor forums and meetings. During 2007 our work	
	focused on health care access, environmental hazards, the impact on our state of the costs of our overseas wars	
	and implementation of the new clean elections law	
	•••••••••••••••••••••••••••••••••••••••	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	54,200
С	We build coalitions with other nonprofit organizations, unions and churches to address public	
	policy questions and to provide outreach and education services to their members. During 2007	
	our coalition work focused on health care access.	
	······	
	(Grants and allocations \$ 334,250) If this amount includes foreign grants, check here ▶ □	453,310
d	We inform Connecticut's residents of the problems associated with consumer & environmental	
	protection. We do this by knocking on doors and by telephone banking.	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	71,665
е	Other program services (attach schedule)	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	766,100

Pa	irt IV	Balance Sheets (See the instructions	i.)			
1	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		43,021	45	38,446
	46	Savings and temporary cash investments .			46	
	47a	Accounts receivable	47a			
		Less: allowance for doubtful accounts .	47b	37,103	47c	56,807
		•				
	48a	Pledges receivable	48a			
	b	Less: allowance for doubtful accounts .	48b	57,844	 	49,693
	49	Grants receivable			49	
	50a	Receivables from current and former officers key employees (attach schedule)			50a	
	b	Receivables from other disqualified persons 4958(f)(1)) and persons described in section 4958			50b	· · · .
绝	51a	Other notes and loans receivable (attach schedule)	51a CCAG			
Assets	ь	Less: allowance for doubtful accounts	51b	241,538	51c	339,380
As	•	Inventories for sale or use	·	,	52	-
	53			4,115	53	8,000
	54a	Investments—publicly-traded securities			54a	
	b	Investments—other securities (attach sched	ule) 🕨 🗌 Cost 🔲 FMV		54b	
	55a	Investments-land, buildings, and	1 1			
	h	equipment: basis	55a			
	_ ~	schedule)	55b		55c	
	56	Investments—other (attach schedule)			56	
	57a	Land, buildings, and equipment: basis .	57a 3,111			
	b	Less: accumulated depreciation (attach				_
		schedule)	57b 3,111	1,285	57c	0
	58	Other assets, including program-related inve	_ '		50	
	59	(describe ►		384,907	58 59	492,326
	60	Accounts payable and accrued expenses .		36,826		39,713
	61	Grants payable			61	
	62	Deferred revenue			62	
ities	63	Loans from officers, directors, trustees, and				
		schedule)		14,052		53,392
Liabil		Tax-exempt bond liabilities (attach schedule		75.005	64a	75 405
_	_	Mortgages and other notes payable (attach		75,285	64b	75,435
	65	Other liabilities (describe ▶)		65	
	66	Total liabilities. Add lines 60 through 65 .	· · · · · · · · · · · · · · · · · · ·	126,163	66	168,540
	Orga	anizations that follow SFAS 117, check here I 67 through 69 and lines 73 and 74.	► ☑ and complete lines			
Ces	67	Unrestricted		209,291	67	238,505
<u>a</u>	68	Temporarily restricted		49,453	68	85,281
Ba	69	Permanently restricted			69	
Fund Balances	Orga	anizations that do not follow SFAS 117, check complete lines 70 through 74.				
ĕ	70	Capital stock, trust principal, or current fund	ts		70	
	71	Paid-in or capital surplus, or land, building,			71	
SSE	72	Retained earnings, endowment, accumulate			72	
Net Assets	73	Total net assets or fund balances. Add line				
ž		70 through 72. (Column (A) must equal line		250 744	_	888 = 22
	74	equal line 21)		258,744 384,907		323,786 492,326
		roun neuminos ena net esseuviunu baland	Jun / July III I I I I I I I I I I I I I I I I I	J04,5U/	/ 🕶	472,320

Reina Cabrera

Quaker Hill, CT

Par	T IV-A	Reconciliation of Revenue per Aud instructions.)	lited Financial Statem	ents With Rev	enue p	er Ret	um (S	See the
а	Total rev	enue, gains, and other support per audit	ed financial statements			а		1,020,966
b		included on line a but not on Part I, line						
1		alized gains on investments		b1				
2		services and use of facilities		b2		_		
3	Recoven	es of prior year grants		b3		_		
4	Other (sp	ecify):		b4				
	Add lines	s b1 through b4				b		0
С						С		1,020,966
d	Amounts	included on Part I, line 12, but not on li	ne a:					
1		nt expenses not included on Part I, line		d1		_		
2		ecify):						
				d2		_		
	Add lines	d1 and d2				d		0
θ		venue (Part I, line 12). Add lines c and d				е		1,020,966
Pai	rt IV-B					per R	eturn	
а	Total exp	enses and losses per audited financial s	statements			а		955,924
b		included on line a but not on Part I, line						
1	Donated	services and use of facilities		b1		_		
2	Prior yea	r adjustments reported on Part I, line 20		b2		_		
3		eported on Part I, line 20		b3				
4		pecify):		b4				
		s b1 through b4				ь		0
С						С		955,924
đ	Amounts	included on Part I, line 17, but not on li	ne a:			j		
1	Investme	nt expenses not included on Part I, line	6b	d1		_		
2	Other (sp	pecify):		d2				
		s d1 and d2				d		0
e	Total ex	penses (Part I, line 17). Add lines c and	d	<u> </u>	<u>▶</u>	e		955,924
Pai	rt V-A	Current Officers, Directors, Trustees or key employee at any time during the ye	s, and Key Employees ar even if they were not	compensated.) (S	ee the i	nstructio	ons.)	director, trustee
		(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contrib benefit (comp	utions to en plans & defe ensation pla	nployee rred ns	(E) Expense account and other allowances
Hen	ry Murray		President					
	tford, CT			-0-			-0-	-0-
	liam Collin	S	Vice President					
-	walk, CT			-0-	ļ		-0-	-0-
	hleen Curry		Treasurer					
	Hartford, C			-0-			-0-	-0-
	een DelBia		Secretary					ļ
	erbury, CT			-0-	<u> </u>		-0-	-0-
	McLean-S	ialis	Executive Director					
	fville, CT		@ 40 hr/wk	69,917	<u> </u>		-0-	-0-
	ith Maslen		Chief Financial Officer @				-	
	tford, CT		20 hr/wk	28,199			-0-	-0-
	liam Sweer		Board Member	1			_	
$\overline{}$	Hartford, C	T	ļ	-0-	<u> </u>		-0-	-0-
	h Alicea		Board Member	1			_	į
Cov	entry. CT		l	-0-	i		-0-	-0-

Board Member

-0-

-0-

-0-

Fprm 990 (2007)					Pi	age (
Part V-A Current Officers, Directors, Trustees	s, and Key Employe	es (continued)			Yes	No
75a Enter the total number of officers, directors, and true meetings	ustees permitted to vo	te on organizatio	n business at board 7			
b Are any officers, directors, trustees, or key employ employees listed in Schedule A, Part I, or hig contractors listed in Schedule A, Part II-A or relationships? If "Yes," attach a statement that ide	hest compensated p	rofessional and other through	other independent family or business	75b		✓
c Do any officers, directors, trustees, or key compensated employees listed in Schedule A, independent contractors listed in Schedule A, organizations, whether tax exempt or taxable, that the definition of "related organization."	Part I, or highest co Part II-A or II-B, rec at are related to the o	ompensated professive compensating sanization? See	essional and other on from any other	75c		✓_
d Does the organization have a written conflict of in			<u> </u>	75d		✓
Part V-B Former Officers, Directors, Trustees, and officer, director, trustee, or key employee reperson below and enter the amount of comp	ceived compensation o	r other benefits (de	escribed below) during	the y	ear, lis	
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	accou	Expension and owance	other
						·
Part VI Other Information (See the instruction	s.)			,	Yes	No
76 Did the organization make a change in its activitie detailed statement of each change		•	? If "Yes," attach a	76		✓
77 Were any changes made in the organizing or gov if "Yes," attach a conformed copy of the changes	_	t not reported to	the IRS?	77		✓
78a Did the organization have unrelated business gro this return?	ss income of \$1,000	_	-	78a		✓
b If "Yes," has it filed a tax return on Form 990-T for				78b		

Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach

and check whether it is □ exempt or □ nonexempt

b If "Yes," enter the name of the organization ▶

b Did the organization file Form 1120-POL for this year?

79

80a

and Financial Accounts.

91b

Form 99									Page 8
Part								Yes	No
92	If "Y Sect and	ny time during the calendar year, did the es," enter the name of the foreign count ion 4947(a)(1) nonexempt charitable trustenter the amount of tax-exempt interest Analysis of Income-Producing A	try ► sts filing Form 990 t received or acci	0 <i>in lieu of Form</i> rued dunng the t	1041—Check ax year	here		•	. ▶ □
				business income		ion 512, 513, or 514	<u> </u>	(E)	
note: indica: 93	ted.	r gross amounts unless otherwise	(A) Business code	(B)	(C) Exclusion code	(D) Amount	exem	elatec	nction
		gram service revenue: Children's Medical Center-LAMPP Proq					1		1,015
a b		sulting for other nonprofit organizations			1				5,777
c					1		<u> </u>		
ď			_						
6								•	
f	Med	dicare/Medicaid payments							
9		s and contracts from government agenci							
94		mbership dues and assessments							8,750
95	Inter	rest on savings and temporary cash investmer	nts		l			2	22,013
96	Divi	dends and interest from securities			ļ				
97		rental income or (loss) from real estate:	•						
а		t-financed property			<u> </u>		-		
Ь		debt-financed property				<u> </u>			
98		rental income or (loss) from personal propert		+	 				
99		er investment income							
100		or (loss) from sales of assets other than inventor	Dry -	+	 				12,185
101		income or (loss) from special events .	_			· .	\vdash	-	12, 103
102 103		ss profit or (loss) from sales of inventory er revenue: a	/	+	1		 		
b	Oliv	er revenue. a							
c					1	 			
ď									
e									
104	Sub	total (add columns (B), (D), and (E)) .							
105	Tota	al (add line 104, columns (B), (D), and (E	i))			>		26	9,740
		105 plus line 1e, Part I, should equal th			 				
Part	VIII	Relationship of Activities to the A	ccomplishment	of Exempt Pur	poses (See th	e instructions.)			
Line ▼	No.	Explain how each activity for which inco of the organization's exempt purposes (or	other than by provi			mportantly to the	acco	mplis	hment
93		Fees & reimbursements for program service							
93	<u> </u>	Consulting for other nonprofit organizations							
D		Indo-selle Deservice Co.		·	A: (O :::				
Part	IX	Information Regarding Taxable Su (A)	bsidianes and D	,			1	(E)	
		ne, address, and EIN of corporation,	(B) Percentage of	(C) Nature of a	ctivities	(D) Total income	En	(E) d-of-	year
	p	partnership, or disregarded entity	ownership interest	1.12.0.0 01 6		.0.2	 	asset	<u>s</u>
			% %	<u> </u>		. ,	 		
			% %				 		
			/0						

Part	is a controlling organization	Fransfers To and From on as defined in section	Controlled E 512(b)(13).	ntities. Cor	nplete only if the or		
106	Did the reporting organization mathe Code? If "Yes," complete the	ke any transfers to a conschedule below for each	trolled entity as controlled entity	defined in se	ection 512(b)(13) of	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descr	(C) iption of nsfer	(D) Amount of		er
a 							
b							
С							
	Totals						
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"					Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descr	(C) iption of nsfer	(D) Amount of		er
а							
b							
С							
	Totals						
108	Did the organization have a bindi rents, royalties, and annuities des			, 2006, cove	ring the interest,	Yes	No ✓
Plea Sign Here	Signature of officer	ote Declaration of preparer (other	ding accompanying si than officer) is base	d on all informat	atements, and to the best of tion of which preparer has a 11 24 10 Date	ıny knov	wledge
Paid	Preparer's		Date	Check if self- employed ▶	Preparer's SSN or PTIN (See Gen	Inst. X)
Use 0				EiN	▶ : ne no ▶ ()		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

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

OMB No. 1545-0047

2007

Employer identification number

CT Citizen Re	esearch Group, Inc.			06	0889894
Part I	Compensation of the Five High (See page 1 of the instructions. I				s, and Trustees
(a) Name a	nd address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit plar deferred compensat	is & account and other
none					
	of other employees paid over \$50,000 .				
	Compensation of the Five High (See page 2 of the instructions. Lis	t each one (whether indiv	iduals or firms). If	there are non	e, enter "None.")
	ame and address of each independent contracto	r paid more than \$50,000	(b) Type	of service	(c) Compensation
none					
	······································				
				· · · · · · · · · · · · · · · · · · ·	
Total number professional	r of others receiving over \$50,000 for services	0			
Part II-B	Compensation of the Five High (List each contractor who perform	ned services other than p	orofessional serv		
(a) Na	firms. If there are none, enter "No ame and address of each independent contracto	<u> </u>		of service	(c) Compensation
none	and address of each independent contracto	pad more train \$50,000	(6) 1900	OI SEIVICE	(c) compensation
Total number \$50,000 for c	r of other contractors receiving over other services	0			

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2007

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

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	_

Pa	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$\bigsim \frac{29,968}{29,968}\$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	√	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
а	Sale, exchange, or leasing of property?		✓
b	Lending of money or other extension of credit?		✓
С	Furnishing of goods, services, or facilities?		✓
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
е	Transfer of any part of its income or assets?		✓_
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		✓_
b	Did the organization have a section 403(b) annuity plan for its employees?		✓
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement 3c		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . 3d		1
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		1
D	bis the organization make any ababis distributions under section 45001		
С	Did the organization make a distribution to a donor, donor advisor, or related person?	1	
đ	Enter the total number of donor advised funds owned at the end of the tax year		0
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		0
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		0

Pana	3
raue	•

Pai	rt I\	Reason for Non-Private	Foundation S	Status (See pages 4	through 8 of	f the instruct	ions.)		
cer	tify	that the organization is not a priva-	te foundation bed	ause it is: (Please check	only ONE app	olicable box.)			
5		A church, convention of churches	s, or association of	of churches. Section 170)(b)(1)(A)(i).				
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)							
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).							
8		A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).							
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶							
0		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A.)							
1a	Ø	An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)							
1b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)							
2		An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and gross receipt from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/2% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)							
3		An organization that is not control requirements of section 509(a)(3).					nd otherwise meets t		
		☐ Type II	∏Type I	II-Functionally Integrate	ed [Type III-Othe	r		
		Provide the following info	rmation about th	e supported organizat	ions. (See pag	e 8 of the instr	uctions.)		
(a) Name(s) of supported organization(s)		1		(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support		
					Yes	No			
		·				-			
ota	١.		· · · · · · ·			🕨			
4		An organization organized and op	erated to test for	public safety. Section 5	509(a)(4). (See ı	page 8 of the in	nstructions.)		

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (d) 2003 Calendar year (or fiscal year beginning in) (a) 2006 (b) 2005 (c) 2004 (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.), 846,247 456,190 625,771 469,499 2,397,707 16 Membership fees received 8,825 38,095 2,675 7,500 57,095 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 12,645 20,959 13,736 11,075 58,415 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975. 20,695 15,316 10,952 64,410 17,447 Net income from unrelated business activities not included in line 18. 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf. 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 223.978 288.563 267.598 187.022 967.161 23 Total of lines 15 through 22 . . . 1,112,390 821,254 925,096 686,048 3,544,788 Line 23 minus line 17. 1,099,745 800,295 911,360 674,973 3,486,373 25 Enter 1% of line 23 10,997 8,003 9,114 6,750 **26a** 69,727 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the 26b 150,161 amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶ 3,486,373 26c Total support for section 509(a)(1) test: Enter line 24, column (e) 64,410 Add: Amounts from column (e) for lines: 18 967,161 26b 1,101,298 26d 26e 2,385,075 Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) Add: Amounts from column (e) for lines: 15 ___ 16 . 27c 21 ___ 27d d Add: Line 27a total and line 27b total 27e Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . ▶ 27f 27g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) % Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006,

prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Pa	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)							
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No				
	other governing instrument, or in a resolution of its governing body?	29						
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?							
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during							
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way	31		l				
	that makes the policy known to all parts of the general community it serves?							
32	Does the organization maintain the following:	32a						
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	Sea						
_	basis?	32b						
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32c		Ì				
d	with student admissions, programs, and scholarships?	32d						
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)							
33	Does the organization discriminate by race in any way with respect to:							
а	Students' rights or privileges?	33a		<u> </u>				
b	Admissions policies?	33b						
С	Employment of faculty or administrative staff?	33c						
d	Scholarships or other financial assistance?	33d						
e	Educational policies?	33e						
f	Use of facilities?	33f						
•	Use of facilities?							
9	Athletic programs?	33g						
h	Other extracurncular activities?	33h						
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)							
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a						
- ra	2000 the organization receive any intaining and or assistance from a governmental agency i							
b	Has the organization's right to such aid ever been revoked or suspended?	34b		-				
	n you allowed the to entire one of b, prease explain using an attached statement.							
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05]				

of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Sche	edule A (Form 990 or 990-EZ) 2007					Page 6
Pa	rt VI-A Lobbying Expenditures by E (To be completed ONLY by a				e instructions	
Che	ck ▶ a ☐ if the organization belongs to an affil		ck ▶ b ☐ if y		d "limited control"	provisions apply.
	Limits on Lobby	• .			(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public	 		36		16,324
37	Total lobbying expenditures to influence a legi			37		13,644
38	Total lobbying expenditures (add lines 36 and	• ,	, ,,		······	29,968
39	Other exempt purpose expenditures	•				925,956
40	Total exempt purpose expenditures (add lines	1	40			
41	Lobbying nontaxable amount. Enter the amou					
		lobbying nontaxal	•			
	Not over \$500,000 20%	of the amount on	line 40			
	Over \$500,000 but not over \$1,000,000 . \$100	,000 plus 15% of th	e excess over \$50	00,000		
	Over \$1,000,000 but not over \$1,500,000 . \$175	,000 plus 10% of the	excess over \$1,00	00,000 41		168,389
	Over \$1,500,000 but not over \$17,000,000. \$225	•	•	-		
	Over \$17,000,000 \$1,00					
42	Grassroots nontaxable amount (enter 25% of	•				42,097
43	Subtract line 42 from line 36. Enter -0- if line					0
44	Subtract line 41 from line 38. Enter -0- if line	41 is more than lin	e 38	44		
	Caution: If there is an amount on either line 4	3 or line 44, you m	oust file Form 472	20.		
	(Some organizations that made a section See the instructions	for lines 45 through		of the instruction	ns.)	
	Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount	168,389	184,466	149,715	155,138	657,708
<u>46</u>	Lobbying ceiling amount (150% of line 45(e))			 	· · · · · · · · · · · · · · · · · · ·	986,562
47	Total lobbying expenditures	13,644	5,705	6,408	0	25,757
48	Grassroots nontaxable amount	42,097	46,117	37,429 38		164,428
49	Grassroots ceiling amount (150% of line 48(e))					246,642
50	Grassroots lobbying expenditures	16,324	9,365	18,655	9,919	54,762
Pa	rt VI-B Lobbying Activity by Nonele (For reporting only by organize			art VI-A) (See	page 14 of th	e instructions.)
	ng the year, did the organization attempt to influence public opinion on a legislative in	uence national, sta	ite or local legisla	ation, including a	1 1	Amount
	Volunteers		,			
b		tion in expenses re	ported on lines of	through h.)		
C	Media advertisements					
d		· · · · · · ·				
е	D 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				.	
f	Grants to other organizations for lobbying pur	poses			.	

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

_		(Form 990 or 990-EZ)	2007				F	age 7	
Par	t VI			ransfers To and Transa e page 14 of the instruction	ctions and Relationships With ns.)	Nonc	hari	table	
51					following with any other organization de on 527, relating to political organizations		d in s	section	
а	Tran	nsfers from the rep	orting organization	to a noncharitable exempt orga	anization of:		Yes	No	
		Cash				51a(i)		1	
		Other assets .				a(ii)		✓	
b	Other transactions:								
-	m	Sales or exchang	es of assets with a	noncharitable exempt organiza	tion	b(i)	i	/	
	an	_		• •		b(ii)		√	
	(iii)			ner assets		b(iii)	√		
	(iv)		rrangements .	b(iv)	1				
	• •		arantees	b(v)	1				
		· · · · · · · · · · · · · · · · · · ·		ship or fundraising solicitations		b(vi)	1		
С				sts, other assets, or paid emplo		С	1		
đ	If the	e answer to any of ds, other assets, o	the above is "Yes," or services given by	complete the following schedule the reporting organization. If t	he organization received less than fair mals, other assets, or services received				
Line	a) no.	(b) Amount involved	Name of none	(c) chantable exempt organization	(d) Description of transfers, transactions, and sha		angem	ents	
_51b	(iii)	10,725	CT Citizen Action G	roup, Inc.	office space & telephones for 3 employees				
_51b	(iv)		CT Citizen Action C		reimb for health insurance for CCRG employees				
_51b)(v)		CT Citizen Action C		balance due on loan @ 8% interest				
_51b	(vi)	136,568	CT Citizen Action C	roup, Inc.	ro rated cost of shared telephone & field canvass				
51	lc	see 51b(iii)	CT Citizen Action G		one of CCRG's 3 offices is shared with CCAG,				
51c			CT Citizen Action Group, Inc.		shared donor lists-trade/in-kind				
	lc		CT Citizen Action Group, Inc.		CCRG shares part time CFO-each pay sep	arately			
51	1c		United Auto Worke	r's Region 9A	donates in-kind office space for 2 staff				
				· · · · · · · · · · · · · · · · · · ·					
						<u>.</u>			
			<u> </u>						
	desc	cribed in section 5		other than section 501(c)(3)) or i	ne or more tax-exempt organizations in section 527?	☑ Yes	. [] No	
(a) Name of organization				(b) Type of organization	(c) Description of relationship				
CT C	itizer	n Action Group, Inc.		501(c)4	A historical and continuing relationship that				
					includes some joint programs and fundra		S		
					well as sharing one of our 3 offices. Ther	re are			
					no common board members, except for o				
					Contracts govern the financial obligations	s of eac	h		
					organization to the other & are adopted b	iannual	lly		
					by each board of directors.				
				· · · · · · · · · · · · · · · · · · ·					
			······································						

Name of the organization CT Citizen Research Gr	oup, inc.		cmplayer laer	uncauon number 0889894	
Section B: This is an a	nended return.				
The reason for amendir	g our original return is due to submitting our prev	ious return befo	ere we obtain	ed our audited	
financial statements. C	ur original return therefore did not have the adjust	stments to reve	nue and net	asset	
accounts that are nece	ssary to demonstrate compliance with SFAS 117.	Our amended i	return reflects	that.	
We had previously rep	orted deferred revenue' liabilities and matching de	ductions from r	evenue. We i	10W	
are reporting our previous	usly deferred revenue as Temporarily Restricted I	let Assets, and	adjusting rev	enue accordingly.	
Part I line 20: explanation	n of change in net assets from previous year:				
An adjustment was mad	e to our net assets carried forward from previous	year to conforn	n with SFAS 1	17 as explained	
above. The detailed bre	akout of the change is reflected in Part IV Column	A (Balance She	eets-beginnin	g of year) lines 62 &	
68. We re-classified th	\$49453 that had been reported on line 62 as defe	rred revenue to	line 68-Temp	orarily Restricted	
Net Assets.					
Part II-Line 22b: Grants	made:		····		
CT Citizen Action Grou	o, 30 Arbor Street STE 6N, Hartford, CT (ein # 06-0	872695/ 501(c)4	\$300,000		
National Association of Social Workers, 2139 Silas Deane Hwy. Rocky Hill CT (ein # 06-0907232/ 501(c)6) \$34,250					
Part IV: Line 55 a & b					
Equipment: Cost i	Basis: Acc	umulated Depre	ciation:		
Office furniture:	\$2,533.48	\$2,533.48			
Computer:	\$ 577.69	\$ 577.69			
Total as of 12/31/07	\$3,111.17	\$3,111.17			
·					