

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

**1998**This Form Is Open  
to Public Inspection**A** For the 1998 calendar year, OR tax year period beginning 1998, and ending 19

|   |   |   |
|---|---|---|
| <b>B</b> Check if:<br><input type="checkbox"/> Change of address<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input type="checkbox"/> Amended return (required also for state reporting) | <b>C</b> Name of organization<br><b>CITIZENS COMMISSION ON HUMAN RIGHTS</b><br>Number and street (or P.O. box if mail is not delivered to street address) Room/suite<br><b>6362 HOLLYWOOD BLVD. B</b><br>City or town, state or country, and ZIP+4<br><b>LOS ANGELES, CA 90028-6331</b> | <b>D</b> Employer identification number<br><b>68-0005541</b><br><b>E</b> Telephone number<br><b>(323) 467-4242</b><br><b>F</b> Check <input type="checkbox"/> if exemption application is pending |
|---|---|---|

**G** Type of organization ☒ Exempt under 501(c) ( 3 ) (insert number) OR ☐ section 4947(a)(1) nonexempt charitable trust**Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).**

|   |  |
|---|--|
| <b>H(a)</b> Is this a group return filed for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(b)</b> If "Yes," enter the number of affiliates for which this return is filed:<br><b>(c)</b> Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>I</b> If either box in H is checked "Yes," enter four-digit group exemption number (GEN)<br><b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)<br><b>K</b> Check here <input type="checkbox"/> 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 it received a Form 990 Package in the mail, it should file a return without financial data. <b>Some states require a complete return.</b> |
|---|--|

**Note:** Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

|  |                |                 |                    |
|--|----------------|-----------------|--------------------|
| <b>1</b> Contributions, gifts, grants, and similar amounts received:   |                |                 |                    |
| <b>a</b> Direct public support   | <b>1a</b>      | <b>974162.</b>  |                    |
| <b>b</b> Indirect public support   | <b>1b</b>      | <b>1462843.</b> |                    |
| <b>c</b> Government contributions (grants)   | <b>1c</b>      |                 |                    |
| <b>d</b> Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ <b>2437005.</b> noncash \$ ) |                | <b>STMT 2</b>   | <b>1d 2437005.</b> |
| <b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)                |                |                 | <b>2</b>           |
| <b>3</b> Membership dues and assessments   |                |                 | <b>3</b>           |
| <b>4</b> Interest on savings and temporary cash investments  |                |                 | <b>4 2368.</b>     |
| <b>5</b> Dividends and interest from securities  |                |                 | <b>5</b>           |
| <b>6 a</b> Gross rents   | <b>6a</b>      |                 |                    |
| <b>b</b> Less: rental expenses   | <b>6b</b>      |                 |                    |
| <b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)   |                |                 | <b>6c</b>          |
| <b>7</b> Other investment income (describe )   |                |                 | <b>7</b>           |
| <b>8 a</b> Gross amount from sale of assets other than inventory   | (A) Securities | (B) Other       |                    |
| <b>b</b> Less: cost or other basis and sales expenses  | <b>8a</b>      | <b>8b</b>       |                    |
| <b>c</b> Gain or (loss) (attach schedule)  | <b>8c</b>      |                 |                    |
| <b>d</b> Net gain or (loss) (combine line 8c, column (A), and (B))   |                |                 | <b>8d</b>          |
| <b>9</b> Special events and activities (attach schedule):  |                |                 |                    |
| <b>a</b> Gross revenue (not including contributions reported on line 1a)   | <b>9a</b>      |                 |                    |
| <b>b</b> Less: direct expenses other than nonrecurring expenses  | <b>9b</b>      |                 |                    |
| <b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)                                |                |                 | <b>9c</b>          |
| <b>10 a</b> Gross sales of inventory, less returns and allowances  | <b>10a</b>     | <b>36247.</b>   |                    |
| <b>b</b> Less: cost of goods sold  | <b>10b</b>     | <b>16247.</b>   |                    |
| <b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)      |                | <b>STMT 3</b>   | <b>10c 20000.</b>  |
| <b>11</b> Other revenue (from Part VII, line 103)  |                |                 | <b>11 33.</b>      |
| <b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)                                   |                |                 | <b>12 2459406.</b> |
| <b>13</b> Program services (from line 44, column (B))  |                |                 | <b>13 1810669.</b> |
| <b>14</b> Management and general (from line 44, column (C))  |                |                 | <b>14 126436.</b>  |
| <b>15</b> Fundraising (from line 44, column (D))   |                |                 | <b>15 231074.</b>  |
| <b>16</b> Payments to affiliates (attach schedule)   |                |                 | <b>16</b>          |
| <b>17</b> Total expenses (add lines 16 and 44, column (A))   |                |                 | <b>17 2168179.</b> |
| <b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)                                       |                |                 | <b>18 291227.</b>  |
| <b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))                            |                |                 | <b>19 174432.</b>  |
| <b>20</b> Other changes in net assets or fund balances (attach explanation)                                      |                |                 | <b>20 0.</b>       |
| <b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)                              |                |                 | <b>21 465659.</b>  |

**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 \$ _____ noncash \$ _____  | 22        |                      |                            |                 |
| 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        | 67630.               | 41444.                     | 26186.          |
| 26 Other salaries and wages .....   | 26        | 232092.              | 165601.                    | 29072.          |
| 27 Pension plan contributions .....   | 27        |                      |                            | 37419.          |
| 28 Other employee benefits .....  | 28        | 2544.                | 1758.                      | 469.            |
| 29 Payroll taxes .....  | 29        | 30425.               | 21018.                     | 5610.           |
| 30 Professional fundraising fees .....  | 30        |                      |                            | 3797.           |
| 31 Accounting fees .....  | 31        | 7695.                |                            |                 |
| 32 Legal fees .....   | 32        | 25437.               | 20131.                     | 7695.           |
| 33 Supplies .....   | 33        | 37586.               | 25970.                     | 5306.           |
| 34 Telephone .....  | 34        | 38623.               | 26681.                     | 6924.           |
| 35 Postage and shipping .....   | 35        | 758937.              | 673757.                    | 4692.           |
| 36 Occupancy .....  | 36        | 47107.               | 33421.                     | 81759.          |
| 37 Equipment rental and maintenance .....   | 37        | 11694.               | 7575.                      | 3421.           |
| 38 Printing and publications .....  | 38        | 648909.              | 584060.                    | 8301.           |
| 39 Travel .....   | 39        | 38460.               | 36174.                     | 5385.           |
| 40 Conferences, conventions, and meetings .....                                   | 40        |                      |                            | 2751.           |
| 41 Interest .....   | 41        |                      |                            | 1368.           |
| 42 Depreciation, depletion, etc. (attach schedule) ...                            | 42        | 13275.               | 9420.                      | 2221.           |
| 43 Other expenses (itemize):  |           |                      |                            | 62628.          |
| a _____   | 43a       |                      |                            | 194.            |
| b _____   | 43b       |                      |                            |                 |
| c _____   | 43c       |                      |                            |                 |
| d _____   | 43d       |                      |                            |                 |
| e SEE STATEMENT 4   | 43e       | 207765.              | 163659.                    | 16928.          |
| 44 Total functional expenses (add lines 22 through 43)                            | 44        | 2168179.             | 1810669.                   | 126436.         |
| Organizations completing columns (B)-(D), carry these totals to lines 13-15 ..... |           |                      |                            | 231074.         |

Reporting of Joint Costs. - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? ▶

**TO INVESTIGATE AND EXPOSE PSYCHIATRIC ABUSES OF HUMAN 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 SEE STATEMENT 5  |  |          |
| (Grants and allocations \$ _____)  |  | 84341.   |
| b SEE STATEMENT 6  |  |          |
| (Grants and allocations \$ _____)  |  | 79927.   |
| c SEE STATEMENT 7  |  |          |
| (Grants and allocations \$ _____)  |  | 17589.   |
| d SEE STATEMENT 8  |  |          |
| (Grants and allocations \$ _____)  |  | 307756.  |
| e Other program services (attach schedule) STATEMENT 9                                   |  | 1321056. |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services) |  | 1810669. |

**Part IV Balance Sheets**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

|   |  | (A)<br>Beginning of year |         | (B)<br>End of year |     |        |
|---|--|--------------------------|---------|--------------------|-----|--------|
| <b>Assets</b>   | 45 Cash - non-interest-bearing .....   | 30091.                   | 45      | 48818.             |     |        |
|   | 46 Savings and temporary cash investments .....  | 79843.                   | 46      | 358355.            |     |        |
|   | 47 a Accounts receivable .....   | 47a                      |         |                    |     |        |
|   | b Less: allowance for doubtful accounts .....  | 47b                      | 47c     |                    |     |        |
|   | 48 a Pledges receivable .....  | 48a                      |         |                    |     |        |
|   | b Less: allowance for doubtful accounts .....  | 48b                      | 48c     |                    |     |        |
|   | 49 Grants receivable .....   |                          | 49      |                    |     |        |
|   | 50 Receivables from officers, directors, trustees, and key employees (attach schedule) .....   |                          | 50      |                    |     |        |
|   | 51 a Other notes and loans receivable .....  | 51a                      |         |                    |     |        |
|   | b Less: allowance for doubtful accounts .....  | 51b                      | 51c     |                    |     |        |
|   | 52 Inventories for sale or use .....   | 15870.                   | 52      | 15500.             |     |        |
|   | 53 Prepaid expenses and deferred charges .....   |                          | 53      |                    |     |        |
|   | 54 Investments - securities (attach schedule) .....  |                          | 54      |                    |     |        |
|   | 55 a Investments - land, buildings, and equipment: basis .....   | 55a                      |         |                    |     |        |
|   | b Less: accumulated depreciation (attach schedule) .....   | 55b                      | 55c     |                    |     |        |
| 56 Investments - other .....  | SEE STATEMENT 10   | 11900.                   | 56      | 11900.             |     |        |
| 57 a Land, buildings, and equipment: basis .....                                | 57a  | 110697.                  |         |                    |     |        |
| b Less: accumulated depreciation .....  | STMT 11  | 57b                      | 78693.  | 37400.             | 57c | 32004. |
| 58 Other assets (describe ► MISCELLANEOUS RECEIVABLE )                          |  | 58                       | 24.     |                    |     |        |
| 59 Total assets (add lines 45 through 58) (must equal line 74) .....            | 175104.  | 59                       | 466601. |                    |     |        |
| <b>Liabilities</b>  | 60 Accounts payable and accrued expenses .....   | 672.                     | 60      | 942.               |     |        |
|   | 61 Grants payable .....  |                          | 61      |                    |     |        |
|   | 62 Deferred revenue .....  |                          | 62      |                    |     |        |
|   | 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 ► )   |                          | 65      |                    |     |        |
| 66 Total liabilities (add lines 60 through 65) .....                            | 672.   | 66                       | 942.    |                    |     |        |
| <b>Net Assets or Fund Balances</b>  | Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74                               |                          |         |                    |     |        |
|   | 67 Unrestricted .....  |                          | 67      |                    |     |        |
|   | 68 Temporarily restricted .....  |                          | 68      |                    |     |        |
|   | 69 Permanently restricted .....  |                          | 69      |                    |     |        |
|   | Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 70 through 74                                 |                          |         |                    |     |        |
|   | 70 Capital stock, trust principal, or current funds .....  | 0.                       | 70      | 0.                 |     |        |
|   | 71 Paid-in or capital surplus, or land, building, and equipment fund .....   | 0.                       | 71      | 0.                 |     |        |
|   | 72 Retained earnings, endowment, accumulated income, or other funds .....  | 174432.                  | 72      | 465659.            |     |        |
|   | 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21) ..... | 174432.                  | 73      | 465659.            |     |        |
| 74 Total liabilities and net assets / fund balances (add lines 66 and 73) ..... | 175104.  | 74                       | 466601. |                    |     |        |

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 | N/A |
| b   | Amounts included on line a but not on line 12, Form 990:                 |   |     |
| (1) | Net unrealized gains on investments \$                                   |   |     |
| (2) | Donated services and use of facilities \$                                |   |     |
| (3) | Recoveries of prior year grants \$                                       |   |     |
| (4) | Other (specify): \$  |   |     |
|     | Add amounts on lines (1) through (4)                                     | b |     |
| c   | Line a minus line b  | c |     |
| 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 |     |
| e   | Total revenue per line 12, Form 990 (line c plus line d)                 | e |     |

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

|     |  |   |     |
|-----|--|---|-----|
| a   | Total expenses and losses per audited financial statements | a | N/A |
| 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): \$  |   |     |
|     | Add amounts on lines (1) through (4)                       | b |     |
| c   | Line a minus line b  | c |     |
| 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 |     |
| e   | Total expenses per line 17, Form 990 (line c plus line d)  | e |     |

**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 |
|-----------------------------|--|---|---|--|
| MICK MCFARLAND              | TRUSTEE  |   |   |  |
| 6331 HOLLYWOOD BL. #1200    | AS NEEDED  | 0.  | 0.  | 0.                                       |
| LA CA 90028                 |  |   |   |  |
| MEGAN SHIELDS               | TRUSTEE  |   |   |  |
| 5336 FOUNTAIN AVE.          | AS NEEDED  | 0.  | 0.  | 0.                                       |
| LA, CA 90029                |  |   |   |  |
| ISADORE CHAIT               | DIRECTOR   |   |   |  |
| 261 18TH ST.                | AS NEEDED  | 0.  | 0.  | 0.                                       |
| BEVERLY HILLS, CA 90210     |  |   |   |  |
| ANNE HOGARTH                | DIRECTOR   |   |   |  |
| 6331 HOLLYWOOD BL. #1200    | AS NEEDED  | 0.  | 0.  | 0.                                       |
| LA, CA 90029                |  |   |   |  |
| BRUCE WISEMAN               | PRESIDENT  |   |   |  |
| 206 S. BRAND BL.            | 9 HRS/WEEK   | 2228.                                     | 0.  | 0.                                       |
| GLENDAL, CA 91205           |  |   |   |  |
| FRAN ANDREWS                | DIRECTOR/EMPLOYEE  |   |   |  |
| 1012 FAIR OAKS #193         | 40 HRS/WEEK  | 13382.                                    | 0.  | 0.                                       |
| SOUTH PASADENA, CA 91030    |  |   |   |  |
| PETER DOCKX                 | VICE PRESIDENT   |   |   |  |
| 6362 HOLLYWOOD BL., SUITE B | 40 HRS/WEEK  | 14413.                                    | 0.  | 0.                                       |
| HOLLYWOOD, CA 90028         |  |   |   |  |
| ROSE TINKLENBERG            | SECRETARY  |   |   |  |
| 6362 HOLLYWOOD BL., SUITE B | 40 HRS/WEEK  | 8447.                                     | 0.  | 0.                                       |
| HOLLYWOOD, CA 90028         |  |   |   |  |
| JAN MEYER                   | KEY EMPLOYEE   |   |   |  |
| 6362 HOLLYWOOD BL., SUITE B | 40HRS/WEEK   | 13542.                                    | 0.  | 0.                                       |
| HOLLYWOOD, CA 90028         |  |   |   |  |
| BILL EARNSHAW               | TREASURER  |   |   |  |
| 426 WHEELING WAY            | 40 HRS/WEEK  | 15618.                                    | 0.  | 0.                                       |
| PASADENA, CA 90042          |  |   |   |  |

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

**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?<br>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?<br>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>CHURCH OF SCIENTOLOGY INTERNATIONAL</b><br>and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.  |     |     |
| 81 a | Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81  | 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 for reporting 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 |     |
| b    | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   | 84b |     |
| 85   | 501(c)(4), (5), or (6) organizations. - a Were substantially all dues nondeductible by members?   | 85a |     |
| b    | Did the organization make only in-house lobbying expenditures of \$2,000 or less?<br>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. | 85b |     |
| 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?  | 85g |     |
| h    | If section 6033(e)(1)(A) dues notice 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?                      | 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?<br>If "Yes," complete Part IX  | 88  | X   |
| 89 a | 501(c)(3) organizations. - Enter: Amount of tax imposed during the year under:<br>section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>  |     |     |
| b    | 501(c)(3) and 501(c)(4) organizations. - Did the organization engage in any section 4958 excess benefit transaction during the 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 in 89c, above, reimbursed by the organization  |     | 0.  |
| 90 a | List the states with which a copy of this return is filed <b>CALIFORNIA</b>   |     |     |
| b    | Number of employees employed in the pay period that includes March 12, 1998   | 90b | 24  |
| 91   | The books are in care of <b>BILL EARNSHAW</b> Telephone no. <b>323 467-4242</b>   |     |     |
|      | Located at <b>6362 HOLLYWOOD BLVD. SUITE B L.A. CAL.</b> ZIP + 4 <b>90028-6331</b>  |     |     |
| 92   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041. - Check here <input type="checkbox"/><br>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**

Enter gross amounts unless otherwise indicated.

|   | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (E)<br>Related or exempt<br>function income |
|---|---------------------------|---------------|--------------------------------------|---------------|---|
|   | (A)<br>Business<br>code   | (B)<br>Amount | (C)<br>Exclu-<br>sion<br>code        | (D)<br>Amount |   |
| 93 Program service revenue:   |                           |               |                                      |               |   |
| (a) _____   |                           |               |                                      |               |   |
| (b) _____   |                           |               |                                      |               |   |
| (c) _____   |                           |               |                                      |               |   |
| (d) _____   |                           |               |                                      |               |   |
| (e) _____   |                           |               |                                      |               |   |
| (f) Medicare/Medicaid payments .....                                  |                           |               |                                      |               |   |
| (g) Fees and contracts from government agencies .....                 |                           |               |                                      |               |   |
| 94 Membership dues and assessments .....                              |                           |               |                                      |               |   |
| 95 Interest on savings and temporary<br>cash investments .....        |                           |               | 14                                   | 2368.         |   |
| 96 Dividends and interest from securities .....                       |                           |               |                                      |               |   |
| 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<br>other than inventory ..... |                           |               |                                      |               |   |
| 101 Net income or (loss) from special events .....                    |                           |               |                                      |               |   |
| 102 Gross profit or (loss) from sales of inventory .....              |                           |               |                                      |               | 20000.                                      |
| 103 Other revenue:  |                           |               |                                      |               |   |
| a COMMISSION .....  |                           |               | 01                                   | 25.           |   |
| b CURRENCY EXCHANGE .....   |                           |               | 01                                   | 8.            |   |
| c .....   |                           |               |                                      |               |   |
| d .....   |                           |               |                                      |               |   |
| e .....   |                           |               |                                      |               |   |
| 104 Subtotal (add columns (B), (D), and (E)) .....                    |                           | 0.            |                                      | 2401.         | 20000.                                      |
| 105 TOTAL (add line 104, columns (B), (D), and (E)) .....             |                           |               |                                      |               | 22401.                                      |

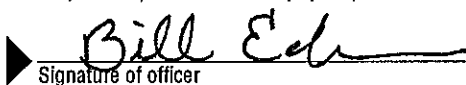
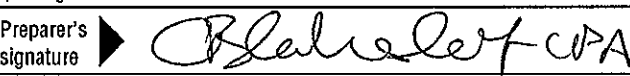
Note: (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.)

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes**

| 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). |
|----------|---|
| 102      | SALE OF PROGRAM RELATED PRINTED MATERIAL  |
|          |   |
|          |   |
|          |   |
|          |   |
|          |   |
|          |   |
|          |   |
|          |   |
|          |   |

**Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on 88 is checked.)**

| Name, address, and employer identification<br>number of corporation or partnership | Percentage of<br>ownership interest | Nature of business activities | Total income | End-of-year<br>assets |
|--|-------------------------------------|-------------------------------|--------------|-----------------------|
| N/A  | %                                   |                               |              |                       |
|  | %                                   |                               |              |                       |
|  | %                                   |                               |              |                       |
|  | %                                   |                               |              |                       |

|                                |   |   |                   |   |
|--------------------------------|---|---|-------------------|---|
| Please<br>Sign<br>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. |   |                   |   |
|                                | <br>Signature of officer   |   | 15 NOV 99<br>Date | BILL EARNSHAW<br>Type or print name and title                     |
| Paid<br>Preparer's<br>Use Only | Preparer's signature  | <br>BLAKESLEE CPA GROUP<br>814 MICHELTORENA ST.<br>LOS ANGELES, CA | 15 NOV 99<br>Date | Check if self-employed <input type="checkbox"/><br>Preparer's SSN |
|                                | Firm's name (or yours if self-employed) and address   |   | EIN               | 90026-2702<br>ZIP + 4   |



**Part III Statement About Activities**

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? .....   | 1  | X |   |
|     | If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. ► \$ 17589.  |    |   |   |
|     | 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 of its 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: |    |   |   |
| 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)? SEE PART V, FORM 990   | 2d | X |   |
| e   | Transfer of any part of its income or assets? .....  | 2e |   | X |
|     | If the answer to any question is "Yes," attach a detailed statement explaining the transactions.   |    |   |   |
| 3   | Does the organization make grants for scholarships, fellowships, student loans, etc.? .....  | 3  |   | X |
| 4 a | Do you have a section 403(b) annuity plan for your employees? .....  | 4a |   | X |
| b   | 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 instructions.)   |    |   |   |

**Part IV Reason for Non-Private Foundation Status** (See 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, page 4.)
- 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 instructions on page 4.)

| (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 instructions on page 4.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12 above.) 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) 1997 | (b) 1996 | (c) 1995         | (d) 1994 | (e) Total    |
|---|----------|----------|------------------|----------|--------------|
| <b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) .....  | 2427173. | 2567347. | 2698063.         | 840832.  | 8533415.     |
| <b>16</b> Membership fees received .....  |          |          |                  |          |              |
| <b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose .....  |          |          |                  |          |              |
| <b>18</b> 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 .....  | 2861.    | 2151.    | 376.             | 97.      | 5485.        |
| <b>19</b> Net income from unrelated business activities not included in line 18 .....   |          |          |                  |          |              |
| <b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf .....  |          |          |                  |          |              |
| <b>21</b> 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 .....  |          |          |                  |          |              |
| <b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets .....  | 7.       |          | SEE STATEMENT 12 |          | 7.           |
| <b>23</b> Total of lines 15 through 22 .....  | 2430041. | 2569498. | 2698439.         | 840929.  | 8538907.     |
| <b>24</b> Line 23 minus line 17 .....   | 2430041. | 2569498. | 2698439.         | 840929.  | 8538907.     |
| <b>25</b> Enter 1% of line 23 .....   | 24300.   | 25695.   | 26984.           | 8409.    |              |
| <b>26</b> Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24 .....  |          |          |                  |          | 26a 170778.  |
| b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1994 through 1997 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts .....   |          |          |                  |          | 26b 224222.  |
| c Total support for section 509(a)(1) test: Enter line 24, column (e) .....   |          |          |                  |          | 26c 8538907. |
| d Add: Amounts from column (e) for lines: 18 5485. 19 .....   |          |          |                  |          | 26d 229714.  |
| 22 7. 26b 224222. ....  |          |          |                  |          | 26e 8309193. |
| e Public support (line 26c minus line 26d total) .....  |          |          |                  |          | 26f 97.3098% |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) .....  |          |          |                  |          |              |
| <b>27</b> Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year. N/A   |          |          |                  |          |              |
| (1997) ..... (1996) ..... (1995) ..... (1994) .....   |          |          |                  |          |              |
| b For any amount included in line 17 that was received from a nondisqualified person, attach a list 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.) 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 |          |          |                  |          |              |
| (1997) ..... (1996) ..... (1995) ..... (1994) .....   |          |          |                  |          |              |
| c Add: Amounts from column (e) for lines: 15 ..... 16 .....   |          |          |                  |          | 27c N/A      |
| 17 ..... 20 ..... 21 .....  |          |          |                  |          | 27d N/A      |
| d Add: Line 27a total ... and line 27b total .....  |          |          |                  |          | 27e N/A      |
| e Public support (line 27c, total minus line 27d total) .....   |          |          |                  |          |              |
| 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 1994 through 1997, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions.)

NONE

**Part V****Private School Questionnaire****(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

N/A

|  | 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? .....<br>If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) | 31  |    |
| 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? .....<br>If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)   | 32d |    |
| 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? .....<br>If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)   | 33h |    |
| 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? .....<br>If you answered "Yes" to either 34a or b, please explain using an attached statement.  | 34b |    |
| 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**(To be completed **ONLY** by an eligible organization that filed Form 5768)Check here ☒ **a** If the organization belongs to an affiliated group.Check here ☐ **b** If you checked "a" above and "limited control" provisions apply.

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred) |   | (a)<br>Affiliated group totals | (b)<br>To be completed for ALL<br>electing organizations |
|---|---|--------------------------------|--|
| 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) .....      | 36  | 16448.                         | 14885.   |
| 37 Total lobbying expenditures to influence a legislative body (direct lobbying) .....      | 37  | 9552.                          | 2704.  |
| 38 Total lobbying expenditures (add lines 36 and 37) .....                                  | 38  | 26000.                         | 17589.   |
| 39 Other exempt purpose expenditures .....  | 39  | 2186008.                       | 1807965.   |
| 40 Total exempt purpose expenditures (add lines 38 and 39) .....                            | 40  | 2212008.                       | 1825554.   |
| 41 Lobbying nontaxable amount. Enter the amount from the following table -                  |   |                                |  |
| 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 | 41                             | 241278.  |
| 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                                       |                                |  |
| 42 Grassroots nontaxable amount (enter 25% of line 41) .....                                | 42  | 65150.                         | 60320.   |
| 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....           | 43  | 0.                             | 0.   |
| 44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....           | 44  | 0.                             | 0.   |

**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.)

| Calendar year (or fiscal year beginning in) ▶           | Lobbying Expenditures During 4-Year Averaging Period |             |             |             |              |
|---|--|-------------|-------------|-------------|--------------|
|   | (a)<br>1998  | (b)<br>1997 | (c)<br>1996 | (d)<br>1995 | (e)<br>Total |
| 45 Lobbying nontaxable amount .....                     | 260600.  | 264065.     |             |             | 524665.      |
| 46 Lobbying ceiling amount (150% of line 45(e)) .....   |  |             |             |             | 786998.      |
| 47 Total lobbying expenditures .....                    | 26000.   | 31065.      |             |             | 57065.       |
| 48 Grassroots nontaxable amount .....                   | 65150.   | 66016.      |             |             | 131166.      |
| 49 Grassroots ceiling amount (150% of line 48(e)) ..... |  |             |             |             | 196749.      |
| 50 Grassroots lobbying expenditures .....               | 16448.   | 6349.       |             |             | 22797.       |

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A)

N/A

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 .....   |     |    |        |
| b Paid staff or management (include compensation in expenses reported on lines c through h) .....  |     |    |        |
| c Media advertisements .....   |     |    |        |
| d Mailings to members, legislators, or the public .....  |     |    |        |
| e Publications or published or broadcast statements .....  |     |    |        |
| f Grants to other organizations for lobbying purposes .....  |     |    |        |
| g Direct contact with legislators, their staffs, government officials, or a legislative body ..... |     |    |        |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....     |     |    |        |
| 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.



**Citizens Commission on Human Rights  
Lobbying Expenditures  
Affiliated Group Members  
For the Year 1998**

| <b>Group Member<br/>Address</b>   | <b><u>Grassroots<br/>Lobbying</u></b> | <b><u>Direct<br/>Lobbying</u></b> | <b><u>Exempt Purpose<br/>Expenditures</u></b> | <b><u>Other<br/>Lobbying<br/>Nontaxable</u></b> | <b><u>Grassroots<br/>Nontaxable</u></b> |
|---|---------------------------------------|-----------------------------------|---|---|---|
| 68-0005541<br>Citizens Commission on Human Rights<br>6362 Hollywood Blvd. #B<br>Los Angeles, CA 90028       | 14,885                                | 2,704                             | 1,807,965                                     | 241,278   | 60,320                                  |
| 74-2683124<br>Citizens Commission on Human Rights<br>711 West 7th St.<br>Austin, Texas 78701                | 0                                     | 0                                 | 55,437  | 55,437  | 0                                       |
| 91-1938843<br>Citizens Commission on Human Rights<br>448 Beacon St<br>Boston, MA 02115                      | 24                                    | 276                               | 0   | 0   | 0                                       |
| 36-3688416<br>Citizens Commission on Human Rights<br>385 Anne Ter<br>Wheeling, IL 60090                     | 0                                     | 0                                 | 0   | 0   | 0                                       |
| 59-2973520<br>Citizens Commission on Human Rights<br>305 N. Fort Harrison Ave.<br>Clearwater, FL 33755-3923 | 542                                   | 3,420                             | 275,495                                       | 55,891  | 13,973                                  |
| 84-1358039<br>Citizens Commission on Human Rights<br>P.O. Box 9202<br>Denver, CO 80209-0202                 | 0                                     | 0                                 | 0   | 0   | 0                                       |
| 06-1435334<br>Citizens Commission on Human Rights<br>PO Box 17<br>Higganum, CT 06441                        | 0                                     | 0                                 | 0   | 0   | 0                                       |
| 95-4680716<br>Citizens Commission on Human Rights<br>P.O. Box 29754<br>Los Angeles, CA 90029-0754           | 0                                     | 0                                 | 0   | 0.00  | 0                                       |

**Citizens Commission on Human Rights  
Lobbying Expenditures  
Affiliated Group Members  
For the Year 1998**

|  |     |       |        |       |       |
|--|-----|-------|--------|-------|-------|
| 38-3430811<br>Citizens Commission on Human Rights<br>23205 Gratiot Ave., PMB #397<br>Eastpointe, MI 48021-1684 | 0   | 0     | 0      | 0     | 0     |
| 56-1929853<br>Citizens Commission on Human Rights<br>P.O. Box 24<br>Davidson, NC 28036                         | 0   | 925   | 0      | 0     | 0     |
| 33-0631999<br>Citizens Commission on Human Rights<br>P.O. Box 984<br>Tustin, CA 92781-0984                     | 0   | 0     | 0      | 0     | 0     |
| 94-3102568<br>Citizens Commission on Human Rights<br>P.O. Box 8842<br>Portland, OR 97207                       | 0   | 0     | 0      | 0     | 0     |
| 74-2548468<br>Citizens Commission on Human Rights<br>727 E. Glendale Ave., Suite 2B<br>Phoenix, AZ 85078       | 0   | 0     | 0      | 0     | 0     |
| 94-3309544<br>Citizens Commission on Human Rights<br>P.O. Box 4005-308<br>Carmichael, CA 95608                 | 77  | 0     | 0      | 0     | 0     |
| 94-3109471<br>Citizens Commission on Human Rights<br>300 Lenora St. #B252<br>Seattle, WA 98121-2400            | 843 | 2,227 | 44,235 | 9,461 | 2,365 |
| 43-1630660<br>Citizens Commission on Human Rights<br>P.O. Box 24222<br>St. Louis, MO 63130-0222                | 27  | 0     | 2,876  | 580   | 145   |
| 77-0389584<br>Citizens Commission on Human Rights<br>P.O. Box 10428<br>San Jose, CA 95157                      | 0   | 0     | 0      | 0     | 0     |

**Citizens Commission on Human Rights  
Lobbying Expenditures  
Affiliated Group Members  
For the Year 1998**

|  |               |              |                  |                |               |
|--|---------------|--------------|------------------|----------------|---------------|
| 87-0516153<br>Citizens Commission on Human Rights<br>PO Box 521384<br>Salt Lake City, UT 84152                 | 50            | 0            | 0                | 0              | 0             |
| 52-1842070<br>Citizens Commission on Human Rights<br>1731 Connecticut Ave., Suite 300<br>Washington, D.C. 2009 | 0             | 0            | 0                | 0              | 0             |
| <b>TOTALS</b>  | <b>16,448</b> | <b>9,552</b> | <b>2,186,008</b> | <b>362,647</b> | <b>76,803</b> |

# Depreciation and Amortization

(Including Information on Listed Property) 990

OMB No. 1545-0172

**1998**  
Attachment  
Sequence No. 67

▶ See separate instructions. ▶ Attach this form to your return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

CITIZENS COMMISSION ON HUMAN RIGHTS

FORM 990 PAGE 2

68-0005541

**Part I Election To Expense Certain Tangible Property (Section 179)** (Note: If you have any "listed property," complete Part V before you complete Part I.)

|    |   |                              |                  |
|----|---|------------------------------|------------------|
| 1  | Maximum dollar limitation. If an enterprise zone business, see instructions   | 1                            | 18500.           |
| 2  | Total cost of section 179 property placed in service  | 2                            |                  |
| 3  | Threshold cost of section 179 property before reduction in limitation   | 3                            | \$200,000        |
| 4  | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-  | 4                            |                  |
| 5  | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5                            |                  |
| 6  | (a) Description of property   | (b) Cost (business use only) | (c) Elected cost |
| 7  | Listed property. Enter amount from line 27  | 7                            |                  |
| 8  | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7  | 8                            |                  |
| 9  | Tentative deduction. Enter the smaller of line 5 or line 8  | 9                            |                  |
| 10 | Carryover of disallowed deduction from 1997   | 10                           |                  |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5   | 11                           |                  |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11   | 12                           |                  |
| 13 | Carryover of disallowed deduction to 1999. Add lines 9 and 10, less line 12   | 13                           |                  |

**Note:** Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

**Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1998 Tax Year (Do Not Include Listed Property.)**

**Section A - General Asset Account Election**

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See instructions ☐

**Section B - General Depreciation System (GDS) (See instructions.)**

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 15 a 3-year property           |                                      |  |                     |                |            |                            |
| b 5-year property              |                                      |  |                     |                |            |                            |
| c 7-year property              |                                      |  |                     |                |            |                            |
| d 10-year property             |                                      |  |                     |                |            |                            |
| e 15-year property             |                                      |  |                     |                |            |                            |
| f 20-year property             |                                      |  |                     |                |            |                            |
| g 25-year property             |                                      |  | 25 yrs.             |                | S/L        |                            |
| h Residential rental property  | /                                    |  | 27.5 yrs.           | MM             | S/L        |                            |
| i Nonresidential real property | /                                    |  | 27.5 yrs.           | MM             | S/L        |                            |
|                                | /                                    |  | 39 yrs.             | MM             | S/L        |                            |
|                                | /                                    |  |                     | MM             | S/L        |                            |

**Section C - Alternative Depreciation System (ADS) (See instructions.)**

|                 |   |  |         |    |     |  |
|-----------------|---|--|---------|----|-----|--|
| 16 a Class life |   |  |         |    | S/L |  |
| b 12-year       |   |  | 12 yrs. |    | S/L |  |
| c 40-year       | / |  | 40 yrs. | MM | S/L |  |

**Part III Other Depreciation (Do Not Include Listed Property.) (See instructions.)**

|    |  |    |        |
|----|--|----|--------|
| 17 | GDS and ADS deductions for assets placed in service in tax years beginning before 1998 | 17 |        |
| 18 | Property subject to section 168(f)(1) election   | 18 |        |
| 19 | ACRS and other depreciation  | 19 | 13275. |

**Part IV Summary (See instructions.)**

|    |  |    |        |
|----|--|----|--------|
| 20 | Listed property. Enter amount from line 26   | 20 |        |
| 21 | Total. Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions | 21 | 13275. |
| 22 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs  | 22 |        |

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 4562 (1998)

**Part V Listed Property - Automobiles, Certain Other Vehicles, Cellular Telephones, Certain Computers, and Property Used for Entertainment, Recreation, or Amusement**

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)**

**23a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **23b** If "Yes," is the evidence written? ☐ Yes ☐ No

| (a)<br>Type of property<br>(list vehicles first) | (b)<br>Date<br>placed in<br>service | (c)<br>Business/<br>investment<br>use percentage | (d)<br>Cost or<br>other basis | (e)<br>Basis for depreciation<br>(business/investment<br>use only) | (f)<br>Recovery<br>period | (g)<br>Method/<br>Convention | (h)<br>Depreciation<br>deduction | (i)<br>Elected<br>section 179<br>cost |
|--|-------------------------------------|--|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|
|--|-------------------------------------|--|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|

**24** Property used more than 50% in a qualified business use:

|  |   |   |   |  |  |  |  |  |
|--|---|---|---|--|--|--|--|--|
|  | : | : | % |  |  |  |  |  |
|  | : | : | % |  |  |  |  |  |
|  | : | : | % |  |  |  |  |  |

**25** Property used 50% or less in a qualified business use:

|  |   |   |   |  |  |     |  |  |
|--|---|---|---|--|--|-----|--|--|
|  | : | : | % |  |  | S/L |  |  |
|  | : | : | % |  |  | S/L |  |  |
|  | : | : | % |  |  | S/L |  |  |

**26** Add amounts in column (h). Enter the total here and on line 20, page 1 **26**

**27** Add amounts in column (i). Enter the total here and on line 7, page 1 **27**

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

|   | (a)<br>Vehicle | (b)<br>Vehicle | (c)<br>Vehicle | (d)<br>Vehicle | (e)<br>Vehicle | (f)<br>Vehicle |
|---|----------------|----------------|----------------|----------------|----------------|----------------|
| <b>28</b> Total business/investment miles driven during the year (DO NOT include commuting miles) ..... |                |                |                |                |                |                |
| <b>29</b> Total commuting miles driven during the year ...  |                |                |                |                |                |                |
| <b>30</b> Total other personal (noncommuting) miles driven .....  |                |                |                |                |                |                |
| <b>31</b> Total miles driven during the year.<br>Add lines 28 through 30 .....                          |                |                |                |                |                |                |
|   | Yes            | No             | Yes            | No             | Yes            | No             |
| <b>32</b> Was the vehicle available for personal use during off-duty hours? .....                       |                |                |                |                |                |                |
| <b>33</b> Was the vehicle used primarily by a more than 5% owner or related person? .....               |                |                |                |                |                |                |
| <b>34</b> Is another vehicle available for personal use? .....  |                |                |                |                |                |                |

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

|  | Yes | No |
|--|-----|----|
| <b>35</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....  |     |    |
| <b>36</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners ..... |     |    |
| <b>37</b> Do you treat all use of vehicles by employees as personal use? .....   |     |    |
| <b>38</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....   |     |    |
| <b>39</b> Do you meet the requirements concerning qualified automobile demonstration use? .....  |     |    |

**Note:** If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles.

**Part VI Amortization**

| (a)<br>Description of costs   | (b)<br>Date amortization<br>begins | (c)<br>Amortizable<br>amount | (d)<br>Code<br>section | (e)<br>Amortization<br>period or percentage | (f)<br>Amortization<br>for this year |
|---|------------------------------------|------------------------------|------------------------|---|--------------------------------------|
| <b>40</b> Amortization of costs that begins during your 1998 tax year:                              |                                    |                              |                        |   |                                      |
|   | :                                  | :                            |                        |   |                                      |
|   | :                                  | :                            |                        |   |                                      |
| <b>41</b> Amortization of costs that began before 1998 .....  |                                    |                              |                        | <b>41</b>                                   |                                      |
| <b>42</b> Total. Enter here and on "Other Deductions" or "Other Expenses" line of your return ..... |                                    |                              |                        | <b>42</b>                                   |                                      |

| SCHEDULE A                   | OTHER INCOME   |                |                | STATEMENT 12   |
|------------------------------|----------------|----------------|----------------|----------------|
| DESCRIPTION                  | 1997<br>AMOUNT | 1996<br>AMOUNT | 1995<br>AMOUNT | 1994<br>AMOUNT |
| COMMISSIONS                  | 7.             |                |                |                |
| TOTAL TO SCHEDULE A, LINE 22 | 7.             |                |                |                |

| FORM 990                                      | OTHER INVESTMENTS | STATEMENT | 10 |
|---|-------------------|-----------|----|
| DESCRIPTION                                   | VALUATION METHOD  | AMOUNT    |    |
| BOOKS   | COST              | 4500.     |    |
| ARTWORK                                       | COST              | 7400.     |    |
| TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B |                   | 11900.    |    |

| FORM 990                          | DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT | STATEMENT                | 11         |
|-----------------------------------|--|--------------------------|------------|
| DESCRIPTION                       | COST OR OTHER BASIS                            | ACCUMULATED DEPRECIATION | BOOK VALUE |
| FURNITURE & EQUIPMENT             | 313.   | 313.                     | 0.         |
| FURNITURE & EQUIPMENT             | 313.   | 313.                     | 0.         |
| FURNITURE & EQUIPMENT             | 2143.  | 2143.                    | 0.         |
| FURNITURE & EQUIPMENT             | 2973.  | 2973.                    | 0.         |
| FURNITURE & EQUIPMENT             | 16651.   | 16651.                   | 0.         |
| FURNITURE & EQUIPMENT             | 2356.  | 2356.                    | 0.         |
| FURNITURE & EQUIPMENT             | 1080.  | 1080.                    | 0.         |
| FURNITURE & EQUIPMENT             | 1593.  | 1593.                    | 0.         |
| FURNITURE & EQUIPMENT             | 36477.   | 34948.                   | 1529.      |
| FURNITURE & EQUIPMENT             | 1178.  | 756.                     | 422.       |
| FURNITURE & EQUIPMENT             | 1125.  | 1013.                    | 112.       |
| FURNITURE & EQUIPMENT             | 637.   | 319.                     | 318.       |
| FURNITURE & EQUIPMENT             | 2648.  | 1855.                    | 793.       |
| LEASEHOLD IMPROVEMENT             | 4797.  | 957.                     | 3840.      |
| SOFTWARE                          | 758.   | 456.                     | 302.       |
| COMPUTER EQUIPMENT                | 8627.  | 4313.                    | 4314.      |
| COMPUTER SOFTWARE                 | 161.   | 135.                     | 26.        |
| FURNITURE & EQUIPMENT             | 18988.   | 5697.                    | 13291.     |
| FURNITURE & EQUIPMENT             | 7362.  | 736.                     | 6626.      |
| COMPUTER SOFTWARE                 | 517.   | 86.                      | 431.       |
| TOTAL TO FORM 990, PART IV, LN 57 | 110697.  | 78693.                   | 32004.     |

FORM 990

OTHER PROGRAM SERVICES

STATEMENT

9

## DESCRIPTION

GRANTS AND  
ALLOCATIONS

## EXPENSES

PUBLICATIONS: AS PART OF CCHR'S ONGOING COMMITMENT TO PUBLIC EDUCATION AND AWARENESS, CCHR PRODUCED THE 10TH BOOKLET IN ITS SERIES OF PUBLICATIONS ON PSYCHIATRIC ABUSE WHICH DEALT WITH PSYCHIATRIC BETRAYAL AND DRUGGING OF CHILDREN. THIS COMPREHENSIVE BOOKLET, OF WHICH OVER 250,000 WERE DISTRIBUTED, PROVIDED INFORMATION CONCERNING FRAUDULENT PSYCHIATRIC DIAGNOSING, ABUSIVE PSYCHIATRIC DRUG TREATMENTS AND RESTRAINTS, AND CRIMINAL CONVICTIONS OF PSYCHIATRISTS WHO ENGAGED IN THE ABOVE. IT SENT A PUBLIC WARNING TO PARENTS, TEACHERS, EDUCATORS AND LEGISLATORS OF THE THREAT TO OUR FUTURE GENERATIONS. THERE WERE MORE THAN 780,000 OF THIS BOOKLET AND OTHERS PRINTED EARLIER IN THE SERIES DISTRIBUTED FREE OF CHARGE IN 1998.

1321056.

CCHR ALSO PRODUCED 3 PAMPHLETS AND DISTRIBUTED MORE THAN 5,000 OF THEM FREE OF CHARGE THROUGH THE COURSE OF THE YEAR. THE PAMPHLETS DISCUSSED "LEARNING DISORDERS" AND OTHER UNFOUNDED PSYCHIATRIC DIAGNOSES OF CHILDREN, THE VIOLENCE AND SUICIDE-INDUCING EFFECTS OF PSYCHIATRIC DRUGS AND GAVE GENERAL INFORMATION ABOUT PSYCHIATRIC MIND-ALTERING DRUGS. EDUCATIONAL REPORTS ON THE HARMFUL INFLUENCE OF PSYCHIATRIC/PSYCHOLOGICAL PROGRAMS SUCH AS "DEATH EDUCATION" IN SCHOOLS WERE PRODUCED AND DISTRIBUTED. TWO VIDEOS WERE ALSO PRODUCED CONCERNING CCHR'S PUBLIC INQUIRIES HELD IN 1998 WHICH WERE DISTRIBUTED TO MEDIA AND CONCERNED INDIVIDUALS AND GROUPS.

TOTAL TO FORM 990, PART III, LINE E

1321056.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

8

DESCRIPTION OF PROGRAM SERVICE FOUR

PUBLIC AWARENESS: CCHR ACTIVELY RAISED PUBLIC AWARENESS OF THE NEED FOR REFORMS IN THE FIELD OF MENTAL HEALTH DURING 1998. SEVERAL PUBLIC RALLIES, REACHING MORE THAN 2,000 PEOPLE AT A TIME, EDUCATED PEOPLE THAT CHILDREN ARE BEING FRAUDULENTLY DIAGNOSED AND HARMFULLY DRUGGED WITH "MEDICATION" THAT COULD TURN THEM INTO ADDICTS AND KILLERS. THERE WAS CONSIDERABLE INFORMATION PROVIDED TO PARENTS AND PARENT GROUPS ABOUT THIS AND IT ALSO GRABBED THE ATTENTION OF THE MEDIA.

CCHR SUPPORTED GRIEVING FAMILIES OF CHILDREN WHO HAD DIED IN PSYCHIATRIC INSTITUTIONS BY HOLDING CANDLELIGHT VIGILS THAT RAISED PUBLIC AWARENESS OF ABUSES IN THESE FACILITIES, THE PERPETRATORS OF WHICH HAVING BEEN UNTIL THEN UNACCOUNTABLE.

CCHR ALSO PROVIDED INFORMATION TO THE MEDIA ON ABUSIVE PSYCHIATRIC OVER-DRUGGING OF CHILDREN. ADDITIONALLY, INFORMATION WAS PROVIDED TO MEDIA AND INDIVIDUALS ABOUT FRAUDULENT ACTIVITIES IN PSYCHIATRIC FACILITIES, INCLUDING THE SEXUAL ASSAULT OF PATIENTS.

SEMINARS WERE ALSO HELD TO EDUCATE PEOPLE ABOUT THE DANGERS IN THE MENTAL HEALTH SYSTEM. IN SUMMARY, THROUGHOUT THE YEAR, CCHR SPOKESPEOPLE WERE INTERVIEWED ON MORE THAN 220 RADIO SHOWS AND THERE WERE MORE THAN 200 PRINT ARTICLES AND NEARLY 60 TV SHOWS THAT COVERED ISSUES OF CONCERN TO CCHR. THESE REACHED APPROXIMATELY 50 MILLION PEOPLE.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE D

307756.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

7

DESCRIPTION OF PROGRAM SERVICE THREE

LEGISLATION: 150 PEOPLE ARE CONFIRMED AS HAVING DIED IN PSYCHIATRIC HOSPITALS THROUGH THE USE OF RESTRAINTS IN THE PAST DECADE. AN ADDITIONAL 1,500 SUCH DEATHS ARE SUSPECTED. IT WAS THEREFORE IMPERATIVE THAT CCHR ALERT LEGISLATORS TO THE FACT THAT THERE WAS NO MANDATORY REPORTING SYSTEM REQUIRED FOR HOSPITALS WHEN SUCH A DEATH OCCURRED. TO STOP THIS ABUSIVE PRACTICE FROM LEADING TO MORE UNNECESSARY DEATHS, CCHR WROTE AND PRESENTED SUBMISSIONS AND REPORTS CONCERNING THIS DANGEROUS PRACTICE TO VARIOUS STATE AND FEDERAL LEGISLATIVE BODIES, RESULTING IN COMMITMENTS TO REFORM.

CCHR ALSO PRODUCED A WHITE PAPER FOR LEGISLATORS ON THE SUBJECT OF "MENTAL HEALTH INSURANCE PARITY." THE WHITE PAPER PROVIDED STUDIES AND REPORTS THAT REFUTED INACCURATE CLAIMS THAT MENTAL HEALTH INSURANCE PARITY WOULD BE COST-EFFECTIVE AND LESS DISCRIMINATORY FOR THOSE DEEMED MENTALLY ILL. SEVERAL STATES RESPONDED AND QUESTIONED THE VERACITY OF MANDATED MENTAL HEALTH INSURANCE PARITY WHICH WOULD HAVE LEFT MORE INDIVIDUALS UNINSURED AND COULD HAVE LED TO WRONGFUL INCARCERATION AND TREATMENT IN PSYCHIATRIC FACILITIES.

CCHR WAS ALSO INVITED TO AND PRESENTED EVIDENCE TO LEGISLATIVE HEARINGS INTO PSYCHIATRIC ABUSE.

TO FORM 990, PART III, LINE C

GRANTS

EXPENSES

17589.

DIAGNOSED WITH "ATTENTION DEFICIT HYPERACTIVITY DISORDER" (ADHD) AND IRRESPONSIBLY DRUGGED, AND HELD SEVERAL PUBLIC INQUIRIES INTO THIS ISSUE. CCHR GAVE EVIDENCE ON ITS FINDINGS TO THE NATIONAL INSTITUTE OF HEALTH AT THEIR INVITATION.

CCHR DOCUMENTED MORE THAN 400 CASES OF FRAUD AND ABUSE IN THE MENTAL HEALTH SYSTEM, WITH MORE THAN 350 COMPLAINTS SUBSEQUENTLY FILED WITH STATE OR FEDERAL LAW ENFORCEMENT AGENCIES, PRACTITIONER OR FACILITY LICENSING BOARDS, OR WITH PRIVATE AND FEDERAL HEALTH CARE FRAUD UNITS.

|                               | GRANTS | EXPENSES |
|-------------------------------|--------|----------|
| TO FORM 990, PART III, LINE A |        | 84341.   |

| FORM 990 | STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS | STATEMENT | 6 |
|----------|--|-----------|---|
|----------|--|-----------|---|

#### DESCRIPTION OF PROGRAM SERVICE TWO

HOTLINE SERVICES: CCHR'S HOTLINE 800 NUMBER PROVIDED INVALUABLE INFORMATION TO INDIVIDUALS AND MORE THAN 350 COMMUNITY GROUPS. THE HOTLINE HAS ENABLED CCHR TO PROVIDE RAPID RESPONSES TO INFORMATION REQUESTS, ESPECIALLY IN LIGHT OF THE GROWING NUMBER OF REPORTS OF SENSELESS ACTS OF VIOLENCE BEING COMMITTED BY INDIVIDUALS, INCLUDING CHILDREN, WHO WERE PRESCRIBED PSYCHIATRIC DRUGS KNOWN TO CAUSE VIOLENT REACTIONS. THE HOTLINE ENABLED PEOPLE TO RECEIVE THE REPORTS AND INFORMATION THAT THEY NEEDED REGARDING SUCH SITUATIONS FREE OF CHARGE. IN ADDITION, THE HOTLINE PROVIDED THE MEANS FOR THE PUBLIC TO REPORT INCIDENTS OF PSYCHIATRIC ABUSE AND FRAUD SO THAT CCHR COULD ASCERTAIN WHAT RESEARCH OR INVESTIGATION WAS NECESSARY. THERE WERE A TOTAL OF 7,500 REQUESTS FOR INFORMATION MADE THROUGH THE HOTLINE NUMBER.

|                               | GRANTS | EXPENSES |
|-------------------------------|--------|----------|
| TO FORM 990, PART III, LINE B |        | 79927.   |

| FORM 990                 | OTHER EXPENSES |                            |                                  | STATEMENT 4        |
|--------------------------|----------------|----------------------------|----------------------------------|--------------------|
| DESCRIPTION              | (A)<br>TOTAL   | (B)<br>PROGRAM<br>SERVICES | (C)<br>MANAGEMENT<br>AND GENERAL | (D)<br>FUNDRAISING |
| DISSEMINATION            | 144951.        | 136163.                    | 4542.                            | 4246.              |
| STAFF TRAINING           | 16134.         | 10901.                     | 3264.                            | 1969.              |
| LICENSES, FEES &<br>DUES | 7031.          | 6900.                      | 131.                             |                    |
| COMMISSIONS & AWARDS     | 19211.         |                            |                                  | 19211.             |
| BANK CHARGES             | 14035.         | 9695.                      | 2588.                            | 1752.              |
| LEGAL SETTLEMENT         | 6403.          |                            | 6403.                            |                    |
| TOTAL TO FM 990, LN 43   | 207765.        | 163659.                    | 16928.                           | 27178.             |

| FORM 990 | STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS | STATEMENT 5 |
|----------|--|-------------|
|----------|--|-------------|

## DESCRIPTION OF PROGRAM SERVICE ONE

INVESTIGATIONS: DURING 1998, CCHR, AMONG ITS PROGRAM ACTIVITIES, RESEARCHED AND INVESTIGATED PSYCHIATRIC ABUSES, AND, WHERE WARRANTED, FILED COMPLAINTS WITH THE PROPER AUTHORITIES. THIS FORWARDED ONE OF CCHR'S OVERALL PURPOSES TO "CLEAN UP THE FIELD OF MENTAL HEALING" AND HELPED TO SAFEGUARD LIVES.

CCHR INVESTIGATED NUMEROUS INCIDENTS OF CHILDREN WHO REBELLED AGAINST A FAILING EDUCATIONAL SYSTEM AND WERE THEN PLACED IN PSYCHIATRIC INSTITUTIONS WHERE THEY WERE VIOLENTLY RESTRAINED AND DIED. THE LAW DOES NOT REQUIRE THAT PSYCHIATRIC HOSPITALS REPORT THESE DEATHS. THEREFORE, CCHR REPORTED THE INFORMATION TO STATE AND FEDERAL AUTHORITIES TO HAVE CRIMINAL CHARGES BROUGHT WHERE INDICATED AND REGULATIONS PASSED THAT WOULD PROTECT CHILDREN AGAINST THIS ABUSE. NATIONAL MEDIA COVERED THESE INVESTIGATIONS. AS A RESULT, SEVERAL PRIVATE PSYCHIATRIC HOSPITALS WERE INDEPENDENTLY INVESTIGATED, PROSECUTED AND/OR FINED FOR ABUSIVE PRACTICES.

CCHR ALSO INVESTIGATED CHILDREN WHO WERE WRONGLY

FORM 990

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

STATEMENT 3

## INCOME

|  |       |       |
|--|-------|-------|
| 1. GROSS RECEIPTS . . . . .                    | 36247 |       |
| 2. RETURNS AND ALLOWANCES . . . . .            |       |       |
| 3. LINE 1 LESS LINE 2 . . . . .                |       | 36247 |
| 4. COST OF GOODS SOLD (LINE 13) . . . . .      | 16247 |       |
| 5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . . |       | 20000 |

## COST OF GOODS SOLD

|   |       |       |
|---|-------|-------|
| 6. INVENTORY AT BEGINNING OF YEAR . . . . .       | 15870 |       |
| 7. MERCHANDISE PURCHASED . . . . .                | 15877 |       |
| 8. COST OF LABOR . . . . .                        |       |       |
| 9. MATERIALS AND SUPPLIES . . . . .               |       |       |
| 10. OTHER COSTS . . . . .                         |       |       |
| 11. ADD LINES 6 THROUGH 10 . . . . .              |       | 31747 |
| 12. INVENTORY AT END OF YEAR . . . . .            | 15500 |       |
| 13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) . . |       | 16247 |

| Asset<br>Number | Description of property                      |                     |                 |             |                        |                    |  |                           |  |
|-----------------|--|---------------------|-----------------|-------------|------------------------|--------------------|--|---------------------------|--|
|                 | Date<br>placed<br>in service                 | Method/<br>IRC sec. | Life<br>or rate | Line<br>No. | Cost or<br>other basis | Basis<br>reduction | Accumulated<br>depreciation/amortization | Current year<br>deduction |  |
|                 | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             |                        |                    |  |                           |  |
| 1               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/86                                     | SL                  | 5.00            | 19          | 313.                   |                    | 313.                                     | 0.                        |  |
| 2               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/87                                     | SL                  | 5.00            | 19          | 313.                   |                    | 313.                                     | 0.                        |  |
| 3               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/88                                     | SL                  | 7.00            | 19          | 2143.                  |                    | 2143.                                    | 0.                        |  |
| 4               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/89                                     | SL                  | 5.00            | 19          | 2973.                  |                    | 2973.                                    | 0.                        |  |
| 5               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/90                                     | SL                  | 7.00            | 19          | 16651.                 |                    | 16651.                                   | 0.                        |  |
| 6               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/91                                     | SL                  | 7.00            | 19          | 2356.                  |                    | 2189.                                    | 167.                      |  |
| 7               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/92                                     | SL                  | 5.00            | 19          | 1080.                  |                    | 1080.                                    | 0.                        |  |
| 8               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/93                                     | SL                  | 5.00            | 19          | 1593.                  |                    | 1435.                                    | 158.                      |  |
| 9               | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/93                                     | SL                  | 7.00            | 19          | 36477.                 |                    | 29737.                                   | 5211.                     |  |
| 10              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/94                                     | SL                  | 7.00            | 19          | 1178.                  |                    | 588.                                     | 168.                      |  |
| 11              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/94                                     | SL                  | 5.00            | 19          | 1125.                  |                    | 788.                                     | 225.                      |  |
| 12              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/95                                     | SL                  | 7.00            | 19          | 637.                   |                    | 228.                                     | 91.                       |  |
| 13              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/95                                     | SL                  | 5.00            | 19          | 2648.                  |                    | 1325.                                    | 530.                      |  |
| 16              | COMPUTER EQUIPMENT                           |                     |                 |             |                        |                    |  |                           |  |
|                 | 07/01/96                                     | SL                  | 5.00            | 19          | 8627.                  |                    | 2588.                                    | 1725.                     |  |
| 18              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 04/01/97                                     | SL                  | 5.00            | 19          | 18988.                 |                    | 1899.                                    | 3798.                     |  |
| 19              | FURNITURE & EQUIPMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 07/01/98                                     | SL                  | 5.00            | 19          | 7362.                  |                    |  | 736.                      |  |
|                 | ** 990 PAGE 2 TOTAL - FURNITURE & EQUIPMENT  |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             | 104464.                |                    | 64250.                                   | 12809.                    |  |
|                 | COMPUTER SOFTWARE                            |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             |                        |                    |  |                           |  |
| 15              | SOFTWARE                                     |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/95                                     | SL                  | 5.00            | 19          | 758.                   |                    | 304.                                     | 152.                      |  |
| 17              | COMPUTER SOFTWARE                            |                     |                 |             |                        |                    |  |                           |  |
|                 | 07/01/96                                     | SL                  | 3.00            | 19          | 161.                   |                    | 81.                                      | 54.                       |  |
| 20              | COMPUTER SOFTWARE                            |                     |                 |             |                        |                    |  |                           |  |
|                 | 07/01/98                                     | SL                  | 3.00            | 19          | 517.                   |                    |  | 86.                       |  |
|                 | ** 990 PAGE 2 TOTAL - COMPUTER SOFTWARE      |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             | 1436.                  |                    | 385.                                     | 292.                      |  |
|                 | LEASEHOLD IMPROVEMENTS                       |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             |                        |                    |  |                           |  |
| 14              | LEASEHOLD IMPROVEMENT                        |                     |                 |             |                        |                    |  |                           |  |
|                 | 12/31/93                                     | SL                  | 27.50           | 19          | 4797.                  |                    | 783.                                     | 174.                      |  |
|                 | ** 990 PAGE 2 TOTAL - LEASEHOLD IMPROVEMENTS |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             | 4797.                  |                    | 783.                                     | 174.                      |  |
|                 | ** GRAND TOTAL 990 PAGE 2 DEPRECIATION       |                     |                 |             |                        |                    |  |                           |  |
|                 |  |                     |                 |             | 110697.                |                    | 65418.                                   | 13275.                    |  |

## FOOTNOTES

STATEMENT 1

FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES  
AND KEY EMPLOYEES

OFFICERS, TRUSTEES AND DIRECTORS WHO ARE ALSO  
EMPLOYEES ARE COMPENSATED ONLY FOR THEIR DUTIES  
AS EMPLOYEES, NOT FOR THEIR DUTIES AS OFFICERS,  
TRUSTEES OR DIRECTORS.