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**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)

**2004**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2004 calendar year, or tax year beginning** OCT 1, 2004 **and ending** SEP 30, 2005

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C Name of organization</b> <b>PUBLIC CITIZEN FOUNDATION, INC.</b>	<b>D Employer identification number</b> <b>52-1263996</b>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1600 20TH STREET NW</b>	<b>E Telephone number</b> <b>202-588-1000</b>
		City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20009</b>	<b>F Accounting method</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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  No

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

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

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

**G Website:** WWW.CITIZEN.ORG

**J Organization type** (check only one)  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**

**I Group Exemption Number**

**L Gross receipts:** Add lines 6b, 8b, 9b, and 10b to line 12 **10,284,842.**

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

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

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	<b>1a</b>	<b>5,751,184.</b>		
	<b>b</b> Indirect public support	<b>1b</b>	<b>26,428.</b>		
	<b>c</b> Government contributions (grants)	<b>1c</b>			
	<b>d Total</b> (add lines 1a through 1c) (cash \$ <b>5,495,815.</b> noncash \$ <b>281,797.</b> )	<b>1d</b>			<b>5,777,612.</b>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>			<b>165,172.</b>
	<b>3</b> Membership dues and assessments	<b>3</b>			<b>1,640,933.</b>
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>			
	<b>5</b> Dividends and interest from securities	<b>5</b>			<b>233,713.</b>
	<b>6 a</b> Gross rental income (do not subtract line 6b from line 6a)	<b>6a</b>			
	<b>b</b> Less: rental expenses	<b>6b</b>			
	<b>7</b> Other investment income (describe in Part VII)	<b>7</b>			
<b>8 a</b> Gross amount from sales of capital assets other than inventory	(A) Securities	<b>8a</b>			
	<b>1,187,922.</b>				
	<b>b</b> Less: cost or other basis and sales expenses	<b>8b</b>	<b>1,184,994.</b>		
	<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>	<b>2,928.</b>		
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>		<b>STMT 1</b>	<b>2,928.</b>	
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	<b>a</b> Gross revenue (not including \$ <b>184,078.</b> of contributions reported on line 1a)	<b>9a</b>	<b>29,922.</b>		
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>	<b>29,922.</b>		
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>		<b>SEE STATEMENT 2</b>	<b>0.</b>
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>	<b>1,074,198.</b>			
	<b>b</b> Less: cost of goods sold	<b>10b</b>	<b>295,068.</b>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		<b>STMT 3</b>	<b>779,130.</b>
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			<b>175,370.</b>	
<b>12 Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>			<b>8,774,858.</b>	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<b>7,748,641.</b>	
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<b>608,204.</b>	
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		<b>459,666.</b>	
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>			
	<b>17 Total expenses</b> (add lines 16 and 44, column (A))	<b>17</b>			<b>8,816,511.</b>
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		<b>-41,653.</b>	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>8,938,206.</b>	
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		<b>SEE STATEMENT 5</b>	
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>			<b>8,981,269.</b>

19

**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. Page 2

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 \$172,175, noncash \$)	172,175.	172,175.	STATEMENT 7		
23	Specific assistance to individuals (attach schedule)					
24	Benefits paid to or for members (attach schedule)					
25	Compensation of officers, directors, etc.	85,892.	60,498.	14,938.	10,456.	
26	Other salaries and wages	3,191,653.	2,836,975.	274,437.	80,241.	
27	Pension plan contributions	115,560.	95,446.	16,578.	3,536.	
28	Other employee benefits	438,629.	357,347.	68,820.	12,462.	
29	Payroll taxes	240,721.	208,274.	28,412.	4,035.	
30	Professional fundraising fees	167,031.			167,031.	
31	Accounting fees	11,218.		11,218.		
32	Legal fees	70,952.	70,952.			
33	Supplies	45,826.	32,426.	11,976.	1,424.	
34	Telephone	70,515.	68,726.	974.	815.	
35	Postage and shipping	1,316,740.	1,206,547.	59,507.	50,686.	
36	Occupancy	40,035.		40,035.		
37	Equipment rental and maintenance	42,755.	351.	42,404.		
38	Printing and publications	899,178.	831,602.	36,535.	31,041.	
39	Travel	168,271.	163,085.	2,999.	2,187.	
40	Conferences, conventions, and meetings	43,902.	43,792.	59.	51.	
41	Interest					
42	Depreciation, depletion, etc. (attach schedule)	99,960.		99,960.		
43	Other expenses not covered above (itemize):					
a		43a				
b		43b				
c		43c				
d		43d				
e	SEE STATEMENT 6	43e	1,595,498.	1,600,445.	-100,648.	95,701.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	8,816,511.	7,748,641.	608,204.	459,666.

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 956,534.; (ii) the amount allocated to Program services \$ 343,421.; (iii) the amount allocated to Management and general \$ 330,008.; and (iv) the amount allocated to Fundraising \$ 283,105.

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
<b>WORK FOR CONSUMER RIGHTS</b> 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)	
<b>a PUBLICATIONS-PUBLISHED BOOKS, PERIODICALS, SPECIAL REPORTS, AND EXPERT TESTIMONY ON CURRENT ISSUES IN HEALTH AND SAFETY, LAW, ENERGY POLICY, AND GOVERNMENT &amp; CORPORATE RESPONSIBILITY</b> (Grants and allocations \$ )	2,656,545.
<b>b 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.</b> (Grants and allocations \$ )	1,389,311.
<b>c LITIGATION GROUP - SEEKED TO PROTECT THE HEALTH, SAFETY AND RIGHTS OF CONSUMERS THROUGH COURT ACTIONS AND BY MONITORING AND PETITIONING GOVERNMENT AGENCIES</b> (Grants and allocations \$ )	872,240.
<b>d GLOBAL TRADE WATCH - LEADS NATIONAL COALITION OF ENVIRONMENT GROUPS UNITED TO EDUCATE THE PUBLIC ABOUT GLOBALIZATION AND ITS EFFECTS THROUGH TREATIES SUCH AS NAFTA AND GATT.</b> (Grants and allocations \$ 20,000.)	619,970.
<b>e Other program services (attach schedule) STATEMENT 8</b> (Grants and allocations \$ 152,175.)	2,210,575.
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services)	7,748,641.

**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	114,055.	45	242,364.
	46 Savings and temporary cash investments	1,415,943.	46	1,240,303.
	47 a Accounts receivable	54,499.		
	47 b Less: allowance for doubtful accounts		47c	54,499.
	48 a Pledges receivable			
	48 b Less: allowance for doubtful accounts		48c	
	49 Grants receivable	854,346.	49	160,838.
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	51 b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use	159,146.	52	52,697.
	53 Prepaid expenses and deferred charges	67,008.	53	97,804.
	54 Investments - securities	5,037,310.	54	6,775,045.
	55 a Investments - land, buildings, and equipment: basis			
	55 b Less: accumulated depreciation		55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	4,757,318.			
57 b Less: accumulated depreciation	1,177,900.	57c	3,579,418.	
58 Other assets (describe SEE STATEMENT 10)	389,731.	58	417,512.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)	11,789,253.	59	12,620,480.	
Liabilities	60 Accounts payable and accrued expenses	369,059.	60	400,018.
	61 Grants payable		61	
	62 Deferred revenue	2,338,129.	62	2,480,365.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	64 b Mortgages and other notes payable		64b	
65 Other liabilities (describe SEE STATEMENT 11)	143,859.	65	758,828.	
66 <b>Total liabilities</b> (add lines 60 through 65)	2,851,047.	66	3,639,211.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	6,688,148.	67	7,317,475.
	68 Temporarily restricted	2,250,058.	68	1,663,794.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	8,938,206.	73	8,981,269.	
74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	11,789,253.	74	12,620,480.	

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	9,154,642.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$ 84,716.		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	<b>STMT 13</b> \$ 295,068.		
	Add amounts on lines (1) through (4)	b	379,784.
c	Line a minus line b	c	8,774,858.
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	8,774,858.

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

a	Total expenses and losses per audited financial statements	a	9,111,579.
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):		
	<b>STMT 14</b> \$ 295,068.		
	Add amounts on lines (1) through (4)	b	295,068.
c	Line a minus line b	c	8,816,511.
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	8,816,511.

**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 20009	PRESIDENT 14	36,597.	3,226.	0.
JOSEPH ZILLO 1600 20TH STREET NW, WASHINGTON, DC 20009	CHIEF OPERATING OFFICER 20	49,295.	8,586.	0.
ROBERT C. FELLMETH 1600 20TH STREET NW, WASHINGTON, DC 20009	CHAIR 0	0.	0.	0.
JIM HIGHTOWER 1600 20TH STREET NW, WASHINGTON, DC 20009	SECRETARY-TREASURER 0	0.	0.	0.
LISA A. BLUE 1600 20TH STREET NW, WASHINGTON, DC 20009	DIRECTOR 0	0.	0.	0.
JOSEPH W. COTCHETT 1600 20TH STREET NW, WASHINGTON, DC 20009	DIRECTOR 0	0.	0.	0.
MORRIS DEES 1600 20TH STREET NW, WASHINGTON, DC 20009	DIRECTOR 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.  Yes  No **STMT 15**

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? <span style="float:right">N/A</span>	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 <b>PUBLIC CITIZEN, INC.</b> and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions <span style="float:right">81a 0.</span>		
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.) <span style="float:right">82b N/A</span>		
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? <span style="float:right">N/A</span>	84b	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? <span style="float:right">N/A</span>	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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. <span style="float:right">N/A</span>	85b	
c	Dues, assessments, and similar amounts from members <span style="float:right">85c N/A</span>		
d	Section 162(e) lobbying and political expenditures <span style="float:right">85d N/A</span>		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <span style="float:right">85e N/A</span>		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <span style="float:right">85f N/A</span>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? <span style="float:right">N/A</span>	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? <span style="float:right">N/A</span>	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 <span style="float:right">86a N/A</span>		
b	Gross receipts, included on line 12, for public use of club facilities <span style="float:right">86b N/A</span>		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders <span style="float:right">87a N/A</span>		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">87b N/A</span>		
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 <span style="float:right">0.</span> ; section 4912 <span style="float:right">0.</span> ; section 4955 <span style="float:right">0.</span>		
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 <span style="float:right">0.</span>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <span style="float:right">0.</span>		
90 a	List the states with which a copy of this return is filed <b>SEE ATTACHED</b>	90b	0
b	Number of employees employed in the pay period that includes March 12, 2004		
91	The books are in care of <b>THE ORGANIZATION</b> Telephone no. <b>202-588-1000</b>		

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 page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <b>COURT AWARDS</b>					165,172.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments			12	1,640,933.	
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	233,713.	
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					2,928.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					779,130.
103 Other revenue:					
a <b>LIST RENTAL ROYALTIES</b>			13	150,576.	
b <b>MISCELLANEOUS REVENUE</b>					6,134.
c <b>ROYALTIES</b>			15	18,660.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		2,043,882.	953,364.
105 Total (add line 104, columns (B), (D), and (E))					2,997,246.

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 page 34 of the instructions.)

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 16

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

(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	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

- (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.

Signature of officer: *Joan Claybrook* Date: *1/9/06* Type or print name and title: *Joan Claybrook - President*

Preparer's signature: *Mark C Thomas* CPA Date: *1/5/06* Check if self-employed:  Preparer's SSN or PTIN: \_\_\_\_\_

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: \_\_\_\_\_ 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

**2004**

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	DIRECTOR 40	98,664.	12,774.	
PAUL A LEVY ----- 1600 20TH STREET, NW, WASHINGTON, DC	SEN ATTORNEY 40	85,349.	15,287.	
BRIAN WOLFMAN ----- 1600 20TH STREET, NW, WASHINGTON, DC	DIRECTOR 30	76,149.	13,450.	
WENONAH HAUTER ----- 1600 20TH STREET, NW, WASHINGTON, DC	DIRECTOR 34	73,341.	13,022.	
PETER LURIE ----- 1600 20TH STREET, NW, WASHINGTON, DC	DEP DIRECTOR 40	70,817.	7,166.	
Total number of other employees paid over \$50,000 ▶	8			

**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 ----- 487 ROUTE 23, CLAVERACK, NY 12513	DIRECT MAIL CONSULTING	142,017.
CRAVER, MATHEWS, SMITH & CO. ----- 4121 WILSON BLVD, 11TH FLOOR, ARLINGTON, VA 22203	DIRECT MAIL CONSULTING	115,752.
----- ----- ----- ----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	



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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities <b>▶</b> \$ _____ \$ <u>32,100.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) <b>VI-A, LINE 38B</b> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	<b>1</b>	<b>X</b>
<b>2</b> 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)		
<b>a</b> Sale, exchange, or leasing of property?	<b>2a</b>	<b>X</b>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>	<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V, FORM 990</b>	<b>2d</b>	<b>X</b>
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>	<b>X</b>
<b>3 a</b> Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) <b>SEE STATEMENT 17</b>	<b>3a</b>	<b>X</b>
<b>b</b> Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	<b>X</b>
<b>4 a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4a</b>	<b>X</b>
<b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4b</b>	<b>X</b>

**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 5 of the instructions.)

**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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	6,971,861.	5,547,435.	4,470,166.	5,069,332.	22,058,794.
16 Membership fees received	1,573,085.	1,227,147.	1,180,404.	954,516.	4,935,152.
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	780,280.	373,344.	724,575.	883,326.	2,761,525.
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	160,258.	204,067.	255,598.	363,830.	983,753.
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	330,392.	181,639.	SEE STATEMENT 18 189,059.	148,797.	849,887.
23 Total of lines 15 through 22	9,815,876.	7,533,632.	6,819,802.	7,419,801.	31,589,111.
24 Line 23 minus line 17	9,035,596.	7,160,288.	6,095,227.	6,536,475.	28,827,586.
25 Enter 1% of line 23	98,159.	75,336.	68,198.	74,198.	
28 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 576,552.
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 2,409,065.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 28,827,586.
d Add: Amounts from column (e) for lines: 18 983,753. 19 22 849,887. 26b 2,409,065.					26d 4,242,705.
e Public support (line 26c minus line 26d total)					26e 24,584,881.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 85.2825%
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					
(2003) (2002) (2001) (2000)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 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					
(2003) (2002) (2001) (2000)					
c Add: Amounts from column (e) for lines: 15 17 20 and line 27b total					27c N/A
d Add: Line 27a 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 2000 through 2003, 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?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 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?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? 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?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? 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?		
b	Has the organization's right to such aid ever been revoked or suspended? 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		





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**FORM 990**                      **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES**                      **STATEMENT 1**


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DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
INVESTMENTS	906,408.	906,359.	0.	49.
STOCK DONATIONS	281,514.	278,635.	0.	2,879.
TO FORM 990, PART I, LINE 8	<u>1,187,922.</u>	<u>1,184,994.</u>	<u>0.</u>	<u>2,928.</u>

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**FORM 990**                      **SPECIAL EVENTS AND ACTIVITIES**                      **STATEMENT 2**


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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL EVENTS	214,000.	184,078.	29,922.	29,922.	0.
TO FM 990, PART I, LINE 9	<u>214,000.</u>	<u>184,078.</u>	<u>29,922.</u>	<u>29,922.</u>	<u>0.</u>

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME

1. GROSS RECEIPTS . . . . .	1,074,198	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		1,074,198
4. COST OF GOODS SOLD (LINE 13) . . . . .	295,068	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		779,130

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .		
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .	295,068	
11. ADD LINES 6 THROUGH 10 . . . . .		295,068
12. INVENTORY AT END OF YEAR . . . . .		
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). . . . .		295,068

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	4
DESCRIPTION		AMOUNT	
PUBLICATIONS		295,068.	
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B		295,068.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
UNREALIZED GAIN ON INVESTMENTS		84,716.	
TOTAL TO FORM 990, PART I, LINE 20		84,716.	

FORM 990	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
CONSULTING & PROFESSIONAL FEES	522,216.	471,863.	36,471.	13,882.	
REFERENCE MATERIALS	67,745.	66,385.	734.	626.	
PUBLIC RELATIONS	13,051.	12,323.	728.		
CONTRACT LABOR	37,556.	34,096.	3,460.		
CAGING	147,278.	119,126.	15,196.	12,956.	
MAIL HOUSE	380,281.	310,742.	37,536.	32,003.	
PROSPECT LIST RENTAL	59,578.	53,923.	3,052.	2,603.	
MISCELLANEOUS	29,804.	25,781.	3,423.	600.	
ADMINISTRATIVE AND OTHER EXPENSES	151,962.	463,670.	-328,879.	17,171.	
PERSONNEL RECRUITMENT	5,238.	4,981.	257.		
SPECIAL EVENTS	8,063.	3,096.	2,681.	2,286.	
FEES AND LICENSES	102,516.	14,122.	86,957.	1,437.	
PLANNED GIVING	5,631.	2,022.	1,948.	1,661.	
BANK CHARGES	64,579.	18,315.	35,788.	10,476.	
TOTAL TO FM 990, LN 43	1,595,498.	1,600,445.	-100,648.	95,701.	



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**FORM 990** **CASH GRANTS AND ALLOCATIONS** **STATEMENT** **7**


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<u>CLASSIFICATION</u>	<u>DONEE'S NAME</u>	<u>DONEE'S ADDRESS</u>	<u>DONEE'S RELATIONSHIP</u>	<u>AMOUNT</u>
ENERGY EFFICIENT WORK	SEED COALITION	AUSTIN TX	NONE	50,175.
REFINERY WORK	ENVIRONMENTAL INTEGRITY PROJECT	WASHINGTON, DC	NONE	7,000.
RENEWABLE ENERGY ISSUES	ENVIRONMENTAL DEFENSE	AUSTIN, TX	NONE	85,000.
RENEWABLE ENERGY ISSUES	TEXAS IMPACT		NONE	10,000.
SUPPORT WTO MINISTERIAL IN HONG KONG	HONG KONG PEOPLE'S ALLIANCE	MONGKOK, KOWLOON HONG KONG	NONE	20,000.
<b>TOTAL INCLUDED ON FORM 990, PART II, LINE 22</b>				<b>172,175.</b>

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**FORM 990** **OTHER PROGRAM SERVICES** **STATEMENT** **8**


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<u>DESCRIPTION</u>	<u>GRANTS AND ALLOCATIONS</u>	<u>EXPENSES</u>
HEALTH RESEARCH GROUP		598,672.
PUBLIC INFORMATION AND EDUCATION		489,306.
PC TEXAS	152,175.	420,833.
CONGRESS WATCH		418,711.
PC CALIFORNIA		101,137.
AUTO SAFETY GROUP		181,916.
<b>TOTAL TO FORM 990, PART III, LINE E</b>	<b>152,175.</b>	<b>2,210,575.</b>

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FORM 990	GOVERNMENT SECURITIES	STATEMENT	9
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DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
GOVERNMENT SECURITIES	FMV	1,891,452.		1,891,452.
TOTAL TO FORM 990, LINE 54, COL B		1,891,452.		1,891,452.

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FORM 990	OTHER ASSETS	STATEMENT	10
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DESCRIPTION	AMOUNT
INTEREST RECEIVABLE	14,824.
BEQUEST RECEIVABLE	402,688.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	
	417,512.

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FORM 990	OTHER LIABILITIES	STATEMENT	11
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DESCRIPTION	AMOUNT
DUE TO PUBLIC CITIZEN, INC	468,887.
ANNUITIES PAYABLE	289,941.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	
	758,828.

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FORM 990	OTHER SECURITIES	STATEMENT	12
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SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
CERTIFICATE OF DEPOSITS (AT COST)	COST	2,741,925.
MUTUAL FUNDS	FMV	1,693,105.
EQUITY SECURITIES	FMV	448,563.
TO FORM 990, LINE 54, COL B		4,883,593.

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FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 13

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	295,068.
TOTAL TO FORM 990, PART IV-A	295,068.

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 14

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	295,068.
TOTAL TO FORM 990, PART IV-B	295,068.

FORM 990 PART V - OFFICER COMPENSATION FROM RELATED ORGANIZATIONS STATEMENT 15

OFFICER'S NAME	NAME AND EIN OF RELATED ORGANIZATION	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOAN CLAYBROOK	PUBLIC CITIZEN, INC. - 23-7104508	67,968.	5,991.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT 16

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	COURT AWARDS INVOLVED CLASS ACTION SETTLEMENT OBJECTIONS, REGULATORY ACTIONS AGAINST FEDERAL AND STATE AGENCIES, 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.



## FORM 990, PART IV, LINE 57a LAND, BUILDINGS, AND EQUIPMENT: BASIS

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	END YEAR
LAND	1,243,073			1,243,073
BUILDING	3,060,490	5,025		3,065,515
EQUIPMENT	434,871	13,859		448,730
	<u>4,738,434</u>	<u>18,884</u>	<u>-</u>	<u>4,757,318</u>

## FORM 990, PART IV, LINE 57B LAND, BUILDINGS, AND EQUIPMENT: ACCUMULATED DEPRECIATION

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	END YEAR
BUILDING	682,654	77,517		760,171
EQUIPMENT	395,286	22,443		417,729
	<u>1,077,940</u>	<u>99,960</u>	<u>-</u>	<u>1,177,900</u>

**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