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 7/1/2007, and ending 6/30/2008

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

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

C Name of organization: CENTER FOR CONSTITUTIONAL RIGHTS

Number and street (or P.O. box if mail is not delivered to street address): 666 BROADWAY, 7TH FLOOR | Room/suite:

City or town: NEW YORK | State or country: NY | ZIP + 4: 10012

D Employer identification number: 22-6082880

E Telephone number: (212) 614 - 6464

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

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

G Website: ▶ WWW.CCRJUSTICE.ORG

H and I are not applicable to section 527 organizations.

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

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

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

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

I Group Exemption Number ▶

J **Organization type** (check only one) ▶ [X] 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.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 6,945,443

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue

1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a	0		
b	Direct public support (not included on line 1a)	1b	4,344,307		
c	Indirect public support (not included on line 1a)	1c	5,000		
d	Government contributions (grants) (not included on line 1a)	1d	0		
e	**Total** (add lines 1a through 1d) (cash $ 4,181,246 noncash $ 168,061)			1e	4,349,307
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	349,882
3	Membership dues and assessments			3	0
4	Interest on savings and temporary cash investments			4	62,153
5	Dividends and interest from securities			5	95,056
6 a	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

		(A) Securities		(B) Other
8 a	Gross amount from sales of assets other than inventory	2,084,116	8a	0
b	Less: cost or other basis and sales expenses	2,085,769	8b	0
c	Gain or (loss) (attach schedule) SCHEDULE 5	-1,653	8c	0

d	Net gain or (loss). Combine line 8c, columns (A) and (B)			8d	-1,653
9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ [ ]				
a	Gross revenue (not including $ 0 of contributions reported on line 1b)	9a	0		
b	Less: direct expenses other than fundraising expenses	9b	0		
c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	0
10 a	Gross sales of inventory, less returns and allowances	10a	0		
b	Less: cost of goods sold	10b	0		
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	0
11	Other revenue (from Part VII, line 103)			11	4,929
12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	4,859,674

Expenses

13	Program services (from line 44, column (B))	13	3,935,870
14	Management and general (from line 44, column (C))	14	562,743
15	Fundraising (from line 44, column (D))	15	708,633
16	Payments to affiliates (attach schedule)	16	0
17	**Total expenses.** Add lines 16 and 44, column (A)	17	5,207,246

Net Assets

18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	-347,572
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	4,954,425
20	Other changes in net assets or fund balances (attach explanation) SCHEDULE 1	20	-134,646
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	4,472,207

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

(HTA)

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 the instructions.)*

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 a Grants paid from donor advised funds (attach schedule) (cash $ 0 noncash $ 0) If this amount includes foreign grants, check here ▶ ☐	22a	0	0		
22 b Other grants and allocations (attach schedule) (cash $ 0 noncash $ 0) If this amount includes foreign grants, check here ▶ ☐	22b	0	0		
23 Specific assistance to individuals (attach schedule)	23	0	0		
24 Benefits paid to or for members (attach schedule)	24	0	0		
25 a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	530,600	351,457	104,981	74,162
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0	0	0	0
c 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)	25c	0	0	0	0
26 Salaries and wages of employees not included on lines 25a, b, and c	26	2,099,794	1,672,413	167,046	260,335
27 Pension plan contributions not included on lines 25a, b, and c	27	74,360	57,214	7,690	9,456
28 Employee benefits not included on lines 25a – 27	28	396,155	304,807	40,970	50,378
29 Payroll taxes	29	209,186	160,952	21,633	26,601
30 Professional fundraising fees	30	0			
31 Accounting fees	31	15,018		15,018	
32 Legal fees	32	147,486	145,211	2,275	
33 Supplies	33	88,039	69,551	7,043	11,445
34 Telephone	34	55,723	34,639	17,762	3,322
35 Postage and shipping	35	80,373	45,910	5,710	28,753
36 Occupancy	36	36,942	29,184	2,955	4,803
37 Equipment rental and maintenance	37	131,486	103,874	10,519	17,093
38 Printing and publications	38	158,579	66,860	11,888	79,831
39 Travel	39	220,488	194,501	526	25,461
40 Conferences, conventions, and meetings	40	27,683	13,109	9,443	5,131
41 Interest	41	0			
42 Depreciation, depletion, etc. (attach schedule) SCHEDULE 2	42	118,087	93,289	9,447	15,351
43 Other expenses not covered above (itemize): a SCHEDULE 3	43a	817,247	592,899	127,837	96,511
b	43b	0	0	0	0
c	43c	0	0	0	0
d	43d	0	0	0	0
e	43e	0	0	0	0
f	43f	0	0	0	0
g	43g	0	0	0	0
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44	5,207,246	3,935,870	562,743	708,633

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 $ 0 ; **(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 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? ▶ DEFEND AND PROTECT CONSTITUTIONAL RIGHTS All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a LITIGATION PROGRAM - UNDERTAKES LITIGATIONS TO PROTECT CONSTITUTIONAL RIGHTS. (Grants and allocations $ 0) If this amount includes foreign grants, check here ▶ ☐	2,550,837
b EDUCATION AND OUTREACH PROGRAM - PUBLISHES AND DISTRIBUTES EDUCATIONAL MATERIAL AND PROVIDES WORKSHOPS AND SUPPORT REGARDING CONSTITUTIONAL RIGHTS. (Grants and allocations $ 0) If this amount includes foreign grants, check here ▶ ☐	1,385,033
c (Grants and allocations $ 0) If this amount includes foreign grants, check here ▶ ☐	0
d (Grants and allocations $ 0) If this amount includes foreign grants, check here ▶ ☐	0
e Other program services (attach schedule) (Grants and allocations $ 0) If this amount includes foreign grants, check here ▶ ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	3,935,870

Part IV Balance Sheets *(See the instructions.)*

					(A) Beginning of year		(B) End of year
		Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*					
Assets	45	Cash—non-interest-bearing			98,177	45	74,684
	46	Savings and temporary cash investments			1,826,020	46	1,599,725
	47 a	Accounts receivable	47a	18,783			
	b	Less: allowance for doubtful accounts	47b	0	15,614	47c	18,783
	48 a	Pledges receivable	48a	0			
	b	Less: allowance for doubtful accounts	48b	0	0	48c	0
	49	Grants receivable			380,807	49	58,188
	50 a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			0	50a	0
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				50b	
	51 a	Other notes and loans receivable (attach schedule)	51a	0			
	b	Less: allowance for doubtful accounts	51b	0	0	51c	0
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			50,030	53	73,855
	54 a	Investments—publicly-traded securities. SCH. 6 ▶ ☐ Cost ☒ FMV			2,291,886	54a	2,158,168
	b	Investments—other securities (attach schedule). ▶ ☐ Cost ☐ FMV			0	54b	0
	55 a	Investments—land, buildings, and equipment: basis	55a	0			
	b	Less: accumulated depreciation (attach schedule)	55b	0	0	55c	0
	56	Investments—other (attach schedule)			0	56	0
	57 a	Land, buildings, and equipment: basis	57a	2,303,789			
	b	Less: accumulated depreciation (attach schedule) SCHEDULE 2	57b	1,554,959	829,080	57c	748,830
	58	Other assets, including program-related investments (describe ▶ SCHEDULE 4)			51,992	58	373,487
	59	**Total assets** (must equal line 74). Add lines 45 through 58			5,543,606	59	5,105,720
Liabilities	60	Accounts payable and accrued expenses			278,118	60	294,044
	61	Grants payable			7,034	61	7,533
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
	64 a	Tax-exempt bond liabilities (attach schedule)			0	64a	0
	b	Mortgages and other notes payable (attach schedule)			0	64b	0
	65	Other liabilities (describe ▶ ANNUITY PAYMENT LIABILITY)			304,029	65	331,936
	66	**Total liabilities.** Add lines 60 through 65			589,181	66	633,513
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted			3,345,959	67	3,214,029
	68	Temporarily restricted			1,316,880	68	961,592
	69	Permanently restricted			291,586	69	296,586
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			4,954,425	73	4,472,207
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73.			5,543,606	74	5,105,720

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	4,725,028
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	-134,646		
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4	0		
	Add lines b1 through b4			b	-134,646
c	Subtract line b from line a			c	4,859,674
d	Amounts included on Part I, line 12, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2	0		
	Add lines d1 and d2			d	0
e	**Total revenue** (Part I, line 12). Add lines c and d ▶			e	4,859,674

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

a	Total expenses and losses per audited financial statements			a	5,207,246
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4	0		
	Add lines b1 through b4			b	0
c	Subtract line b from line a			c	5,207,246
d	Amounts included on Part I, line 17, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2	0		
	Add lines d1 and d2			d	0
e	**Total expenses** (Part I, line 17). Add lines c and d ▶			e	5,207,246

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.)*

(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 plans	(E) Expense account and other allowances
Name ERNEST VINCENT WARREN Str 666 BROADWAY, 7/FL City NEW YORK ST NY ZIP 10012	Title EXEC. DIRECTOR Hr/WK 40	143,240	4,056	0
Name CAROLYN CHAMBERS Str 666 BROADWAY, 7/FL City NEW YORK ST NY ZIP 10012	Title ASSOC. EXE. DIR. Hr/WK 40	103,781	3,150	0
Name SAMUEL MILLER Str 666 BROADWAY, 7/FL City NEW YORK ST NY ZIP 10012	Title INTERIM LEGAL DIR Hr/WK 40	83,462	2,262	0
Name KEVI BRANELLY Str 666 BROADWAY, 7/FL City NEW YORK ST NY ZIP 10012	Title DEVLP. DIR. Hr/WK 40	103,019	2,910	0
Name ANNETTE DICKERSON Str 666 BROADWAY, 7/FL City NEW YORK ST NY ZIP 10012	Title DIR. OF EDU. & Hr/WK OUTREACH 40	97,098	2,910	0
Name SEE SCHEDULE 8 Str FOR OTHER NON- City COMPENSATED ST ZIP	Title Hr/WK	0	0	0
Name DIRECTORS Str City ST ZIP	Title Hr/WK	0	0	0
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 25			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) SCHEDULE 7	75b	X	
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ If "Yes," attach a statement that includes the information described in the instructions.	75c		X
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				
Name N/A Str City ST ZIP				

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt **or** ☐ nonexempt			
81 a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

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 *quid pro quo* contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*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?	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.			
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) orgs.* 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) orgs.* 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	N/A	
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	N/A	
89 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	*501(c)(3) and 501(c)(4) orgs.* 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 ▶ N/A			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ N/A			
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	N/A	

90 a List the states with which a copy of this return is filed ▶ NJ, NY

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) **90b** 40

91 a The books are in care of ▶ Name CENTER FOR CONSTITUTIONAL RIGHTS Telephone no. ▶ (212) 614 - 6464
Located at ▶ 666 BROADWAY, 7TH FLOOR City NEW YORK ST NY ZIP + 4 ▶ 10012

			Yes	No
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)?	91b		X
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

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? If "Yes," enter the name of the foreign country ▶	91c		X

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) Exclusion code	(D) Amount	
93 Program service revenue:					
a COURT AWARDS AND ATTORNEY FEES					349,882
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			14	62,153	
96 Dividends and interest from securities			14	95,056	
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			18	-1,653	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a OTHER INCOME					4,929
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		155,556	354,811
105 **Total** (add line 104, columns (B), (D), and (E)) ▶					510,367

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).
93(a)	LEGAL FEE AWARDS ARE COURT APPOINTED OR OTHER AWARDED FEES RECEIVED FOR THE LEGAL
	REPRESENTATION OF INDIVIDUALS AND REPRESENTS THE REIMBURSEMENT OF LITIGATION COSTS
	INCURRED IN DEFENDING THE CIVIL RIGHTS CASES INVOLVED.
103(a)	OTHER INCOME IS USED TO COVER THE COST OF PROGRAM AND SUPPORTING SERVICES.

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
	%		0	0
	%		0	0
	%		0	0
	%		0	0

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).*

		Yes	No
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. N/A		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			0

		Yes	No
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. N/A		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			0

		Yes	No
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? N/A		

Please Sign Here

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

Signature of officer — Date 11/21/08

GREGORY H. FINGER TREASURER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date 8/8/2008	Check if self-employed ☐	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4	WINNIE TAM & CO., P.C.	EIN	13-3777972
	50 BROAD STREET, 18TH FLOOR, NEW YORK, NY 10004	Phone no.	(212) 785 - 4600

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: CENTER FOR CONSTITUTIONAL RIGHTS

Employer identification number: 22-6082880

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
SHAYANA KADIDAL, 666 BROADWAY, 7/FL NEW YORK, NY 10012	SR. STAFF ATTORNEY 40	98,353	2,827	0
KARL FRANKLIN, 666 BROADWAY, 7/FL NEW YORK, NY 10012	RACIAL JUSTICE FELLOW 40	93,133	2,643	0
ANDREA COSTELLO, 666 BROADWAY, 7/FL NEW YORK, NY 10012	STAFF ATTORNEY 40	87,880	2,643	0
JONATHAN DIXON, 666 BROADWAY, 7/FL NEW YORK, NY 10012	STAFF ATTORNEY 40	86,987	2,551	0
KATHERINE GALLAGHER, 666 BROADWAY, 7/FL NEW YORK, NY 10012	STAFF ATTORNEY 40	84,626	2,459	0
Total number of other employees paid over $50,000 ▶	15			

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
THE GLOVER PARK GROUP, 3299 K STREET, NW WASHINGTON, DC 20007	PUBLIC RELATIONS/SPECIFIC CAMPAIGN	100,000
RIPTIDE COMMUNICATIONS, INC, 270 LAFAYETTE STREET, STE. 1300 NEW YORK, NY 10012	PRESS/MEDIA CONSULTING	99,000
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
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 ▶ $ 7,229 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? FORM 990, PART V	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3 a	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.)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	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	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b	N/A	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A	
d	Enter the total number of donor advised funds owned at the end of the tax year ▶	N/A		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶	N/A		
f	Enter the total number of separate funds or accounts owned at the end of the tax 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 ▶	0		
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶	0		

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** ▶ ____ City ____ ST ____ Country ____

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.)

11 a ☒ 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.)

11 b ☐ 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? Yes	No	(e) Amount of support
					0
					0
					0
					0
					0
					0
Total . . . . . . ▶					0

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.)	4,365,508	3,964,203	3,071,324	2,373,152	13,774,187
16	Membership fees received					0
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	49,308	932,968	1,012,500	37,978	2,032,754
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	175,711	136,579	44,343	32,591	389,224
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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					0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	12,883	1,277	3,110	1,082	18,352
23	Total of lines 15 through 22	4,603,410	5,035,027	4,131,277	2,444,803	16,214,517
24	Line 23 minus line 17	4,554,102	4,102,059	3,118,777	2,406,825	14,181,763
25	Enter 1% of line 23	46,034	50,350	41,313	24,448	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 283,635

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 1,807,208

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 14,181,763

d Add: Amounts from column (e) for lines: 18 389,224 19 ______ 22 18,352 26b 1,807,208 ▶ 26d 2,214,784

e Public support (line 26c minus line 26d total) ▶ 26e 11,966,979

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 84.38%

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:

(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:

(2006) ______ (2005) ______ (2004) ______ (2003) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c 0

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d 0

e Public support (line 27c total minus line 27d total) ▶ 27e 0

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

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g 0.00%

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h 0.00%

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.

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

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

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		1,927
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		5,302
38	Total lobbying expenditures (add lines 36 and 37)	38	0	7,229
39	Other exempt purpose expenditures	39		4,637,274
40	Total exempt purpose expenditures (add lines 38 and 39)	40	0	4,644,503
41	Lobbying nontaxable amount. Enter the amount from the following table—			
	If the amount on line 40 is— / **The lobbying nontaxable amount is—**			
	Not over $500,000 — 20% of the amount on line 40			
	Over $500,000 but not over $1,000,000 — $100,000 plus 15% of the excess over $500,000			
	Over $1,000,000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000,000	41		382,225
	Over $1,500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
	Over $17,000,000 — $1,000,000			
42	Grassroots nontaxable amount (enter 25% of line 41)	42	0	95,556
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0	0

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 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	382,225	360,305	308,435	271,560	1,322,525
46	Lobbying ceiling amount (150% of line 45(e))					1,983,788
47	Total lobbying expenditures	7,229	35,885	83,418	54,091	180,623
48	Grassroots nontaxable amount	95,556	90,076	77,109	67,890	330,631
49	Grassroots ceiling amount (150% of line 48(e))					495,947
50	Grassroots lobbying expenditures	1,927	3,233	7,549	1,451	14,160

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.)

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

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

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

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

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

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

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

b If "Yes," complete the following schedule:

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

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization	Employer identification number
CENTER FOR CONSTITUTIONAL RIGHTS	22-6082880

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.** (**Note:** *Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.*)

General Rule—

[ ] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

[X] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . ▶ $

Caution: *Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they* ***must*** *check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).*

Name of organization: CENTER FOR CONSTITUTIONAL RIGHTS

Employer identification number: 22-6082880

Part I **Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MADISON COMMUNITY FOUNDATION PO BOX 5010 MADISON WI 53750 Foreign State or Province: Foreign Country:	$ 200,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
2	THE HOLTHUES TRUST 209 IOWA AVENUE MUSCATINE IA 52761 Foreign State or Province: Foreign Country:	$ 100,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
3	THE JACK P. TATE FOUNDATION PO BOX 9259 GREENVILLE SC 29604 Foreign State or Province: Foreign Country:	$ 150,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
4	VANGUARD CHARITABLE ENDOWMENT PROGRAM PO BOX 3075 SOUTHEASTERN PA 19398 Foreign State or Province: Foreign Country:	$ 261,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
5	THE FORD FOUNDATION 320 EAST 43RD STREET NEW YORK NY 10017 Foreign State or Province: Foreign Country:	$ 200,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
6	THE JEHT FOUNDATION 120 WOOSTER STREET, 2ND FLOOR NEW YORK NY 10012 Foreign State or Province: Foreign Country:	$ 234,583	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Name of organization: CENTER FOR CONSTITUTIONAL RIGHTS

Employer identification number: 22-6082880

Part I **Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	CS FUND/WARSH MOTT LEGACY 469 BOHEMIAN HIGHWAY FREESTONE CA 95472 Foreign State or Province: Foreign Country:	$ 155,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
8	THE ATLANTIC PHILANTHROPIES 125 PARK AVENUE, 21ST FLOOR NEW YORK NY 10017 Foreign State or Province: Foreign Country:	$ 500,000	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
9	ESTATE OF DELLA GREENFIELD 495 NW GREENLEAF ROAD PORTLAND OR 97229 Foreign State or Province: Foreign Country:	$ 150,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
10	Foreign State or Province: Foreign Country:	$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
11	Foreign State or Province: Foreign Country:	$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
12	Foreign State or Province: Foreign Country:	$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Center for Constitutional Rights ("CCR")
EIN: 22-6082880
FYE 6/30/08

Other Changes in Net Assets

(Form 990, Part I, Line 20)

Net unrealized loss on investments for the fiscal year ended June 30, 2008 (134,646)

SCHEDULE 1

Fixed Assets and Depreciation

(Form 990, Part II, Line 42)

Categories	Basis / Costs	Method / Years	Acc. Deprec. 6/30/07	Deprec. 6/30/08	Acc. Deprec. 6/30/08	Book Value 6/30/08
Furniture and fixture	120,505	S.L. 5 Years	12,050	24,100	36,150	84,355
Building	1,933,540	S.L. 30 Years	1,361,937	64,451	1,426,388	507,152
Building 1999 Additions	106,296	S.L. 39 Years	21,808	2,726	24,534	81,762
Building 2000 Additions	16,456	S.L. 16.75 Years	6,874	982	7,856	8,600
Building 2002 Additions	18,428	S.L. 14.75 Years	6,244	1,249	7,493	10,935
Computer and software	81,894	S.L. 3 Years	29,813	19,245	40,715	41,179
Telephone system	26,670	S.L. 5 Years	6,489	5,334	11,823	14,847
	2,303,789		1,445,215	118,087	1,554,959	748,830

SCHEDULE 2

Statement of Functional Expenses

(Form 990, Part II, Line 43)

Descriptions	Total	Programs	Adm./Gen.	Fundraising
Consultants and professional fees	467,993	355,662	73,097	39,234
Court and legal costs	45,528	45,528		
Insurance	28,945	26,574	903	1,468
Books and subscriptions	137,027	128,010	5,855	3,162
Event expenses	95,596	32,225	10,724	52,647
Advertising and recruitment	6,372		6,372	
Investment expenses	14,905		14,905	
Amortization of loan costs	3,505		3,505	
Miscellaneous	17,376	4,900	12,476	
	817,247	592,899	127,837	96,511

SCHEDULE 3

Other Assets
(Form 990, Part IV, Line 58)

	Beginning of Year	End of Year
Legal fee awards receivable		325,000
Deferred loan cost	7,595	4,090
Art work	39,517	39,517
Utility deposits	4,880	4,880
	51,992	373,487

SCHEDULE 4

Gains / Loss from Sales of Securities
(Form 990, Part I, Line 8)

	Sales Proceeds	Costs	Gains / (loss)
Stocks	101,859	103,334	(1,475)
Certificate of Deposits	1,979,957	1,980,000	(43)
Mutual Funds	2,300	2,435	(135)
	2,084,116	2,085,769	(1,653)

SCHEDULE 5

Investments - Securities
(Form 990, Part IV, Line 54)

	Beginning of Year	End of Year
Certificate of deposits	1,050,036	1,113,438
Equity securities	568,232	516,118
Mutual funds	534,228	407,605
U.S. Government obligations	92,432	69,994
Debt securities	46,958	51,013
	2,291,886	2,158,168

SCHEDULE 6

Individuals related through Family and Business Relationships
(Form 990, Part V-A, Line 75b)

Board member Ms. Judy Lerner is the mother of David Lerner, principal of Riptide Communications. Judy Lerner does not vote on any matters related to Riptide Communications.

CCR Board of Directors FY 08

Catherine Albisa
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Radhika Balakrishnan
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Ajamu Baraka
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Karima Bennoune
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Ann Cammett
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Marilyn Clement
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

David Cole
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Rhonda Copelon
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Michelle DePass
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

SCHEDULE 8.1

CCR Board of Directors FY 08

Gregory H. Finger, Treasurer
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Abdeen Jabara
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Wilhelm H. Joseph, Jr.
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Julie Kay
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Judy Lerner
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Eric Lewis
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Robin Lloyd
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Jules Lobel, Vice-President
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Charles Hey-Maestre, Secretary
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

SCHEDULE 8.2

CCR Board of Directors FY 08

Michael Ratner, President
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Alex Rosenberg, Vice-President
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Franklin Siegel
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Michael Smith
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Richard A. Soble
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Peter Weiss, Vice-President
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

Ellen Yaroshefsky
c/o Center for Constitutional Rights
666 Broadway, 7th Floor,
New York, NY 10012

LP 67 200806 670 1341 K 29404-320-53124-8 A0112805 211A
200849 033551 10012 IRS USE ONLY 226082880 TE 3

Department of the Treasury
Internal Revenue Service
OGDEN, UT 84201-0074

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: December 15, 2008

Taxpayer Identification Number:
22-6082880
Tax Form: 990
Tax Period: June 30, 2008

026363.564746.0088.002 1 AT 0.346 530

CENTER FOR CONSTITUTIONAL RIGHTS
INC
666 BROADWAY FL 7
NEW YORK NY 10012-2317076

026363

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We have received your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above.

We have approved your request and have extended the due date to file your return to February 15, 2009.

Please attach a copy of this letter to your return when you file it. It is evidence that we granted an extension of time to file your return. A copy is provided for your records.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top left of this letter.

Reminder - You May Be Required to File Electronically

Exempt organizations may be required to file certain returns electronically. For tax years ending on or after December 31, 2006, the electronic filing requirement applies to exempt organizations with $10 million or more in total assets if the organization files at least 250 returns in a calendar year, including income, excise, employment tax and information returns. Private foundations and charitable trusts will be required to file Forms 990-PF electronically regardless of their asset size, if they file at least 250 returns annually. For more information, go to www.irs.gov . Click "Charities and Non-Profits" and look for the "e-file for Charities and Non-Profits" tab.

For tax forms, instructions and information visit **www.irs.gov**. (Access to this site will not provide you with your specific taxpayer account information.)

Form **8868**
(Rev. April 2008)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only . . . . ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization: CENTER FOR CONSTITUTIONAL RIGHTS	**Employer identification number** 22-6082880
	Number, street, and room or suite no. If a P.O. box, see instructions. 666 BROADWAY, 7TH FLOOR	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10012	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ CCR

Telephone No. ▶ ____________ FAX No. ▶ ____________

- If the organization does not have an office or place of business in the United States, check this box . . . . ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ____________. If this is for the whole group, check this box . . . . ▶ [ ] . If it is for part of the group, check this box . . . . . ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15/2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ [ ] calendar year ______ or

▶ [X] tax year beginning 7/1/2007, and ending 6/30/2008.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3 a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$ 0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
(HTA)