

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2007**Open to Public  
Inspection**A** For the 2007 calendar year, or tax year beginning

and ending

**B** Check if  
applicable

- ☐ Address  
change
- ☐ Name  
change
- ☐ Initial  
return
- ☐ Termin-  
ation
- ☐ Amended  
return
- ☐ Application  
pending

Please  
use IRS  
label or  
print or  
type  
See  
Specific  
Instruc-  
tions**C** Name of organization**CITIZENS COMMISSION ON HUMAN RIGHTS**

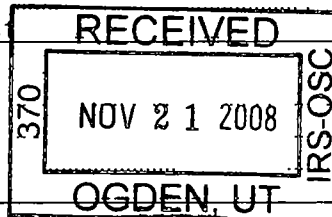
Number and street (or P.O. box if mail is not delivered to street address)

**6616 SUNSET BLVD**

City or town, state or country, and ZIP + 4

**LOS ANGELES, CA 90028****D** Employer identification number**68-0005541****E** Telephone number**323-467-4242****F** Accounting method ☐ Cash ☒ Accrual  
☐ Other (specify) ▶• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts  
must attach a completed Schedule A (Form 990 or 990-EZ).**H** and **I** are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No  
(If "No," attach a list.)**H(d)** Is this a separate return filed by an or-  
ganization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****G** Website: **WWW.CCHR.ORG****J** Organization type (check only one) ☒ 501(c) ( 3 ) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross  
receipts are normally not more than \$25,000. A return is not required, but if the organization  
chooses to file a return, be sure to file a complete return.**M** Check ☐ if the organization is not required to attach  
Sch. B (Form 990, 990-EZ, or 990-PF).**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **5,045,762.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Contributions to donor advised funds	1a		
	b	Direct public support (not included on line 1a)	1b	1,713,641.	
	c	Indirect public support (not included on line 1a)	1c	2,795,894.	
	d	Government contributions (grants) (not included on line 1a)	1d		
	e	Total (add lines 1a through 1d) (cash \$ 4,509,535. noncash \$ )	1e	4,509,535.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	436,035.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	315.	
	5	Dividends and interest from securities	5		
	6a	Gross rents	6a		
	6b	Less: rental expenses	6b		
Expenses	c	Net rental income or (loss). Subtract line 6b from line 6a	6c		
	7	Other investment income (describe ▶ )	7		
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a	
	b	Less: cost or other basis and sales expenses	8b		
	c	Gain or (loss) (attach schedule)	8c		
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	a	Gross revenue (not including \$ of contributions reported on line 1b)	9a		
	b	Less: direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c		
	10a	Gross sales of inventory, less returns and allowances	10a	85,606.	
	b	Less: cost of goods sold	10b	14,114.	
Net Assets	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	71,492.	
	11	Other revenue (from Part VII, line 103)	11	14,271.	
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	5,031,648.	
	13	Program services (from line 44, column (B))	13	3,958,774.	
	14	Management and general (from line 44, column (C))	14	488,417.	
	15	Fundraising (from line 44, column (D))	15	450,677.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses. Add lines 16 and 44, column (A)	17	4,897,868.	
	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	133,780.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,135,199.	
	20	Other changes in net assets or fund balances (attach explanation)	20	0.	
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	1,268,979.	



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

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**Part II Statement of Functional Expenses**

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <u>204,100</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>			<b>STATEMENT 3</b>	
	<u>204,100.</u>	<u>204,100.</u>		
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25a</b> Compensation of current officers, directors, key employees, etc. listed in Part V-A	<u>163,028.</u>	<u>118,052.</u>	<u>31,544.</u>	<u>13,432.</u>
<b>b</b> Compensation of former officers, directors, key employees, etc. listed in Part V-B	<u>0.</u>	<u>0.</u>	<u>0.</u>	<u>0.</u>
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	<u>853,523.</u>	<u>561,108.</u>	<u>205,085.</u>	<u>87,330.</u>
<b>27</b> Pension plan contributions not included on lines 25a, b, and c				
<b>28</b> Employee benefits not included on lines 25a - 27	<u>21,530.</u>	<u>14,154.</u>	<u>5,173.</u>	<u>2,203.</u>
<b>29</b> Payroll taxes	<u>90,644.</u>	<u>59,589.</u>	<u>21,780.</u>	<u>9,275.</u>
<b>30</b> Professional fundraising fees				
<b>31</b> Accounting fees	<u>53,874.</u>	<u>780.</u>	<u>53,094.</u>	
<b>32</b> Legal fees	<u>57,620.</u>		<u>57,620.</u>	
<b>33</b> Supplies	<u>56,698.</u>	<u>43,635.</u>	<u>5,477.</u>	<u>7,586.</u>
<b>34</b> Telephone	<u>66,990.</u>	<u>44,040.</u>	<u>16,096.</u>	<u>6,854.</u>
<b>35</b> Postage and shipping	<u>546,448.</u>	<u>532,725.</u>	<u>3,092.</u>	<u>10,631.</u>
<b>36</b> Occupancy	<u>412,531.</u>	<u>332,514.</u>	<u>45,116.</u>	<u>34,901.</u>
<b>37</b> Equipment rental and maintenance	<u>19,361.</u>	<u>16,160.</u>	<u>2,086.</u>	<u>1,115.</u>
<b>38</b> Printing and publications	<u>738,505.</u>	<u>735,160.</u>	<u>496.</u>	<u>2,849.</u>
<b>39</b> Travel	<u>34,980.</u>	<u>31,116.</u>	<u>1,719.</u>	<u>2,145.</u>
<b>40</b> Conferences, conventions, and meetings				
<b>41</b> Interest				
<b>42</b> Depreciation, depletion, etc. (attach schedule)	<u>266,565.</u>	<u>213,852.</u>	<u>29,721.</u>	<u>22,992.</u>
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> COMMISSIONS	<u>107,479.</u>			<u>107,479.</u>
<b>b</b> PROMOTION	<u>1,074,206.</u>	<u>984,650.</u>		<u>89,556.</u>
<b>c</b> INSURANCE	<u>17,959.</u>	<u>14,408.</u>	<u>2,002.</u>	<u>1,549.</u>
<b>d</b> TAXES, DUES, & FEES	<u>4,437.</u>	<u>3,025.</u>	<u>1,407.</u>	<u>5.</u>
<b>e</b> UTILITIES	<u>61,957.</u>	<u>49,706.</u>	<u>6,909.</u>	<u>5,342.</u>
<b>f</b> BANK FEES	<u>45,433.</u>	<u>0.</u>	<u>0.</u>	<u>45,433.</u>
<b>g</b>				
<b>44</b> Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<u>4,897,868.</u>	<u>3,958,774.</u>	<u>488,417.</u>	<u>450,677.</u>

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

Yes ☐ No ☒If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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

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.

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 INVESTIGATIONS SEE STATEMENT 10.**

(Grants and allocations \$ 292. ) If this amount includes foreign grants, check here ► ☐

197,338.

**b HOTLINE SERVICES: SEE STATEMENT 11.**

(Grants and allocations \$ 146. ) If this amount includes foreign grants, check here ► ☐

101,968.

**c LEGISLATION: SEE STATEMENT 12.**

(Grants and allocations \$ 171. ) If this amount includes foreign grants, check here ► ☐

238,480.

**d PUBLIC AWARENESS: SEE STATEMENT 13.**

(Grants and allocations \$ 203,120. ) If this amount includes foreign grants, check here ► ☐

3,109,156.

**e Other program services (attach schedule) SEE STATEMENT 4**

(Grants and allocations \$ 371. ) If this amount includes foreign grants, check here ► ☐

311,832.

**f Total of Program Service Expenses** (should equal line 44, column (B), Program services) ►

3,958,774.

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**Part IV Balance Sheets** (See the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	45 Cash - non-interest-bearing	85,162.	45	49,747.	
	46 Savings and temporary cash investments	60,079.	46	616,911.	
	47 a Accounts receivable	47a 70,232.			
	b Less: allowance for doubtful accounts	47b 35,116.	29,095.	47c 35,116.	
	48 a Pledges receivable	48a 5,430.			
	b Less: allowance for doubtful accounts	48b 2,715.	30,127.	48c 2,715.	
	49 Grants receivable		49		
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b		
	51 a Other notes and loans receivable	51a		51c	
	b Less: allowance for doubtful accounts	51b			
	52 Inventories for sale or use	39,787.	52	41,824.	
	53 Prepaid expenses and deferred charges	28,728.	53	10,355.	
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a		
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b		
55 a Investments - land, buildings, and equipment: basis	55a				
b Less: accumulated depreciation	55b		55c		
56 Investments - other	SEE STATEMENT 5	4,500.	56	4,500.	
57 a Land, buildings, and equipment: basis	57a 2,110,602.				
b Less: accumulated depreciation STMT 6	57b 1,342,522.	1,028,606.	57c	768,080.	
58 Other assets, including program-related investments (describe ► <b>PAYROLL TAX REFUND RECEIVABLE</b> )		7,023.	58	12,660.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		1,313,107.	59	1,541,908.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	174,048.	60	266,313.	
	61 Grants payable		61		
	62 Deferred revenue	2,304.	62	5,370.	
	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 ► <b>SALES TAX PAYABLE</b> )		1,556.	65	1,246.
	66 <b>Total liabilities.</b> Add lines 60 through 65		177,908.	66	272,929.
<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	1,135,199.	72	1,268,979.	
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		1,135,199.	73	1,268,979.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73		1,313,107.	74	1,541,908.

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## Part IV-A

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
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**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions )

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Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A
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 on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
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 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: 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 or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed <u>CA</u>	90b	52
b	Number of employees employed in the pay period that includes March 12, 2007		
91 a	The books are in care of <u>SERENITY MACDONALD</u> Telephone no. <u>323-467-4242</u> Located at <u>6616 SUNSET BLVD., LOS ANGELES, CA</u> ZIP + 4 <u>90028</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States?

91c ☐ Yes ☒ NoIf "Yes," enter the name of the foreign country **N/A**92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐and enter the amount of tax-exempt interest received or accrued during the tax year **92** **N/A****Part VII Analysis of Income-Producing Activities** (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <b>LICENSING FEES</b>					94,840.
b <b>ANNUAL AWARDS DINNER</b>					341,195.
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 cash investments			14	315.	
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 other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					71,492.
103 Other revenue:					
a <b>MISCELLANEOUS</b>			01	13,842.	
b <b>PAYROLL TAX REFUNDS</b>					429.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		14,157.	507,956.
105 Total (add line 104, columns (B), (D), and (E))					522,113.

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	<b>SEE STATEMENT 8</b>

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
NONE	%			
	%			
	%			
	%			

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

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes ☒ No

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



**Part XI Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13) **N/A**

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	<b>X</b>

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	<b>X</b>

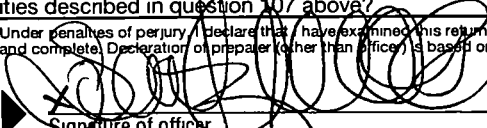
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	<b>X</b>

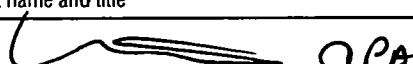
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Please Sign Here**

Signature of officer:  Date: **11/17/08**

Type or print name and title: **Serenity Macelbrald Treasurer**

**Paid Preparer's Use Only**

Preparer's signature:  Date: **11/17/08** Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: **NSBN LLP  
9454 WILSHIRE BLVD., 4TH FLOOR  
BEVERLY HILLS, CA 90212-2907**

Preparer's SSN or PTIN (See Gen. Inst. X): **EIN** **(310) 273-2501**

Form 990 (2007)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

**Supplementary Information-(See separate instructions.)**

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

OMB No 1545-0047

**2007**

Name of the organization

**CITIZENS COMMISSION ON HUMAN RIGHTS**

Employer identification number

**68 0005541**

**Part I**

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

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

**Part II-A**

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

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SAM BRUNELLI 15462 GULF BLVD #508, SAINT PETERSBURG, FL 33708	PUBLIC RELATIONS	137,500.
PAT FREY DBA CREATIVE PRODUCTIONS UNLIMITED 1543 HILL DRIVE, LOS ANGELES, CA 90041	EVENT PRODUCTION	116,136.
Total number of others receiving over \$50,000 for professional services	0	

**Part II-B**

**Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

**Part III** **Statements About Activities** (See page 2 of the instructions.)**Yes** **No**

<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ <u>288,528.</u> \$ <u>238,480.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) <b>VI-A, LINE 38A VI-A, LINE 38B</b> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	<b>1</b>	<b>X</b>	
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
<b>a</b> Sale, exchange, or leasing of property?	<b>2a</b>		<b>X</b>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>		<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>		<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990</b>	<b>2d</b>	<b>X</b>	
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>		<b>X</b>
<b>3 a</b> Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	<b>3a</b>		<b>X</b>
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees?	<b>3b</b>		<b>X</b>
<b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	<b>3c</b>		<b>X</b>
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>3d</b>		<b>X</b>
<b>4 a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	<b>4a</b>		<b>X</b>
<b>b</b> Did the organization make any taxable distributions under section 4966?	<b>4b</b>	<b>N/A</b>	
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>4c</b>	<b>N/A</b>	
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year		<b>N/A</b>	
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		<b>N/A</b>	
<b>f</b> Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			<b>0.</b>
<b>g</b> Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			<b>0.</b>

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** \_\_\_\_\_
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

**Provide the following information about the supported organizations.** (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> <b>▶</b>					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

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

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,960,698.	3,368,508.	2,119,315.	2,286,109.	10,734,630.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	449,399.	458,357.	114,570.	127,551.	1,149,877.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	169.	94.	211.	302.	776.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	4,568.	5,501.	SEE STATEMENT 9 1,469.	21,245.	32,783.
23 Total of lines 15 through 22	3,414,834.	3,832,460.	2,235,565.	2,435,207.	11,918,066.
24 Line 23 minus line 17	2,965,435.	3,374,103.	2,120,995.	2,307,656.	10,768,189.
25 Enter 1% of line 23	34,148.	38,325.	22,356.	24,352.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 215,364.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 831,664.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 10,768,189.
d Add: Amounts from column (e) for lines: 18 776. 19 22 32,783. 26b 831,664.					26d 865,223.
e Public support (line 26c minus line 26d total)					26e 9,902,966.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 91.9650%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A	(2006)	(2005)	(2004)	(2003)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A	(2006)	(2005)	(2004)	(2003)	
c Add: Amounts from column (e) for lines: 15 16 17 20 and line 27b total					27c N/A
d Add: Line 27a total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.	NONE				

**Part V Private School Questionnaire** (See page 9 of the instructions.)

N/A

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

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 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? 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?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? 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	

Schedule A (Form 990 or 990-EZ) 2007

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** ☒ if the organization belongs to an affiliated group. Check **b** ☒ if you checked "a" and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	76,149.	57,981.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	212,379.	180,499.
38	Total lobbying expenditures (add lines 36 and 37)	288,528.	238,480.
39	Other exempt purpose expenditures	5,008,183.	4,099,693.
40	Total exempt purpose expenditures (add lines 38 and 39)	5,296,711.	4,338,173.
41	Lobbying nontaxable amount. Enter the amount from the following table - <div style="display: flex; justify-content: space-between;"> <div> <p><b>If the amount on line 40 is -</b></p> <p>Not over \$500,000</p> <p>Over \$500,000 but not over \$1,000,000</p> <p>Over \$1,000,000 but not over \$1,500,000</p> <p>Over \$1,500,000 but not over \$17,000,000</p> <p>Over \$17,000,000</p> </div> <div> <p><b>The lobbying nontaxable amount is -</b></p> <p>20% of the amount on line 40</p> <p>\$100,000 plus 15% of the excess over \$500,000</p> <p>\$175,000 plus 10% of the excess over \$1,000,000</p> <p>\$225,000 plus 5% of the excess over \$1,500,000</p> <p>\$1,000,000</p> </div> </div>	414,836.	366,909.
42	Grassroots nontaxable amount (enter 25% of line 41)	103,709.	91,727.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	0.	0.
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	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 on page 13 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount	414,836.	352,803.	334,169.	297,100.	1,398,908.
46 Lobbying ceiling amount (150% of line 45(e))					2,098,362.
47 Total lobbying expenditures	288,528.	246,178.	205,790.	135,241.	875,737.
48 Grassroots nontaxable amount	103,709.	88,201.	83,542.	74,275.	349,727.
49 Grassroots ceiling amount (150% of line 48(e))					524,591.
50 Grassroots lobbying expenditures	76,149.	55,735.	41,055.	30,251.	203,190.

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

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

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:

- 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.)

Yes	No	Amount
		0.

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





2007 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE & FIXTURES														
8	FURNITURE & EQUIPMENT	12/31/93	SL	5.00		HY16	1,009.				1,009.	1,009.		0.	1,009.
12	FURNITURE & EQUIPMENT	12/31/95	SL	7.00		HY16	637.				637.	637.		0.	637.
14	FURNITURE & EQUIPMENT	04/01/97	SL	5.00		HY16	14,997.				14,997.	14,997.		0.	14,997.
15	FURNITURE & EQUIPMENT	07/01/98	SL	5.00		HY16	655.				655.	655.		0.	655.
16	FURNITURE & EQUIPMENT	07/01/99	SL	5.00		HY16	22,962.				22,962.	22,962.		0.	22,962.
27	FURNITURE & EQUIPMENT	07/01/00	SL	5.00		HY16	30,682.				30,682.	30,682.		0.	30,682.
38	FURNITURE & EQUIPMENT	07/01/01	SL	5.00		HY16	434,070.				434,070.	434,070.		0.	434,070.
48	FURNITURE & EQUIPMENT	07/01/02	SL	5.00		HY16	111,258.				111,258.	100,133.		11,125.	111,258.
51	FURNITURE & EQUIPMENT	07/01/03	SL	5.00		HY16	211,711.				211,711.	148,197.		42,342.	190,539.
62	FURNITURE & EQUIPMENT	07/01/04	SL	5.00		HY16	54,375.				54,375.	27,188.		10,875.	38,063.
63	FURNITURE & EQUIPMENT	07/01/05	SL	5.00		HY16	354,250.				354,250.	106,275.		70,850.	177,125.
66	FURNITURE & EQUIPMENT	07/01/06	SL	5.00		HY16	120,897.				120,897.	12,090.		24,179.	36,269.
69	FURNITURE & EQUIPMENT	11/01/07	SL	5.00		HY16	2,215.				2,215.			222.	222.
	* 990 PAGE 2 TOTAL FURNITURE & FIXTURES						1,359,718.					898,895.		159,593.	1,058,488.
	OTHER														
18	COMPUTER SOFTWARE	07/01/96	SL	3.00		HY16	64.				64.	64.		0.	64.
20	COMPUTER SOFTWARE	07/01/98	SL	3.00		HY16	490.				490.	490.		0.	490.

728111  
08-23-07

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2007 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
21	COMPUTER SOFTWARE	07/01/99	SL	3.00		HY16	650.				650.	650.		0.	650.
26	SOFTWARE	05/01/00	SL	3.00		HY16	1,735.				1,735.	1,735.		0.	1,735.
39	COMPUTER SOFTWARE	07/01/01	SL	3.00		HY16	16,062.				16,062.	16,062.		0.	16,062.
49	COMPUTER SOFTWARE	07/01/02	SL	3.00		HY16	1,191.				1,191.	1,191.		0.	1,191.
64	COMPUTER SOFTWARE	07/01/05	SL	3.00		HY16	4,771.				4,771.	2,385.		1,590.	3,975.
67	COMPUTER SOFTWARE	07/01/06	SL	3.00		HY16	5,184.				5,184.	864.		1,728.	2,592.
70	SOFTWARE	10/01/07	SL	3.00		HY16	687.				687.			116.	116.
	* 990 PAGE 2 TOTAL OTHER						30,834.				30,834.	23,438.		3,434.	26,872.
	* 990 PAGE 2 TOTAL -						1,390,552.				1,390,552.	922,333.		163,027.	1,085,360.
	OTHER														
65	DISPLAY FIXTURES	07/01/05	SL	7.00		HY16	652,542.				652,542.	139,830.		93,220.	233,050.
68	DISPLAY FIXTURES	07/01/05	SL	7.00		HY16	64,373.				64,373.	13,794.		9,196.	22,990.
71	DISPLAY FIXTURES	09/15/06	SL	7.00		HY16	3,135.				3,135.			1,122.	1,122.
	* 990 PAGE 2 TOTAL OTHER						720,050.				720,050.	153,624.		103,538.	257,162.
	* 990 PAGE 2 TOTAL -						720,050.				720,050.	153,624.		103,538.	257,162.
	* GRAND TOTAL 990 PAGE 2 DEPR						2,110,602.				2,110,602.	1,075,957.		266,565.	1,342,522.

728111  
08-23-07

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## FOOTNOTES

STATEMENT 1

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

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

FORM 990

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

STATEMENT 2

## INCOME

1. GROSS RECEIPTS . . . . .	85,606	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		85,606
4. COST OF GOODS SOLD (LINE 13) . . . . .	14,114	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		71,492

## COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	39,787	
7. MERCHANDISE PURCHASED . . . . .	15,611	
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .		
11. ADD LINES 6 THROUGH 10 . . . . .		55,398
12. INVENTORY AT END OF YEAR . . . . .	41,284	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). .		14,114

FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT	3
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CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	AMOUNT
EDUCATIONAL CHURCH OF SCIENTOLOGY - SOUTH AFRICA	39,302.
EDUCATIONAL CHURCH OF SCIENTOLOGY - EU	78,252.
EDUCATIONAL CHURCH OF SCIENTOLOGY - EAST US	51,529.
EDUCATIONAL CHURCH OF SCIENTOLOGY - WUS	35,017.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22B	204,100.

FORM 990	OTHER PROGRAM SERVICES	STATEMENT	4
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DESCRIPTION OF OTHER PROGRAM SERVICES	GRANTS AND ALLOCATIONS	EXPENSES
PUBLICATIONS: SEE STATEMENT 14.	371.	311,832.
TOTAL TO FORM 990, PART III, LINE E	371.	311,832.

FORM 990	OTHER INVESTMENTS	STATEMENT	5
DESCRIPTION	VALUATION METHOD	AMOUNT	
ARTWORK	COST	4,500.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		4,500.	

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE & EQUIPMENT	1,009.	1,009.	0.
FURNITURE & EQUIPMENT	637.	637.	0.
FURNITURE & EQUIPMENT	14,997.	14,997.	0.
FURNITURE & EQUIPMENT	655.	655.	0.
FURNITURE & EQUIPMENT	22,962.	22,962.	0.
COMPUTER SOFTWARE	64.	64.	0.
COMPUTER SOFTWARE	490.	490.	0.
COMPUTER SOFTWARE	650.	650.	0.
SOFTWARE	1,735.	1,735.	0.
FURNITURE & EQUIPMENT	30,682.	30,682.	0.
FURNITURE & EQUIPMENT	434,070.	434,070.	0.
COMPUTER SOFTWARE	16,062.	16,062.	0.
FURNITURE & EQUIPMENT	111,258.	111,258.	0.
COMPUTER SOFTWARE	1,191.	1,191.	0.
FURNITURE & EQUIPMENT	211,711.	190,539.	21,172.
FURNITURE & EQUIPMENT	54,375.	38,063.	16,312.
FURNITURE & EQUIPMENT	354,250.	177,125.	177,125.
COMPUTER SOFTWARE	4,771.	3,975.	796.
DISPLAY FIXTURES	652,542.	233,050.	419,492.
FURNITURE & EQUIPMENT	120,897.	36,269.	84,628.
COMPUTER SOFTWARE	5,184.	2,592.	2,592.
DISPLAY FIXTURES	64,373.	22,990.	41,383.
FURNITURE & EQUIPMENT	2,215.	222.	1,993.
SOFTWARE	687.	116.	571.
DISPLAY FIXTURES	3,135.	1,122.	2,013.
FURNITURE & EQUIPMENT ADJ	0.	<3.>	3.
TOTAL TO FORM 990, PART IV, LN 57	2,110,602.	1,342,522.	768,080.

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FORM 990      PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS,      STATEMENT      7  
TRUSTEES AND KEY EMPLOYEES

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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MICK MCFARLAND 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	TRUSTEE 0.25	0.	0.	0.
MEGAN SHIELDS 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	TRUSTEE 0.25	0.	0.	0.
ISADORE CHAIT 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	DIRECTOR 0.25	0.	0.	0.
BRUCE WISEMAN (SEE STMT 1) 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	PRESIDENT 2.10	828.	0.	0.
FRAN ANDREWS (SEE STMT 1) 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	VICE PRESIDENT 40.00	32,950.	0.	0.
MARLA FILIDEI (SEE STMT 1) 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	VICE PRESIDENT 40.00	32,950.	0.	0.
SERENITY MACDONALD (SEE STMT 1) 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	TREASURER 40.00	32,750.	0.	0.
CARLA MOXON (SEE STMT 1) 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	SECRETARY 40.00	31,800.	0.	0.
JAN EASTGATE MEYER 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	TRUSTEE 40.00	31,750.	0.	0.
SHAUN ALLEN 6616 SUNSET BOULEVARD LOS ANGELES, CA 90028	DIRECTOR 0.25	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		163,028.	0.	0.

FORM 990      PART VIII - RELATIONSHIP OF ACTIVITIES TO      STATEMENT      8  
 ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	LICENSING FEES FROM CCHR CHAPTERS AROUND THE UNITED STATES OF AMERICA.
93B	ANNUAL AWARDS DINNER ACKNOWLEDGING OUTSTANDING ACCOMPLISHMENTS IN THE FIELD OF HUMAN RIGHTS.
102	EDUCATIONAL AND PROMOTIONAL MATERIALS SOLD TO PROMOTE EXEMPT PURPOSES.
103B	REFUND OF EXCESS EVENT EXPENSE.

SCHEDULE A      OTHER INCOME      STATEMENT      9

DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
COMMISSIONS	0.	0.	264.	350.
PROPERTY TAX REFUND	0.	0.	1,205.	20,895.
MISCELLANEOUS	4,568.	5,501.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	4,568.	5,501.	1,469.	21,245.



**2007 FORM 990, PART III  
FEDERAL ID #68-0005541  
CITIZENS COMMISSION ON HUMAN RIGHTS  
STATEMENT 10**

**DESCRIPTION OF PROGRAM SERVICE ONE FOR 2007  
RESEARCH & INVESTIGATIONS:**

WITH 100 MILLION PEOPLE WORLDWIDE TAKING PRESCRIBED PSYCHOTROPIC (MIND-ALTERING) DRUGS, CCHR TOOK ON INVESTIGATING THE DANGERS OF THESE DRUGS TO INFORM OTHERS OF THEIR ADVERSE EFFECTS. THIS ACTIVITY ASSISTED IN ENCOURAGING THE FDA TO REQUIRE MANUFACTURERS OF STIMULANTS PRESCRIBED FOR SO-CALLED "ATTENTION DEFICIT HYPERACTIVITY DISORDER" (ADHD) TO WARN USERS OF RESULTING SERIOUS PSYCHIATRIC AND CARDIOVASCULAR PROBLEMS. THE FDA ALSO EXTENDED THE AGE GROUP FROM 18 TO 24 FOR WHICH THE "BLACK BOX" SUICIDE WARNING ON SELECTIVE SEROTONIN REUPTAKE INHIBITOR (SSRI) ANTIDEPRESSANTS APPLIED.

CCHR INVESTIGATES CASES OF CHILDREN AND CONSUMERS EXPERIENCING DELETERIOUS EFFECTS AND RELEASES FINDINGS IN OFFICIAL "WHITE PAPERS," REPORTS AND IN NOTIFICATIONS TO THE APPROPRIATE DRUG REGULATORY AGENCIES. IT ALSO FILES FREEDOM OF INFORMATION ACT REQUESTS TO OBTAIN STATISTICS AND FACTS ABOUT ADVERSE PSYCHIATRIC DRUG REACTIONS (ADRS) AND RECOMMENDS THAT CONSUMERS AND PHYSICIANS REPORT ALL ADRS TO THE FDA.

CCHR CONTINUED ITS INVESTIGATIONS INTO THE DANGERS OF ANTIPSYCHOTIC DRUGS, FREQUENTLY PRESCRIBED TO CHILDREN AND THE ELDERLY, TO THEIR GREAT RISK. CCHR ALSO INVESTIGATED HOW MEDICAID AND MEDICARE FUNDS ARE BEING MISUSED TO DRUG MILLIONS OF ELDERLY AND CHILDREN, ESPECIALLY THOSE CHILDREN IN FOSTER CARE.

CCHR INVESTIGATED AND ALERTED NUMEROUS STATE LICENSING BOARDS AND FEDERAL HEALTHCARE FRAUD INVESTIGATING AGENCIES OF CONVICTIONS OR LICENSE REVOCATIONS OF PSYCHIATRISTS AND PSYCHOLOGISTS. IN 2007 CCHR RECORDED AND MADE PUBLIC MORE THAN 387 LICENSE REVOCATIONS OR SUSPENSIONS AND 71 CRIMINAL CONVICTIONS OF PSYCHIATRISTS, PSYCHOLOGISTS AND OTHER MENTAL HEALTH WORKERS.

**2007 FORM 990, PART III**  
**FEDERAL ID #68-0005541**  
**CITIZENS COMMISSION ON HUMAN RIGHTS**  
**STATEMENT 11**

**DESCRIPTION OF PROGRAM SERVICE TWO**  
**HOTLINE AND INFORMATION REQUESTS:**

CCHR'S HUMANITARIAN EFFORTS INCLUDED PROVIDING A TOLL-FREE HOTLINE FOR PEOPLE TO EASILY REPORT INCIDENTS OF PSYCHIATRIC ABUSE AND FRAUD. THROUGH THIS, CCHR NOT ONLY ASSISTS THOSE WHO WISH TO REPORT THE ABUSE AND FILE DISCIPLINARY OR CRIMINAL COMPLAINTS TO THE APPROPRIATE AUTHORITIES, BUT ALSO PROVIDES CALLERS WITH ANY INFORMATION THEY MAY NEED TO BECOME BETTER INFORMED ABOUT PSYCHIATRY. CCHR PROMOTES THE HOTLINE THROUGH PUBLICATIONS, FLYERS, PAMPHLETS, MEDIA ARTICLES, PUBLIC SERVICE ANNOUNCEMENTS ON THE RADIO, CCHR'S WEBSITE, THE INTERNET, NEWSPAPER ADS, OR ON RADIO AND TV SHOWS.

DURING 2007 THOUSANDS OF INDIVIDUALS AND GROUPS WERE PROVIDED INFORMATION AND ASSISTANCE, WHILE THOUSANDS MORE RECEIVED INFORMATION THROUGH CCHR'S WEBSITE, [WWW.CCHR.ORG](http://WWW.CCHR.ORG).

HOTLINE CALLERS WERE ALSO REFERRED TO OTHER WEBSITES OF INTEREST, ALTERNATIVE HELP SITES AND TO BOOKS OR WHITE PAPERS THAT COULD FURTHER ASSIST THEM. CCHR HAS A WIDE RANGE OF BOOKLETS AND REPORTS THAT WERE SENT OUT TO CALLERS. IT ALSO PRODUCED A REPORT ON THE SIDE EFFECTS OF COMMON PSYCHIATRIC DRUGS THAT ENABLES CONSUMERS TO EASILY ACCESS INFORMATION ABOUT PSYCHOTROPIC DRUG EFFECTS, WITH DEFINITIONS FOR OFTEN COMPLEX MEDICAL TERMS FOUND IN DRUG INFORMATION PACKAGING. ANOTHER REPORT WAS PRODUCED

ABOUT THE POTENTIAL ALTERNATIVES AND SOLUTIONS TO HELPING THOSE  
WITH MENTAL HEALTH PROBLEMS, WITHOUT RESORTING TO DANGEROUS —  
OFTEN LIFE-THREATENING — PSYCHIATRIC "TREATMENTS."

**2007 FORM 990, PART III  
FEDERAL ID #68-0005541  
CITIZENS COMMISSION ON HUMAN RIGHTS  
STATEMENT 12**

**DESCRIPTION OF PROGRAM SERVICE THREE  
LEGISLATION:**

THE FDA'S FAILURE TO POLICE ADVERSE DRUG REACTIONS (ADRS) ONCE THE DRUGS ARE APPROVED IS LEGENDARY, BUT BECAME AN EVEN GREATER ISSUE IN 2007, WHEN THE FEDERAL LAW REGULATING THE FDA, THE PRESCRIPTION DRUG USER FEE ACT (PDUFA), CAME UP FOR RENEWAL. THE FDA ADMITS THAT ONLY ONE TO TEN PERCENT OF CONSUMERS AND PHYSICIANS REPORT ADRS TO IT, MEANING THE DEATHS FROM PSYCHOTROPIC AND OTHER DRUGS COULD BE 10 TIMES GREATER THAN IS BEING REPORTED.

CCHR WAS AMONG THE MANY WHO WANTED TO SEE MAJOR FDA REFORMS, INCLUDING MEDICAL DOCTORS, CONSUMER GROUPS, PARENTS AND WHISTLEBLOWERS. CCHR MADE NUMEROUS PRESENTATIONS ON FDA REFORM, INCLUDING AN INITIATIVE TO INCREASE CONSUMER PROTECTIONS BY MAKING IT EASIER TO REPORT ADRS TO THE FDA.

CCHR CONTINUED TO EDUCATE AND WARN LEGISLATORS, POLICY MAKERS AND EDUCATORS ABOUT THE INHERENT DANGERS OF MENTAL HEALTH SCREENING THAT SO OFTEN LEADS TO CHILDREN BEING PLACED ON PSYCHOTROPIC DRUGS DOCUMENTED TO CAUSE SUICIDAL AND HOMICIDAL IDEATION (THOUGHTS), PSYCHOSIS, MANIA, AGGRESSION, HALLUCINATIONS, SEVERE LIVER DAMAGE, BIRTH DEFECTS, DIABETES, HEART ATTACK, STROKE AND SUDDEN DEATH.

**2007 FORM 990, PART III  
FEDERAL ID #68-0005541  
CITIZENS COMMISSION ON HUMAN RIGHTS  
STATEMENT 13**

**DISCRIPTION OF PROGRAM SERVICE FOUR  
PUBLIC AWARENESS:**

DURING THE YEAR, MANY THOUSANDS OF INDIVIDUALS, INCLUDING HUMAN RIGHTS ACTIVISTS, RELIGIOUS LEADERS, LEGISLATORS, DOCTORS, MEDIA, PARENTS, ARTISTS AND OTHERS, TOURED THE "PSYCHIATRY: AN INDUSTRY OF DEATH" MUSEUM AT CCHR HEADQUARTERS IN LOS ANGELES.

THIS MUSEUM IS A GRAPHIC DOCUMENTARY-STYLE EXPOSÉ THAT PROVIDES VIEWERS WITH AN IN-DEPTH 300-YEAR HISTORY OF PSYCHIATRY. IT INCLUDES 14 STATE-OF-THE-ART DOCUMENTARIES ADDRESSING SUBJECTS RANGING FROM THE ORIGINS OF PSYCHIATRY, ITS FAILURES AND DESTRUCTIVE INVENTIONS TO THE PRESENT-DAY HARM BEING INFLICTED UPON SOCIETY THROUGH ITS BRUTAL TREATMENTS, INCLUDING ELECTROSHOCK "TREATMENT," RESTRAINTS AND DRUGS.

CCHR'S 11 TRAVELING EXHIBITS, MODELED AFTER THE PERMANENT MUSEUM, TOURED 44 CITIES IN 18 COUNTRIES ON 5 CONTINENTS THROUGHOUT 2007. MORE THAN 40,000 INDIVIDUALS TOURED AND THE RESPONSE WAS OVERWHELMINGLY IN SUPPORT OF CCHR'S CAMPAIGNS AND ACTIONS. PEOPLE ENLIGHTED WITH THE INFORMATION FROM THE TRAVELING EXHIBIT WANTED TO SUPPORT CCHR, ITS MISSION AND ACTIVITIES, TO REPORT ABUSES THEY WERE AWARE OF AND TO TAKE NEEDED ACTION TO EFFECT CHANGE.

CCHR ALSO UPGRADED ITS WEBSITES, [WWW.CCHR.ORG](http://WWW.CCHR.ORG), [WWW.FIGHTFORKIDS.ORG](http://WWW.FIGHTFORKIDS.ORG) AND [WWW.PSYCHCRIME.ORG](http://WWW.PSYCHCRIME.ORG) ADDING HUNDREDS OF PAGES, BREAKING NEWS ARTICLES AND VIDEOS AND PSAS. THE SITES

PROVIDE FACTS AND STATISTICS ABOUT THE PSYCHIATRIC-PHARMACEUTICAL INDUSTRY AND PROVIDE DOWNLOADABLE REPORTS, INCLUDING STUDIES AND WARNINGS ON PSYCHOTROPIC DRUGS.

CCHR ALSO ENSURED THAT ITS ADVISORY BOARD OF "COMMISSIONERS," THE CCHR CHAPTERS AROUND THE WORLD AND ITS MANY VOLUNTEERS AND SUPPORTERS WERE FURNISHED WITH UP-TO-DATE INFORMATION ABOUT ITS ACTIVITIES AND MENTAL HEALTH REFORMS.

CCHR CONTINUED ITS PUBLIC AWARENESS EVENTS HELD IN CITIES ACROSS THE U.S. DURING WHICH PARENTS GAVE TESTIMONIALS ABOUT HOW PSYCHIATRIC LABELING AND DRUGS HAD HARMED THEIR CHILDREN—TRAGICALLY, IN SOME CASES, FATALLY. DOCTORS ADDRESSED THOSE ATTENDING ON THE REAL CAUSES OF CHILDHOOD BEHAVIORAL AND LEARNING PROBLEMS AND HOW THERE ARE NON-DAMAGING SOLUTIONS FOR THESE PROBLEMS.

CCHR ALSO HELPED RAISE CONSIDERABLE PUBLIC AWARENESS THROUGH THE MEDIA. DURING 2007, MORE THAN 35,000 ARTICLES AND ELECTRONIC MEDIA RAN COVERING MANY ISSUES RELATING TO MENTAL HEALTH TREATMENTS, INCLUDING THE DANGEROUS EFFECTS OF PSYCHIATRIC DRUGS, DRUG REGULATORY AGENCY WARNINGS AND STUDIES ABOUT ADVERSE DRUG REACTIONS, AND THE INCREASING NUMBER OF CHILDREN BEING FALSELY LABELED "MENTALLY ILL" AND DRUGGED.

**2007 FORM 990, PART III  
FEDERAL ID #68-0005541  
CITIZENS COMMISSION ON HUMAN RIGHTS  
STATEMENT 14**

**DESCRIPTION OF PROGRAM SERVICE FIVE  
PUBLICATIONS:**

CCHR WIDELY DISTRIBUTES FREE PUBLICATIONS, CDS, AND DVDS AND TO RAISE AWARENESS ABOUT PSYCHIATRY'S HARMFUL IMPACT ON MANY AREAS OF SOCIETY.

CCHR CONTINUED TO PRINT AND DISTRIBUTE THE "REPORT AND RECOMMENDATION" SERIES OF 20 BOOKLETS AND 20 PAMPHLETS IN 15 LANGUAGES, COVERING A WIDE RANGE OF PSYCHIATRIC ISSUES.

THIS YEAR CCHR PRODUCED MORE THAN 50 DIFFERENT PROPERTIES WITH OVER A MILLION COPIES DISTRIBUTED, INCLUDING A SERIES OF PUBLIC SERVICE ANNOUNCEMENTS WARNING OF THE VIOLENT AND SUICIDAL SIDE EFFECTS OF PSYCHIATRIC DRUGS; AND A WHITE PAPER ENTITLED "MENTAL HEALTH PARITY—MANDATING COVERAGE OF THE DSM-IV" THAT EXPOSED HOW MANDATING INSURANCE COVERAGE FOR TREATMENT OF "MENTAL DISORDERS" LINES THE POCKETS OF PSYCHIATRISTS AND THE DRUG INDUSTRY.

NEW DVD/CD MANUFACTURING EQUIPMENT WAS ALSO ESTABLISHED AT CCHR'S HEADQUARTERS, THAT WAS USED TO PRODUCE AND DISTRIBUTE DVDS AND CDS ON THE ISSUES IDENTIFIED ABOVE.



Form **4562**Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return**Depreciation and Amortization** 990  
(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

OMB No 1545-0172

**2007**Attachment  
Sequence No **67****CITIZENS COMMISSION ON HUMAN RIGHTS****FORM 990 PAGE 2****68-0005541****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount. See the instructions for a higher limit for certain businesses	125,000.
2	Total cost of section 179 property placed in service (see instructions)	
3	Threshold cost of section 179 property before reduction in limitation	500,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	
6	(a) Description of property	(b) Cost (business use only)
		(c) Elected cost
7	Listed property. Enter the amount from line 29	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 line 13 of your 2006 Form 4562	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 2008. Add lines 9 and 10, less line 12	13

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year	14
15	Property subject to section 168(f)(1) election	15
16	Other depreciation (including ACRS)	266,565.

**Part III MACRS Depreciation (Do not include listed property.) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>	

**Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System**

(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
19a 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	
	/		27.5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year	/		40 yrs	MM	S/L	

**Part IV Summary (see instructions)**

21	Listed property. Enter amount from line 28	21
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23

**Part V Listed Property** (Include 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 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use							25	

**26** Property used more than 50% in a qualified business use.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%						
		%						
		%						

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%				S/L -		
		%				S/L -		
		%				S/L -		

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

28

**29** Add amounts in column (i), line 26. Enter here and on line 7, page 1

29

**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) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year. Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</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>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</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>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2007 tax year:					
<b>43</b> Amortization of costs that began before your 2007 tax year					43
<b>44</b> Total. Add amounts in column (f). See the instructions for where to report					44