See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490
# Form 990

## 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.

### For the 2002 calendar year, or tax year period beginning **OCT 1, 2002** and ending **SEP 30, 2003**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>C Name of organization</td>
<td><strong>PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY, INC.</strong></td>
</tr>
<tr>
<td>D Employer identification number</td>
<td><strong>93-1102740</strong></td>
</tr>
<tr>
<td>E Telephone number</td>
<td><strong>202-265-7337</strong></td>
</tr>
<tr>
<td>F Accounting method</td>
<td><strong>Cash</strong></td>
</tr>
</tbody>
</table>

### G Web site: [WWW.PEBR.ORG](http://www.pebr.org)

### K Check here ☑ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

### L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ➔ **562,497.**

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Contributions, gifts, grants, and similar amounts received: Direct public support</td>
<td><strong>554,187.</strong></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Direct public support</td>
<td><strong>4,297.</strong></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Government contributions (grants)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Total (add lines 1a through 1c) (cash $558,484. noncash $)</td>
<td><strong>558,484.</strong></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Program service revenue including government fees and contracts (from Part VII, line 93)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Membership dues and assessments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Interest on savings and temporary cash investments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Dividends and interest from securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td>Gross rents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td>Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c</td>
<td>Net rental income or (loss) (subtract line 6b from line 6a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other investment income (describe )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>Gross amount from sale of assets other than inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b</td>
<td>Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8c</td>
<td>Gain or (loss) (attach schedule)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Special events and activities (attach schedule)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td>Gross revenue (not including $ of contributions reported on line 1a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td>Less: direct expenses other than fundraising expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td>Net income or (loss) from special events (subtract line 9b from line 9a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: cost of goods sold</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c</td>
<td>Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Other revenue (from Part VII, line 103)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)</td>
<td><strong>562,497.</strong></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Program services (from line 44, column (B))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Management and general (from line 44, column (C))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Fundraising (from line 44, column (D))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Payments to affiliates (attach schedule)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Total expenses (add lines 16 and 44, column (A))</td>
<td><strong>855,806.</strong></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Excess or (deficit) for the year (subtract line 17 from line 12)</td>
<td><strong>&lt;239,309.</strong></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Net assets or fund balances at beginning of year (from line 73, column (A))</td>
<td><strong>200,433.</strong></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Other changes in net assets or fund balances (attach explanation)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Net assets or fund balances at end of year (combine lines 18, 19, and 20)</td>
<td><strong>&lt;92,876.</strong></td>
<td></td>
</tr>
<tr>
<td>Part II</td>
<td>Statement of Functional Expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>-----------------</td>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td></td>
<td>(A) Total</td>
<td>(B) Program services</td>
<td>(C) Management and general</td>
</tr>
<tr>
<td>22 Grants and allocations (attach schedule)</td>
<td>22</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>Cash $</td>
<td></td>
<td>102,642.</td>
<td>86,108.</td>
</tr>
<tr>
<td>Noncash $</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Specific assistance to individuals (attach schedule)</td>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Benefits paid to or for members (attach schedule)</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Compensation of officers, directors, etc.</td>
<td>25</td>
<td>302,295.</td>
<td>253,600.</td>
</tr>
<tr>
<td>26 Other salaries and wages</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Pension plan contributions</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Other employee benefits</td>
<td>28</td>
<td>50,687.</td>
<td>42,522.</td>
</tr>
<tr>
<td>29 Payroll taxes</td>
<td>29</td>
<td>34,065.</td>
<td>28,577.</td>
</tr>
<tr>
<td>30 Professional fundraising fees</td>
<td>30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Accounting fees</td>
<td>31</td>
<td>13,648.</td>
<td>11,254.</td>
</tr>
<tr>
<td>32 Legal fees</td>
<td>32</td>
<td>9,388.</td>
<td>7,742.</td>
</tr>
<tr>
<td>33 Supplies</td>
<td>33</td>
<td>7,267.</td>
<td>3,077.</td>
</tr>
<tr>
<td>34 Telephone</td>
<td>34</td>
<td>20,034.</td>
<td>16,141.</td>
</tr>
<tr>
<td>35 Postage and shipping</td>
<td>35</td>
<td>19,344.</td>
<td>18,417.</td>
</tr>
<tr>
<td>36 Occupancy</td>
<td>36</td>
<td>68,394.</td>
<td>55,353.</td>
</tr>
<tr>
<td>37 Equipment rental and maintenance</td>
<td>37</td>
<td>3,888.</td>
<td>1,253.</td>
</tr>
<tr>
<td>38 Printing and publications</td>
<td>38</td>
<td>33,739.</td>
<td>33,153.</td>
</tr>
<tr>
<td>39 Travel</td>
<td>39</td>
<td>18,175.</td>
<td>15,993.</td>
</tr>
<tr>
<td>40 Conferences, conventions, and meetings</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41 Interest</td>
<td>41</td>
<td></td>
<td></td>
</tr>
<tr>
<td>42 Depreciation, depletion, etc. (attach schedule)</td>
<td>42</td>
<td></td>
<td></td>
</tr>
<tr>
<td>43 Other expenses not covered above (itemize):</td>
<td>43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e SEE STATEMENT 1</td>
<td>43e</td>
<td>163,590.</td>
<td>113,209.</td>
</tr>
<tr>
<td>44 Total functional expenses (add lines 22 through 43)</td>
<td>44</td>
<td>855,806.</td>
<td>686,399.</td>
</tr>
</tbody>
</table>

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 $ , (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 |
|----------------|-----------------|-----------------|-----------------|
|               | Program Service Expenses |
|               | (Required for 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts, but optional for others) |
| a SEE STATEMENT 3 | | | |
| b MEMBERSHIP: HELPS PEER EMPLOYEE MEMBERS EXPOSE AND REMEDY ENVIRONMENTAL PROBLEMS WITHIN THEIR PUBLIC AGENCIES. | | | 357,696. |
| c SEE STATEMENT 4 | | | |
| d SEE STATEMENT 5 | | | 125,166. |
| e Other program services (attach schedule) | | | 55,924. |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services) | | | 66,797. |
| | | | |
| g Total of Program Service Expenses (should equal line 44, column (B), Program services) | | | 80,816. |
| | | | 686,399. | |

Form 990 (2002)
# Part IV Balance Sheets

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td></td>
<td>1,438.45</td>
<td>4,274.</td>
</tr>
<tr>
<td>46</td>
<td></td>
<td>1,826.46</td>
<td>1,826.</td>
</tr>
<tr>
<td>47a</td>
<td></td>
<td>47a</td>
<td>47c</td>
</tr>
<tr>
<td>47b</td>
<td>Less: allowance for doubtful accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>48a</td>
<td></td>
<td>48a</td>
<td>48c</td>
</tr>
<tr>
<td>48b</td>
<td>Less: allowance for doubtful accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>49</td>
<td></td>
<td>225,440.49</td>
<td>63,359.</td>
</tr>
<tr>
<td>50</td>
<td></td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>51a</td>
<td>Other notes and loans receivable</td>
<td>51a</td>
<td></td>
</tr>
<tr>
<td>51b</td>
<td>Less: allowance for doubtful accounts</td>
<td>51b</td>
<td></td>
</tr>
<tr>
<td>52</td>
<td></td>
<td></td>
<td>52</td>
</tr>
<tr>
<td>53</td>
<td></td>
<td>4,273.53</td>
<td></td>
</tr>
<tr>
<td>54</td>
<td></td>
<td></td>
<td>54</td>
</tr>
<tr>
<td>55a</td>
<td>Investments - land, buildings, and equipment: basis</td>
<td>55a</td>
<td></td>
</tr>
<tr>
<td>55b</td>
<td>Less: accumulated depreciation</td>
<td>55c</td>
<td></td>
</tr>
<tr>
<td>56</td>
<td></td>
<td></td>
<td>56</td>
</tr>
<tr>
<td>57a</td>
<td>Land, buildings, and equipment: basis</td>
<td>57a</td>
<td></td>
</tr>
<tr>
<td>57b</td>
<td>Less: accumulated depreciation</td>
<td>57b</td>
<td></td>
</tr>
<tr>
<td>58</td>
<td></td>
<td>2,739.58</td>
<td>2,739.</td>
</tr>
<tr>
<td>59</td>
<td>Total assets (add lines 45 through 58) (must equal line 74)</td>
<td>253,319.59</td>
<td></td>
</tr>
<tr>
<td>60</td>
<td></td>
<td>41,932.60</td>
<td>117,653.</td>
</tr>
<tr>
<td>61</td>
<td></td>
<td></td>
<td>61</td>
</tr>
<tr>
<td>62</td>
<td></td>
<td></td>
<td>62</td>
</tr>
<tr>
<td>63</td>
<td></td>
<td></td>
<td>63</td>
</tr>
<tr>
<td>64a</td>
<td>Tax-exempt bond liabilities</td>
<td>64a</td>
<td></td>
</tr>
<tr>
<td>64b</td>
<td>Mortgages and other notes payable</td>
<td>STMT 8</td>
<td></td>
</tr>
<tr>
<td>65</td>
<td>Other liabilities (describe DEPOSITS)</td>
<td>65</td>
<td></td>
</tr>
<tr>
<td>66</td>
<td>Total liabilities (add lines 60 through 65)</td>
<td>52,886.66</td>
<td></td>
</tr>
<tr>
<td>67</td>
<td>Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.</td>
<td>&lt;135,502.&gt;67</td>
<td></td>
</tr>
<tr>
<td>68</td>
<td>Unrestricted</td>
<td>335,935.68</td>
<td></td>
</tr>
<tr>
<td>69</td>
<td>Permanently restricted</td>
<td>69</td>
<td></td>
</tr>
<tr>
<td>70</td>
<td>Capital stock, trust principal, or current funds</td>
<td>70</td>
<td></td>
</tr>
<tr>
<td>71</td>
<td>Paid-in or capital surplus, or land, building, and equipment fund</td>
<td>71</td>
<td></td>
</tr>
<tr>
<td>72</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>72</td>
<td></td>
</tr>
<tr>
<td>73</td>
<td>Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)</td>
<td>200,433.73</td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>Total liabilities and net assets / fund balances (add lines 66 and 73)</td>
<td>253,319.74</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.
### Part IV-A | Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

- a. Total revenue, gains, and other support per audited financial statements: $562,497.
- b. Amounts included on line a but not on line 12, Form 990:
  - (1) Net unrealized gains on investments: $__________
  - (2) Donated services and use of facilities: $__________
  - (3) Recoveries of prior year grants: $__________
  - (4) Other (specify): $__________
  - Add amounts on lines (1) through (4): $0.
- c. Amounts included on line 12, Form 990 but not on line a:
  - (1) Investment expenses: $__________
  - (2) Other (specify): $__________
  - Add amounts on lines (1) and (2): $0.
- d. Total revenue per line 12, Form 990: $562,497.

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

- a. Total expenses and losses per audited financial statements: $855,806.
- b. Amounts included on line a but not on line 17, Form 990:
  - (1) Donated services and use of facilities: $__________
  - (2) Prior year adjustments reported on line 20, Form 990: $__________
  - (3) Losses reported on line 20, Form 990: $__________
  - (4) Other (specify): $__________
  - Add amounts on lines (1) through (4): $0.
- c. Amounts included on line 17, Form 990 but not on line a:
  - (1) Investment expenses: $__________
  - (2) Other (specify): $__________
  - Add amounts on lines (1) and (2): $0.
- d. Total expenses per line 17, Form 990: $855,806.

### Part V | List of Officers, Directors, Trustees, and Key Employees

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Title and average hours per week devoted to position</th>
<th>(C) Compensation if not paid, enter 0</th>
<th>(D) Contributions to employee benefit plans and deferred compensation</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>JEFF RUCH</td>
<td>PRESIDENT/EXEC DIRECTOR</td>
<td>40+</td>
<td>60,000.</td>
<td>0.</td>
</tr>
<tr>
<td>2001 S STREET NW, #570</td>
<td>WASHINGTON, DC 20009</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HOWARD WILSHIRE</td>
<td>CHAIRMAN</td>
<td>2-5+</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>3727 BURNSIDE ROAD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEBASTOPOL, CA 95472</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DENNIS MCKINNEY</td>
<td>SECRETARY (DEVEL. DIR.)</td>
<td>2-5+</td>
<td>42,642.</td>
<td>0.</td>
</tr>
<tr>
<td>9101 WARREN STREET</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SILVER SPRING, MD 20910</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MAGI SHAPIRO</td>
<td>BOARD MEMBER</td>
<td>2+</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>16411 GUN BARREL ROAD</td>
<td>MONTPELIER, VA 23192</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRANK BUONO</td>
<td>BOARD MEMBER</td>
<td>2+</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>P.O. BOX 3835</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SIERRA VISTA, AZ 85635</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOUIS CLARK</td>
<td>BOARD MEMBER</td>
<td>2+</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>1612 K STREET, NW, SUITE 400</td>
<td>WASHINGTON, DC 20006</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MARTHA HAHN</td>
<td>BOARD MEMBER</td>
<td>2+</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>1915 NORTH 16TH STREET</td>
<td>BOSIE, ID 83702</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule. □ Yes □ No Form 990 (2002)

220301 01-22-03
| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity | Yes | No |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? | Yes | No |
| 78a | Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? | N/A | X |
| 78b | If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | X |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? | Yes | No |
| 80a | 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? | Yes | X |
| 80b | If "Yes," enter the name of the organization ________ and check whether it is exempt or nonexempt. | 
| 81a | Enter direct or indirect political expenditures. See line 81 instructions | 81b | X |
| 82a | Did the organization file Form 1120-POL for this year? | 82b | X |
| 83a | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83b | X |
| 84a | Did the organization solicit any contributions or gifts that were not tax deductible? | 84b | X |
| 85 | 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? | N/A | X |
| 86a | Did the organization make only in-house lobbying expenditures of $2,000 or less? | N/A | X |
| 86b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | N/A | X |
| 86c | b Dues, assessments, and similar amounts from members | N/A | X |
| 86d | c Section 162(e) lobbying and political expenditures | N/A | X |
| 86e | d Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | N/A | X |
| 86f | e Taxable amount of lobbying and political expenditures (line 85d less 85e) | N/A | X |
| 87a | g Does the organization elect to pay the section 6033(e) tax on the amount on line 85? | N/A | X |
| 87b | 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? | N/A | X |
| 88 | 501(c)(7) organizations. Enter: a Imputation fees and capital contributions included on line 12 | N/A | X |
| 89a | b Gross receipts, included on line 12, for public use of club facilities | N/A | X |
| 89b | c Gross income from members or shareholders | N/A | X |
| 89c | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | N/A | X |
| 89d | 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? | N/A | X |
| 90a | 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? | N/A | X |
| 90b | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 | N/A | X |
| 90c | Enter: Amount of tax on line 89c, above, reimbursed by the organization | N/A | X |

Located at 2001 S STREET NW, SUITE 570  
Telephone no. (202) 265-7337  
Telephone no. (202) 265-7337

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  
Telephone no. (202) 265-7337  
Telephone no. (202) 265-7337

09170607 745960 27275 2002.08000 PUBLIC EMPLOYEES FOR ENVIRIO 27275 1
### Part VII | Analysis of Income-Producing Activities

Note: Enter gross amounts unless otherwise indicated.

<table>
<thead>
<tr>
<th>(A) Business code</th>
<th>(B) Amount</th>
<th>(C) Exclusion code</th>
<th>(D) Amount</th>
<th>(E) Related or exempt function income</th>
</tr>
</thead>
<tbody>
<tr>
<td>93. Program service revenue:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Medicare/Medicaid payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Fees and contracts from government agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>94. Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95. Interest on savings and temporary cash investments</td>
<td></td>
<td></td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>96. Dividends and interest from securities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97. Net rental income or (loss) from real estate:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. not debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>98. Net rental income or (loss) from personal property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99. Other investment income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100. Gain or (loss) from sales of assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>101. Net income or (loss) from special events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>102. Gross profit or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>103. Other revenue:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. MISCELLANEOUS 4,006.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>104. Subtotal (add columns (B), (D), and (E))</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>105. Total (add line 104, columns (B), (D), and (E))</td>
<td>7.</td>
<td></td>
<td>4,006.</td>
<td></td>
</tr>
</tbody>
</table>

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

### Part VIII | Relationship of Activities to the Accomplishment of Exempt Purposes

(See page 32 of the instructions.)

<table>
<thead>
<tr>
<th>Line No.</th>
<th>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).</th>
</tr>
</thead>
<tbody>
<tr>
<td>103A</td>
<td>MISCELLANEOUS REVENUE GENERATED IN RELATION TO THE EDUCATION AND DISSEMINATION OF INFORMATION CONCERNING ENVIRONMENTAL ETHICS.</td>
</tr>
</tbody>
</table>

### Part IX | Information Regarding Taxable Subsidiaries and Disregarded Entities

(See page 32 of the instructions.)

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

### Part X | Information Regarding Transfers Associated with Personal Benefit Contracts

(See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? [ ] No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? [ ] Yes [ ] No

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

Please Sign: [Signature of officer] Date: [11/04/2009] Preparer: [Jeffrey Perl | Environmental Data]

Preparer's signature: [Signature of preparer] Date: [11/15/2009] Check if self-employed: [ ] Yes [ ] No

Paid Preparer's Use Only: [Name of preparer] Address: [4550 Montgomery Ave., Suite 650 North Bethesda, Maryland 20814-2930] EIN: [951-9090]

Phone no: (301) 951-9090

Form 990 (2002)
### Part I: Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

<table>
<thead>
<tr>
<th>Name and address of each employee paid more than $50,000</th>
<th>Title and average hours per week devoted to position</th>
<th>Compensation</th>
<th>Contributions to employee benefit plans &amp; deferred compensation</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>DANIEL MEYER</td>
<td>GEN COUNSEL</td>
<td>40+</td>
<td>55,000.</td>
<td></td>
</tr>
</tbody>
</table>

Total number of other employees paid over $50,000: 0

### Part II: Compensation of the Five Highest Paid Independent Contractors for Professional Services

<table>
<thead>
<tr>
<th>Name and address of each independent contractor paid more than $50,000</th>
<th>Type of service</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of others receiving over $50,000 for professional services: 0
PUBLIC EMPLOYEES FOR ENVIRONMENTAL
RESPONSIBILITY, INC. 93-1102740

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 $ ___________ $ ___________. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B and attach a statement giving a detailed description of the lobbying activities.

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)

2a Sale, exchange, or leasing of property?

2b Lending of money or other extension of credit?

2c Furnishing of goods, services, or facilities?

2d Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? SEE PART V, FORM 990

2e Transfer of any part of its income or assets?

3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)

4 Do you have a section 403(b) annuity plan for your employees?

Note: 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

Part IV Reason for Non-Private Foundation Status
(See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).

9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(v). 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)(vi). (Also complete the Support Schedule in Part IV-A.)

11 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)(vii). (Also complete the Support Schedule in Part IV-A.)

12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)

13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in:

(1) lines 5 through 12 above; or
(2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)

(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2002

09170607 745960 27275 2002.08000 PUBLIC EMPLOYEES FOR ENVIRONMENTAL 27275 1
<table>
<thead>
<tr>
<th>18</th>
<th>Gross income from interest, dividends, amounts received from unincorporated business taxable income (less section 5131 taxes) from unrelated business activities not included in line 18</th>
<th>$26,462.00</th>
<th>$938,869.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Gross receipts from admissions, services performed or furnished, or admission charges related to facilities, including amounts included in unrelated business taxable income (less section 5131 taxes) from unrelated business activities, not included in line 18</td>
<td>$69,154.00</td>
<td>$310,951.00</td>
</tr>
<tr>
<td>16</td>
<td>Membership fees, receipts from subscriptions, payments for admissions to educational institutions, gifts, grants, and contributions (line 16 minus line 15)</td>
<td>$675,023.00</td>
<td>$3,109,518.00</td>
</tr>
<tr>
<td>15</td>
<td>Net income from unrelated business (line 14 less line 16)</td>
<td>$669,164.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>14</td>
<td>Total unrelated business income (line 13 plus line 15)</td>
<td>$826,422.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>13</td>
<td>Unrelated business taxable income (unrelated business income minus unrelated business deductions)</td>
<td>$833,542.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>12</td>
<td>Income not included in unrelated business income. Prepare a list of your records to show the name, address, and amount received from each person or entity from unrelated business activity.</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>11</td>
<td>Total amounts included in unrelated business taxable income (less section 5131 taxes) from unrelated business activities not included in unrelated business income</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>10</td>
<td>Unrelated business deductions (line 11 minus line 12)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>9</td>
<td>Total unrelated business deductions (line 9 plus line 10)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>8</td>
<td>Net unrelated business income (line 8 plus line 9)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>7</td>
<td>Total unrelated business income (line 6 plus line 8)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>6</td>
<td>Total unrelated business deductions (line 5 plus line 6)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>5</td>
<td>Total unrelated business income (line 4 plus line 5)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>4</td>
<td>Total unrelated business deductions (line 3 plus line 4)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>3</td>
<td>Total unrelated business income (line 2 plus line 3)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>2</td>
<td>Total unrelated business deductions (line 1 plus line 2)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
<tr>
<td>1</td>
<td>Total unrelated business income (line 0 plus line 1)</td>
<td>$28,946.00</td>
<td>$938,869.00</td>
</tr>
</tbody>
</table>

**NOTES:**
- N/A stands for Not Applicable.
- The data in the table is subject to further calculation and verification.
- The table includes data from Schedule A of Form 990 for the year 2002.
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>29 Does the organization have a racially nondiscriminatory policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>toward students by statement in its charter, bylaws, other governing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>instrument, or in a resolution of its governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 Does the organization include a statement of its racially nondiscrim</td>
<td></td>
<td></td>
</tr>
<tr>
<td>inatory policy toward students in all its brochures, catalogues,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and other written communications with the public dealing with student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Has the organization publicized its racially nondiscriminatory policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>through newspaper or broadcast media during the period of solicitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>for students, or during the registration period if it has no solicitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>program, in a way that makes the policy known to all parts of the general</td>
<td></td>
<td></td>
</tr>
<tr>
<td>community it serves?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; please describe; if &quot;No,&quot; please explain. (If you need more</td>
<td></td>
<td></td>
</tr>
<tr>
<td>space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Does the organization maintain the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Records indicating the racial composition of the student body, faculty,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Records documenting that scholarships and other financial assistance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Copies of all catalogues, brochures, announcements, and other written</td>
<td></td>
<td></td>
</tr>
<tr>
<td>communications to the public dealing with student admissions, programs,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Copies of all material used by the organization or on its behalf to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>solicit contributions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;No&quot; to any of the above, please explain. (If you need</td>
<td></td>
<td></td>
</tr>
<tr>
<td>more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 Does the organization discriminate by race in any way with respect to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Students' rights or privileges?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Admissions policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Employment of faculty or administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Scholarships or other financial assistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Educational policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Use of facilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Athletic programs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Other extracurricular activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to any of the above, please explain. (If you need</td>
<td></td>
<td></td>
</tr>
<tr>
<td>more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 a Does the organization receive any financial aid or assistance from</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a governmental agency?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Has the organization's right to such aid ever been revoked or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>suspended?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to either 34a or b, please explain using an</td>
<td></td>
<td></td>
</tr>
<tr>
<td>attached statement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35 Does the organization certify that it has complied with the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>applicable requirements of sections 4.01 through 4.05 of Rev. Proc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If &quot;No,&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>attach an explanation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PUBLIC EMPLOYEES FOR ENVIRONMENTAL

Schedule A (Form 990 or 990-EZ) 2002  
RESPONSIBILITY, INC.  
N/A  
Page 5  
93-1102740

Part VI-A  Lobbying Expenditures by Electing Public Charities  
(See page 9 of the instructions.)

<table>
<thead>
<tr>
<th>Limits on Lobbying Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>(The term &quot;expenditures&quot; means amounts paid or incurred.)</td>
</tr>
<tr>
<td>(a) Affiliated group totals</td>
</tr>
<tr>
<td>36 Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
</tr>
<tr>
<td>37 Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
</tr>
<tr>
<td>38 Total lobbying expenditures (add lines 36 and 37)</td>
</tr>
<tr>
<td>39 Other exempt purpose expenditures</td>
</tr>
<tr>
<td>40 Total exempt purpose expenditures (add lines 38 and 39)</td>
</tr>
<tr>
<td>41 Lobbying nontaxable amount. Enter the amount from the following table -</td>
</tr>
<tr>
<td>If the amount on line 40 is -</td>
</tr>
<tr>
<td>Not over $500,000</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
</tr>
<tr>
<td>Over $17,000,000</td>
</tr>
<tr>
<td>42 Grassroots nontaxable amount (enter 25% of line 41)</td>
</tr>
<tr>
<td>43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36</td>
</tr>
<tr>
<td>44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38</td>
</tr>
</tbody>
</table>

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 11 of the instructions.)

<table>
<thead>
<tr>
<th>Lobbying Expenditures During 4-Year Averaging Period</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calendar year (or fiscal year beginning in) ▶</td>
<td>(a) 2002</td>
</tr>
<tr>
<td>45 Lobbying nontaxable amount</td>
<td>0</td>
</tr>
<tr>
<td>46 Lobbying ceiling amount (150% of line 45(e))</td>
<td>0</td>
</tr>
<tr>
<td>47 Total lobbying expenditures</td>
<td>0</td>
</tr>
<tr>
<td>48 Grassroots nontaxable amount</td>
<td>0</td>
</tr>
<tr>
<td>49 Grassroots ceiling amount (150% of line 48(e))</td>
<td>0</td>
</tr>
<tr>
<td>50 Grassroots lobbying expenditures</td>
<td>0</td>
</tr>
</tbody>
</table>

Part VI-B  Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 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:

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.)

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

Yes  No  Amount

0
### Part VII: Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

#### 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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Cash</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(ii) Other assets</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Sales or exchanges of assets with a noncharitable exempt organization</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(ii) Purchases of assets from a noncharitable exempt organization</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(iii) Rental of facilities, equipment, or other assets</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(iv) Reimbursement arrangements</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(v) Loans or loan guarantees</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>(vi) Performance of services or membership or fundraising solicitations</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing of facilities, equipment, mailing lists, other assets, or paid employees</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>Line no.</th>
<th>Amount involved</th>
<th>Name of noncharitable exempt organization</th>
<th>Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 52
 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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes," complete the following schedule:

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asset No.</td>
<td>Description</td>
<td>Date Acquired</td>
</tr>
<tr>
<td>----------</td>
<td>--------------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td></td>
<td>MANAGEMENT AND GENERAL</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>FURNITURE &amp; FIXTURES</td>
<td>5.00</td>
</tr>
<tr>
<td>2</td>
<td>EQUIPMENT</td>
<td>5.00</td>
</tr>
<tr>
<td>3</td>
<td>COPIER</td>
<td>5.00</td>
</tr>
<tr>
<td>4</td>
<td>EQUIPMENT/COPIER/IMAGI STICS</td>
<td>5.00</td>
</tr>
<tr>
<td></td>
<td>* 990 PAGE 2 TOTAL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MANAGEMENT AND GENERAL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* GRAND TOTAL 990 PAGE</td>
<td></td>
</tr>
</tbody>
</table>

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction
### FORM 990

**OTHER EXPENSES**  

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>(A) TOTAL</th>
<th>(B) PROGRAM SERVICES</th>
<th>(C) MANAGEMENT AND GENERAL</th>
<th>(D) FUNDRAISING</th>
</tr>
</thead>
<tbody>
<tr>
<td>BANK &amp; CREDIT CARD FEES</td>
<td>5,976.</td>
<td></td>
<td></td>
<td>5,976.</td>
</tr>
<tr>
<td>INSURANCE</td>
<td>3,805.</td>
<td>195.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MISCELLANEOUS</td>
<td>26,874.</td>
<td>7,644.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER PROFESSIONAL FEES</td>
<td>120,158.</td>
<td>99,084.</td>
<td>14,709.</td>
<td>6,365.</td>
</tr>
<tr>
<td>REGISTRATIONS, FEES &amp; LICENSES</td>
<td>3,854.</td>
<td>3,854.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUBSCRIPTIONS</td>
<td>2,923.</td>
<td>2,432.</td>
<td>491.</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL TO FM 990, LN 43</strong></td>
<td><strong>163,590.</strong></td>
<td><strong>113,209.</strong></td>
<td><strong>44,016.</strong></td>
<td><strong>6,365.</strong></td>
</tr>
</tbody>
</table>

---

### FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE

**PART III**

**EXPLANATION**

TO EDUCATE THE PUBLIC AND EMPLOYEES OF GOVERNMENT RESOURCE MANAGEMENT AND ENVIRONMENTAL PROTECTION AGENCIES NATIONWIDE ABOUT ENVIRONMENTAL ETHICS, TO ASSIST THOSE WHO SPEAK OUT ON BEHALF OF ENVIRONMENTAL ETHICS AND TO PROTECT THE INTEGRITY OF INDIVIDUAL EMPLOYEES AND SCIENTISTS WITHIN THE GOVERNMENT.
DESCRIPTION OF PROGRAM SERVICE ONE

FIELD OPERATIONS: PEER HAS RETAINED A NUMBER OF FORMER PUBLIC EMPLOYEES, LARGELY FORMER STATE EMPLOYEES, AS FIELD REPRESENTATIVES OPERATING OUT OF ALBUQUERQUE, AUSTIN, DENVER, HELENA, NASHVILLE, SACRAMENTO AND TALLAHASSEE. THESE FIELD OFFICES ARE EXTENSIONS OF THE NATIONAL OPERATION AND ARE THE FOCAL POINT FOR STATE AND LOCAL ADVOCACY CAMPAIGNS.

<table>
<thead>
<tr>
<th>GRANTS</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>357,696.</td>
</tr>
</tbody>
</table>

TO FORM 990, PART III, LINE A

DESCRIPTION OF PROGRAM SERVICE THREE

LEGAL: PEER PROVIDES LEGAL COUNSEL, ASSISTANCE, AND REPRESENTATION TO PUBLIC EMPLOYEES WHO MAY FACE RETALIATION FOR SPEAKING OUT FOR HIGHER STANDARDS OF SCIENTIFIC INTEGRITY, ENVIRONMENTAL ETHICS, AND ACCOUNTABILITY IN GOVERNMENT.

<table>
<thead>
<tr>
<th>GRANTS</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>55,924.</td>
</tr>
</tbody>
</table>

TO FORM 990, PART III, LINE C
DESCRIPTION OF PROGRAM SERVICE FOUR

NATURAL RESOURCES: PEER WORKS WITH AND ON BEHALF OF PUBLIC EMPLOYEES WHO SERVE AS STEWARDS OF OUR NATION'S PUBLIC LANDS AND NATURAL RESOURCES. PEER ADVOCATES RESPONSIBLE PLANNING AND MANAGEMENT, INFORMING POLICY MAKERS AND THE PUBLIC ON NATURAL RESOURCES ISSUES.

<table>
<thead>
<tr>
<th>GRANTS</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>66,797.</td>
</tr>
</tbody>
</table>

TO FORM 990, PART III, LINE D

FORM 990 OTHER PROGRAM SERVICES

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>GRANTS AND ALLOCATIONS</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLLUTION CONTROL</td>
<td>40,437.</td>
<td></td>
</tr>
<tr>
<td>MILITARY</td>
<td>40,379.</td>
<td></td>
</tr>
<tr>
<td>TOTAL TO FORM 990, PART III, LINE E</td>
<td></td>
<td>80,816.</td>
</tr>
</tbody>
</table>

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>COST OR OTHER BASIS</th>
<th>ACCUMULATED DEPRECIATION</th>
<th>BOOK VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FURNITURE &amp; FIXTURES</td>
<td>759.</td>
<td>759.</td>
<td>0.</td>
</tr>
<tr>
<td>EQUIPMENT</td>
<td>56,672.</td>
<td>55,327.</td>
<td>1,345.</td>
</tr>
<tr>
<td>COPIER</td>
<td>4,800.</td>
<td>4,800.</td>
<td>0.</td>
</tr>
<tr>
<td>EQUIPMENT/COPIER/IMAGISTICS</td>
<td>9,924.</td>
<td>2,316.</td>
<td>7,608.</td>
</tr>
<tr>
<td>TOTAL TO FORM 990, PART IV, LN 57</td>
<td>72,155.</td>
<td>63,202.</td>
<td>8,953.</td>
</tr>
<tr>
<td>LENDER'S NAME</td>
<td>TERMS OF REPAYMENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------</td>
<td>-------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BANK</td>
<td>300/MONTH</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE OF NOTE</th>
<th>MATURITY DATE</th>
<th>ORIGINAL LOAN AMOUNT</th>
<th>INTEREST RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/01/05</td>
<td></td>
<td>9,669.</td>
<td>5.50%</td>
</tr>
</tbody>
</table>

SECURITY PROVIDED BY BORROWER: COPIER
PURPOSE OF LOAN: NOTE PAYABLE - COPIER

RELATIONSHIP OF LENDER: NONE

DESCRIPTION OF CONSIDERATION

<table>
<thead>
<tr>
<th>FMV OF CONSIDERATION</th>
<th>BALANCE DUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.</td>
<td>6,374.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LENDER'S NAME</th>
<th>TERMS OF REPAYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>BANK</td>
<td>DEMAND</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE OF NOTE</th>
<th>MATURITY DATE</th>
<th>ORIGINAL LOAN AMOUNT</th>
<th>INTEREST RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/30/03</td>
<td></td>
<td>50,000.</td>
<td>3.80%</td>
</tr>
</tbody>
</table>

SECURITY PROVIDED BY BORROWER: NONE
PURPOSE OF LOAN: LINE OF CREDIT

RELATIONSHIP OF LENDER: NONE

DESCRIPTION OF CONSIDERATION

<table>
<thead>
<tr>
<th>FMV OF CONSIDERATION</th>
<th>BALANCE DUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.</td>
<td>50,000.</td>
</tr>
</tbody>
</table>

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B: 56,374.
States
AZ, CA, CO, CN, DC, FL, ME, MD, MA, MI, MN, MT, NE, NJ, NM, NY, NC, ND, OH, PA, RI, TN, TX, UT, VA, WA, WV, WI

<table>
<thead>
<tr>
<th>Schedule A</th>
<th>Other Income</th>
<th>Statement 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>2001 Amount</td>
<td>2000 Amount</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>1,841</td>
<td>5,997</td>
</tr>
<tr>
<td>Total to Schedule A, Line 22</td>
<td>1,841</td>
<td>5,997</td>
</tr>
</tbody>
</table>
Form 8868
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

* 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).

Note: 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)

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of Exempt Organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY, INC.</td>
<td>93-1102740</td>
</tr>
</tbody>
</table>

File by the due date for filing your return. See instructions

Number, street, and room or suite no. If a P.O box, see instructions
2001 S STREET, N.W., NO. 570
City, town or post office, state, and ZIP code. For a foreign address, see instructions.
WASHINGTON, DC 20009

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

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

☐ 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 month, for 990-T corporation) extension of time until MAY 17, 2004 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 OCT 1, 2002 and ending SEP 30, 2003.

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

3a 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

☐ 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 $ ________

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

☐ 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 $ ________

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

☐ 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 $ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Signature ▶ Title ▶ CPA Date ▶ 2/2/04

LHA For Paperwork Reduction Act Notice, see instruction

Form 8868 (12-2000)

223831 09-01-02

08580130 745960 27275 2002.08000 PUBLIC EMPLOYEES FOR ENVIRO 27275_1

18
Form 8868 (12-2000)  
Page 2

**Note:** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part II**  
Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.

- **Name of Exempt Organization**
  - PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY, INC.

- **Employer identification number**
  - 93-1102740

- **Number, street, and room or suite no. If a P.O. box, see instructions**
  - 2001 S STREET, N.W., NO. 570

- **City, town or post office, state, and ZIP code. For a foreign address, see instructions**
  - WASHINGTON, DC 20009

- **Check type of return to be filed (File a separate application for each return)**
  - [X] Form 990
  - Form 990-EZ
  - Form 990-T (sec. 401(a) or 408(a) trust)
  - Form 1041-A
  - Form 5227
  - Form 8870
  - Form 990-BL
  - Form 990-PF
  - Form 990-T (trust other than above)
  - Form 4720
  - Form 6069

- **STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- **I am not filing for an additional (not automatic) 3-month extension of time.**

- **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.**

- **I request an additional 3-month extension of time until**
  - AUGUST 16, 2004

- **For calendar year _____, or other tax year beginning _____ and ending _____**
  - OCT 1, 2002 and SEP 30, 2003

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

- **State in detail why you need the extension**
  - ADDITIONAL TIME IS NEEDED FOR PREPARING A COMPLETE AND ACCURATE RETURN

- **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**
  - $ 

- **If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868**
  - $ 

- **Balance Due. Subtract line 8b from line 8a. 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**
  - $ N/A

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

*Signature*

*Title*  
C P A  
*Date*  
4/30/04

**Notice to Applicant - To be Completed by the IRS**

- [ ] We have approved this application. Please attach this form to the organization's return.
- [ ] We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for filing the return otherwise required to be made on a timely return. Please attach this form to the organization's return.
- [ ] We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- [ ] We cannot consider this application because it was filed after the due date of the return for which an extension of time

Other

**Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.**

- **Name**
  - GELMAN, ROSENBERG & FREEDMAN

- **Number and street (include suite, room, or apt. no.) Or a P.O. box number**
  - 4550 MONTGOMERY AVE., SUITE 650 NORTH

- **City or town, province or state, and country (including postal or ZIP code)**
  - BETHESDA, MARYLAND 20814-2930

Form 8868 (12-2000)

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