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

OMB No 1545-0047 — **2001** — Open to Public Inspection

A For the 2001 calendar year, or tax year period beginning OCT 1, 2001 and ending SEP 30, 2002

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return [ ] Amended return [ ] Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: PUBLIC CITIZEN FOUNDATION, INC.

Number and street (or P O box if mail is not delivered to street address): 1600 20TH STREET NW — Room/suite:

City or town, state or country, and ZIP + 4: WASHINGTON, DC 20009

D Employer identification number: 52-1263996

E Telephone number: 202-588-1000

F Accounting method: [ ] Cash [X] Accrual [ ] Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? N/A [ ] Yes [ ] No (If "No," attach a list.)

G Web site ▶ WWW.CITIZEN.ORG

J Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

K Check here ▶ [ ] if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return**

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

I Enter 4-digit GEN ▶

M Check ▶ [ ] if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 9458606.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	4443938.		
	b	Indirect public support	1b	26228.		
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash $ 4428177. noncash $ 41989.)			1d	4470166.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	275992.
	3	Membership dues and assessments			3	1180404.
	4	Interest on savings and temporary cash investments			4	195061.
	5	Dividends and interest from securities			5	60537.
	6 a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other
8 a	Gross amount from sale of assets other than inventory	2556662.	8a	
b	Less cost or other basis and sales expenses	2659325.	8b	
c	Gain or (loss) (attach schedule)	-102663.	8c	

Revenue	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 1			8d	-102663.
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ ________ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10 a	Gross sales of inventory, less returns and allowances	10a	530725.		
	b	Less cost of goods sold Statement 3	10b	82142.		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) Stmt 2			10c	448583.
	11	Other revenue (from Part VII, line 103)			11	189059.
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	6717139.
Expenses	13	Program services (from line 44, column (B))			13	6802441.
	14	Management and general (from line 44, column (C))			14	500852.
	15	Fundraising (from line 44, column (D))			15	340911.
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	7644204.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-927065.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	9598291.
	20	Other changes in net assets or fund balances (attach explanation) See Statement 4			20	47034.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	8718260.

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Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash $ 112257. noncash $	22	112257.	112257.	Statement 6	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	45120.	27003.	13054.	5063.
26 Other salaries and wages	26	2764937.	2423002.	243368.	98567.
27 Pension plan contributions	27	51400.	47441.	2791.	1168.
28 Other employee benefits	28	464958.	416563.	39479.	8916.
29 Payroll taxes	29	97764.	87194.	5705.	4865.
30 Professional fundraising fees	30	142334.	77016.	30014.	35304.
31 Accounting fees	31	9460.		9460.	
32 Legal fees	32				
33 Supplies	33	63878.	57586.	4922.	1370.
34 Telephone	34	75589.	74115.	677.	797.
35 Postage and shipping	35	1021730.	942545.	36389.	42796.
36 Occupancy	36	39516.		39516.	
37 Equipment rental and maintenance	37	31210.	953.	30215.	42.
38 Printing and publications	38	750766.	670682.	36847.	43237.
39 Travel	39	143007.	137015.	3153.	2839.
40 Conferences, conventions, and meetings	40	16760.	16317.	232.	211.
41 Interest	41	6539.		6539.	
42 Depreciation, depletion, etc (attach schedule)	42	144198.		144198.	
43 Other expenses not covered above (itemize)					
a	43a				
b	43b				
c	43c				
d	43d				
e See Statement 5	43e	1662781.	1712752.	-145707.	95736.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13 15	44	7644204.	6802441.	500852.	340911.

Joint Costs Check ▶ [X] if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ [X] Yes [ ] No

If "Yes," enter (i) the aggregate amount of these joint costs $ 982000. , (ii) the amount allocated to Program services $ 351000. ,

(iii) the amount allocated to Management and general $ 290000. , and (iv) the amount allocated to Fundraising $ 341000.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? ▶ WORK FOR CONSUMER RIGHTS

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served publications issued etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a LITIGATION GROUP - SEEKED TO PROTECT THE HEALTH, SAFETY AND RIGHTS OF CONSUMERS THROUGH COURT ACTIONS AND BY MONITORING AND PETITIONING GOVERNMENT AGENCIES (Grants and allocations $)	835640.
b PUBLICATIONS-PUBLISHED BOOKS, PERIODICALS, SPECIAL REPORTS, AND EXPERT TESTIMONY ON CURRENT ISSUES IN HEALTH AND SAFETY, LAW, ENERGY POLICY, AND GOVERNMENT & CORPORATE RESPONSIBILITY (Grants and allocations $)	2127359.
c HEALTH RESEARCH GROUP-WORKED FOR SAFE FOOD, DRUGS & MEDICAL DEVICES FOR GREATER CONSUMER CONTROL OVER PERSONAL HEALTH DECISIONS & FOR UNIVERSAL ACCESS TO QUALITY HEALTH CARE (Grants and allocations $)	695622.
d CRITICAL MASS-WORKED TO DECREASE RELIANCE ON NUCLEAR AND FOSSIL FUELS, PROMOTE SAFE, AFFORDABLE SUSTAINABLE ENERGY, ADVOCATE SAFE FOOD, AND PROTECT WORLD'S FRAGILE WATER RESERVES. (Grants and allocations $)	934476.
e Other program services (attach schedule) Statement 7 (Grants and allocations $)	2209344.
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	6802441.

Part IV Balance Sheets

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only*			(A) Beginning of year		(B) End of year
Assets					
45 Cash - non-interest-bearing			112630.	45	117907.
46 Savings and temporary cash investments			1968654.	46	1125659.
47 a Accounts receivable	47a	33623.			
b Less allowance for doubtful accounts	47b		132470.	47c	33623.
48 a Pledges receivable	48a				
b Less allowance for doubtful accounts	48b			48c	
49 Grants receivable			540458.	49	1026917.
50 Receivables from officers, directors, trustees, and key employees				50	
51 a Other notes and loans receivable	51a				
b Less allowance for doubtful accounts	51b			51c	
52 Inventories for sale or use			36455.	52	41358.
53 Prepaid expenses and deferred charges			9716.	53	35624.
54 Investments - securities Stmt 8 ▶ ☐ Cost ☒ FMV			4654646.	54	4878800.
55 a Investments - land, buildings, and equipment basis	55a				
b Less accumulated depreciation	55b			55c	
56 Investments - other				56	
57 a Land, buildings, and equipment basis	57a	4768064.			
b Less accumulated depreciation	57b	946222.	3938162.	57c	3821842.
58 Other assets (describe ▶ See Statement 9)			301476.	58	96572.
59 **Total assets** (add lines 45 through 58) (must equal line 74)			11694667.	59	11178302.
Liabilities					
60 Accounts payable and accrued expenses			410655.	60	483792.
61 Grants payable				61	
62 Deferred revenue			1576720.	62	1874761.
63 Loans from officers, directors, trustees, and key employees				63	
64 a Tax-exempt bond liabilities				64a	
b Mortgages and other notes payable				64b	
65 Other liabilities (describe ▶ See Statement 10)			109001.	65	101489.
66 **Total liabilities** (add lines 60 through 65)			2096376.	66	2460042.
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			6520372.	67	5804908.
68 Temporarily restricted			3077919.	68	2913352.
69 Permanently restricted				69	
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
70 Capital stock, trust principal, or current funds				70	
71 Paid in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 **Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)			9598291.	73	8718260.
74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			11694667.	74	11178302.

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	6846315.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $ 47034.		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) Stmt 11 $ 82142.		
	Add amounts on lines (1) through (4)	b	129176.
c	Line a minus line b	c	6717139.
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2)	d	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	6717139.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	7726346.
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) Stmt 12 $ 82142.		
	Add amounts on lines (1) through (4)	b	82142.
c	Line a minus line b	c	7644204.
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2)	d	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	7644204.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
JOAN CLAYBROOK 1600 20TH STREET NW, WASHINGTON, DC	PRESIDENT 16	33754.	2796.	0.
JOSEPH ZILLO 1600 20TH STREET NW, WASHINGTON, DC	CHIEF OPERATING OFFICER 5	11366.	0.	0.
SEE ATTACHED LIST	B.O.D. 0	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule ▶ [X] Yes [ ] No Stmt 13

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Part VI Other Information

				Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?		80a	X	
b	If "Yes," enter the name of the organization ▶ PUBLIC CITIZEN, INC. and check whether it is [X] exempt OR [ ] nonexempt				
81 a	Enter direct or indirect political expenditures See line 81 instructions	81a 0.			
b	Did the organization file **Form 1120-POL** for this year?		81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85	*501(c)(4), (5), or (6) organizations* **a** Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year				
c	Dues, assessments, and similar amounts from members	85c N/A			
d	Section 162(e) lobbying and political expenditures	85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h		
86	*501(c)(7) organizations* Enter **a** Initiation fees and capital contributions included on line 12	86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87	*501(c)(12) organizations* Enter **a** Gross income from members or shareholders	87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		88		X
89 a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0. , section 4912 ▶ 0. , section 4955 ▶ 0.				
b	*501(c)(3) and 501(c)(4) organizations* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ 0.			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0.			
90 a	List the states with which a copy of this return is filed ▶ SEE ATTACHED				
b	Number of employees employed in the pay period that includes March 12, 2001	90b 36			

91 The books are in care of ▶ THE ORGANIZATION Telephone no ▶ 202-588-1000

Located at ▶ 1600 20TH STREET NW, WASHINGTON, DC ZIP + 4 ▶ 20009

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**- Check here ▶ [ ]
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

Note: Enter gross amounts unless otherwise indicated	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a COURT AWARDS					275992.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments			12	1180404.	
95 Interest on savings and temporary cash investments			14	195061.	
96 Dividends and interest from securities			14	60537.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					-102663.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					448583.
103 Other revenue					
a LIST RENTAL ROYALTIES			13	148342.	
b MISCELLANEOUS REVENUE					26665.
c ROYALITIES			15	14052.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1598396.	648577.
105 Total (add line 104, columns (B), (D), and (E))				▶	2246973.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32.)

Line No ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Statement 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A EIN:0	%			
N/A EIN:0	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

▶ Joan B Claybrook — Signature of officer | 11/30/03 — Date | ▶ Joan Claybrook President — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Mark C Thomas CPA	Date 1/23/03	Check if self-employed ▶ ☐	Preparer's SSN or PTIN 212-06-9579
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ DROLET & ASSOCIATES, P.L.L.C 1140 CONNECTICUT AVE, NW #1000 WASHINGTON, DC 20036			EIN ▶ 52-2057543
			Phone no ▶ 202-822-0717

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

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

OMB No 1545 0047

2001

Name of the organization: PUBLIC CITIZEN FOUNDATION, INC.

Employer identification number: 52 1263996

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SID WOLFE 1600 20TH STREET, NW, WASHINGTON, DC	HEALTH RESEAR 40	90999.	11396.	
DAVID VLADECK 1600 20TH STREET, NW, WASHINGTON, DC	LITIGATION 40	84875.	12662.	
PAUL A LEVY 1600 20TH STREET, NW, WASHINGTON, DC	LITIGATION 40	78717.	13557.	
MICHEAL TANKERSLEY 1600 20TH STREET, NW, WASHINGTON, DC	LITIGATION 40	68638.	13053.	
BRIAN WOLFMAN 1600 20TH STREET, NW, WASHINGTON, DC	LITIGATION 40	68638.	13053.	
Total number of other employees paid over $50,000 ▶	6			

Part II **Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
CROSS WORLD NETWORK 828 S. BROADWAY, TARRYTOWN, NY 10591	CONSULTANT	134243.
ADAMS, HUSSEY & ASSOCIATES 1400 I STREET, NW, WASHINGTON, DC	CONSULTANT	77700.
Total number of others receiving over $50,000 for professional services ▶	0	

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

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12 29 01

Part III Statements About Activities (See page 2 of the instructions)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activites ▶ $ ____ $ 24451. (**Must equal amounts on line 38, Part VI-A, or line i of Part VI-B**)	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See **Note** below)	3		X
4	Do you have a section 403(b) annuity plan for your employees?	4	X	

Note *Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments* See Statement 15

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶ ____

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

123111
01 07 02

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11 or 12) **Use cash method of accounting**
Note *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting*

Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts grants and contributions received (Do not include unusual grants See line 28)	5069332.	7926930.	6502173.	5580918.	25079353.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	883326.	769926.	448064.	177906.	2279222.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	363830.	303285.	169130.	77580.	913825.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	148797.	153061.	See Statement 16 163815.	142573.	608246.
23 Total of lines 15 through 22	6465285.	9153202.	7283182.	5978977.	28880646.
24 Line 23 minus line 17	5581959.	8383276.	6835118.	5801071.	26601424.
25 Enter 1% of line 23	64653.	91532.	72832.	59790.	

26 **Organizations described on lines 10 or 11** a Enter 2% of amount in column (e), line 24 ▶ 26a 532028.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a **Do not file this list with your return** Enter the total of all these excess amounts ▶ 26b 1352873.

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 26601424.

d Add Amounts from column (e) for lines 18 913825. 19 ______ 22 608246. 26b 1352873. ▶ 26d 2874944.

e Public support (line 26c minus line 26d total) ▶ 26e 23726480.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 89.1925%

27 **Organizations described on line 12** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" **Do not file this list with your return** Enter the sum of such amounts for each year N/A

(2000) (1999) (1998) (1997)

b For any amount included in line 17 that was received from each peson (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year N/A

(2000) (1999) (1998) (1997)

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c N/A

d Add Line 27a total ______ and line 27b total ______ ▶ 27d N/A

e Public support (line 27c total minus line 27d total) ▶ 27e N/A

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f N/A

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g N/A %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h N/A %

28 **Unusual Grants** For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return** Do not include these grants in line 15

None

Part V **Private School Questionnaire** (See page 7 of the instructions) N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)
(To be completed ONLY by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group   Check ▶ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		24451.
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		0.
38 Total lobbying expenditures (add lines 36 and 37)	38		24451.
39 Other exempt purpose expenditures	39		7619753.
40 Total exempt purpose expenditures (add lines 38 and 39)	40		7644204.
41 Lobbying nontaxable amount. Enter the amount from the following table -	41		532210.
42 Grassroots nontaxable amount (enter 25% of line 41)	42		133053.
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		0.
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		0.

If the amount on line 40 is -	The lobbying nontaxable amount is -
Not over $500 000	20% of the amount on line 40
Over $500 000 but not over $1 000 000	$100 000 plus 15% of the excess over $500 000
Over $1 000 000 but not over $1 500 000	$175 000 plus 10% of the excess over $1 000 000
Over $1 500 000 but not over $17 000 000	$225 000 plus 5% of the excess over $1 500 000
Over $17 000 000	$1,000 000

Caution *If there is an amount on either line 43 or line 44, you must file Form 4720*

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount	532210.	488918.	477463.	394238.	1892829.
46 Lobbying ceiling amount (150% of line 45(e))					2839244.
47 Total lobbying expenditures	24451.	27935.	143466.	53020.	248872.
48 Grassroots nontaxable amount	133053.	122230.	119366.	98560.	473209.
49 Grassroots ceiling amount (150% of line 48(e))					709814.
50 Grassroots lobbying expenditures	24451.	27935.	143466.	49599.	245451.

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h)			0.

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

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	X	

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
C		PUBLIC CITIZEN, INC.	EMPLOYEE & ASSET SHARING

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ [X] Yes [ ] No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
PUBLIC CITIZEN, INC	501(C)(4)	SUPPORT ORGANIZATION:
		SHARED BOARD MEMBER

Form 990 Gain (Loss) From Publicly Traded Securities Statement 1

Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
INVESTMENTS	2514673.	2617336.	0.	-102663.
DONATED STOCK	41989.	41989.	0.	0.
To Form 990, Part I, line 8	2556662.	2659325.	0.	-102663.

Form 990	Income and Cost of Goods Sold Included on Part I, Line 10	Statement 2

Income

1. Gross receipts	530725	
2. Returns and allowances		
3. Line 1 less line 2		530725
4. Cost of goods sold (line 13)	82142	
5. Gross profit (line 3 less line 4)		448583

Cost of Goods Sold

6. Inventory at beginning of year		
7. Merchandise purchased		
8. Cost of labor		
9. Materials and supplies		
10. Other costs	82142	
11. Add lines 6 through 10		82142
12. Inventory at end of year		
13. Cost of goods sold (line 11 less line 12)		82142

Form 990	Cost of Goods Sold - Other Costs	Statement 3

Description	Amount
PUBLICATIONS	82142.
Total included on Form 990, Part I, line 10b	82142.

Form 990	Other Changes in Net Assets or Fund Balances	Statement 4

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	47034.
Total to Form 990, Part I, line 20	47034.

Form 990	Other Expenses	Statement 5

Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
CONSULTING & PROFESSIONAL FEES	291275.	288520.	1617.	1138.
REFERENCE MATERIALS	60363.	59002.	625.	736.
PUBLIC RELATIONS	201636.	201636.		
CONTRACT LABOR	89518.	88868.	299.	351.
CAGING	110008.	84598.	11676.	13734.
MAIL HOUSE	340373.	286842.	24598.	28933.
PROSPECT LIST RENTAL	148322.	137873.	4801.	5648.
MISCELLANEOUS	54919.	27448.	18695.	8776.
ADMINISTRATIVE AND OTHER EXPENSES	220108.	485515.	-294246.	28839.
PERSONNEL RECRUITMENT	6801.	4082.	1249.	1470.
SPECIAL EVENTS	35928.	16597.	13923.	5408.
QD MARKETING	727.	727.		
FEES AND LICENSES	82005.	10246.	71056.	703.
INVENTORY WRITE-OFF	20798.	20798.		
Total to Fm 990, ln 43	1662781.	1712752.	-145707.	95736.

Form 990 Cash Grants and Allocations Statement 6

Classification	Donee's Name	Donee's Address	Donee's Relationship	Amount
	SEED COALITION	AUSTIN TX	NONE	61094.
	CLEAN WATER ACTION	MT CLEMENS, MI	NONE	20000.
ENERGY PROJECT	ENVIRONMENTAL DEFENSE	AUSTIN TX	NONE	12500.
TRAINING CLASSES	UNIVERSITY OF MARYLAND	COLLEGE PARK, MD	NONE	3000.
TRAINING CLASSES	JOHN HOPKINS UNIVERSITY	BALTIMORE, MD	NONE	121.
TRAINING CLASSES	UNIVERSITY OF MINNESOTA	MINNEAPOLIS, MN	NONE	4000.
TRAINING CLASSES	NEW YORK UNIVERSITY	NEW YORK, NY	NONE	2000.
TRAINING CLASSES	MONTEFIORE MEDICAL CENTER	BRONX, NY	NONE	3000.
TRAINING CLASSES	UNIVERSITY OF NORTH CAROLINA	CHAPEL HILL, NC	NONE	3000.
TRAINING CLASSES	PENN MED AMSA	PHILADEPHIA, PA	NONE	542.
TRAINING CLASSES	THE METROHEALTH FOUNDATION	CLEVELAND, OH	NONE	3000.
Total Included on Form 990, Part II, line 22				112257.

Form 990	Other Program Services	Statement 7

Description	Grants and Allocations	Expenses
PUBLIC INFORMATION AND EDUCATION		616429.
PC TEXAS		417464.
CONGRESS WATCH		266177.
GLOBAL TRADE WATCH		782199.
PC CALIFORNIA		127075.
Total to Form 990, Part III, line e		2209344.

Form 990	Government Securities	Statement 8

Description	U.S. Government	State and Local Gov't	Total Gov't Securities
CERTIFCATE OF DEPOSITS	2176029.		2176029.
MUTUAL FUNDS	1031720.		1031720.
U.S. TREASURY FUNDS	1671051.		1671051.
Total to Form 990, line 54, Col B	4878800.		4878800.

Form 990	Other Assets	Statement 9

Description	Amount
INTEREST RECEIVABLE	36059.
BEQUEST RECEIVABLE	60513.
Total to Form 990, Part IV, line 58, Column B	96572.

Form 990	Other Liabilities	Statement 10

Description	Amount
DUE TO PUBLIC CITIZEN, INC.	101489.
Total to Form 990, Part IV, line 65, Column B	101489.

Form 990	Other Revenue Not Included on Form 990	Statement 11

Description	Amount
COST OF GOODS SOLD	82142.
Total to Form 990, Part IV-A	82142.

Form 990	Other Expenses Not Included on Form 990	Statement 12

Description	Amount
COST OF GOODS SOLD	82142.
Total to Form 990, Part IV-B	82142.

Form 990	Part V - Officer Compensation from Related Organizations	Statement 13

Officer's Name	Name of Related Organization	Compen-sation	Employee Ben Plan Contrib	Expense Account
JOAN CLAYBROOK	PUBLIC CITIZEN, INC	62686.	5192.	0.
JOSEPH ZILLO	PUBLIC CITIZEN, INC	79564.	14168.	0.

Form 990	Part VIII - Relationship of Activities to Accomplishment of Exempt Purposes	Statement 14

Line	Explanation of Relationship of Activities
93A	COURT AWARDS INVOLVED CLASS ACTION SETTLEMENT OBJECTIONS, THE FREEDOM OF INFORMATION ACT TO COMPEL THE GOVERNMENT TO RELEASE RECORDS IMPROPERLY WITHHELD, AND AN INTERNET FREEDOM OF SPEECH CASE.
102	INCOME FROM BOOK SALES USED TO KEEP VARIOUS PROGRAMS RUNNING FOR THE PURPOSE OF KEEPING THE PUBLIC INFORMED ABOUT CONSUMER RIGHTS AND THE ENVIRONMENT.
103B	MISCELLANEOUS REVENUE USED FOR ONGOING PROGRAMS.

Schedule A Explanation of Qualifications to Receive Payments Part III, Line 3 Statement 15

PUBLIC CITIZEN FOUNDATION RECEIVED SEVERAL GRANTS WITH A PROPOSAL OR STIPULATION THAT A PORTION OF THOSE GRANTS BE AWARDED TO OTHER ENTITIES.

Schedule A Other Income Statement 16

Description	2000 Amount	1999 Amount	1998 Amount	1997 Amount
LIST RENTAL ROYALTIES	110934.	115229.	128699.	115003.
BOOK ROYALTIES	15352.	0.	25000.	25000.
MISCELLANEOUS	22511.	37832.	10116.	2570.
Total to Schedule A, line 22	148797.	153061.	163815.	142573.

FORM 990, PART IV, LINE ⁝ LAND, BUILDINGS, AND EQUIPMENT BASIS

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	END YEAR
LAND	1,243,073			1,243,073
BUILDING	2,972,400	8,336		2,980,736
EQUIPMENT	524,713	19,542		544,255
	4,740,186	27,878	-	4,768,064

FORM 990, PART IV, LINE ⁝ LAND, BUILDINGS, AND EQUIPMENT ACCUMULATED DEPRECIATION

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	END YEAR
LAND	-	-		-
BUILDING	456,857	74,390		531,247
EQUIPMENT	345,168	69,807		414,975
	802,025	144,197	-	946,222

PUBLIC CITIZEN FOUNDATION, INC **52-1263996**

SCHEDULE OF STATES THAT RECEIVE FEDERAL FORM 990

STATE

ALABAMA

ALASKA

ARIZONA

ARKANSAS

CALIFORNIA

CONNECTICUT

FLORIDA

GEORGIA

ILLINOIS

KANSAS

KENTUCKY

MAINE

MARYLAND

MASSACHUSETTES

MICHIGAN

MINNESOTA

MISSISSIPPI

NEW HAMPSHIRE

NEW JERSEY

NEW MEXICO

SCHEDULE OF STATES THAT RECEIVE FEDERAL FORM 990
(Continued)

NEW YORK

NORTH CAROLINA

NORTH DAKOTA

OHIO

OKLAHOMA

OREGON

PENNSYLVANIA

RHODE ISLAND

SOUTH CAROLINA

TENNESSEE

UTAH

VIRGINIA

WASHINGTON

WEST VIRGINIA

WISCONSIN

52-1263996

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October 2002

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