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Form **990**

Department of the Treasury

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)

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

2009

OMB No 1545-0047

Open to Public Inspection

			nr, or tax year beginning 08-01-2009 C Name of organization	and ending 07-31-201	0	D Employer ide	ntification number
_	ck if app	· icusc	C Name of organization CITIZEN LOBBY INC AKA NJPIRG CITIZE	N LOBBY			
_	ress cha	label or	Doing Business As			22-2708332 E Telephone nu	
_	ne chang	type. See	NJPIRG Citizen Lobby			(609) 394-8	155
_	al return minated	Instruc-	Number and street (or P O box if mail 143 East State StreeT No Ste 6	is not delivered to street addre	ss) Room/suite	G Gross receipts \$	
-	ended re lication i	eturn pending	City or town, state or country, and ZIP TRENTON, NJ 08608	+ 4			
			 me and address of principal officer		117-2 7		_
		Allison			n(a) Is the	s a group return tes?	TYes ▼No
			ast State StreeT No Ste 6 ON,NJ 08608				
		INZIVI	O.N., N.S. 00000		1	l affiliates include	·
Tax	-exemp	ot status 🔽 501(c	(insert no)	527		o, attach a list ip exemption nur	(see instructions) nber ►
We	ebsite:	► WWW NJPIRG	ORG				
			tion Trust Association Other 🕨		L Year of fo	rmation 1986 M	State of legal domicile N
Par	1 E		ne organization's mission or most si				
,	- - -		R REFORMS TO BENEFIT THE GEN				
		,	if the organization discontinued it				
		_	members of the governing body (Pa				
			ndent voting members of the govern))		
			mployees (Part V, line 2a)			5	
			olunteers (estimate if necessary) ited business revenue from Part VII			6	
		-	iness taxable income from Form 99	, , , , , , , , , , , , , , , , , , , ,	•	7a 7b	
		ver america bas	mess taxable meeme nom rom sy		Prio	r Year	Current Year
	8	Contributions an	d grants (Part VIII, line 1h)		1110	466,760	704,01
ļ ļ	9		revenue (Part VIII, line 2g)		100,700	701,01	
1			me (Part VIII, column (A), lines 3,			23,617	11,84
같	11		art VIII, column (A), lines 5, 6d, 8			,	4,91
	12		dd lines 8 through 11 (must equal F		e		
						490,377	720,77
	13		ar amounts paid (Part IX, column (A			115,746	
	14		or for members (Part IX, column (A) ompensation, employee benefits (Pa				
<u> 8</u>	15	10)	ompensation, employee benefits (F	art 1x, column (x), mes :	,-	21,826	15,34
Expenses	16a		draising fees (Part IX, column (A), li	•			
1			penses (Part IX, column (D), line 25) ► 72,8				
	17		(Part IX, column (A), lines 11a-11			354,396	355,82
	18 19		Add lines 13-17 (must equal Part I			491,968	371,17
Fund Balances	19	Revenue less ex	penses Subtract line 18 from line 1	2		-1,591 g of Current ear	349,60 End of Year
ege [20	Total assets (Pa	rt X, line 16)			4,578,099	4,065,82
<u>p</u>			Part X, line 26)			127,316	181,09
Ē	22		nd balances Subtract line 21 from l			4,450,783	3,884,73
Par	t II	Signature Bl	ock		<u> </u>	•	
			erjury, I declare that I have examined this i correct, and complete Declaration of prepa				
ign ere		****** Signature of office	er		2011- Date	06-14	
		Allison Cairo Exec					
aid		Preparer's signature JACK	H FEIN CPA		Check if	Preparer's identify (see instructions)	ring number
	rer's	Firm's name (or your	s L MERCADIEN PC		empolyed 🕨 🦵		
se C	anly	ıf self-employed),				EIN 🕨	
		address, and ZIP + 4	PO BOX 7648			Phone no 🕨 (60	9) 689-9700
			DDINGETON NI COE437640			1	-,,
			PRINCETON, NJ 085437648				Vas ENO

Cat No 11282Y

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

ADVOCATES FOR REFORMS TO BENEFIT THE GENERAL PUBLIC AND ENGAGES IN PUBLIC INTEREST LITIGATION

4e	Total program service	e expenses►\$	259,459			
4d	Other program servic (Expenses \$	es (Describe in Sche inclu	dule O) ding grants of\$)	(Revenue \$)
4c	(Code) (Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	including	grants of \$) (Revenue \$	
	fosters responsive, democ					
	threats to public health an and litigation NJPIRG's m	id well-being and fight to e ission is to deliver persister	nd them, using the time-t	ested tools of investiga	tive research, media expose	nd takes action We uncover es, grassroots organizing, advocacy es a fair, sustainable economy, and
4a	(Code) (Expenses \$	259,459 includin	g grants of \$) (Revenue \$)
4	Describe the exempt p Section 501(c)(3) and allocations to others, t	501(c)(4) organization	ns and section 4947	'(a)(1) trusts are re	quired to report the an	
_	If "Yes," describe thes	_				
3	Did the organization ce services?					┌ Yes ┌ No
	If "Yes," describe thes	e new services on Sch	edule O			
2	the prior Form 990 or 9			during the year which		┌ Yes ┌ No

Part IV	Checklist	of Red	uired	Schedule

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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 similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ĺ	ĺ	
13	Is the organization a school 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 United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 U S? If "Yes," complete Schedule F, Part II	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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes,"</i> complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 line 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	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "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	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% 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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part 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			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
Ь	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 ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
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 line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
	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		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
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 vear			

143 E STATE STREET SUITE 6

TRENTON, NJ 08608 (609) 394-8155

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
ь				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
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?	3		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Νο
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		Νο
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal	9		NO
	evenue Code.)			
	,		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	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?	10b		
11				
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
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		Νo
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		
	Let the Chates with which a convertible Form COO is required to be filed. NI			
17	List the States with which a copy of this Form 990 is required to be filed NJ			
18	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	ne ora-	nization	, j e
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	mization	F-

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

▼ Check this box if the organization did r	not compens	ate any	curr	ent	or fo	rmer o	ffic e	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
KEN WARD CHAIR	50	х		х				0	0	0
ED LLOYD Treasurer	50	х		х				0	0	0
ANDREA SULLIVAN SECRETARY	50	х		х				0	0	0
CURTIS FISHER Member at Large	50	х						0	0	0
MARGIE ALT MEMBER AT LARGE	50	х						0	0	0
MATT BAKER Member	50	х						0	0	0
PAM BLACKLEDGE Member	50	х						0	0	0
allison cairo executive director	1 00			х				0	0	0

For	n 990 (2009)			Page 8
1b	Total	0		(
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶0			
			Yes	No
3	inumber of individuals (including but not limited to those listed above) who received more than cool in reportable compensation from the organization ►0 Yes No eleganization list any former officer, director or trustee, key employee, or highest compensated employee and a supplied of the such individual supplied or such individual supp			
	on line 1a? If "Yes," complete Schedule J for such individual	· · 3	}	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation fro organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	m the		
	ındıvıdual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for s rendered to the organization? If "Yes," complete Schedule I for such person			N.a
S 1	ection B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more the	an		
		B)	(0	:)
44 V		nagement		265,685
2	Total number of independent contractors (including but not limited to those listed above) who received \$100,000 in compensation from the organization ►1	nore than		

Form **990** (2009)

Form 9								Page 9
Part	<u> </u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
\$ \$	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	Ь	Membership du	ıes 1b					
S, G	c	Fundraising ev	ents 1c					
±	d	Related organiz	zations 1d					
E, S	e	Government grant	s (contributions) 1e					
district services	f	All other contribute	ons, gifts, grants, and 1f ot included above	704,011				
電影	g		ibutions included in					
펄				_	704.044			
<u>ँ</u> ल	h	Total. Add lines	s 1a-1f		704,011			
ë				Business Code				
٧en	2a							
2	b							
Program Serwce Revenue	c							
Š	d							
all	e	<u> </u>						
٥	f	All other progra	am service revenue					
	g	Total. Add lines	s 2a-2f	▶				
	3		ome (including dividen	 				
			aramounts)	-	11,847			11,847
	4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties .	() Parl					
	6a	Gross Rents	(ı) Real	(II) Personal				
	Ь	Less rental						
		expenses Rental income						
		or (loss)	L					
	d	Net rental inco	me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	"	from sales of assets other						
	١.	than inventory Less cost or						
	Ь	other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (los	ss)					
	8a		from fundraising					
Ë		events (not inc	luding					
Other Revenue			s reported on line 1c)					
ě		See Part IV, lir	ne 18					
ā.	Ь		a					
돌	"		penses b (loss) from fundraising	events 🕨				
_	9a		from gaming activities					
			ne 19					
			а					
	b		penses b					
	10a		(loss) from gaming acti	vities				
		returns and allo						
			а					
	Ь	_	oods sold b					
	С		(loss) from sales of inve					
	11-	Miscellaneous	s Kevenue	Business Code 900,099	4,915			4,915
	11a	other income		300,039	4,913			7,913
	b							
	C	Λ II -+h - · · · ·						
	d e	All other reven	ue s 11a-11d					
	-	iotai. A uu iiile:	3 11a-11u		4,915			
	12	Total revenue.	See Instructions .	▶	720,773	0	0	16.763
					120,113	U	ı	16,762

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

А	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
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				
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	12,040	9,512	1,926	602
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)				
9	Other employee benefits	2,012	1,589	322	101
10	Payroll taxes	1,292	1,021	207	64
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	11,077	8,640	2,326	111
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	896	699	188	9
12	Advertising and promotion				
13	Office expenses	5,926	4,622	1,244	60
14	Information technology				
15	Royalties				
16	Occupancy	8,842	6,897	1,857	88
17	Travel	958	748	200	10
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	55,904	55,904		
22	Depreciation, depletion, and amortization	735	574	154	7
23	Insurance	308	240	65	3
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	265,685	164,725	29,225	71,735
b	RENTAL LOSSES - PARTNER	5,259	4,102	1,104	53
c	dues & SUBSCRIPTIONS	238	186	50	2
d					_
е					_
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	371,172	259,459	38,868	72,845
26	Joint costs. Check here ▶ ▽ 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	265,685	164,725	29,225	71,735

Part X Balance Sheet (A) (B) Beainning of year End of vear 28.322 28.584 1 1 Cash—non-interest-bearing 330,267 2 1.680.219 2 3 3 4 2.552.398 4 1.101.037 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 7 8 Inventories for sale or use 9 814 Land, buildings, and equipment cost or other basis Complete Part 93.818 10a 10a VI of Schedule D 10b 92.148 2,405 **10c** 1.670 b Less accumulated depreciation 4,577 11 11 769.290 12 1,226,916 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 890.840 15 15 26.586 16 16 4,578,099 4,065,826 Total assets. Add lines 1 through 15 (must equal line 34) . . . 127.316 17 180.198 17 Accounts payable and accrued expenses 18 18 19 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities Complete Part X of Schedule D 25 896 26 Total liabilities. Add lines 17 through 25 127,316 26 181,094 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 4,450,783 3.884.732 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 📂 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 4,450,783 33 3,884,732 34 Total liabilities and net assets/fund balances 4.578.099 4.065.826 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

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DLN: 93493165008081

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Rev

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ernai Revenue Service	F Attach to Form 990. F See separate instruc	ct ions.	Inspecti	VII
Name of the organization CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBI	3Y		yer identification number	
	aining Donor Advised Funds or Other S "Yes" to Form 990, Part IV, line 6.			ıf the
or garingation another or ea	(a) Donor advised fund	ds (b) Funds and other account	ts
Total number at end of year				
Aggregate contributions to (during	g year)			
Aggregate grants from (during yea	ar)			
Aggregate value at end of year				
-	nors and donor advisors in writing that the assets l erty, subject to the organization's exclusive legal c		ed Tyes	┌ No
-	antees, donors, and donor advisors in writing that g and not for the benefit of the donor or donor adviso benefit		purpose Yes	┌ No
art III Conservation Easem	ents. Complete if the organization answere	ed "Yes" to Form	990, Part IV, line 7.	
Protection of natural habitat Preservation of open space	Preserv	ation of a certified		
	,		Held at the End of the Y	ear
Total number of conservation eas	ements	2a		
Total acreage restricted by conse	ervation easements	2b		
	its on a certified historic structure included in (a)	2c		
	its included in (c) acquired after 8/17/06	2d		
the taxable year ►	its modified, transferred, released, extinguished, oi subject to conservation easement is located ►	r terminated by the	organization during	
	ten policy regarding the periodic monitoring, inspe	ection, handling of v	riolations, and Yes	┌ No
Staff and volunteer hours devoted	to monitoring, inspecting and enforcing conservat	tion easements dui	ring the year ►	
A mount of expenses incurred in r	nonitoring, inspecting, and enforcing conservation	easements during	the year ► \$	
Does each conservation easemer 170(h)(4)(B)(i) and 170(h)(4)(B)	nt reported on line 2(d) above satisfy the requireme (II)?	ents of section	☐ Yes	┌ No
<i>,</i>	anization reports conservation easements in its re licable, the text of the footnote to the organization conservation easements	•	•	
	aining Collections of Art, Historical Tre zation answered "Yes" to Form 990, Part IV,		er Similar Assets.	
art, historical treasures, or other	rmitted under SFAS 116, not to report in its revent similar assets held for public exhibition, education ne footnote to its financial statements that describ	n or research in furt		
	rmitted under SFAS 116, to report in its revenue s ilar assets held for public exhibition, education, or ating to these items			
(i) Revenues included in Form 99	0, Part VIII, line 1		► \$	
(ii) Assets included in Form 990,	Part X		► \$	
If the organization received or he	ld works of art, historical treasures, or other simila reported under SFAS 116 relating to these items	ar assets for financi		
Revenues included in Form 990,	Part VIII, line 1		► \$	

Par	Organizations Maintaining Co	ollections of Art	t, His	<u>tori</u>	<u>cal Tr</u>	easur	es, or O	the	<u> Similar</u>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	er records, check an	y of th	e foll	owing t	hat are	a sıgnıfıca	ant us	e of its co	llection		
а	Public exhibition d Loan or exchange programs											
b	Scholarly research e Other											
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	ıın hov	v the y	furthe	r the or	ganızatıon	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								llar	┌	⁄es	┌ No
Pai	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	d "Ye	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	ediary	for c	ontribu	tions or	other ass	ets n	ot	Γ,	í es	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	ble		_					
										A mou	nt	
С	Beginning balance							1c				
d	Additions during the year						L	1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?							Γ,	í es	┌ No
b	If "Yes," explain the arrangement in Part XI\	V										
Pa	rt V Endowment Funds. Complete											
		(a)Current Year	(b)	Prior \	'ear	(c)Two	Years Back	(d)⊺	hree Years B	ack (e)	Four Ye	ars Back
1a	Beginning of year balance											
Ь	Contributions											
С	Investment earnings or losses							<u> </u>				
d	Grants or scholarships							<u> </u>				
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	ar end balance held	as									
а	Board designated or quasi-endowment											
ь	Permanent endowment											
c 3a	Term endowment ► Are there endowment funds not in the posse	ssion of the organiz	ation t	hat a	re held	l and ad	ministere	d for t	·he			
	organization by										Yes	No
	(i) unrelated organizations								[3a(i)		
	(ii) related organizations								ļ	3a(ii)		
	If "Yes" to 3a(II), are the related organizatio							•		3b		
4	Describe in Part XIV the intended uses of th											
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	<u>ee F</u>	orm 9	90, Par	t X, line	10.	ı			
	Description of investment				a) Cost o sıs (ınve	or other stment)	(b)Cost or basis (ot		(c) Accum deprecia		(d) Bo	ook value
1a	Land											
b	Buildings		•									
c	Leasehold improvements		•									
d	Equipment		•									
е	Other						9	3,818		92,148		1,670

Part VII Investments—Other Securities. See (a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other INVESTMENT IN PARTNERSHIP	902,034	F_
mutual funds	220 141	F
mutuai iunus	320,141	
publicly traded stock	4,741	F
Total. (Column (b) should equal Form 990. Part X. col (B) line 12)	1 226 016	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See	-//	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(B) Book Value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin		
		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	tion	
Part IX Other Assets. See Form 990, Part X, lin	5.)	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25.	

Schedule D (Form 990) 2009

Par	XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	720,773
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	371,172
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	349,601
4	Net unrealized gains (losses) on investments	4	-31,398
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-884,254
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-915,652
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-566,051
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	720,773
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	720,773
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	720,773
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	371,172
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	371,172
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	371,172

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
	Positions Under FIN 48	Management has evaluated Citizen Lobby's tax positions for uncertainties with respect to the financial statements as of and for the year ended July 31, 2010, and has determined that there is no liability for uncertain tax positions at July 31, 2010 Citizen Lobby is no longer subject to U S federal, state or local income tax examinations by tax authorities for years before 2006

Software ID: Software Version:

EIN: 22-2708332

Name: CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBBY

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As Filed Data -

DLN: 93493165008081

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

Name of the organization

CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBBY

Employer identification number

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 B, line 11		THE Form 990 IS REVIEWED AND APPROVED BY THE BOARD MEMBERS

ldentifier	Return Reference	Explanation
Form 990,		To monitor and enforce compliance with the conflict of interest policy, the organization requires all officers,
Part VI,		directors and individuals with substantial influence over the organization to complete an annual statement
Section B, line		disclosing to the board any business, contractual or financial relationships the person has with other
12c		corporations In addition, said persons have an ongoing obligation to disclose to the board any financial interest, direct or indirect, that the person would gain from any particular transaction, contract, or policy under consideration by the organization. The board must assess potential conflicts on a case-by-case basis, conflicted persons must abstain from the deliberation of the transaction, and corporate records be maintained.

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, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST FOR THE INFORMATION

Identifier	Return Reference	Explanation	
		THE BOARD IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT AND FINANCIAL STATEMENT PREPARATION THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	

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DLN: 93493165008081

Related Organizations and Unrelated Partnerships

200

Employer identification number

2009

OMB No 1545-0047

Open to Public Inspection

(Form 990)

Name of the organization

SCHEDULE R

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ★ Attach to Form 990.
 ★ See separate instructions.

CITIZEN LOBBY INC AKA NJPIRG CITIZEN LOBBY				22-2708332	
Part I Identification of Disregarded Entities (Complete	ıf the organızatıon	answered "Yes" or	n Form 990, Part	IV, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions (Complete if tax year.)	the organization ar	nswered "Yes" on	Form 990, Part	IV, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity state (if section 501(c)(.)	us Direct controlling 3)) entity
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Cat No 5013	5Y	<u> </u>	Schedule R (Form 990) 2009

art III			s a Partnership (C d as a partnership do		Yes" on For	m 990, Part IV,	line 34	ļ
		(c)			(h)	(i)		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partr	al or ging
							Yes	No		Yes	No
Down TV Identifie	ation of Doloted (\	ationa Tamable a	C	. Tat (Camaniata	C bloom a a a bloom a		111/	! Faure 000 Da	L T\/	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

				, ·			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
National Association of Organizations in the Public Interest Inc 44 Winter St 4th Floor Boston, MA02108 04-3119807	To further public interest education & advocacy	МА	N/A	С			

Pa	rt V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV,	line 34, 35, or 36.)			
	Not e.	Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 D	urıng th	e tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-I	V ?			
а	Recei	ot of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty		1a		No
b	Gıft, g	rant, or capital contribution to other organization(s)		1b		No
с	Gıft, g	rant, or capital contribution from other organization(s)		1c		No
d	Loans	or loan guarantees to or for other organization(s)		1d		No
e	Loans	or loan guarantees by other organization(s)		1e		No
f	Sale o	f assets to other organization(s)		1f		No
g g		ase of assets from other organization(s)		1g		No
_		nge of assets		1h		No
		of facilities, equipment, or other assets to other organization(s)		1i		No
i	Lease	of facilities, equipment, or other assets from other organization(s)		1j		No
, k		mance of services or membership or fundraising solicitations for other organization(s)		1k		No
		nance of services or membership or fundraising solicitations by other organization(s)		11		No
		g of facilities, equipment, mailing lists, or other assets		1m		No
		g of paid employees		1n		No
o	Reimh	ursement paid to other organization for expenses		10		No
р		ursement paid by other organization for expenses		1p		No
P	Keiiii	arsement para by other organization for expenses		-		
q	Other	transfer of cash or property to other organization(s)		1q		No
r	Other	transfer of cash or property from other organization(s)		1 r		No
	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationshi	ps and transaction thresh	nolds		
		(a) Name of other organization	(b) Transaction type(a-r)	(Amount	(c) : involve	ed
(1) Na	ational As	sociation of Organizations in the Public Interest Inc				0
	ee Addıtıc	nal Data Table				
(2)						
(3)						
(4)						
(5)						
(6)						

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(H Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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