

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

1999

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

Department of the Treasury  
Internal Revenue Service

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

This Form Is  
Open to Public  
Inspection

A For the 1999 calendar year, OR tax year period beginning 1999, and ending

B Check if:

- ☐ Change of address  
☐ Initial return  
☐ Final return  
☐ Amended return (required also for state reporting)

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

C Name of organization

Citizens commission on human rights of Clearwater

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

305 N. Fort Harrison Ave

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

Clearwater, FL 33755-3923

D Employer identification number

5912973520

E Telephone number

(727) 442-8820

F Check ☐ If exemption application is pendingG Type of organization—☒ Exempt under section 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).

H(a) Is this a group return filed for affiliates? ☐ Yes ☒ No(b) If "Yes," enter the number of affiliates for which this return is filed: ☐(c) Is this a separate return filed by an organization covered by a group ruling? ☒ Yes ☐ No

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) 4169

J Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify)K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

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 (See Specific Instructions on page 15.)

1 Contributions, gifts, grants, and similar amounts received:

a Direct public support Stmt 1

1a 455 026

b Indirect public support

1b

c Government contributions (grants)

1c

d Total (add lines 1a through 1c) (attach schedule of contributors)

(cash \$ 440 311 noncash \$ 147 15)

1d 455 026

2 Program service revenue including government fees and contracts (from Part VII, line 93)

2 0

3 Membership dues and assessments

3 0

4 Interest on savings and temporary cash investments

4 0

5 Dividends and interest from securities

5 0

6a Gross rents

6a

b Less: rental expenses

6b

c Net rental income or (loss) (subtract line 6b from line 6a)

6c 0

7 Other investment income (describe)

7 0

8a Gross amount from sales of assets other than inventory

(A) Securities

(B) Other

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 0

9 Special events and activities (attach schedule)

a Gross revenue (not including \$ of contributions reported on line 1a)

9a

32 115

b Less: direct expenses other than fundraising expenses

9b

30 667

c Net income or (loss) from special events (subtract line 9b from line 9a) Stmt 2

9c 1 448

10a Gross sales of inventory, less returns and allowances

10a

b Less: cost of goods sold

10b

c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)

10c

11 Other revenue (from Part VII, line 103)

11

12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)

12 456 474

13 Program services (from line 44, column (B))

13

14 Management and general (from line 44, column (C))

14

15 Fundraising (from line 44, column (D))

15

16 Payments to affiliates (attach schedule)

16

17 Total expenses (add lines 16 and 44, column (A))

17 455 733

18 Excess or (deficit) for the year (subtract line 17 from line 12)

18 741

19 Net assets or fund balances at beginning of year (from line 73, column (A))

19 114 330

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)

21 115 071

**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. (See Specific Instructions on page 19.)

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	34,246	20,370	7,086
26	Other salaries and wages	26	63,752	44,424	14,384
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29	6,884	5,062	1,484
30	Professional fundraising fees	30			
31	Accounting fees	31	88		88
32	Legal fees	32			
33	Supplies	33	7,226	5,418	1,808
34	Telephone	34	14,543	10,180	727
35	Postage and shipping	35	9,562	5,737	1,435
36	Occupancy	36			
37	Equipment rental and maintenance	37	9,910	5,940	2,979
38	Printing and publications	38	14,627	12,080	279
39	Travel	39	14,073	14,073	
40	Conferences, conventions, and meetings	40			
41	Interest	41	4,876		4,876
42	Depreciation, depletion, etc. (attach schedule)	42	19,266		19,266
43	Other expenses (itemize): a <i>stmt 4</i>	43a	256,680	218,441	18,239
b		43b			
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	455,733	341,725	72,651

**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** (See Specific Instructions on page 22.)

What is the organization's primary exempt purpose? <i>See stmt 5</i>		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a	<i>Public Information - see stmt 6</i> (Grants and allocations \$ _____)	228,572
b	<i>Investigations - see stmt 6</i> (Grants and allocations \$ _____)	63,517
c	<i>Psychiatric Reform - see stmt 6</i> (Grants and allocations \$ _____)	49,636
d	 (Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	341,725

**Part IV Balance Sheets** (See Specific Instructions on page 22.)

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
45	Cash—non-interest-bearing	10 732	45	9 557
46	Savings and temporary cash investments		46	
47a	Accounts receivable		47a	
b	Less: allowance for doubtful accounts		47b	
48a	Pledges receivable		48a	
b	Less: allowance for doubtful accounts		48b	
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)		51a	
b	Less: allowance for doubtful accounts		51b	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges		53	
54	Investments—securities (attach schedule)		54	
55a	Investments—land, buildings, and equipment: basis		55a	
b	Less: accumulated depreciation (attach schedule)		55b	
56	Investments—other (attach schedule)		56	
57a	Land, buildings, and equipment: basis	203 201	57a	
b	Less: accumulated depreciation (attach schedule)	52 359	57b	
58	Other assets (describe ▶)	149 832	58	150 842
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	161 012	59	160 847
60	Accounts payable and accrued expenses <i>payroll taxes</i>	0	60	1 175
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)	46 682	64b	44 601
65	Other liabilities (describe ▶)		65	
66	<b>Total liabilities</b> (add lines 60 through 65)	46 682	66	45 776
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 type="checkbox"/> and complete lines 70 through 74.				
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds	114 330	72	115 071
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)	114 330	73	115 071
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	161 012	74	160 847

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 (See Specific Instructions, page 24.)

a Total revenue, gains, and other support per audited financial statements. ▶

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): *N/A* \$

Add amounts on lines (1) through (4) ▶

c Line a minus line b. ▶

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) ▶

e Total revenue per line 12, Form 990 (line c plus line d) ▶

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

a Total expenses and losses per audited financial statements. ▶

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): *N/A* \$

Add amounts on lines (1) through (4) ▶

c Line a minus line b. ▶

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) ▶

e Total expenses per line 17, Form 990 (line c plus line d) ▶

**Part V** List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 24.)

(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
<i>David Figueroa</i>	<i>President</i>	<i>6790</i>	<i>0</i>	<i>0</i>
<i>3013 Regal Oaks</i>	<i>1-5 Hrs.</i>			
<i>Palm Harbor FL 34684</i>				
<i>Rosa Sollecito</i>	<i>Executive Director</i>	<i>18692</i>	<i>0</i>	<i>0</i>
<i>P.O. Box 7388</i>	<i>40 Hrs.</i>			
<i>Clearwater FL</i>				
<i>Patricia Wilkins</i>	<i>Treasurer</i>	<i>8764</i>	<i>0</i>	<i>0</i>
<i>1571 Elmwood street</i>	<i>40 Hrs.</i>			
<i>Clearwater FL 33755</i>				

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? ▶ ☐ Yes ☒ No

If "Yes," attach schedule—see Specific Instructions on page 25.

**Part VI Other Information** (See Specific Instructions on page 25.)

	Yes	No
<b>76</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . .	76	X
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . If "Yes," attach a conformed copy of the changes.	77	X
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . .	78b	N/A
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . .	79	X
<b>80a</b> 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>b</b> If "Yes," enter the name of the organization ▶ . . . and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
<b>81a</b> Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81. . . . . <b>81a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	81b	X
<b>82a</b> 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>b</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.) . . . . . <b>82b</b>		
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . .	83b	X
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	84a	X
<b>b</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
<b>85 501(c)(4), (5), or (6) organizations.</b> <b>a</b> Were substantially all dues nondeductible by members? . . . . .	85a	N/A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	85b	N/A
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.		
<b>c</b> Dues, assessments, and similar amounts from members . . . . . <b>85c</b>		
<b>d</b> Section 162(e) lobbying and political expenditures . . . . . <b>85d</b>		
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . <b>85e</b>		
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . <b>85f</b>		
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount in 85f? . . . . .	85g	N/A
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . .	85h	N/A
<b>86 501(c)(7) orgs.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12 . . . . . <b>86a</b>		
<b>b</b> Gross receipts, included on line 12, for public use of club facilities. . . . . <b>86b</b>		
<b>87 501(c)(12) orgs.</b> Enter: <b>a</b> Gross income from members or shareholders. . . . . <b>87a</b>		
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . <b>87b</b>		
<b>88</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . . . .	88	X
<b>89a 501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
<b>b 501(c)(3) and 501(c)(4) orgs.</b> 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
<b>c</b> Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. . . . . ▶ 0		
<b>d</b> Enter: Amount of tax on line 89c, above, reimbursed by the organization. . . . . ▶ 0		
<b>90a</b> List the states with which a copy of this return is filed ▶ N/A		
<b>b</b> Number of employees employed in the pay period that includes March 12, 1999 (See inst.) . . . <b>90b</b>		9
<b>91</b> The books are in care of ▶ Rosa Sollecito Telephone no. ▶ (727) 442-8820 Located at ▶ 305 N. Fort Harrison Ave., Clearwater, FL ZIP + 4 ▶ 33755-3923		
<b>92</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . ▶ 92		N/A

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 29.)

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) Exclusion code	(D) 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 cash investments					
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 . . . . .			01	1448	
102 Gross profit or (loss) from sales of inventory . . . . .					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E)) . . . . .				1448	
105 Total (add line 104, columns (B), (D), and (E)) . . . . .					1448

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 30.)

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).
	N/A

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 30.)

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

return, including accompanying schedules and statements, and to the best of my knowledge preparer (other than officer) is based on all information of which preparer has any knowledge.

**SCHEDULE A**  
**(Form 990)**

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

OMB No. 1545-0047

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

Supplementary Information—(See separate instructions.)

**1999**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

*Citizens Commission on Human Rights of Clearwater, Inc*

Employer identification number

*5912973520*

**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
<i>None</i>				
Total number of other employees paid over \$50,000 . . . . . ▶				

**Part II**

**Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 1 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
<i>Jennis Clarke</i> <i>10461 Milwood Ave., Chatsworth, CA 91311</i>	<i>Media Consulting</i>	<i>78,690</i>
Total number of others receiving over \$50,000 for professional services . . . . . ▶	<i>0</i>	

**Part III** Statements 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? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>4215</u> 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.	<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>
b Lending of money or other extension of credit?		<input checked="" type="checkbox"/>
c Furnishing of goods, services, or facilities?		<input checked="" type="checkbox"/>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <i>see Form 990, Part V</i>	<input checked="" type="checkbox"/>	
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		<input checked="" type="checkbox"/>
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?		<input checked="" type="checkbox"/>
4a Do you have a section 403(b) annuity plan for your employees?		<input checked="" type="checkbox"/>
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 page 2 of the instructions.)		

**Part IV** Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions.)The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, 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 page 4 of the instructions.)

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

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 4 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) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) . . . . .	278 227	162 045	92 223	125 371	657,866
16 Membership fees received . . . . .					
17 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 . . . . .					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . . . . .					
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 . . . . .					
23 Total of lines 15 through 22. . . . .	278 227	162 045	92 223	125 371	657,866
24 Line 23 minus line 17. . . . .	278 227	162 045	92 223	125 371	657,866
25 Enter 1% of line 23. . . . .	2 782	1 620	922	1 254	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. . . . ▶					26a 13,157
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 1995 through 1998 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts. <i>Sum: 7.</i> ▶					26b 42,726
c Total support for section 509(a)(1) test: Enter line 24, column (e) . . . . . ▶					26c 657,866
d Add: Amounts from column (e) for lines: 18 <u>0</u> 19 <u>0</u> 22 <u>0</u> 26b <u>42,726</u> . . . . . ▶					26d 42,726
e Public support (line 26c minus line 26d total) . . . . . ▶					26e 615,140
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . . . . . ▶					26f 93.50 %
27 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: (1998) . . . . . (1997) . . . . . (1996) . . . . . (1995) . . . . . 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: (1998) . . . . . (1997) . . . . . (1996) . . . . . (1995) . . . . . c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ . . . . . ▶					27c _____
d Add: Line 27a total _____ and line 27b total _____ . . . . . ▶					27d _____
e Public support (line 27c total minus line 27d total). . . . . ▶					27e _____
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) . . . . ▶					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)). . . . . ▶					27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h _____ %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, 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 page 4 of the instructions.)					

**Part V Private School Questionnaire** (See page 4 of the instructions.)  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

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? . . . . .

	Yes	No
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? . . . . .

32d		
-----	--	--

If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)

33 Does the organization discriminate by race in any way with respect to:

--	--	--

a Students' rights or privileges? . . . . .

33a		
-----	--	--

b Admissions policies? . . . . .

33b		
-----	--	--

c Employment of faculty or administrative staff? . . . . .

33c		
-----	--	--

d Scholarships or other financial assistance? . . . . .

33d		
-----	--	--

e Educational policies? . . . . .

33e		
-----	--	--

f Use of facilities? . . . . .

33f		
-----	--	--

g Athletic programs? . . . . .

33g		
-----	--	--

h Other extracurricular activities? . . . . .

33h		
-----	--	--

If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)

34a Does the organization receive any financial aid or assistance from a governmental agency? . . . . .

--	--	--

b Has the organization's right to such aid ever been revoked or suspended? . . . . .

34b		
-----	--	--

If you answered "Yes" to either 34a or b, please explain using an attached statement.

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .

35		
----	--	--

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 6 of the instructions.)  
(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 (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)	36	505
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	3710
38	Total lobbying expenditures (add lines 36 and 37)	38	4215
39	Other exempt purpose expenditures	39	450,543
40	Total exempt purpose expenditures (add lines 38 and 39)	40	454,758
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 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	41	90,952
42	Grassroots nontaxable amount (enter 25% of line 41)	42	22,738
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0

**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 7 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
45 Lobbying nontaxable amount	90952	55137	29736	N/A	175825
46 Lobbying ceiling amount (150% of line 45(e))					263737
47 Total lobbying expenditures	4215	3962	8391	N/A	16568
48 Grassroots nontaxable amount	22738	13784	7434	N/A	43956
49 Grassroots ceiling amount (150% of line 48(e))					65934
50 Grassroots lobbying expenditures	505	542	2134	N/A	3181

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

(For reporting only by organizations that did not complete Part VI-A) (See page 8 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation and 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)			

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

**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 8 of the instructions.)

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

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash . . . . .
- (ii) Other assets . . . . .

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization . . . . .
- (ii) Purchases of assets from a noncharitable exempt organization . . . . .
- (iii) Rental of facilities, equipment, or other assets . . . . .
- (iv) Reimbursement arrangements . . . . .
- (v) Loans or loan guarantees . . . . .
- (vi) Performance of services or membership or fundraising solicitations . . . . .

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .

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

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
	N/A	

Statement 2

Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Page 1 - Fundraising Event  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

Part 1 - Line 9

Summary of the revenue and expenses of the major event generating the  
most gross receipts:

Description of Event	Gross Receipts	Contrib. Included	Gross Revenue	Direct Expenses	Net Income (Loss)
Awards Banquet	<u>32,115</u>	<u>0</u>	<u>32,115</u>	<u>30,667</u>	<u>1,448</u>
To Form 990 Part 1, Line 9	32,115	0	32,115	30,667	1,448
	=====				

Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Page 2 - Depreciation and Amortization  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

Description of Property

Date placed in service	Method/ IRC sec.	Life or rate	Line No.	<u>Cost</u> 1995	<u>or</u> 1996	<u>Other</u> 1997	<u>Basis</u> 1998	1999	Basis reduction	Accumulated depreciation/ amortization	Current year deduction
PROPERTY 305 N. FT. HARRISON											
95	SL	25.0		52,000						6,760	2,080
LAND 305 N. FT. HARRISON											
95	L			13,000						0	0
BUILDING IMPROVEMENTS											
95	SL	25.0		3,474	46,357	9,532	0	0		5,849	2,374
FURNITURE 85 FIXTURES											
95	SL	5	1	4,781	7,619	6,281	5,671	3085		9,177	5,178
COMPUTER EQUIPMENT 6* SOFTWARE											
96	SL	5			27,186	2,191	5,808	16216		12,282	8,659

TOTAL 990 Page 2 Depreciation

34,068  
=====

18,291  
=====

Adjustment 1997 - corrected  
(Adjustment originally reported as  
should have been reported as 255) 1230

975

34,068  
=====

19,266  
=====

Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Other Expenses  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

## Part II - Line 43a

Description	(A) Total	(B) Program Services	(C) Management and general	<b>P)</b> Fundraising
Dues and Subscriptions	3,410	3,410	0	0
Utilities	4,597	0	4,597	0
Insurance	2,311	0	2,311	0
Bank Charges	6,791	0	6,791	0
Commissions	20,000	0	0	20,000
Licenses 8B Permits	70	0	70	0
Media Consulting	78,690	78,690	0	0
Media Expenses	4,427	4,427	0	0
Office Expenses	1,159	0	1,159	0
Research	8,818	8,818	0	0
Education (of staff)	1,706	0	1,706	0
Professional Fees	39,507	39,507		0
Dissemination -radio, tv	83,589	83,589		0
Taxes and Fees (other than payroll taxes)	1,605	0	1,605	0
Totals - Line 43a	256,680	218,441	18,239	20,000
=====				

Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Supporting Schedules  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

Form 990 - Part III The Organization's Primary Exempt Purpose

The purposes of Citizens Commission on Human Rights of Clearwater, Inc.  
are:

- a) To guard against abuses of the fundamental rights of people guaranteed by the Constitution of the United States and the Universal Declaration of Human Rights and, where such abuses occur, to seek their correction;
- b) To encourage and support research into the effects of psychiatric and psychological practices and procedures, and into alternatives to such practices and procedures;
- c) To educate the general public regarding mental health, human rights and related areas.



Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Supporting Schedules  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

Form 990 - Part IIa - Statement of Program Service Accomplishments

a) Public Information 228,572

Informed citizens of abuses in the field of mental health:

- 756 radio shows reaching an audience of approximately 110,320,000 listeners.
- 682 TV shows reaching an audience of 6,122,000 viewers.
- Mailed information requested to 1,193 people.

b) Investigations 63,517

Investigations to determine nature and related facts concerning psychiatric human rights violations and abuses. There were people directly helped, with a total of 2202 criminal complaints filed.

c) Psychiatric Reform 49,636

Assisted 24 local, state and federal agencies in their investigations. Provided information on fraud and patient abuse to the Attorney General U.S. which was forwarded to the Inspector General office in Atlanta for investigation and 243 info-packs to Florida legislators on psychiatric violations of human rights.

Total Program Services 341,725  
=====

Citizens Commission on Human Rights  
of Clearwater, Inc.

Form 990 - Schedule A Supporting Schedules  
For the Year Ended December 31, 1999  
Federal ID Number 59-2973520

Part Via - Lobbying Activity by Non-electing Public Charities

Volunteers helped to photocopy and assemble information packs for legislators. Approximately 12 volunteers spent a total of approximately 91 combined hours. Paid employee Rosa Sollecito spent approximately 96 hours in various lobbying activities which equals \$1002.00. Expenses were: telephone \$285.00, postage and shipping \$528.00 and travel \$2,400.00.  
Total \$4,215.00