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DLN: 93493166007120

Form **990** 

Department of the Treasury Internal Revenue Service

# **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)

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

2008

Open to Public Inspection

A Fo	or the 2	2008 ca	lendar yea	r, or tax year beginning 08-01-2008	and ending 07-31-200	19								
_		plicable	Please	C Name of organization CITIZEN LOBBY INC AKA NJPIRG CITIZEN	D Employer identification number									
_	dress cha	,	use IRS label or	Doing Business As	22-2708332 E Telephone number									
_	me char		print or type. See	NJPIRG Citizen Lobby			(609) 394-8	155						
_	tıal retur		Specific Instruc-	Number and street (or P O box if mail is 143 East State Street No Ste 6	not delivered to street addre	ess) Room/suite	G Gross receipts							
_	mınatıoı		tions.											
_	nended r			City or town, state or country, and ZIP + TRENTON, NJ 08608	4									
Ар	plication	pending												
			<b>F</b> Nan allıson	ne and address of Principal Officer cairo			s a group return	for ┌ Yes <b>┌</b> No						
			143 Ea	st State Street No Ste 6		affilia	tes	j tes je No						
Ta	y-eyem	pt status		ON, NJ 08608 ) (4) ◀ (Insert no )		<b>I(b)</b> Are all affiliates included? Yes No								
		·			327		o," attach a list p Exemption Nur	See instructions )						
w	eb site	e: <b>F</b> - vv vv	WNJPIRG	ORG		H(c) 0100	p Exemption War	nber P						
( Тур	e of org	anızatıon	Corporat	ion		<b>L</b> Year of Fo	rmation 1986 M S	State of legal domicile NJ						
Pa	rt I	Sumr	marv											
				e organization's mission or most sigi	nıfıcant actıvıtıes									
Ų		ADVOC	ATES FOR	R REFORMS TO BENEFIT THE GENI	ERAL PUBLIC AND EN	GAGES IN PL	BLIC INTEREST	LITIGATION						
Ě														
Ē	_													
aoyemidiice	1		,	if the organization discontinued its o				-						
	1		_	nembers of the governing body (Part										
ß	1			ident voting members of the governin nployees (Part V , line 2a)	D)									
ACUMUES &	1			lunteers (estimate if necessary)		_	10							
₹	1			ted business revenue from Part VIII			_	0						
				ness taxable income from Form 990				0						
					Pric	or Year	Current Year							
Revenue	8	Contrib	butions and	d grants (Part VIII, line 1h)			237,680	466,760						
	9	Progra	m service	revenue (Part VIII, line 2g)			0							
łą.	10			ne (Part VIII, column (A), lines 3, 4		39,978	23,617							
_	11		•	art VIII, column (A), lines 5, 6d, 8c			11,030	0						
	12	10tair 12)	evenue—a	dd lines 8 through 11 (must equal Pa	e	288,688	490,377							
	13	Grants	and simila	ar amounts paid (Part IX, column (A)	, lınes 1–3)			115,746						
	14		•	r for members (Part IX, column (A),	•			0						
82	15	Salarıe 10)	s, other co	ompensation, employee benefits (Par	t IX, column (A), lines	5 –	37,194	21,826						
Expenses	16a	•	sional fund	raising fees (Part IX, column (A), lin	e 11e)		,	0						
<u>ਵੇਂ</u>	ь	(Total fu	ındraising exi	penses, Part IX, column (D), line 25 79,895	)									
ш	17	Other	expenses (	Part IX, column (A), lines 11a-11d,	, 11f-24f)		171,245	354,396						
	18	Totale	xpenses—	add lines 13–17 (must equal Part I)	K, line 25, column (A))		208,439	491,968						
	19	Revent	ue less exp	penses Subtract line 18 from line 12			80,249	-1,591						
8 00°						Beginni	ing of Year	End of Year						
, <del>č</del>	20	Totala	ssets (Par	t X, line 16)			4,866,162	4,578,099						
net Assets or Fund Bakances	21	Totall	ıabılıtıes (F	Part X, line 26)			125,567	127,316						
	22			d balances Subtract line 21 from lin	e 20		4,740,595	4,450,783						
Pa	rt II		ature Blo											
				erjury, I declare that I have examined this re- correct, and complete Declaration of prepare										
Plea		****					-06-15							
Sigr Ier		Signa	ature of office	21		Date								
	-		n Cairo exec	utive director										
	1	<b>F</b> 'ype	or print nam	c and the	Data T	Charle C	D							
<b>1</b> -!-!		Preparer' signature		Oreboty CPA		Check if self-	Preparer's PTIN (	bee Gen Inst )						
Paid Pron	arer's			- MEDICARYEN DO		empolyed 🕨 🦵								
•	Only	ıf self-em	nme (or yours	P			EIN 🕨							
	-··· <b>y</b>	address,	and ZIP + 4	PO BOX 7648		_ <del>_</del>	Phone no ▶ (60	9) 689-9700						
			_ 17	PRINCETON, NJ 085437648	·		Thone no F (60	9) 669-9700 ✓ Vas □ No						
1121	Tha IDO	- diecue	c thic ratio	rn with the preparer shown above? (9	AA INCTINCTIONS			IN YOU I NO						

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

1	Briefly describe the organization's ADVOCATES FOR REFORMS TO B		IC AND ENGAGES IN PU	JBLIC INTEREST LITIG	ATION							
2	Did the organization under the prior Form 990 or 990	-EZ?		┌ Yes ┌ No								
	If "Yes," describe these no	ew services on Schedu	le O									
3	Did the organization cease services?		ignificant changes	in how it conduct	s any program · · · · · ·	┌ Yes ┌ No						
	If "Yes," describe these ch	hanges on Schedule O										
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	When consumers are cheated threats to public health and we	ell-being and fight to end th n is to deliver persistent, re	izens are drowned out em, using the time-tes	sted tools of investigat	tive research, media exposes	) d takes action We uncover s, grassroots organizing, advocacy a fair, sustainable economy, and						
4b	(Code	) (Expenses \$	ıncluding g	grants of \$	) (Revenue \$	)						
4c	(Code	) (Expenses \$	ıncludıng g	grants of \$	) (Revenue \$	)						
4d	Other program services				/D +	,						
_	(Expenses \$		grants of \$	<u> </u>	(Revenue \$	)						
4e	Total program service ex	penses \$	361,451 <i>Must</i>	equal Part IX, Line	25, column (B).							

Part IV	Checklist of	Required	Schedules
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			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		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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		No
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		No
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
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		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
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? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
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		Νo
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule $H$	20		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
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
b	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 $I$			No
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	25b		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		
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	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	<b>1a</b> 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
Ь	If at least one is reported in 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
b				
_	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1,</b> <i>Report of Foreign Bank and</i>			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5с		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		N o
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
7	were not tax deductible?	ОВ		
	Did the organization provide goods or services in exchange for any guid pro quo contribution of \$75 or	7a		Νο
a	more?	/a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
_	file Form 8282?	7c		<u> No</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νο
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		Νο
	required?	711		
8	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the	8		
_	year?			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a		
_	Did the organization make any taxable distributions under section 4966?	9a 9b		
ь 10	Section 501(c)(7) organizations. Enter	<i>3</i> U		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
U	facilities			
11	Section 501(c)(12) organizations. Enter			
	Section 501(c)(12) organizations Enter  Gross uncome from members or shareholders			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

6

8

11

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

2

3

4

5

6

7a

7Ь

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

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,
.a	Enter the number of voting members of the governing body	1a	7
b	Enter the number of voting members that are independent	1b	6

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

3	Did the organization delegate control over management duties customarily performed by or under the direct
	supervision of officers, directors or trustees, or key employees to a management company or other person?
į.	Did the organization make any significant changes to its organizational documents since the prior Form 990 w

Did the organization make any significant changes to its organizational documents since the prior Form 990 was
filed?
Did the organization become aware during the year of a material diversion of the organization's assets?

Does the organization have	members or st	tockholders	•				•			
Does the organization have	members, sto	ckholders, o	r other	persons	who ma	y elect	one	or more	memb	ers of the
governing body?										_

Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .
	Did the organization contemporaneously document the meetings held or written actions undertaken during the

	Did the organization (	. 0111	em	pore	illec	usi	y u	, cui	пеп	L LII	e III	eeti	iiy s	Heli	u Oi	44111	LLEII	acı	.1011	s ui	iuei	Lake	en u	uiiii	y tii	E
	year by the following																									
а	the governing body?	_	_		_	_		_	_		_	_	_	_	_	_	_	_	_		_	_	_	_	_	_

D	each committee with authority to act on behalf of the governing body?	•	•	•	•	•	•	•	•	•	•	•	٠
9a	Does the organization have local chapters, branches, or affiliates? .												

ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,
	affiliates, and branches to ensure their operations are consistent with those of the organization?
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations

Was a copy of the Form 990 provided to the organization's governing body befor	e it was filed? All organizations
must describe in Schedule O the process, if any, the organization uses to review	w the Form 990

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cann	ot !	be i	reac	hed	at
the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		•			

8a	Yes	
8b		No
9a		No
9b		
10	Yes	
11		No

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a		Νo
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Does the organization have a written whistleblower policy?	13		Νo
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		Νο
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 NJ
- 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 Jacob Koetsier
  143 E STATE STREET SUITE 6
  TRENTON NJ 08608

TRENTON, NJ 08608 (609) 394-8155

# Part VIII 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 not compensate any officer, director, trustee or key employee											
		(C) Position (check all that apply)								(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
ED LLOYD , CHAIR	20	Х		Х				0	0	0	
DENA MOTTOLA JABORSKA, Treasurer	20	Х		Х				0	0	0	
ANDREA SULLIVAN , SECRETARY	20	Х		Х				0	0	0	
Sam Boykın , Member at Large	20	Х		Х				0	0	0	
Allison Cairo , Member & Executive Direc	2 50	Х		Х				8,342	0	1,215	
Rex Wilmouth , Member	20	Х						0	0	0	
Emily Rusch , Member	20	Х						0	0	0	
			<u> </u>								
			<u> </u>								

#### Part VII Continued

<b>(A)</b> Name and Title	(B) Average hours per week	on Individual Trustee or Prestor		apply	y) Føj	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total			•	<u>Ш</u>		<u> </u>	<b>&gt;</b>	8,342	2 0	1,215
									1	1

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶0

			res	140
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$	100,000 in compensation	0

# Part Statement of Revenue VIII

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
* * *	1a	Federated camp	paigns 1a	1				314
gifts, grants illar amounts	ь	Membership du	es 1 <b>b</b>					
Σ,∰	С	Fundraising eve	ents <b>1</b> 0	:				
£₩	d	Related organiz	ations 1d					
ું.≣	e	Government grants	s (contributions) <b>1e</b>					
를 고 S	f	All other contribution	ons, gifts, grants, and 1f	466,760				İ
音巻	g		butions included in					
Contributions, and other simil		lines 1a-1f \$ _						
ပြွန်	h	Total (Add line	s 1a-1f)		466,760			
<u>a</u>				Business Code				
æm	2a							
æ	Ь							
931	c							
<u> </u>	d							
Ē	е							
Program Serwce Revenue	f	All other progra	am service revenue					
Ť	g	Total. Add lines	s 2a-2f	\$				
	3		ome (ıncludıng dıvıden					
		other sımılar ar	mounts)	•	23,617			23,617
	4	Income from inves	tment of tax-exempt bond	proceeds -				
	5	Royalties						
	6-	Gross Rents	(ı) Real	(II) Personal				
	6a b	Less rental						
		expenses Rental income						
	С	or (loss)		<u> </u>				
	d	Net rental incor	me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	' "	from sales of assets other						
		than inventory Less cost or						
	b	other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gaın or (los	s)					
	8a	Gross income f events (not inc						
ä			reported on line 1c)					
Other Revenue		See Part IV, lin Attach Schedule	ie 18 <i>G if total exceeds</i>					
Ä			a					
₫	ь		penses b					
돌	С		loss) from fundraising	events 🟲				
	9a	See part IV, lın	rom gaming activities e 19 ule G if total exceeds					
	ь		a penses b					
	С		loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
	ь		oods sold <b>b</b>					
	С		loss) from sales of inv					
	4.4	Miscellaneous	Revenue	Business Code				
	11a							
	b							
	°							
	d	All other revenu						
	e		s 11a-11d		400 277		0	22.647
	12	Total Revenue. 9c. 10c. and 11	Add lines 1h, 2g, 3, 4	, 5, 6d, 7d, 8c, ▶	490,377	0	U	23,617

# Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orga Il other organizations must complete column (A) but are not re				).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	115,746	115,746		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	676	270	372	34
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	16,305	11,414		815
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	48	34	12	2
9	Other employee benefits	2,965	2,076	741	148
10	Payroll taxes	1,832	1,282	458	92
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	9,500	6,650	2,375	475
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	14,125	9,888	3,531	706
12	Advertising and promotion				
13	Office expenses	5,236	3,665	1,309	262
14	Information technology				
15	Royalties				
16	Occupancy	9,457	6,620	2,364	473
17	Travel	499	349	125	25
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest				
21	Payments to affiliates	21,855	21,855		
22	Depreciation, depletion, and amortization	735	515	183	37
23	Insurance	1,371	959	343	69
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	Citizen Outreach Expens	282,544	173,777	32,464	76,303
b	RENTAL LOSSES - PARTNER	8,839	6,187	2,210	442
c	dues & SUBSCRIPTIONS	235	164	59	12
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	491,968	361,451	50,622	79,895
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				New 900 (2009)

Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			Degining or year	1	Life of year
	2	Savings and temporary cash investments			135,304	2	358,589
	3	Pledges and grants receivable, net		3	·		
	4	Accounts receivable, net			3,654,092	4	2,552,398
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L		5	<u> </u>		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	ction 4			6	
	7	Notes and loans receivable, net			5,000	7	
	8	Inventories for sale or use				8	
Ø	9	Prepaid expenses and deferred charges			221	9	
ē	10a	•					
Assets		Land, buildings, and equipment cost basis	10a	93,818			
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь	91,413	3,140	10c	2,405
	11	Investments—publicly traded securities			6,172		4,577
	12	Investments—other securities See Part IV, line 11 Complete Pa	rt VII o	-	1,048,006		769,290
	13	Investments—program-related See Part IV, line 11 Complete Part IV of Schedule D.	art VIII			13	
	14	Intangible assets				14	
	15	Other assets See Part IV , line 11 Complete Part IX of Schedule			14,227		890,840
		D				15	·
	16	Total assets. Add lines 1 through 15 (must equal line 34)			4,866,162	16	4,578,099
	17	Accounts payable and accrued expenses .			125,567	17	127,316
	18	Grants payable				18	
	19	Deferred revenue				19	
10	20	Tax-exempt bond liabilities				20	
ğ	21	Escrow account liability				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				25	
	26	<b>Total liabilities.</b> Add lines 17 through 25			125,567	26	127,316
s e e		Organizations that follow SFAS 117, check here ▶   and complethrough 29, and lines 33 and 34.	ete line	es 27			
anc	27	Unrestricted net assets			4,740,595	27	4,450,783
Balance	28	Temporarily restricted net assets				28	
<u> </u>	29	Permanently restricted net assets				29	
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ and lines 30 through 34.	d compl	ete			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
Así	32	Retained earnings, endowment, accumulated income, or other fur				32	
Net	33	Total net assets or fund balances			4,740,595	33	4,450,783
Z	34	Total liabilities and net assets/fund balances			4,866,162	34	4,578,099
	!						
Pa	rt XI	Financial Statements and Reporting					

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	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		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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?	За		Νo
b	If "Yes," did the organization undergo the required audit or audits?	3b		

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

**Employer identification number** Name of the organization CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBBY 22-2708332 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts

Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other

impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat

Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Held at the End of the Year

2a Total number of conservation easements h 2b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨

Number of states where property subject to conservation easement is located

Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨

7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and

balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

**►** \$

2c

2d

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2008

3	Organizations Maintaining Collections of Art	·/ · · · · ·						
	Using the organization's accession and other records, check an items (check all that apply)	y of th	ne foll	owing that are	a significant us	se of its collection		
а	Public exhibition	d	Γ	Loan or excha	ange programs			
b	Scholarly research	e	Γ	Other				
С	Preservation for future generations							
4	Provide a description of the organization's collections and explanation XIV	ıın hov	w the	y further the or	ganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as					ılar 🕝 🧎	es (	Г No
Par	Trust, Escrow and Custodial Arrangements. Part IV, line 9, or reported an amount on Form 99				uzation answ	ered "Yes" to Fo	rm 9	90,
1a	Is the organization an agent, trustee, custodian or other intermincluded on Form 990, Part X?	ediary	for c	ontributions or	other assets r	not $ abla_{i}$	es (	┌ No
b	If "Yes," explain why in Part XIV and complete the following tab	le						
						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 Form 990, Part X, lin	e 21?				Γ,	es (	│ No
	If "Yes," explain the arrangement in Part XIV							
Pai	rt V Endowment Funds. Complete if the organizatio						Equr Va	aare Back
1_	(a)Current Year	(D	Prior `	rear   (C)TWO	Years Back (d)	Three Years Back (e)	rour re	ears back
1a L	Beginning of year balance							
b	Investment earnings or losses							
c d	Grants or scholarships							
e e	Other expenditures for facilities							
-	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year end balance held	as						
_	Board designated or quasi-endowment							
а								
a b	Permanent endowment 🕨							
_	Permanent endowment   Term endowment							
b		atıon	that a	are held and ad	ministered for	the _		
b c	Term endowment -  Are there endowment funds not in the possession of the organiz organization by	ation	that a	are held and ad	ministered for		Yes	No
b c	Term endowment   Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations				ministered for	3a(i)	Yes	No
b c 3a	Term endowment   Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations				ministered for t	3a(i) 3a(ii)	Yes	No
b c 3a b	Term endowment   Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations	 d on S	sched		ministered for	3a(i)	Yes	No
b c 3a b	Term endowment   Are there endowment funds not in the possession of the organization by  (i) unrelated organizations	 d on S dowm	ched	ule R?		3a(i) 3a(ii)	Yes	No
b c 3a b	Term endowment  Are there endowment funds not in the possession of the organization by  (i) unrelated organizations	 d on S dowm	ched ent fu	ule R? nds	t X, line 10.	3a(i) 3a(ii) 3b		
b c 3a b	Term endowment   Are there endowment funds not in the possession of the organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R?		3a(i) 3a(ii)		
b c 3a b 4 Par	Term endowment  Are there endowment funds not in the possession of the organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R? nds orm 990, Pai	t X, line 10.	3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R? nds orm 990, Pai	t X, line 10.	3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Term endowment  Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R? nds orm 990, Pai	t X, line 10.	3a(i) 3a(ii) 3b		No pook value
b c 3a b 4 Par	Term endowment  Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R? nds orm 990, Pai	t X, line 10.  (b)Cost or other basis (other)	3a(i) 3a(ii) 3b  (c) Depreciation		ook value
b c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organiz organization by  (i) unrelated organizations	 d on S dowm	ent fu	ule R? nds orm 990, Pai	t X, line 10.  (b)Cost or other basis (other)	(c) Depreciation		ook value

Part VII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other INVESTMENT IN PARTNERSHIP	769,290		F
	760 200		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 ) ▶	769,290		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 1	13.	
(a) Description of investment type	(b) Book value		d of valuation
	(=,====================================	Cost or end-of-	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, II	ne 15.		
(a) Descri			(b) Book value
SECURITY DEPOSITS			5,190
Due from Affiliates			885,650
Total. (Column (b) should equal Form 990, Part X, col.(B) line			890,840
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
7.1.1 (0.1 (l.) short! 15 000 5 111 115 15 15			
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25)	1		

Par	Reconciliation of Cl	hange in Net Assets from Forr	n 99	0 to F	inancial Stateme	nts	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)				1	490,377
2	Total expenses (Form 990, Par	t IX, column (A), line 25)				2	491,968
3	Excess or (deficit) for the year Subtract line 2 from line 1						-1,591
4	Net unrealized gains (losses) o	n investments				4	-288,221
5	Donated services and use of fac					5	
6	Investment expenses					6	
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	
9	Total adjustments (net) Add Iir	nes 4 - 8				9	-288,221
10	•	per financial statements   Combine line	s 3 an	4 9		10	-289,812
		evenue per Audited Financial			ts With Revenue		
1	Total revenue, gains, and othe						490,377
	statements					1	
2		t not on Form 990, Part VIII, line 12		ı			
а	Net unrealized gains on invest		•	2a		-	
b	Donated services and use of fa		•	2b		-	
С	Recoveries of prior year grants		•	2c		-	
d	Other (Describe in Part XIV)		•	2d		-	
е	Add lines <b>2a</b> through <b>2d</b>					2e	0
3	Subtract line <b>2e</b> from line <b>1</b> .		•			3	490,377
4		0, Part VIII, line 12, but not on line 1		_			
a		uded on Form 990, Part VIII, line 7b	•	4a		-	
b	Other (Describe in Part XIV)			4b		ا ہ ⊦	
с _	Add lines 4a and 4b			• •		4c	0
5 Dart		d <b>4c.</b> (This should equal Form 990, Par <b>kpenses per Audited Financia</b>				5 S per	490,377
1		audited financial statements			· · · · · · ·	1	491,968
2		not on Form 990, Part IX, line 25					15 = 75 = 5
а	Donated services and use of fa			2a			
b	Prior year adjustments			2b		1	
с	• •	Part IX, line 25		2c			
d	Other (Describe in Part XIV)			2d		1	
e	Add lines <b>2a</b> through <b>2d</b>			-		2e	0
3	Subtract line <b>2e</b> from line <b>1</b> .					3	491,968
4	A mounts included on Form 990	), Part IX, line 25, but not on line 1:					
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b		4a			
b	Other (Describe in Part XIV)			4b			
c	Add lines <b>4a</b> and <b>4b</b>					4c	0
5	Total expenses Add lines <b>3</b> an	d <b>4c.</b> (This should equal Form 990, Pai	t I, lır	ne 18)		5	491,968
Par	XIV Supplemental Inf	ormation					
		criptions required for Part II, lines 3, ! Part XII, lines 2d and 4b, and Part XI				art XIV	, lines 1b and 2b,
	Ident if ier	Return Reference			Explanat	tion	

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DLN: 93493166007120

OMB No 1545-0047

Department of the Treasury

Schedule I

(Form 990)

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

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

Open to Public

Name of the organization		2.57				Employer identi	fication number
CITIZEN LOBBY INC AKA NJF	PIRG CITIZEN LOE	ЗВҮ				22-2708332	
Part I General Inform	mation on Gran	its and Assistance	1				
<ol> <li>Does the organization mathe selection criteria use</li> <li>Describe in Part IV the organization</li> </ol>	d to award the gran rganızatıon's proce	ts or assistance? dures for monitoring th	e use of grant funds in th	ne United States			
Form 990, Part I Part IV and Sch	IV, line 21 for an edule I-1 if addit	y recipient that rece ional space is	ived more than \$5,00	00. Check this box if	es. Complete if the of no one recipient rec	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
Environment New Jersey Inc 143 East State Street Ste 7 Trenton, NJ 08608	56-2605733	501(c)(4)	115,746	0			A ffecting environmental policies in a manner that will further the work of Citizen Lobby, Inc
2 Enter total number of sec			<u>I</u>				0
organizations							<b>&gt;</b> 1

Part III	<b>Grants and Other Assista</b>	nce to Individuals in the United States	. Complete if the organization	answered "Yes'	" on Form 990,	Part IV, lır	ne 22.
	Use Schedule I-1 (Form 990	) if additional space is needed.					

(a)Type of grant or assistance	( <b>b)</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

See Additional Data Fable		
Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 Environment New Jersey, Inc is to provide a letter of certification to Citizen Lobby, Inc within sixty days of the close of each fiscal year in which grant funds are expended. The letter will certify compliance with the terms of the grant agreement. The report shall be signed by the Executive Director or Acting Director or board designee of Environment New Jersey, Inc

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As Filed Data -

DLN: 93493166007120

**SCHEDULE 0** 

Department of the Treasury
Internal Revenue Service

(Form 990)

# **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	Employer identification number
CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBBY	
	22-2708332

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 8b		Citizen Lobby, Inc. does not have any committees with authority to act on behalf of the governing body

Identifier Return Reference		Explanation
Form 990, Part VI, Section A, line 10		THE Form 990 IS REVIEWED AND APPROVED BY THE BOARD MEMBERS

ldentifier	Return Reference	Explanation			
Form 990, Part VI, Section B, line 15		Susan Rakov of the Fund for the Public Interest, Inc , an affiliate of Citizen Lobby, Inc , reviews wage and salary amounts and increased requests. They are determined reasonable based on length of employment with the Public Interest Network, education level, position, and are compared to the salaries of other staff in similar positions nationally.			

ldentifier	Return Reference	Explanation			
Form 990, Part VI, Section C, line 19		THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST FOR THE INFORMATION			

ldentifier	Return Reference	Explanation			
Form 990, Part XI, Line 2c		The board of directors reviews the Form 990 annually			

DLN: 93493166007120

OMB No 1545-0172

Internal Revenue Service

# **Depreciation and Amortization** (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Sequence No 67

Name(s) shown on return CITIZEN LOBBY INC AKA NJPIRG CITIZEN	Business or activity to which this form relates Form 990 Page 10			Identifying number 22-2708332			
LOBBY							
Part I Election To Expense Certain Note: If you have any listed pro				nplete Par	t I.		
1 Maxımum amount See the instructions for a hig	her limit for certair	n businesses				1	250,000
2 Total cost of section 179 property placed in service (see instructions)						2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)						3	800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-						4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing							
separately, see instructions			- I mame		_	5	
separately, see instructions 1 1 1 1		· · · ·	<u> </u>				
(a) Description of property		1 ' '	(business us only)	e (c) El	ected	cost	
6							
7 Listed property Enter the amount from line 29			. 7				
8 Total elected cost of section 179 property Add	l amounts ın colum	n (c), lines 6	and 7 .			8	
9 Tentative deduction Enter the smaller of line 5	orline 8					9	
10 Carryover of disallowed deduction from line 13	of vour 2007 Form	4562 .				10	
11 Business income limitation Enter the smaller of business in	•		e instructions)			11	
12 Section 179 expense deduction Add lines 9 an						12	
13 Carryover of disallowed deduction to 2009 Add	·			<u> </u>			
	·		. • 13				
Note: Do not use Part II or Part III below fo Part II Special Depreciation Allowan				t include lie	tod n	operty	/ ) (See instructions )
14 Special depreciation allowance for qualified property year (see instructions)						14	( ) (See mistractions )
15 Property subject to section 168(f)(1) election					_	15	
16 Other depreciation (including ACRS)					•	16	735
Part III MACRS Depreciation (Do not	include listed pro	nerty ) (Se	e instruction	ns )	•	10	733
MACKS Depreciation (Do not		tion A	.c msa acac	,,,,			
17 MACRS deductions for assets placed in service			008 .			17	
18 If you are electing to group any assets pl				one or n	nore		
general asset accounts, check here .		_	•		<b>▶</b> □		
Section B—Assets Placed in Service						recia	tion System
	) Basis for						
(a) Classification of property (b) Month and de year placed in service	preciation ss/investment use	<b>d)</b> Recovery period	(e) Conven	nvention (f)		d	(g)Depreciation deduction
only—se	ee instructions)					+	
<b>b</b> 5-year property						_	
c 7 - year property							
d 10-year property							
e 15-year property							
f 20-year property							
g 25-year property		25 yrs			5/L		
h Residential rental		27 5 yrs	ММ		5/L		
property		27 5 yrs	мм		 S/L		
i Nonresıdentıal real		39 yrs			S/L		
property		·	мм	·			
Section C—Assets Placed in Se	rvice During 2008 T	ax Year Using	the Alterna	tive Depre	ciat ior	Syste	em
20a Class life			S/L		S/L		
<b>b</b> 12-year		12 yrs			S/L		
<b>c</b> 40 - year		40 yrs	ММ		S/L		
Part IV Summary (See instructions)							
<b>21</b> Listed property Enter amount from line 28 .						21	
22 Total. Add amounts from line 12, lines 14 throu and on the appropriate lines of your return Part				e 21 Ente	r here	22	735
23 For assets shown above and placed in service of portion of the basis attributable to section 263/		ear, enter the	23				

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? \_ . . . . . . 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or

#### amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44